



UNDERSTANDING EFFECTIVE COMMUNICATION WITH LIMITED ENGLISH PATIENTS

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Background

- As of 2015, Colorado had over 300,000 residents with Limited English Proficiency (LEP).
 - Over 230,000 spoke Spanish as their primary language, that being around 5% of the population with some counties having rates much higher than that¹
- Peak Vista as a community health partner sees much higher rates of patients with LEP than most other Colorado Springs' primary care practices
 - Currently, Peak Vista uses phone interpretation for patients
- A study done in 2008 demonstrated that patients with LEP were more likely to:
 - Have an adverse event (49.1% v 29.5%)
 - Suffer moderate (46.8% v 24.4%) to severe harm or death (3.6% to 1.4%)
 - Have the adverse event be caused by failure of communication (52.4% v 35.9%)²
- Interpreters can help mitigate these poor hospital outcomes as well as:
 - Help reduce ER visits
 - Increase access to preventive services
 - Improved understanding of physician recommendations
 - Lead to higher levels of patient satisfaction³

Innovation Objectives

- To understand the effectiveness of provider communication to Spanish speaking patients as compared to English speaking patients, to evaluate the satisfaction of communication of care plan for both Spanish and English speaking patients, and to understand patient preferred method of interpretation.

Program Description

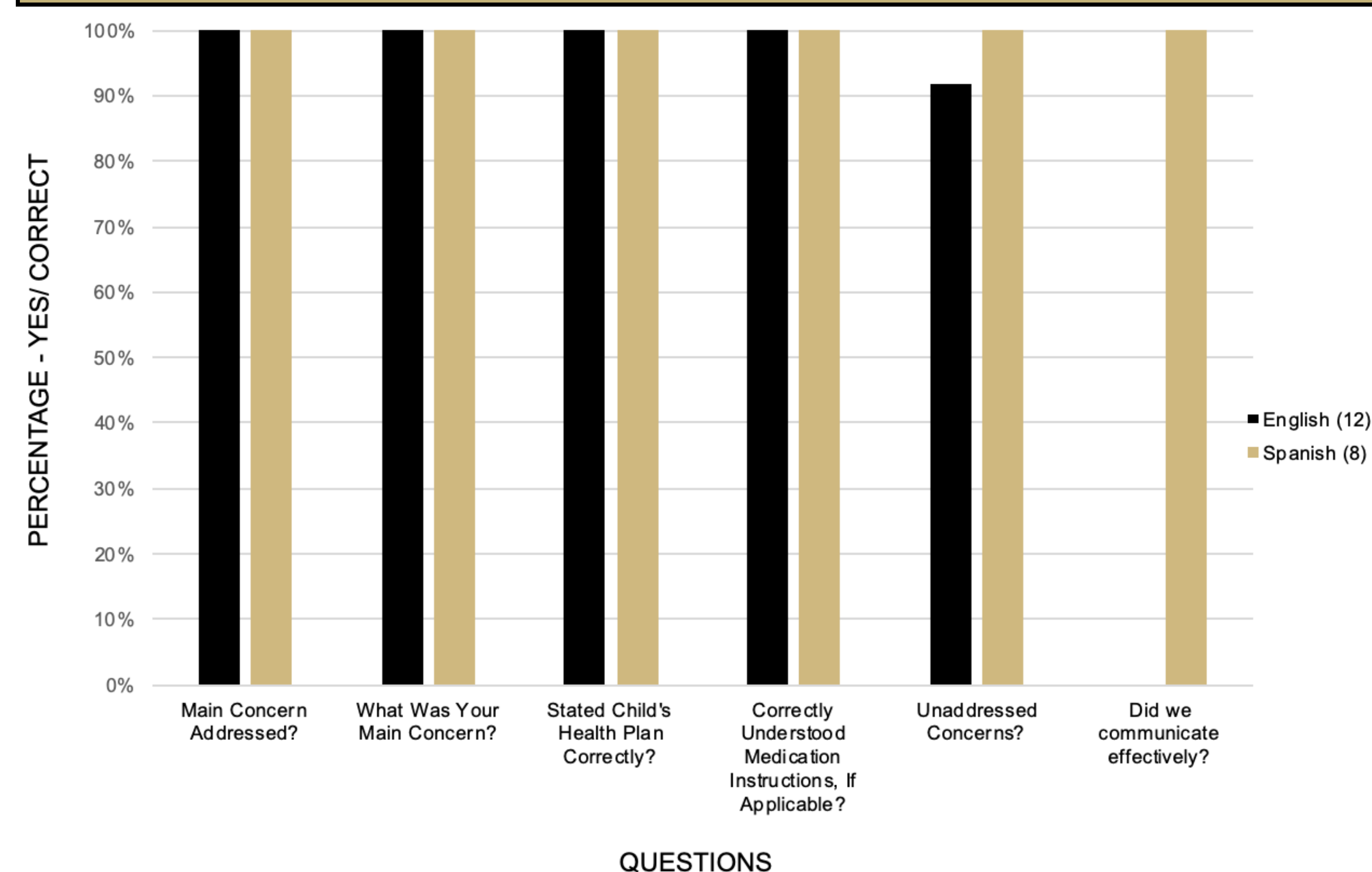
- Survey was developed with series of questions designed to understand if communication was effective, understand the satisfaction of communication, as well as preferred interpretation method.
- Survey was administered in person immediately after acute pediatric visits to the parents of Spanish and English speaking patients
- Total of 20 patients were interviewed of whom 12 were English speaking and 8 Spanish speaking

Program Evaluation

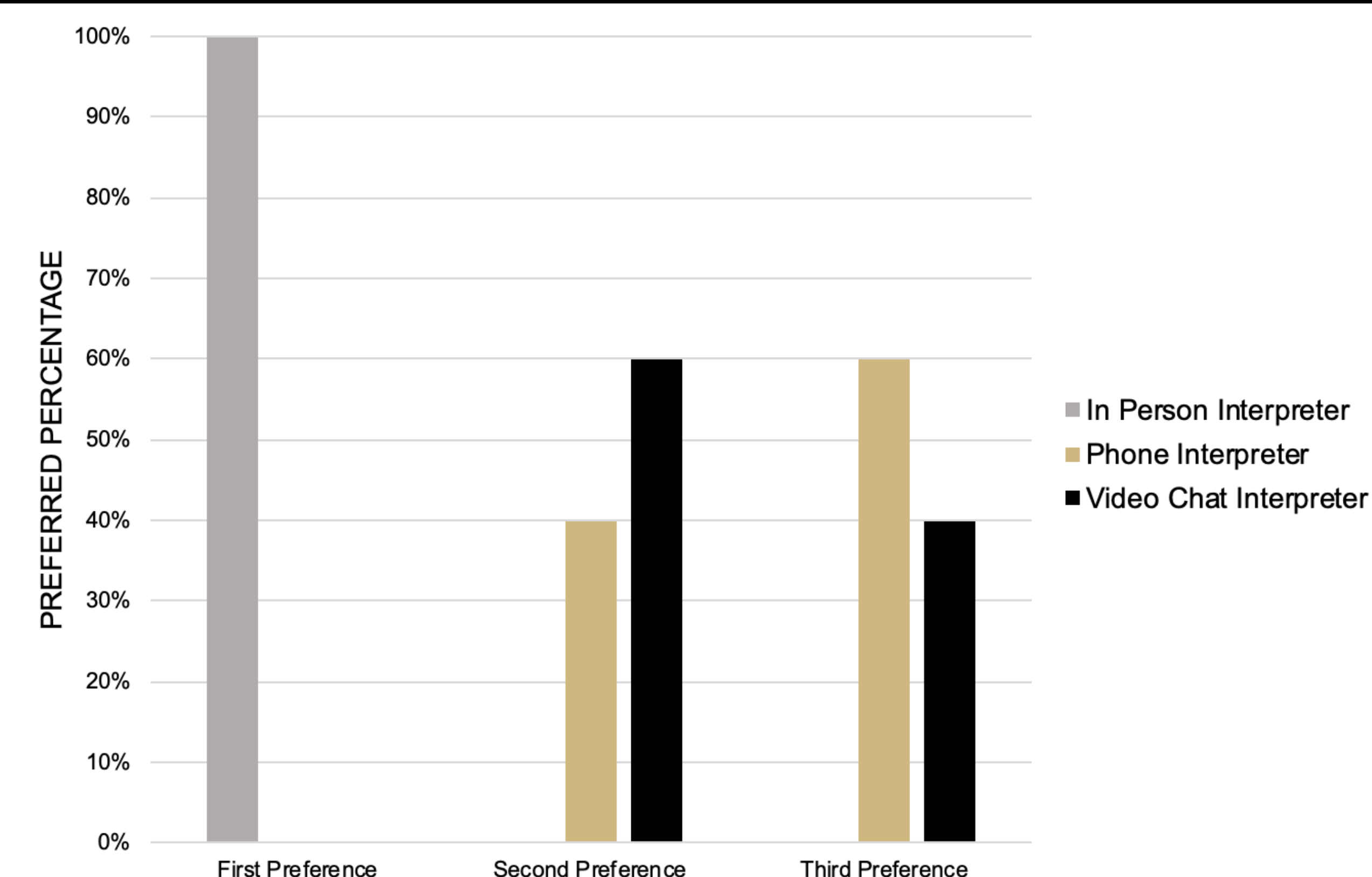
QUESTIONS USED IN ASSESSMENT (n = 20)

- To make sure that we addressed your needs today, could you please tell me if the provider addressed your main concern?
- What was that main concern today?
- To ensure that we communicated effectively, can you please, in your own words, state the plan for your child's care?
- (If on medications) Again, to ensure that we were clear in our communication, can you tell me how your child should be taking their medication?
- Did you have any unanswered questions?
- For Spanish speakers, did we communicate effectively?
- For Spanish Speakers, rate from most preferred to least for interpretation: In person, video or phone interpretation

COMMUNICATION AFTER VISIT ASSESSMENT (n = 20)



PREFERRED METHOD OF INTERPRETATION (n = 5)



Discussion

- From our patients perspective, Peak Vista has excellent provider-patient communication with 100% of parents stating that were satisfied.
 - During the PDSA cycle, it was acknowledge this could be due to simpler patient plan of care in pediatric populations. Further investigation should be done within Family Medicine Clinics.
- Interpreter method preference was adopted later in the project, however, in person interpreters are preferred, followed by video chat, and then phone interpretation.
 - Due to lower numbers of patients, this could be explored more deeply with a greater number of patients and not just Spanish speaking.
- Further work could include ensuring LEP patients have primary language documented and document interpreter service use during encounter.

Conclusions

- Peak Vista communicates effectively with both Spanish and English speaking pediatric patients. As Peak Vista has in house Spanish translation, improved patient satisfaction may be improved if video chat via tablets was implanted instead.

Reference

(1) Data and Language Maps. (2015). Retrieved April 8, 2020, from <https://www.lep.gov/maps>
 (2) Divi, C., Koss, R. G., Schmaltz, S. P., & Loeb, J. M. (2007). Language proficiency and adverse events in US hospitals: a pilot study. *International Journal for Quality in Health Care*, 19(2), 60–67. doi: 10.1093/intqhc/mzl069
 (3) Nápoles, A. M., Santoyo-Olsson, J., Karliner, L. S., Gregorich, S. E., & Pérez-Stable, E. J. (2015). Inaccurate Language Interpretation and Its Clinical Significance in the Medical Encounters of Spanish-speaking Latinos. *Medical Care*, 53(11), 940–947. doi: 10.1097/mlr.0000000000000422