A Look at the Health Care Interpreter Network (HCIN) Underlying Technology

A Collaborative Solution for Access to Language Interpretive Services

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Hospital Systems in the HCIN Collaborative

- San Joaquin General Hospital
- Contra Costa Health Services
- San Mateo Medical Center
- Riverside County Regional Medical Center
- Rancho Los Amigos (LA)
- LA County-USC Medical Center
- Kern Medical Center
- **Connected and Installation in Progress**
- Harbor-UCLA Medical Center
- Olive View–UCLA Medical Center















What HCIN Does

- Interpreters are located in public hospitals across the State and are shared in a "virtual call center"
- Includes Voice and Video Interpretation Calls
- Among member hospital systems, routes over 6,000 interpretation calls per month
- Spanish is the predominate language with about 12 languages supported by HCIN interpreters; and 120 languages with the backup by Language Line
- Public hospital collaboration with the fiscal agent being Contra Costa Regional Health Foundation
- HCIN is managed by Paras and Associates

HCIN Operates in a Range of Clinical Settings

Most Common:

- All hospital ED's and Trauma Centers
- Hospital Specialty and Primary Care clinics

Also:

- Some in In-patient wards, Lab and Pharmacy
- San Joaquin County Health Services Behavioral Health, neighborhood based health centers, and the jail health center
- Rancho Los Amigos Rehabilitation Center
- San Mateo Medical Center Burlingame Long Term Care facility
- Contra Costa Regional Medical Center hosted After-hours Nurse Triage Line

For The Provider

- 97% answered in under 1 minute
- Access from every point of health care, ER, outpatient clinic, pharmacy, long term care
- Usually one to two buttons to push
- Trained Interpreters Respond 24-7, including ASL.
- During business hours Monday Friday most calls are answered by HCIN interpreters

HCIN Technology Features:

- HCIN Automatic Call Distribution (HCIN-ACD) System ("Brain" of the System)
- Audio and Video Interpretation
- Efficient Sharing of Interpreters across Hospitals
- Automatic rollover to contracted language services including American Sign Language

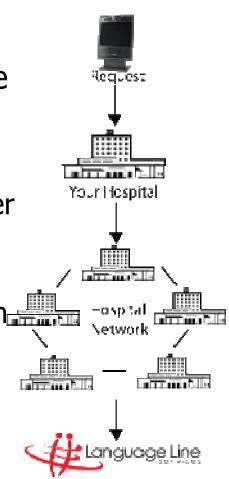
Call Process

 Clinician initiates request ondemand by video device or phone

Automated Call Distribution (ACD)
 routes request to an available
 interpreter inside your medical center

If no local interpreters are available,
 ACD routes request to interpreters in hospitals in your network

 If no network interpreters are available, ACD routes the request to Language Line Services



More Details on How It Works

- Interpreter logs in, and associated with the login is an "Interpreter Profile"
 - Hospital System (e.g. San Joaquin General Hospital)
 - Language (e.g. Spanish)
 - Sex (e.g. Male)
 - Special Proficiency (e.g. Mental Health)
- Interpreters use Video Phones for video and audio calls
- Providers use Video device or own phone system telephone to request for Interpretation. Calls are identified by:
 - Hospital System automatically is determined (e.g. SJGH)
 - Language request (e.g. Spanish)
 - Option for "In-person" interpretation
- HCIN-ACD tries to match the Call to the "logged in" and available Interpreter

How It Works II

- HCIN Automatic Call Distribution Programming Rules
 - Try your own medical centers' Interpreters first
 - Then try your priority business partners (e.g. LA County Hospitals sharing)
 - Then try HCIN partners
 - Then go to an outside contracted Language Services provider (e.g. Language Line)
- No Dispatching Staff is Needed
- Caller and Interpreter are connected
 - 97% of all calls are connected within 1 minute
 - Data stream is point-to-point between Caller and Interpreter
 - Very small amounts of monitoring data continue to flow to the HCIN-ACD
- Hospitals are staffed so that most of the calls (80%) are handled internally
 - Best practice for operational and technical reasons

About the HCIN Call Center and Data Network

- HCIN Call Center including the Automated Call Distribution Server is based on Cisco Voice Over IP technology
- Located in a 24-7-365 monitored state-of the-art Network Operations Center
- Data travels over a AT&T Private Multi-Protocol Layer Switched Broadband Network dedicated to Language Interpretation: NO Internet Access on the Network
- Data travels across hospital controlled firewalls into local hospital data networks dedicated to HCIN traffic

Key Features: Video

- Video in addition to Audio
 - If caller is using a Video phone then connection is with Video
 - If the caller is using telephone, then connection is Audio only
 - Bandwidth for Video call is about 470kbps
 - For calls within a Hospital generally not a problem
 - Outside a hospital with a single T1 broadband connection, 3 concurrent video calls can be easily supported
- Video call averages 13 min. and audio call averages 9.5 min.
 - Anecdotally, more information is communicated than in an audio call

Features: Hospital Uses Its Own Phone System

- Special telephones used by some vendors are not necessary.
- Audio Telephone calls for Interpreters use the hospital's current phone system.
- Recommend a variety of phones to plug into existing phone system. For example:
 - Dual handset adapters
 - Cordless dual handset or dual headset phones
- Staff call an extension that is designated by the hospital as the "gateway" to HCIN-ACD.
- Call is handled like the video call.

Features: Interpreter Sharing

- Scope of Languages is broadening
 - Internal to HCIN
 - Hmong Interpreter in San Joaquin GH
 - Korean in Rancho Los Amigos Nat'l Rehab Center Los Angeles
 - Tongan in San Mateo Medical Center
- Allows for optimized use of own interpreters
 - Optimum 80% of calls handled internally
 - Better use of staff with "bilingual premium"

Sample HCIN Monthly Shared Services Report (Hospital System A)

| | Call Count | Total Minutes | Credit (Debit) |
|--|--|------------------|-------------------|
| Calls Handled Internally | 318 | 2,869.43 | |
| Calls Sent to Other HCIN Interpreters | 256 | 2,596.65 | (\$1,818.39) |
| Calls Received from Other HCIN Users | 652 | 6,143.07 | \$4,607.30 |
| | Total Monthly Balance: \$2,788.91 | | |

^{*} All Calls are Charged \$.75/ min.

^{**} Calls between LA County Hospitals are \$0.00.

Programmatic Value to this Technology

- "Economies of scale" to manage and operate these technologies
 - e.g. shared automated call distribution
- "Economies of scale" of having a large, distributed Spanish interpreter pool.
 - This boosts productivity to 25-30 encounters/day, even for a single hospital with 1 or 2 interpreters.
- "Economies of scale" in covering evening and weekend shifts in Spanish
- "Economies in scale" in coverage of other languages
 - Might not warrant full-time interpreters in one hospital, but can be very productive in serving multiple hospitals.

Questions?