

National Medical Spanish Summit Experts Propose Plan for Usage of Spanish in US Medical Care



35 experts participated in the Medical Spanish Summit proceedings in Fort Washington, MD on March 22, 2018.

To anyone who has ever sought healthcare in a country where one does not have complete control over the language, the prospect of a language discordant medical encounter—a medical visit in which the doctor does not speak your preferred language—is scary and fraught with danger over potential miscommunication. These challenges are a daily reality for the millions of Hispanic/Latino patients in the United States (US) who do not speak sufficient English to communicate in this language with their healthcare team and are a known barrier to seeking medical care and to healthcare quality and efficiency.

The doctors themselves are also affected: taking care of patients who do not speak the language often leads to personal and system-wide frustration, loss of productivity, and inability to provide the highest quality of care. As a result, many doctors and doctors-in-training have exhibited a growing desire and demand for Medical Spanish education.

In light of these known and growing challenges of providing healthcare in an increasingly multilingual environment, the National Hispanic Health Foundation (NHHF) and the University of Illinois at Chicago College of Medicine (UIC-COM) convened a multidisciplinary expert panel in Fort Washington, Maryland, on March 22, 2018.



Dr. Alejandra Zapién-Hidalgo (University of Arizona), Dr. Valeria Pazo (Harvard Medical School), and Dr. Jessica Salt (National Board of Medical Examiners) discuss Medical Spanish evaluation and certification.

The agenda was directed by Dr. Pilar Ortega (UIC-COM) and Dr. Elena Ríos (NHHF) and started with an opening plenary to discuss current Medical Spanish educational needs and practice, and progressing to round-table working sessions to propose and debate solutions, including the following objectives: to define standards for the teaching and application of Spanish in physician-patient communication; to establish a curricular and competency guideline for medical schools; to propose best practices for medical Spanish skill evaluation and certification; and to identify next steps needed for implementation of the proposed national standards.



Dr. Alex Vigo-Valentín (Office of Minority Health) and Dr. Laura Castillo-Page (Association of American Medical Colleges) discuss potential organizational roles within Medical Spanish standardization efforts.

Participants in the Medical Spanish Summit consisted of a national and international representation of stakeholders including physicians, medical educators, academic deans, language researchers, residency leadership, private industry, government employees, medical interpreters, and non-profit organization leadership.



Dr. Marco Alemán (University of North Carolina) discussed the recommended proficiency level and expected core competencies of Medical Spanish learners.

Research has demonstrated that patient-physician language discordance interferes negatively with many components of quality medical care provision and physician productivity, yet there is no process currently in place to address, ensure, or incentivize US physician second language acquisition and proficiency.

Ensuring a linguistically competent physician workforce includes complex components such as an educational structure, linguistic assessment, and quality assurance processes. While other industries address bilingual certification of staff, there is no standardized process currently available in the US for physician certification in their use of languages other than English in patient care. Experts presented the curriculum structure of various Medical Spanish programs throughout the country and reached a consensus regarding curriculum and core competencies for Medical Spanish education as well as a structure for student performance evaluation and a pilot program at partner medical schools to launch and evaluate a standardized process.



Cristina González (Royal National Academy of Medicine of Spain) discussed an international collaborative project called the Diccionario Panhispánico de Términos Médicos.



Dr. Norma Pérez (University of Texas Medical Branch) and Dr. Jorge Girotti (University of Illinois at Chicago) presented their experience with incorporating Medical Spanish into medical curricula.

The Medical Spanish Summit resulted in critical recommendations for development of a standardized Medical Spanish educational program with the target outcomes of improving the healthcare quality and reducing medical error within the Hispanic/Latino community.

The creation of a National Medical Spanish Taskforce and establishment of interdisciplinary and inter-institutional collaborations represent historic developments in healthcare quality assurance and are expected to have long-term implications for conducting research that engages Spanish-speaking populations, addressing physician language competencies as a critical and compensated skill, and shifting the standard-of-care to directly address underserved populations, and to add the language and proficiency level of physicians and other providers as part of essential data collection for medical institutions. In the multilingual health environment of the US, this Medical Spanish initiative can be viewed as a template that can be expanded and replicated within additional languages and health professions.

The work of the Medical Spanish Taskforce will be ongoing, and correspondence should be addressed to Dr. Ortega at POrtega1@uic.edu.

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Dr. Karol Hardin (Baylor University) and Dr. María Luisa Clark (medical translation specialist) participate in round table discussions regarding existing Medical Spanish resources.

Consensus Medical Spanish Expert Panel Recommendations are being reviewed for publication in an academic journal. The Taskforce hopes to continue to advance the field of linguistic competence for physicians in non-English languages, by increasing scholarship, research, and educational quality.