

## San Mateo Medical Center aims to lower language barriers

Silicon Valley/San Jose Business Journal - February 10, 2006

<http://www.bizjournals.com/sanjose/stories/2006/02/13/focus2.html?t=printable>

by [Laura Cutland](#)

**San Mateo Medical Center** will become the first public hospital in Silicon Valley this month to bring medical interpreters to its hospital and clinics through a novel use of Internet-based technology as it tries to lower language barriers between its staff and patients. The county hospital, which counts 35 percent of its patients as not proficient in English, will become part of a translator network at the end of February that will electronically link it with medical interpreters at **Contra Costa Regional Medical Center** and **San Joaquin General Hospital** via phone and video systems and allow it to access Hmong and Cambodian interpreters.

Funded by a number of philanthropic organizations, the project aims to foster better health care access and outcomes by improving interactions between medical staff and non-English-speaking patients.

While language barriers have long been an issue in the health care system, experts say it's becoming more critical as minority populations grow and providers struggle to accommodate them.

A 2003 study involving more than 200 hospitals in California, for instance, found that 48 percent of patients who needed translation services did not receive them, according to California Healthcare Foundation. Meanwhile, research has shown that poor patient communication leads to medical errors and worse outcomes.

San Mateo Medical Center wants to change that by pooling its resources with other county hospitals, says its CEO Nancy Steiger. "I think we expect to see more savings," she says. "But from my perspective, the return on investment is safety and quality."

Like many providers, the medical center has been using a patchwork approach to communicate with its non-English speaking patients, including tapping two dozen or so bilingual staff members as translators for patients who speak Spanish, Mandarin, Tagalog, Russian, Hindi, Tongan, Punjabi or Vietnamese. If that approach doesn't work, the center uses a professional phone interpreter service.

These ad hoc systems are common but fraught with issues, says Melinda Paras, who is spearheading the project on behalf of **Health Access Foundation** of Oakland. Ms. Paras, who launched a interpreter-sharing project at **San Francisco General Hospital** and **Highland Hospital** of Oakland based on different technology, notes that phone-based professional interpreter services are expensive, at up to \$4 a minute, and don't include a visual component.

In addition, staff members aren't always available to translate, she says, while recruiting a patient's family member, especially a child, can lead to a misdiagnosis because they usually aren't familiar with medical terminology.

"Unfortunately it happens throughout California hospitals more than anyone would prefer," acknowledges Ms. Steiger. "It's something we're trying to get away from but sometimes it's all you've got."

The network is designed to chip away at these issues through the sharing of translators at participating hospitals. For instance, when a Hindi-speaking patient walks into an emergency room, a doctor can log onto the network with the push of a button and the system will automatically search for a Hindi translator that's logged on to the system, first among the center's own staff and then at the partner hospitals.

At San Joaquin General Hospital, which installed the system five months ago, the network has reduced the time its staff has to wait for an interpreter from as long as an hour and a half to less than two minutes, says Al Murillo, program director of interpreter services at the hospital. "We would have patients who would wait 30 minutes, to an hour, to an hour and a half, for a translator," he says. "Now you can find someone within 30 seconds. And they understand medical jargon and can explain it fully to patients ... it's been outstanding." It could also mean substantial savings. San Mateo Medical Center expects to shave off more than \$100,000 a year from its interpreter budget.

The system assesses a fee only when a hospital uses a translator at a participating hospital, at 75 cents per minute, while the hardware and software are being paid for by grant funders, which include the U.S. Department of Commerce, California Healthcare Foundation, **Kaiser Permanente Community Benefit and California Consumer Protection Foundation**. Combined they have kicked in more than \$1 million, says Ms. Paras. And annual costs in the form of administrative and connection fees, which the medical center is responsible for, should reach less than \$30,000, Ms. Steiger says.

By comparison, the center pays \$200,000 a year to staff members to fill in as interpreters and \$12,000 annually on its professional translation service.

Lured by the possibility of greater economies and better outcomes, Ms. Paras expects other hospitals to join the network, including private medical centers, in the coming years. "I see providers who want to do the right thing," she says, "but they don't have cost-effective ways to do it."

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