SCVMC
LANGUAGE SERVICES DEPARTMENT

Systems overview of operations

Santa Clara County Health & Hospital System

Language Access

- The centralized Language Services Department (providing telephonic as well as face-to-face).

- The third-party vendors (telephonic, face-to-face for rare languages, and ASL)

- The Language Bank (telephonic and face-to-face)

Language Services Department:

27 certfied medical interpreters:

✓ 21 Spanish interpreters

✓ 5 Vietnamese interpreters

  - 3 of whom speak Mandarin and Cantonese

✓ 1 Russian interpreter

✓ 1 Dispatcher

✓ 1 Coordinator

✓ All certified Medical Interpreters are centralized and linked to ACD – users connect via speakerphone with pre-programmed speed-dial, or via internal conference. Some interpreters stationed off-site (ED, CHI, etc.), linked using remote software.

✓ In addition to internal training, we also provide "Bridging The Gap" training to each interpreter.

Language Services Department

➢ Our interpreters are certified internally (they are also provided "Bridging The Gap" training), and provide telephonic interpretation to the hospital and its satellite clinics as well as to other agencies under the umbrella of the SCCHHS (e.g. Main Jail, Public Health, Alcohol and Drug, Mental Health, etc.).

➢ Most of the medical interpretations (~ 90%) are done by telephone which is one of the most cost effective ways of coping with the high demand for our services. In 2006, there were 156,567 interpretations done by our LS Department over the phone, and an additional 18,794 handled face-to-face. We also translated 1557 pages of documents in 2006.

➢ We do offer face-to-face interpretations in the languages we have in-house when the requests meet the established criteria for face-to-face interpretation. The criteria was developed over many years in collaboration with physician leadership.

3rd party vendor

➢ Available 24 x 7 x 365, offers > 120 languages, and guarantees ASA of no more than 25 seconds.

➢ In 2006, our third party vendor handled 30,010 overflow calls.

➢ Our ASL vendor handled 327 interpretations in 2006.

➢ For languages we offer in-house, caller is connected to third party vendor after 5 minutes (so as to provide in-house staff the opportunity to answer call). ASA of third-party interpreter was 23 seconds in 2006. Callers connected directly by Dispatcher for languages we don't offer.

3rd party vendor (cont.)

- When requesting language assistance through the outside vendor, you don't need to provide more information than your name as the system recognizes where the call was originated (press 1 for this clinic, two for that clinic, etc.).

- Allows for audit of call to determine usage by individuals and departments, as well as allowing for charge-back by department.

- Extensive training of their staff, monitoring of their staff, etc. – they deal with their own personnel issues.

The Language Bank

- More than 450 bilingual employees
- Speak about 20 different languages
- Provide clerical and basic medical interpretations.
- Each department is provided with updated directory every 6 months, outlining agents by both department and language
- Level I - Clerical
- Level II - Medical

The Language Bank (cont.)

➢ Due to the potential implications involved, only Level II bilingual employees are qualified to do basic medical interpretation.

➢ Level I employees can deal only with interpretations regarding registration, scheduling or other clerical issues.

➢ Testing conducted by LS Department – tests available in 10 languages; only oral skills are tested.

Use of Technology – present and future.

➢Currently using speakerphones linked to ACD system – there are advantages and challenges with a centralized call center.

➢ACD Reports allow for service level details and to identify trends – vendor reports identify languages used (and cost and length of time) and registration system reports identify deomgraphic breakdown (mandate to provide signage and fundamental documents in that language). Staffing and other critical decisions are made based on data.

➢Hospital opted not to go with RVVMI initiative due to need to alter current ACD structure, as well as network (and resources required).

➢Is possible to replicate for Sign Language using basic webcam technology and various ASL vendors, but bandwidth must be adequate.

➢Hospital switchboard recently installed speech recognition. Vendors are developing speech recognition programs for various languages.

➢Call Center hopes to employ CTI technology within the next 3-6 months – goal is to incorporate top 12 languages spoken – improving ease of access to physicians and appointments, improving responsiveness of interpreters to clinical staff, reducing third party vendor costs, improving overall communications and providing for cradle to grave audit.

➢When Valley Specialty Center goes live, we intend to connect all our physicians with hands-free phones, as well as our interpreters in the ED and possibly in the call center as well.