Meeting Summary for Committee on Diversity, Equity & Inclusion in Behavioral Health Zoom Meeting

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Quick recap

The group discussed the importance of language access plans, the role of language ambassadors, and the need for well-trained interpreters in various settings, including healthcare and clinics. They also explored the potential of language ambassadors in improving communication and addressing stigma within the group, and the importance of enhancing interpretation skills. The conversation ended with plans to address language barriers in healthcare, improve interpretation skills, and a low-cost campaign to improve language accessibility in clinics.

Next steps

Dr. Springer to check with Dr. Gregory about DCF's intentions and funding for the language ambassador training program.

Brenetta Henry to arrange for Dr. Farrell from Olive Branch to give a presentation on institutional racism to the committee.

Alice and Dr. Reyes to discuss potential class work at Southern Connecticut State University for bilingual interpretation skills.

Committee to draft a recommendation for healthcare providers to display multilingual posters and information about language services.

Committee to review data from Amy Soto (Department of Public Health) on medical home model focus group results at the next meeting in September.

Summary

Live Meeting Coverage and Attendees

Interpretation Basics and Language Ambassador Initiative

Alice Forrester introduced Carlos Blanco, an interpreter with 22 years of experience in Connecticut, who gave a presentation on the different types of interpretation. Carlos led the discussion on the interpretation basics and the language ambassador initiative for DEI, with a focus on the follow-up from community and family focus groups. He highlighted the importance of consumer feedback and mentioned that he had requested data from some focus groups, although he did not expect an immediate response.

Language Access Plans and Interpretation

Carlos discussed the importance of language access plans and the availability of interpretation and translated documents in organizations, highlighting the new Aca.1557 approved by President Biden. They also shared resources on the DEI presentation and key points related to language access. The speaker emphasized that while phone interpretation is useful for urgent communication, in-person interpretation is ideal for medical and other situational scenarios due to its adaptability and context-rich communication. They hinted at continued discussion on these topics in the second part of a presentation.

Ambassador Program for Bilingual Employees

Carlos discussed the Ambassador program, a project supported by DCF, which graduated 17 candidates who were trained on national standards of protocols for interpreters and HIPAA. The program aimed to equip bilingual employees, referred to as 'cultural brokers', with the

necessary skills and knowledge to assist agencies without crossing the line into independent interpretation, which could potentially jeopardize the organization. The training covered topics such as phone etiquette, address specific situations for a company, and the boundaries of their role as a bilingual employee. The program also emphasized the importance of following specific guidelines, like those for Clifford Bear's proprietary baby care instructions.

Language Ambassadors and Expanding Programs

Carlos discussed the importance and benefits of language ambassadors within an organization. He explained that language ambassadors, who are bilingual employees, can help organizations navigate cultural differences and language barriers, and can act as a bridge between different communities. Brenetta asked about the possibility of expanding the ambassador program, to which Carlos responded positively, mentioning a future presentation at an international conference. He also highlighted the program's success and the positive feedback it received.

Language Interpretation Training Program Discussed

Carlos presented a training program that focused on the needs of patients requiring language interpretation and translation services, particularly in senior care settings. The program aimed to equip participants, like Carmen, with the necessary skills and knowledge to handle such situations. Alice expressed her satisfaction with the program and offered to assist in spreading the word. Brenetta queried about potential repercussions if language ambassadors were not utilized, to which Carlos responded that such situations could be subject to legal complaints and were best avoided.

Language Access in Healthcare Discussion

Carlos shared a poignant story about a patient from Colombia who experienced an incorrect amputation due to language barriers in a hospital, highlighting the importance of language access in healthcare. Alice and Carlos discussed the need for well-trained and registered interpreters in their organization, in line with Connecticut's law. They also explored the concept of a 'word bank' for standardizing terminology and the potential role of bilingual employees as interpreters. The discussion further clarified the role of a 'health ambassador', who would facilitate communication with clients in their native language and ensure compliance with laws, providing a welcoming presence and helping clients navigate the system.

Language Ambassadors and Interpreter Training

Alice, Brenetta, and Carlos discussed the potential of language ambassadors in clinics, particularly for the Medicaid population. They considered presenting this idea to the Oversight Council and other relevant committees. The group also discussed the cost and potential benefits of having bilingual staff and the need for funding and training programs for language interpreters. They suggested that the Department of Labor could be a suitable place for such a training program, as it could benefit individuals seeking employment. The idea of language ambassadors and the need for interpreter services was recognized as a critical element of their care, despite the associated costs.

Language Barriers in Healthcare Discussed

Alice, Neva Caldwell, and Carlos discussed the issue of language barriers in healthcare and the potential consequences for patients. Carlos explained that patients who are not fluent in the language may avoid complaining about their treatment out of fear of losing the service or being penalized. This fear is particularly prevalent among those who need regular treatment, such as diabetics requiring constant medication. The group agreed that the lack of language interpreters and programs is an unfortunate reality, and that it negatively impacts access to healthcare services, especially in underserved communities.

Improving Communication, Addressing Stigma, and Language Accessibility

Alice and Brenetta emphasized the importance of enhancing communication and addressing stigma within the group, with Brenetta suggesting the role of a cultural ambassador and inviting Dr. Farrell to present on institutional racism. They also discussed improving interpretation skills and C.'s idea of a low-cost campaign to improve language accessibility in clinics. Additionally, Alice introduced the results of a focus group on the medical home model and announced that there would be no meeting in August, with the next gathering scheduled for September. The conversation ended with Brenetta reminding the team about an upcoming in-person iCAN conference on September 26, 2024 and a holiday greeting.