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Accessing and Utilizing Medical Interpreters in a Rural Setting

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Problem Identification

Providers and clinic staff don't feel confident accessing or utilizing a medical interpreter when interacting with a non-English speaking patient

This results in sub-par communication with the patient and possibly poor medical care

Public Health Cost

Regional organizations cite that 28% of people speak a language other than English at home in Essex County NY, up from 19% in 2000 (Impact Essex County)

Approximate cost of providing interpreter services is $279 per person per year (Jacobs, et al.)

These services were found to increase healthcare utilization amongst non-English speakers, as well as hospital reimbursements (Jacobs, et al.)

Community Perspectives

Providers and clinic staff that were interviewed reported low confidence in accessing and knowing best practices for interacting with medical interpreters

This results in a reliance on family members, google translate, and other third-party applications for translator services, which is inappropriate for patient care

"I don't feel confident working with a medical interpreter and don't feel that the training is currently adequate to make me feel confident"

"I don't feel comfortable relying on family members or google translate when working with non-English speakers"

"The care we deliver is isn't as good without medical interpreters"

Interviews were conducted with Dr. Mary Halloran, anonymous staff members, and Eric Obey PT

Interprofessional Education

To address this educational need, I created a handout that details how to access translators and how to work with them

This provides a framework for providers and clinic staff to better access resources and feel confident utilizing them

Results and Reflection

The handout will provide opportunities for interprofessional education and tangible guidelines for best practices when working with medical translators

Working on this project deepened my understanding of the critical role medical interpreters play in ensuring equitable care, especially in rural primary care settings where language resources are often limited.

I learned how gaps in interpreter access can directly impact patient safety, autonomy, and outcomes, and I feel more committed to advocating for systems that support clear, compassionate communication for all patients.

Future Directions

Obtaining interviews with non-English speaking patients after working with a medical interpreter in a clinical setting would be an avenue to assess perceived impact

Surveys with clinic staff and providers to assess their confidence working with medical interpreters after using provided materials

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