



NATIONAL COUNCIL ON INTERPRETING IN HEALTH CARE



Managing Interpreter Services in Public Health During the Pandemic

Part 1

with Mateo Rutherford, MATI, Vonessa Costa, CoreCHI™,
and Christopher Fan, MPH, MSW

Friday, December 11
11:00am - 12:30pm Central



WWW.NCIHC.ORG



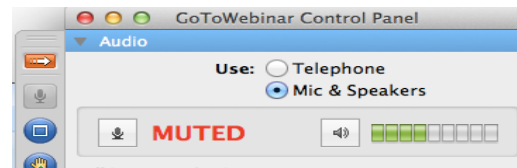


You can access the
recording of the live
webinar presentation at
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Housekeeping

- This session is being recorded
- Certificate of Attendance
 - * must attend full 90 minutes
 - * trainerswebinars@ncihc.org
- Audio and technical problems



- Questions to organizers
- Q & A



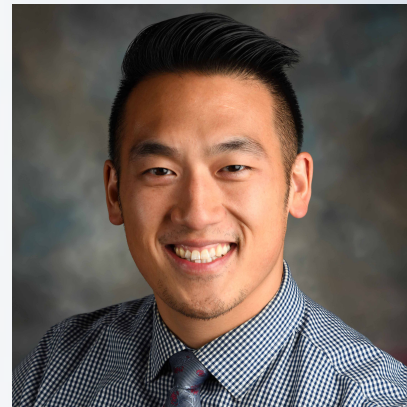
Welcome to our guest panelists!



Mateo Rutherford,
MATI



Vonessa Costa,
CoreCHI™



Christopher K. Fan,
MSW, MPH



Welcome to our guest panelists!



Mateo Rutherford

Manager of Systems and Technology
Interpreting Services Department
UCSF Health



The University of California, San Francisco Medical Center is a research and teaching hospital in San Francisco, California and is the medical center of the University of California, San Francisco.



COVID-19 Response

- Ways We Are Keeping You Safe During COVID-19: Learn about the precautions we have in place to protect your health at our hospitals and clinics.
- Telehealth Video Visits Available: UCSF Health offers video visits for many health care needs. Contact your provider's office to make a telehealth appointment.
- Non-COVID Symptoms You Shouldn't Ignore: Visit our website to read about 12 symptoms that you should never ignore, from a UCSF Emergency Department physician.



Welcome to our guest panelists!



Christopher K. Fan
Manager for Language Services
Barnes-Jewish Hospital

“

Good communication
is the bridge between
confusion and clarity

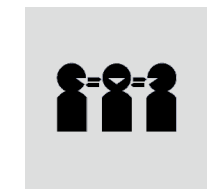
- Nat Turner



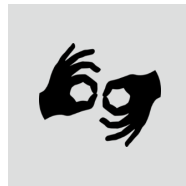
Experts in Communication

BJH Language Services

We will eliminate communication and cultural barriers that threaten or negatively impact healthcare outcomes



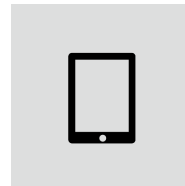
In-Person Interpretation



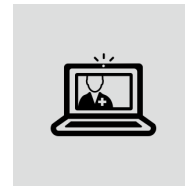
American Sign Language



Over-the-Phone Interpretation (OPI)



Video Remote Interpretation (VRI)



Telehealth Interpretation



Translation Services



What if you were in your patient's situation?
What kind of care would you want?

Ensuring Safety and Service Excellence

Centering both patient and interpreter

Our Healthcare System sees qualified medical interpreter as essential staff to the health care and safety of our most vulnerable patients and their family members

Our communities see our interpreters as a trusted and necessary members of their health care experience

Our interpreters see themselves as critical to patient health outcomes

Our department leaders see our interpreters and their physical health, mental health, and spiritual health as vital



2020 Data through October | Language Support on the WUSM Medical Campus

Languages & Dialects:	Non-English Spoken Encounters:	Sign Language Encounters:	International Patient Encounters:	Total Interpreted Minutes:
100+	46,417	1,700+	1,500+	1.53 million

✓ **Top 6 languages:** Spanish, Arabic, Bosnian, American Sign Language, Nepali, and Vietnamese

✓ Language Services has its own multilingual call center that has received 47,000+ calls so far, completes advanced scheduling needs, and on-demand needs

✓ We have completed 138 translation projects with a total of 226 translated documents for our medical campus and healthcare system

✓ Our numbers since June are the same as Pre-COVID numbers for language support needs



Welcome to the Midwest | St. Louis & BJH Facts

- 1 St. Louis is a refugee resettlement region and has had multiple major waves of immigrant/refugee resettlement periods
- 2 St. Louis has the most Bosnians living outside the country of Bosnia (85,000+)
- 3 Language Services was originally called Refugee Health and Interpreter Services and was started in the 1980s at Jewish Hospital
- 4 The International Institute of St. Louis was founded in 1919 to help a large number of displaced and refugee women from war-torn European countries
- 5 Language Services is a fully staffed, fully budgeted department under the Office of Diversity, Equity, and Inclusion





Welcome to our guest panelists!



Vonessa Costa
Director of Multicultural Affairs
and Patient Services
Cambridge Health Alliance

Cambridge Health Alliance

A public safety-net health system:

- 2 hospitals, each with 24-hour emergency services
- 12 primary care practices, 3 Teen Health Centers, 1 urgent care facility
- Cambridge Public Health Department

Key Statistics (FY19)

- 140,000 patients
- Discharges - 10,184
- Patient Days - 56,374
- ED Visits - 94,947
- Ambulatory Visits - 619,536
- Births - 1,171

43% of CHA patients are LEP and receive care in non-English language!



BECAUSE EVERYONE DESERVES GREAT CARE

CARE TO ♥ THE PEOPLE

CHA Cambridge Health Alliance | HARVARD MEDICAL SCHOOL TEACHING HOSPITAL | challiance.org

CHA Language Access

The Program

- 100 medical interpreters, providing language assistance across modalities
- 200+ credentialed bilingual providers and clinical support staff
- Language access available at all points of contact and care
- Language-specific clinics, programs, and services

Key Statistics (FY19)

- 43% Limited English Proficient
- 365,000+ completed interpretations
- 72 language groups served

CHA established the first dedicated hospital-based interpreter call center in New England in 2008.



Early Transformation

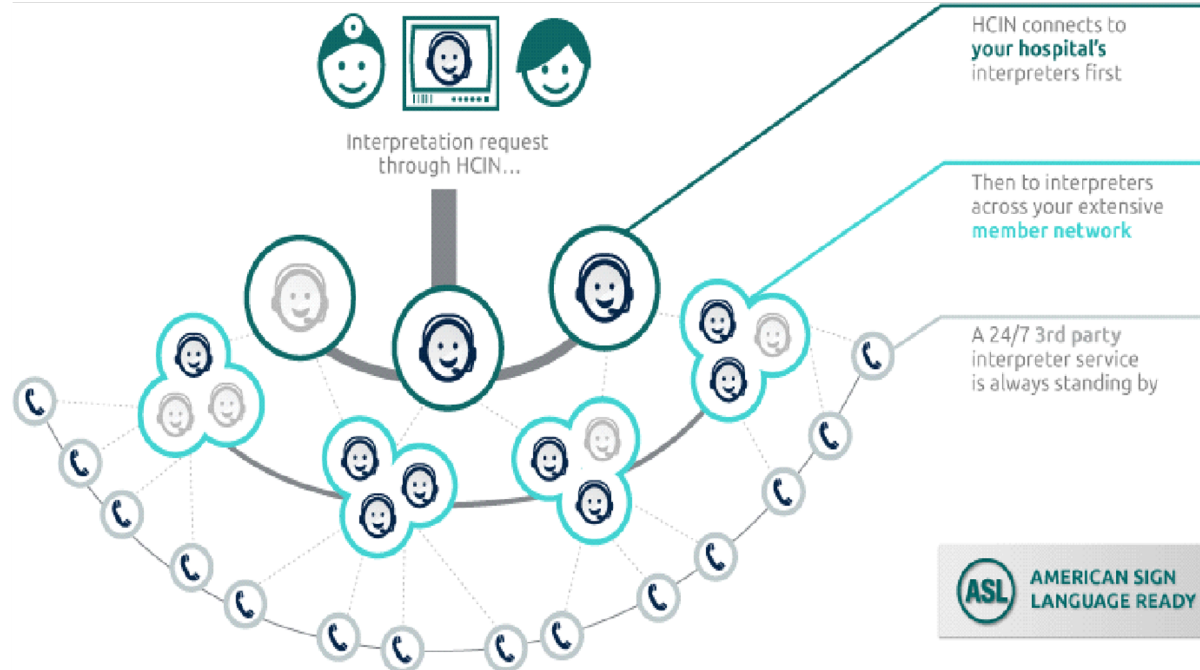
Phase 1 – Audio (2008)

- Established in-house Call Center to control cost and quality
- Created Call Center extensions for campus-based interpreters, to maximize productivity
- By 2012, CHA handled >80% of its major language call volume in-house!



Phase 2 – Video (2012)

- Equipped all interpreter workstations for video
- Joined HCIN, shared resources 30+ health systems nationwide
- Since 2017, >90% of all CHA interpreter requests have been met via remote modalities



What it meant in March 2020...

- **Mobile workforce!**

Transitioned 42 interpreters to WFH within 72 hours. Required:

- CISCO phone (from office)
- broadband internet
- personal computer

- More than 20 interpreters volunteered to stay on campus to provide essential in-person services

- Transition itself caused no interruption to provider-patient experience across modalities.

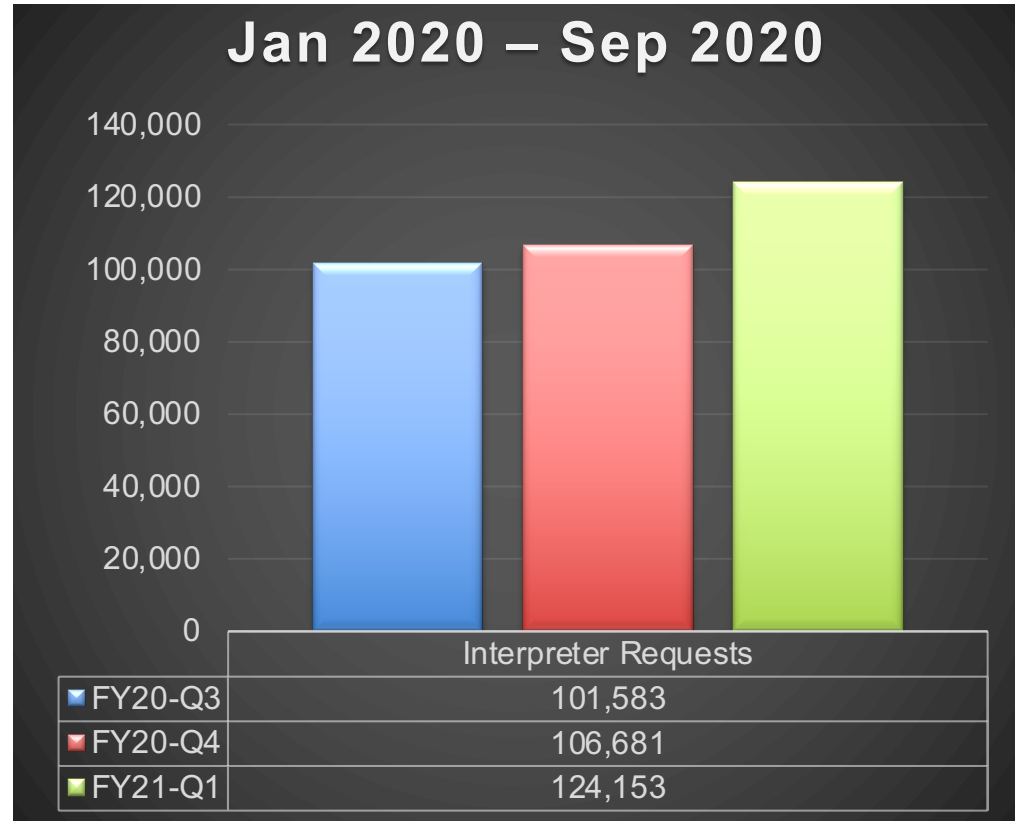
- Overwhelming sense of solidarity in doing our part to “flatten the curve”



What's happened since April?

VOLUME! AND MORE VOLUME

- The first day that ambulatory closed to in-person visits, interpreter request volume jumped to 1,600 (from average of 1,300) – A 23% INCREASE.
- FY20 Q4 (April-June 2020) reported record 106,681 encounters.
- Finished FY20 with >395,000 completed interpretations – a 10% increase over prior fiscal year.
- Experienced an 8% drop in internal call answer rate, and a 29% increase in vendor expenses over prior year.
- Interpreter productivity flat, with a slight decrease in the WFH group.



CHA is in its third consecutive record-volume quarter. FY21 – Q1 saw a 16% increase over the prior quarter.

Supporting Campus-Based Interpreters During Covid

Challenges

- Interpreting with PPE
- Covid anxiety
- Loneliness



Supports

- Director/Supervisor remained on-site, covered interpreter assignments
- Modifications to Interpreter Rounds decreased non-essential bedside work
- Modified triage of in-person requests (special communication needs only)
- Daily huddles kept on-site interpreters virtually connected to WFH colleagues

The Challenges of Managing a Hybrid Workforce – “Lessons from a Covid Summer”

#1 Not all internet is created equal

- How much broadband do you have?
 - package upgrades
 - router upgrades
- Who is using it?
 - gaming
 - remote school
 - work-from-home
- What’s happening in the neighborhood?
 - service provider variation
 - record WFH turnout
 - inclement weather
 - NOS brownouts/blackouts



The Challenges of Managing a Hybrid Workforce – “Lessons from a Covid Summer”

#2 Staying Home ≠ Staying Safe

Assessing Covid WFH risk:

- Living in a hotspot
- Sharing a home with essential workers
- Large pandemic bubble
- Unmasked gatherings



Cover



CHA has experienced 3x as many Covid infections in WFH interpreter group than in campus-based group.

Other WFH-related health issues:

- ergonomics
- isolation
- stress of remote schooling

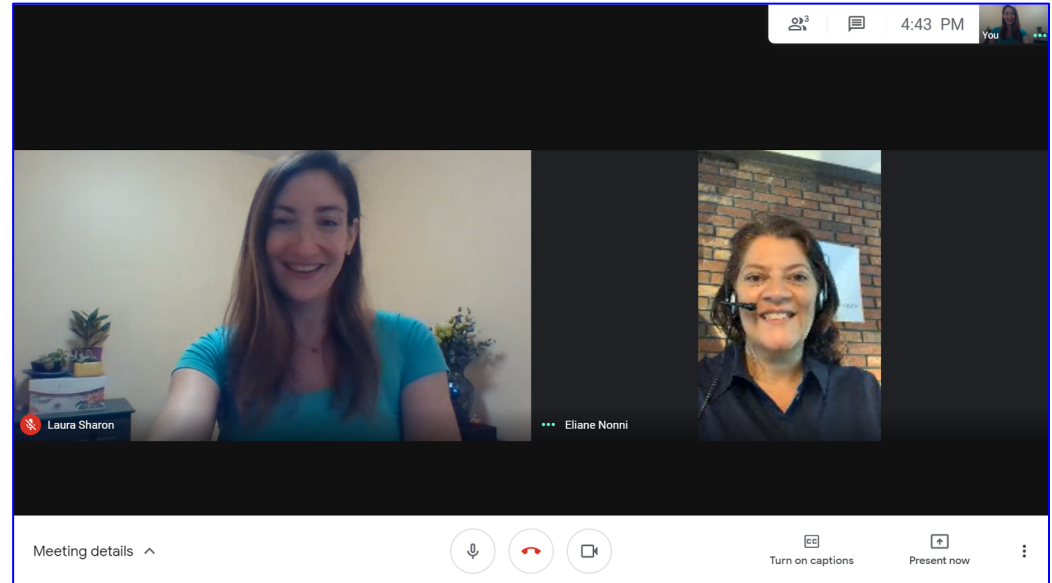


Photo courtesy of Today.com

The Challenges of Managing a Hybrid Workforce – “Lessons from a Covid Summer”

#3 “Digital Divide” impacts staff, too!

- CHA adopted Google Meet as a video Telehealth platform
 - 1st health system to integrate GoogleMeet with EPIC/MyCHART
 - Built patient portal in 4 languages
- To join Google Meet with 3-way video, interpreters need camera/mic
- To support video Telehealth, some interpreters needed to upgrade or return to campus



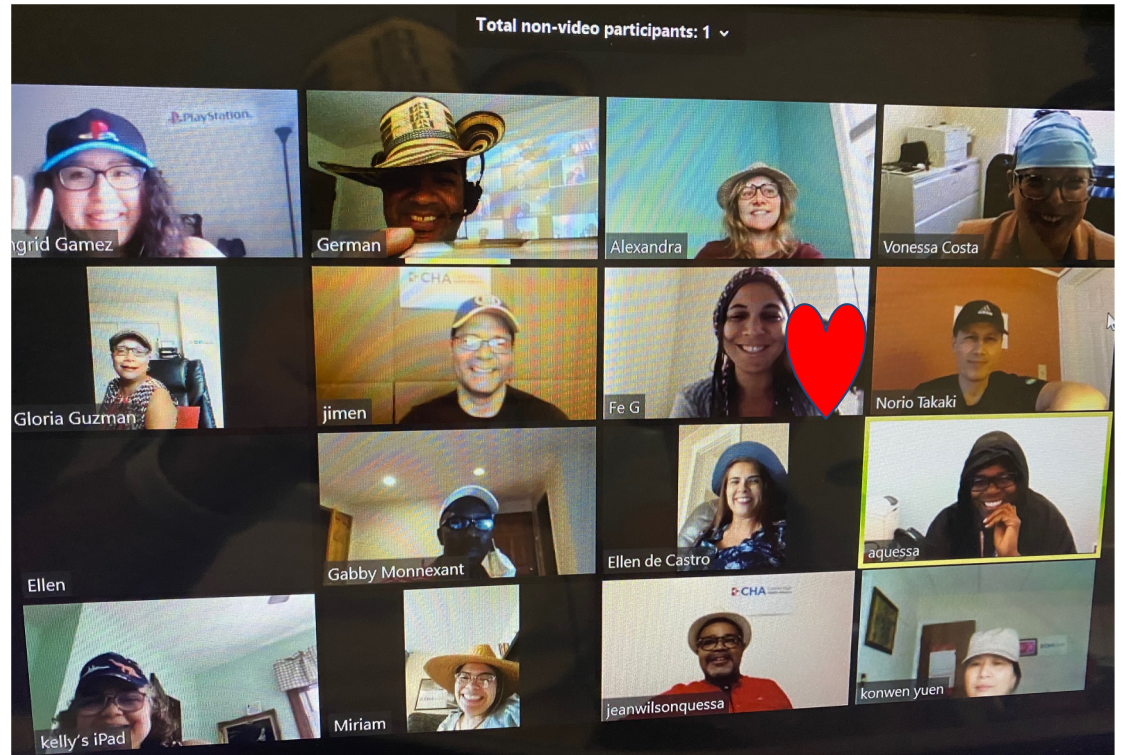
Portuguese medical interpreter Eliane Nonni shares a beautiful moment after a televisit with social worker Laura Sharon:

“We did ‘Caça ao tesouro’ (scavenger hunt). The child was running all over his house with the camera. We got dizzy! But he had fun trying to find the items. It was like we were with him in his home.”

The Challenges of Managing a Hybrid Workforce – “Lessons from a Covid Summer”

#4 Keep ‘em close!

- Instituted daily huddles April-July
Scaled to 3x/wk (Aug-Current)
 - informational
 - communal
 - uplifting
- Dedicated professional development time (2x/mth)
 - interpreting for Covid
 - interpreting trauma
 - self-care
 - cultivating resilience
- Employee Assistance Program
- Manager rounding
(in-person and 1-to-1 video chats)



Positioning to Thrive Beyond the Pandemic

Institutions:

- Invest in a multimodality staff interpreter model
- Debrief frequently (and re-recruit) your teams
- Reimagine the in-house call center
 - physical distancing
 - visual privacy
 - sound quality
 - ventilation
 - small teams in multiple locations
- Integrate language access into telehealth platforms
- Work with LEP patients and interpreters to co-produce a better experience of care

Interpreters:

- Make it your goal to become proficient in all modalities of interpretation:
 - in-person (w/PPE)
 - by phone
 - by video/Telehealth platform
 - remote simultaneous
- Partner with management in designing call center improvements
- Regularly engage in self-care
- Make full use of all institutional supports
- Leverage association memberships for free professional development opportunities
- Attain national interpreter certification

Language Access is Essential

Limited English Proficient communities have been disproportionately impacted by Covid and its socioeconomic effects.

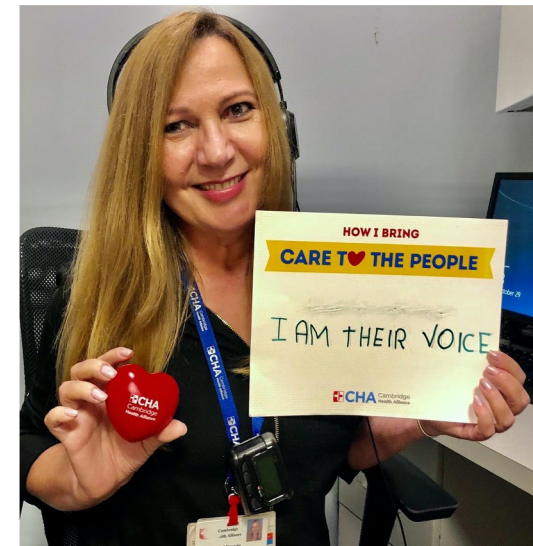
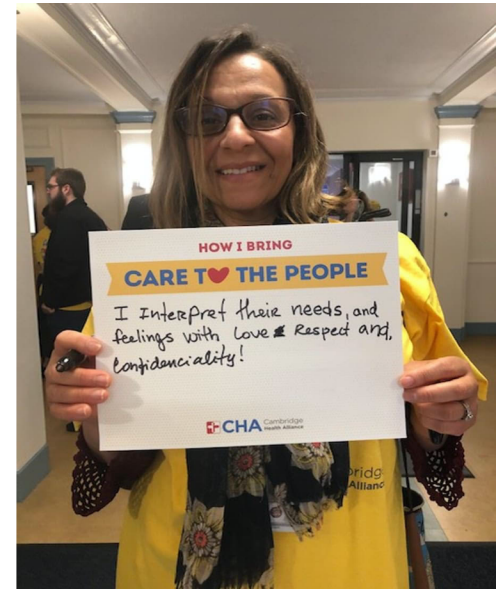
Language access will continue to be fundamental to Covid prevention and treatment, and to support of other essential healthcare services throughout the pandemic and beyond.

We can confidently say:

*“We are in this together,
and together we will thrive!”*

Questions?

Contact vcosta@challiance.org





Q&A



Mateo Rutherford,
MATI



Vonessa Costa,
CoreCHI™



Christopher K. Fan,
MSW, MPH



Announcements

- Upcoming webinars
- Webinar evaluation form
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- ncihc.org/participate



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