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Improving communication in patient visits requiring medical interpreters



The University of Vermont

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Vermont is Increasingly Diverse

- ▶ According to the Census Bureau's 2013 American Community Survey, **over 31,000 Vermonters speak a language other than English** at home. 8,754 of those Vermonters reported that they spoke English "less than very well." [1]
- ▶ The languages encountered by clinicians at UVMHC range the world, including Arabic, Armenian, Chinese, Farsi, Hindi, Spanish, Tagalog, Tibetan, Vietnamese and many more.

Effective Communication Improves Patient Care

- ▶ Barriers to communication lead to reduced patient satisfaction. In one 1999 survey of Emergency Department patients, only **52%** of non-English-speaking patients reported being satisfied with their care, while **71%** of English speakers reported being satisfied with their care ($p < 0.1$) [2].
- ▶ In a focus group on building patient and physician trust, **“communicating clearly and completely”** was identified as one of nine core components of building a trusting therapeutic relationship [3].

Community Perspective

One Milton Family Practice Physician described the challenges of working without a trained interpreter. “The patient’s face turned ashen as her family member (who was serving as an interpreter when none was available) described the bronchoscopy procedure as putting a black snake with laser eyes down the patient’s throat.” Stories like these emphasize the importance of using trained medical interpreters, and the limitations of relying on a family member. Patients are legally entitled to interpretation services.

“Without interpreting services, there is no way to provide the quality of care that patients are entitled to by law.”

-Lynette Reep, Interpreter Coordinator UVMHC

Intervention and Methodology

- ▶ Collaborate with Milton Family Practice medical staff and UVMHC interpreters
- ▶ Use evidence-based resources and community perspectives to create a guide for using interpreter services effectively, including information on:
 - ▶ How to prepare for interactions requiring interpreters
 - ▶ How to communicate effectively with patients while using interpreters
 - ▶ Addressing common issues faced and outlining possible solutions
- ▶ This guide will be available on UVM ScholarWorks for future access

Using Interpreting Services Effectively

Before the Encounter:

Remember **cultural humility**: Consider what type of conversation you are having: are you delivering bad news? Are you discussing issues that may be surrounded by stigma, such as mental illness? Consider the emotional impact of facing these conversations through a language barrier.

The interpreter is part of the clinical team. Bring them up to speed so they know what to expect during the encounter

Plan ahead: Patient visits with interpreters may require more time

During the Encounter:

Let the patient know interpreting services are provided free of charge

Introduce yourself to the interpreter, and allow the interpreter to introduce themselves to the patient

Find a comfortable arrangement for yourself, the patient, and the interpreter

After the Encounter:

Debrief with the interpreter to discuss any cultural nuances you may have missed

Be sure to document an issues that made it impossible to use an interpreter or rely on a family member (for example, a life-threatening emergency)

Tips for Effective Communication:

- Speak directly to patient, not the interpreter
- Use short sentences and pause regularly to allow for interpretation
- Pay attention to the patient's body language to gauge understanding, and don't be afraid to ask the interpreter about potential barriers
- If you're unsure if the patient is understanding you, simply ask



Common Issues and Solutions:

Not scheduling enough time for the visit

While not every patient visit is planned ahead of time (ie Emergency Department), visits with interpreters will take more time. Scheduling an extra 15 minutes allows a good buffer for set-up, interpretation, and potential technological issues.

Dialect Issues

Not all dialects are intelligible to all speakers, even within the same language. Knowing what region or city a patient is from can help interpreters find someone who is familiar with a certain dialect.

Family members serving as interpreters

Patients sometimes request that a family member serve as an interpreter. However, if you are sensing that the patient may not be understanding you, or you are not understanding the patient, you can say "I am concerned I may not be understanding you, so I would like to use a hospital interpreter."

Evaluation of Effectiveness

- ▶ Patients who require or request interpreter services at Milton Family Practice could be assessed for satisfaction with their care before and after the implementation of this educational resource. Additionally, compliance with treatment protocols could be studied as a deeper assessment of the effectiveness of patient-physician communication through interpreters.

Recommendations for Future Projects

- ▶ While easily disseminated and easy to refer back to, written educational resources have limited impact on changing entrenched communication habits. In-person training utilizing a standardized patient encounter with an interpreter could be an effective way to instill effective communication habits in trainees and early career physicians.
- ▶ Research into patient perspectives around effective communication through interpreters could shine a light onto the other half of this issue.

References

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Consented 2/2

Name: Kimberly Hageman, MD

Name: Lynette Reep, Interpreter Coordinator UVMCC

Did NOT Consent

Name: _____

Name: _____