



## “Community Diversity And Language Translation Challenges.” A Case Study of AnMed Health in Anderson, SC

### AnMed Health

- Anderson, South Carolina
- # of beds: 533
- # of annual admissions: 21,554
- # of annual emergency visits: 107,819
- # of annual surgical procedures: 15,601

### Problem:

With diverse communities come language translation issues. Medical interpretation is a challenge facing most health organizations. Medical interpretation and translation services are costly. AnMed Health was challenged to establish customer-focused, cost-efficient communication programs.

### Background:

In 2001, AnMed Health was one of the first systems in the state to dedicate full-time resources to effective diversity management. The increasing cultural and linguistic diversity of our community enriches our workforce, presents new patient care challenges and helps us recognize the important connection between diversity and profitability. Our mission and vision statements affirm AnMed Health’s commitment “...to passionately blend the art of caring, with the science of medicine to optimize the health of our patients, staff, and community,” and “to be recognized and celebrated as the gold standard for healthcare quality and community health improvement.”

### Solution:

Accurate data is essential to the appropriate growth and development of any new business venture. Medical interpretation and translation services are no different. In 2002, AnMed Health assembled a multidisciplinary process-improvement team to develop a system that, today, is used to record every patient’s race, ethnicity (national origin), and language preference in the medical record. Possessing this data helps AnMed determine which patient-population requires the special resources, while also considering the service needs of the entire population.

During the admissions process, the health system’s information system requires staff to note the race and ethnicity of patients. Admissions personnel are prompted to dig deeper for Latino patients to delineate the patient’s national origin (e.g. Puerto Rican, Colombian, Mexican, etc.) in order to better reflect and serve differences within these cultures and languages. In addition, “language preference” is recorded during the initial registration, ensuring appropriate communication throughout the entire patient encounter.

This information is important, as cultural and linguistic differences may significantly impact the interaction between patient and caregiver – and ultimately, the quality of care, the outcome of the treatment, and satisfaction of the patient. Admission personnel receive culturally appropriate scripts and in-service training to assist with their confidence regarding this sensitive line of questioning. In partnership with Medical Resource Management, Diversity and Language Services has designed and implemented several technical strategies, or focus studies, that have



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given AnMed Health the ability to quantify services, improve data collection, and monitor the improvement of service quality to LEP patients.

First, all medical interpretations are documented on an Interpretation Services Report and executed by the attending interpreter. A second strategy or tool is the Interpretation Service Satisfaction focus. This is a prompted series of questions, generated upon completion of each patient encounter, designed to assess the patient’s satisfaction with the interpretation support provided. There are two benefits of this tool: it provides specific information for the interpreter so that he or she may identify areas for improvement such as accuracy or technique and it also provides an opportunity to clarify discharge information for the patient. This system utilizes a telephone survey. The third and most innovative strategy was created for the organization’s obstetrical LEP patients. LEP patients are pre-registered at Women’s Health and the information is input into the MIDAS+™ system, providing interpreters with essential information that can be made available to the caregivers 24 hours per day. It’s also available in the event of a premature delivery or miscarriage, a time when accurate and timely communication can be critical.

### Conclusion:

AnMed Health has continued to widen the definition of diversity. AnMed Health has been recognized for its model language program in US News & World Report 2006 “Best Hospitals” issue and was named the first recipient of “Diversity Leader – Not-for-profit Business Category” by The Riley Institute of Furman University. AnMed Health is the first health system in South Carolina to use “Deaf-Talk” video conferencing technology to improve communication with deaf and hard-of-hearing patients. By utilizing these and other new strategies as they are developed, AnMed Health meets the language interpretation challenges that come from providing service to a diverse community.