Clinical Safety & Effectiveness
Cohort # 9

Interpreting for University Hospital's Spanish Speakers

CENTER FOR PATIENT SAFETY & HEALTH POLICY

UT HEALTH SCIENCE CENTER™ SAN ANTONIO

Educating for Quality Improvement & Patient Safety

Financial Disclosure

Christopher Moreland, MD, MPH, has no relevant financial relationships with commercial interests to disclose.

The Team

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  - Keri Richardson, CI CT, TCDHH V
- Sponsor Department
  - Medicine Chair: L. David Hillis, MD

What We Are Trying to Accomplish?

OUR AIM STATEMENT

To increase effective communication between inpatient health providers and Spanish-speaking patients in the University Hospital observation unit on the 6th and 8th floors by utilizing telephone interpretation services with average of 1-point increase in patient satisfaction and 10% decrease in LOS.

Project Milestones

• Team Created	9/2011
• AIM statement created	10/10/2011
• Bi-Weekly Team Meetings	10/10-11/2/2011
• Background Data, Brainstorm Sessions, Workflow and Fishbone Analyses	10/17-12/1/2011
• Interventions Implemented	1/2011
• Data Analysis	2/2011
• CS&E Presentation	2/24/2011

Background

- Limited-English proficient = LEP
- Large health disparities impacting LEP
- *Professional* interpretation can resolve disparities
- University Health System (UHS) has 498-bed tertiary care hospital, >70,000 ED & >300,000 outpatient visits/year.
- UHS 2nd most common language: Spanish
- Bexar County population: 60% Hispanic*
- Carelink population: 66% Hispanic*
- Difficulty obtaining inpatient interpretation

*** The Costs and Adequacy of Safety Net Access for the Uninsured Bexar County (San Antonio), Texas**
Mark A. Hall, Wake Forest University , June 2010

Background: Joint Commission

- **Standard RI.01.01.03:** The hospital respects the patient's right to receive information in a manner he or she understands.
  - **Elements of Performance C** 2. The hospital provides language interpreting and translation services.
  - **Note:** *Language interpreting options may include hospital employed language interpreters, contract interpreting services, or trained bilingual staff, and may be pro-vided in person or via telephone or video. The hospital determines which translated documents and languages are needed based on its patient population.*

How Will We Know That a Change is an Improvement?

- Length of stay (hours)
  - Seeking improvement by at least 20%
- Patient satisfaction
  - Using HCAPS survey questions on discharge
  - Seeking improvement by average of 1 answer point

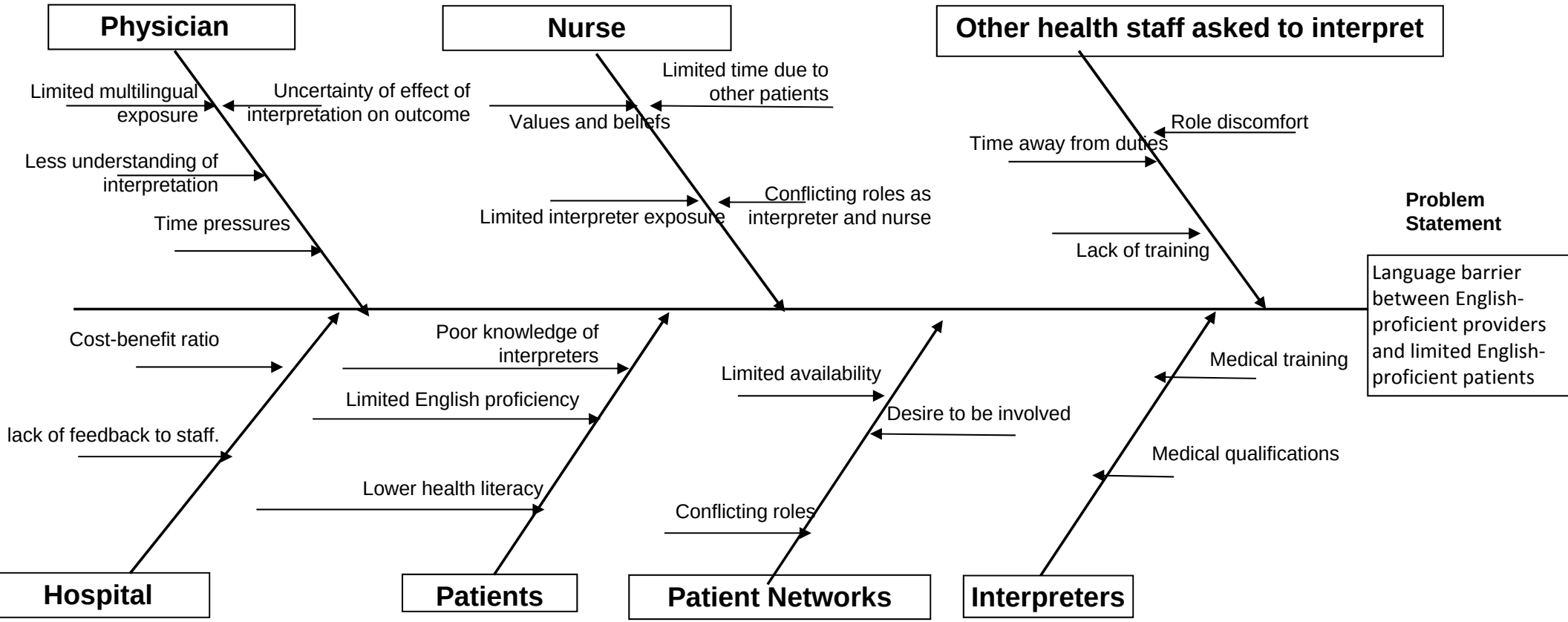
What Changes Can We Make That Will Result in an Improvement?

- Make interpretation services easily accessible
- Educate patients and staff on use of services
- Reinforce education periodically

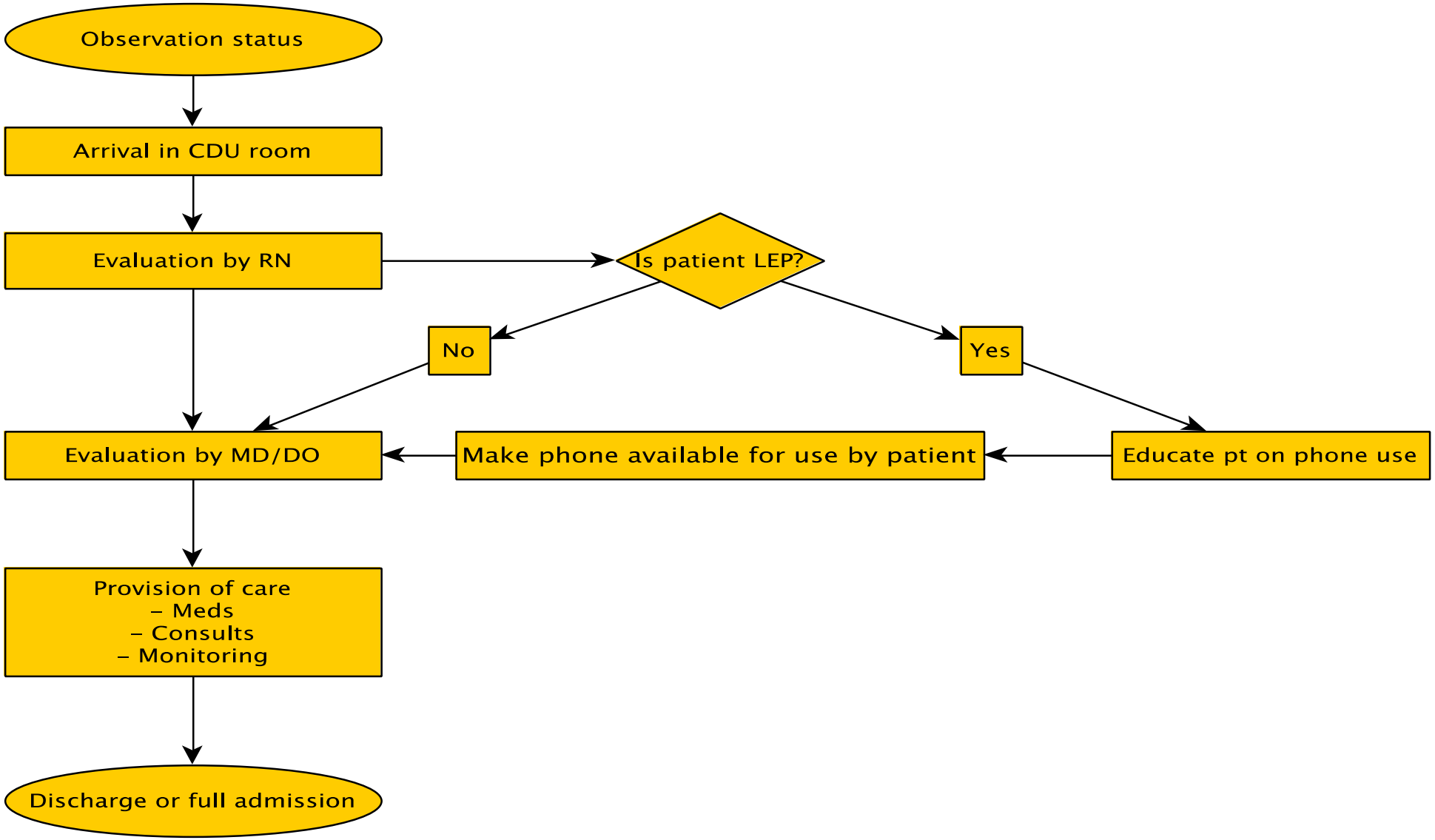
Selected Decision Making Tools

- Brainstorming
- Fishbone
- Work flowchart

Cause and Effect Diagram



Flowchart


Observation status
Arrival in CDU room
Evaluation by RN
Is patient LEP?
No
Yes
Evaluation by MD/DO
Make phone available for use by patient
Educate pt on phone use
Provision of care
– Meds
– Consults
– Monitoring
Discharge or full admission

Background Data

- Most UH units have 1 Language Line telephone
  - Jan-August 2011: 25,259 minutes used
  - 69% by Spanish speakers

- In-person interpreters via private vendors
  - 2-hour minimum charge per interpreter visit at $70/hour
  - Jan-Oct 2011: 2,584 hours
  - 79% Spanish speakers

Intervention

- Install dual-line telephones in each room

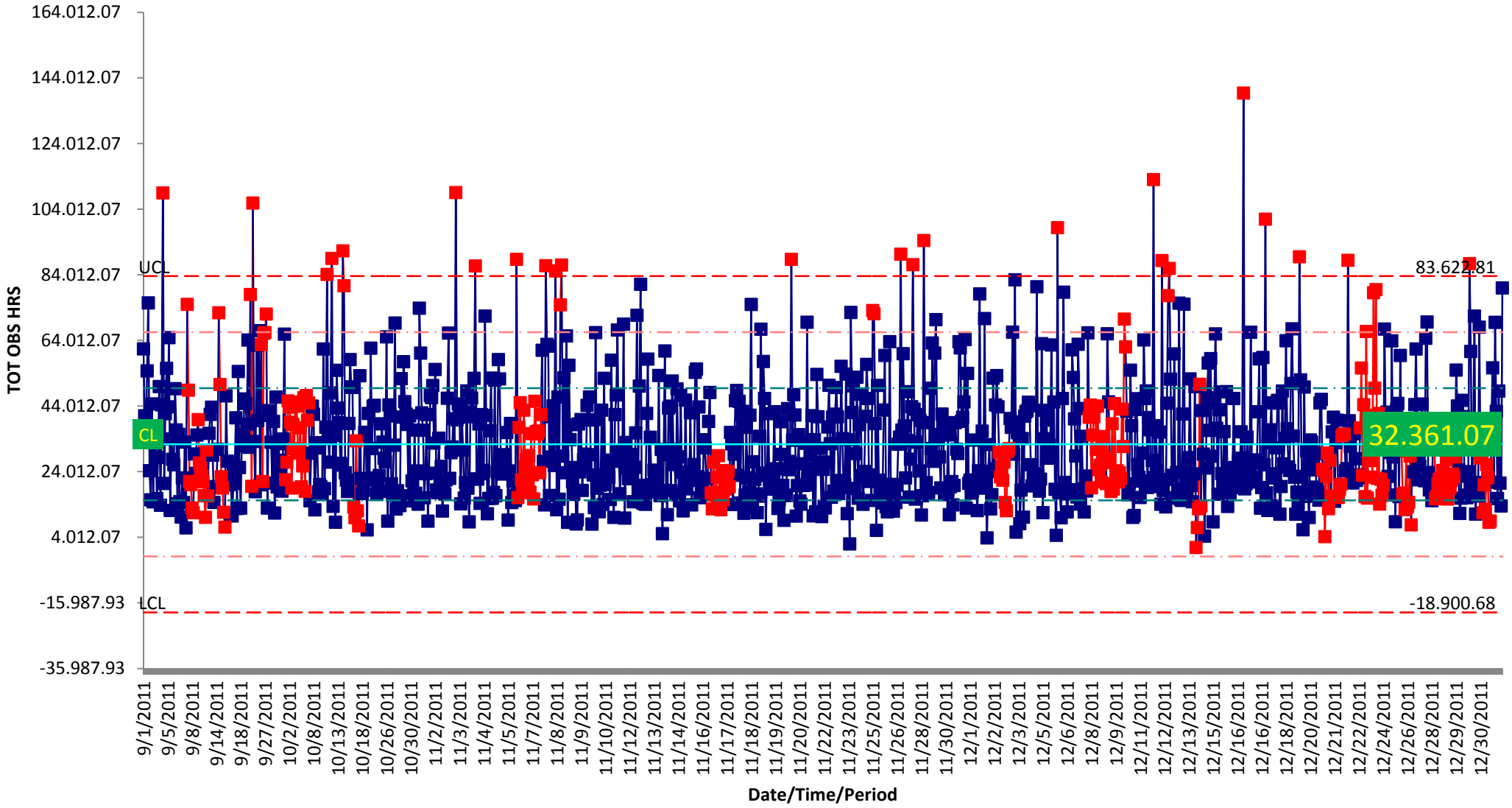
- Track measures
  - Length of stay (hours)
  - Patient satisfaction

See Appendix C for guidance about PDCA cycle

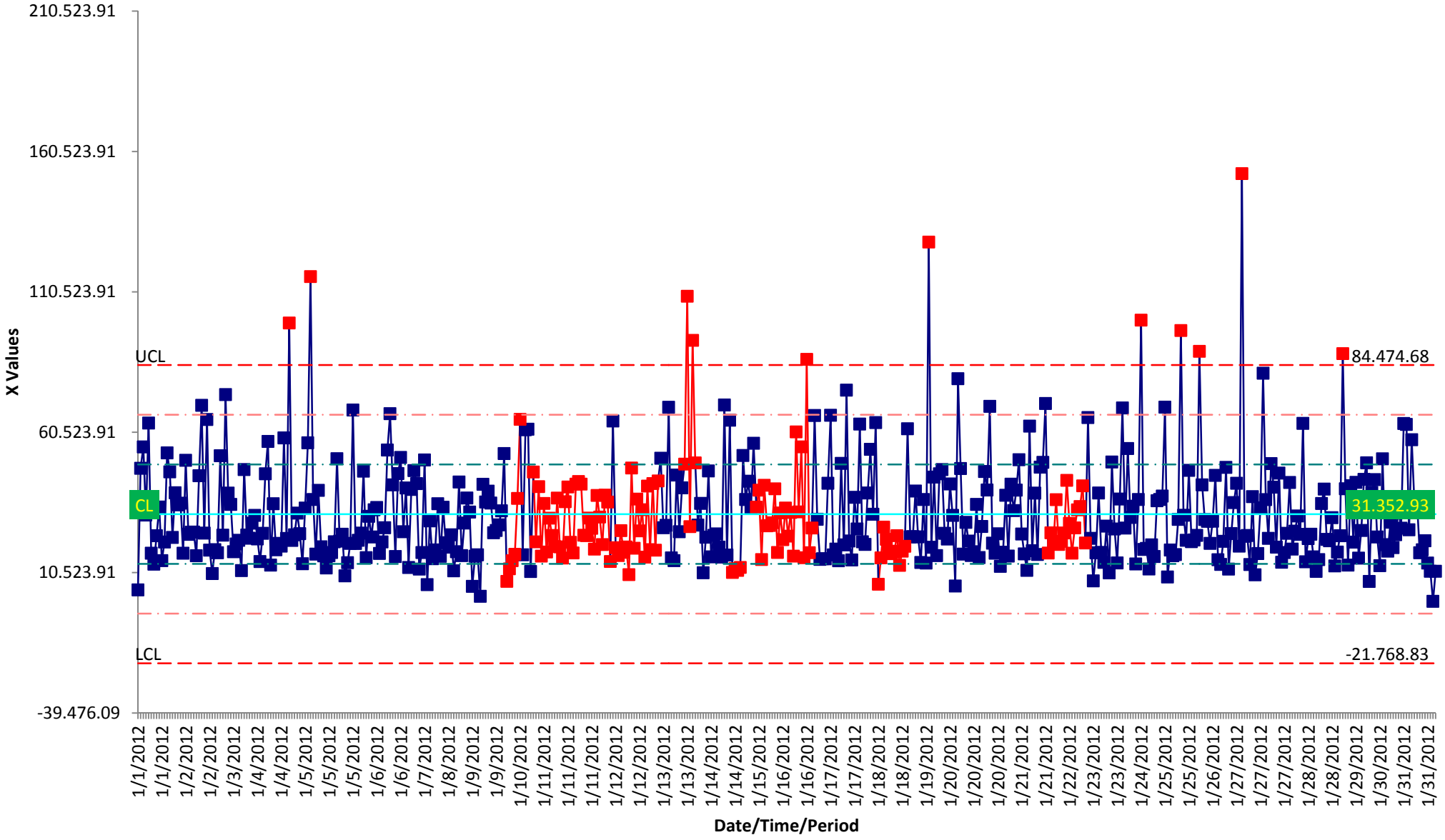
Implementing the Change

- Language Line phones installed 1/1/2012
- CDU clerks collected and maintained surveys
- Implementation issues
  - Technical (digital vs analog phones)
  - Ongoing education on using services
  - Hospital ID number for Language Line
  - Belief of some staff that their Spanish was adequate

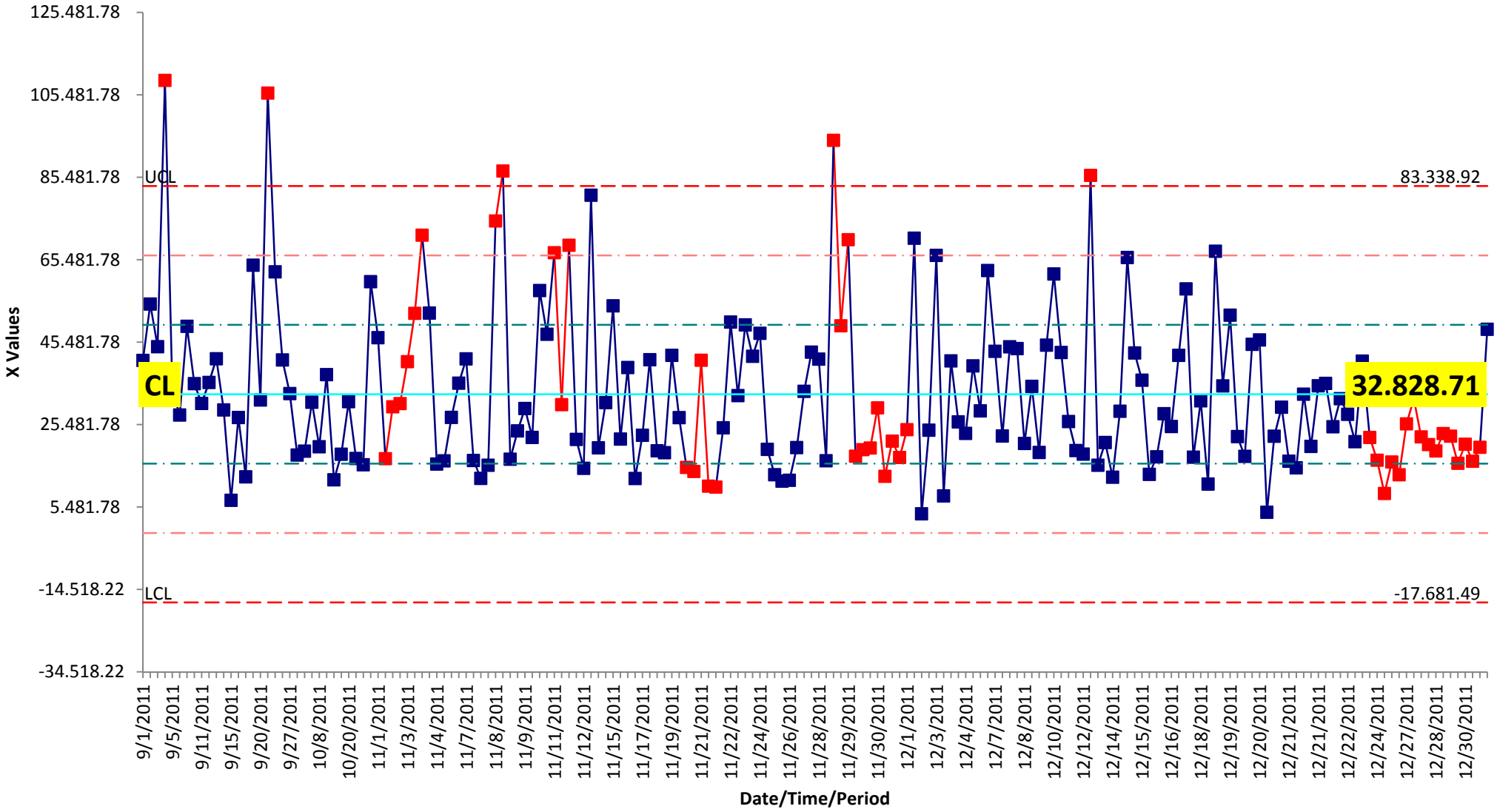
Pre-intervention: LOS (hours) for all CDU patients
Sept-Dec 2012

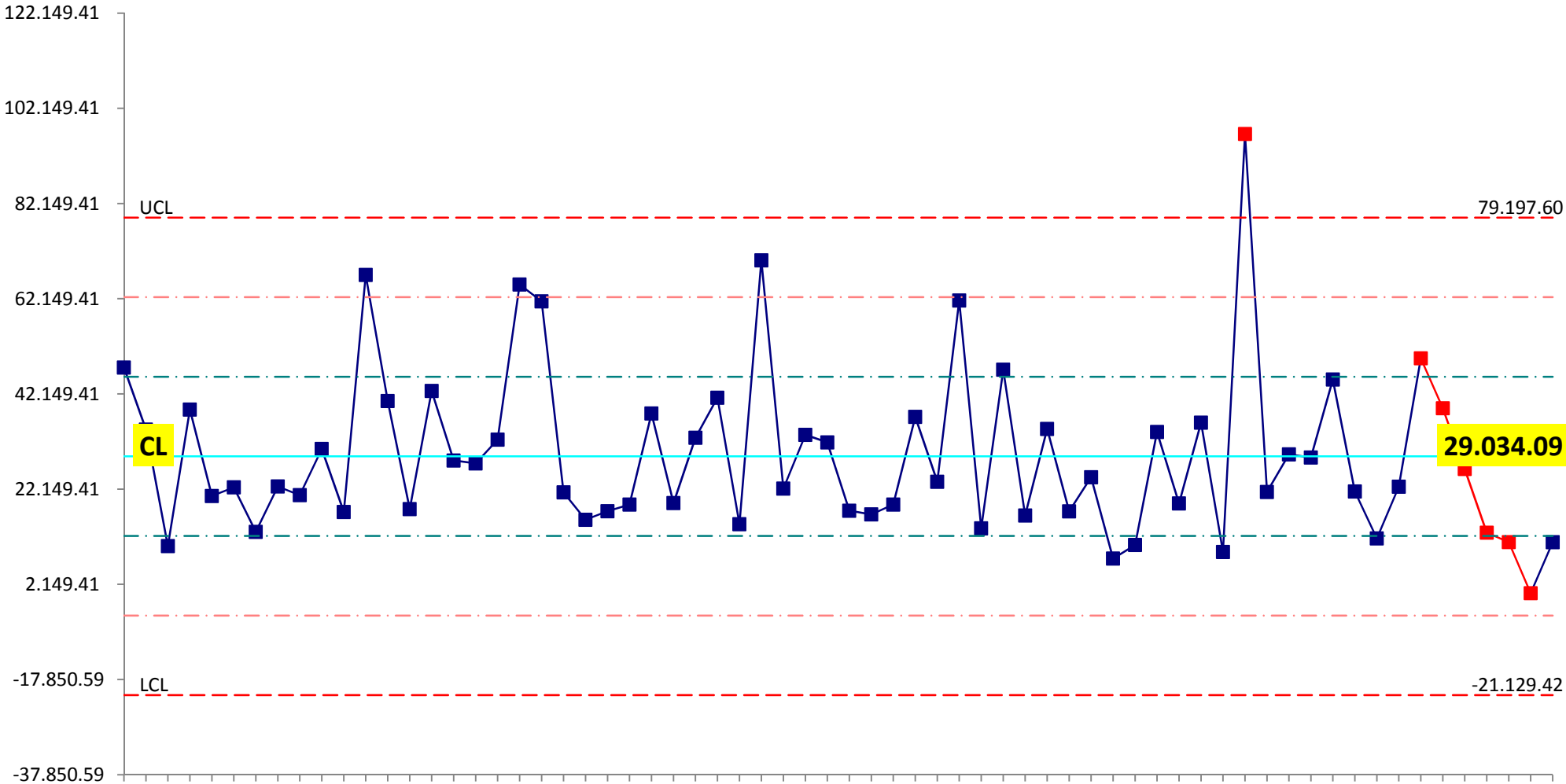


Post-intervention: LOS (hours) for all CDU patients, Jan 2012



Pre-intervention: LOS (hours) for Spanish-speaking CDU patients,Sept-Dec 2011

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