



## No Safety Without Equity: Eliminating Medical Errors in Diverse Populations

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## Conflict of Interest Disclosure

Joseph Betancourt, MD, MPH, reported no relevant financial relationships or relationships he has with ineligible companies of any amount during the past 24 months.



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## Presenter

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## Outline

- ◆ LEP Patients and Patient Safety
- ◆ Hospital Guide/TeamSTEPPS Project Overview
- ◆ Findings, Key Themes and Recommendations

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## Background: Disparities in Patient Safety

- ◆ Approximately 55 million people – 19.3% of the U.S. population – speak a language other than English.
- ◆ Approximately 24 million – 8.5% of the U.S. population – are defined as having Limited English Proficiency (LEP)

(LEP = speaks English less than “Very Well”)

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## Background: Disparities in Patient Safety

- ◆ Adverse events affect LEP patients more frequently and severely than they affect English speaking patients
- ◆ LEP patients are more likely to experience medical errors due to communication problems than English speaking patients
- ◆ LEP patients are more likely to suffer from physical harm when errors occur

*(Divi et al., 2007)*

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## Project Overview

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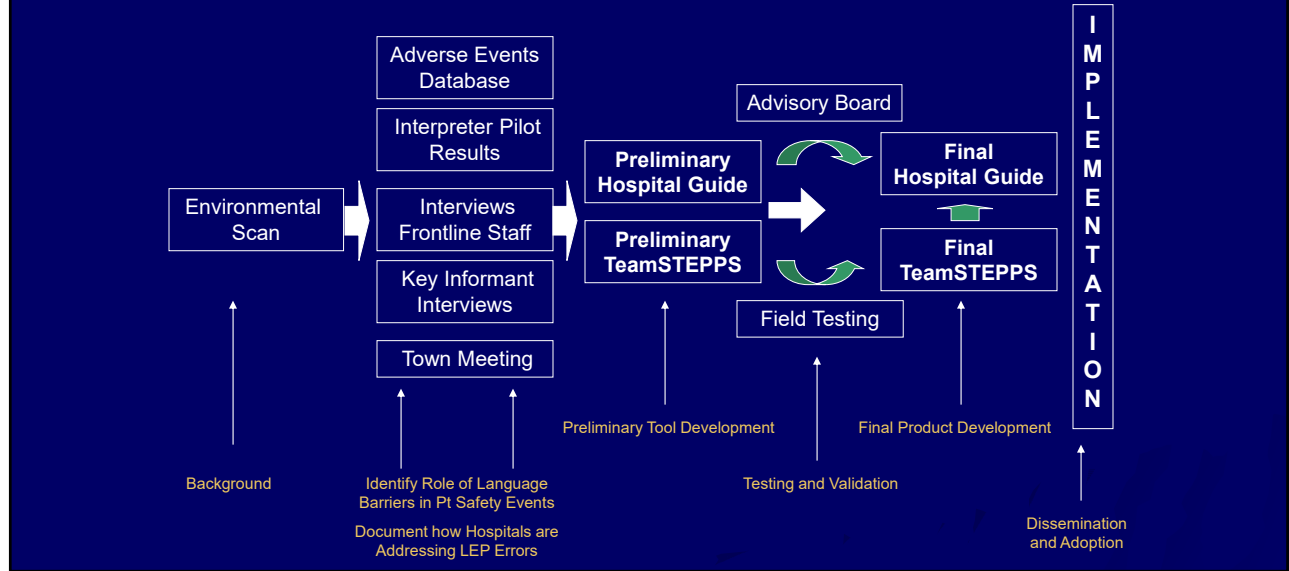
## Project Overview

- ◆ Goal: Develop, test, and implement two new tools to reduce patient harm due to language barriers and cross-cultural care communication problems
  - ◆ Hospital Guide on preventing, identifying, and reporting medical errors due to language barriers and cross-cultural communication problems
  - ◆ A new TeamSTEPPS training module, focused on team behaviors to improve safety in LEP and culturally diverse patient populations

*Funded by the Agency for HealthCare Research and Quality (AHRQ) and conducted by the Disparities Solutions Center at MGH in collaboration with Abt Associates, Inc., Cambridge*

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# Methodology and Data Sources



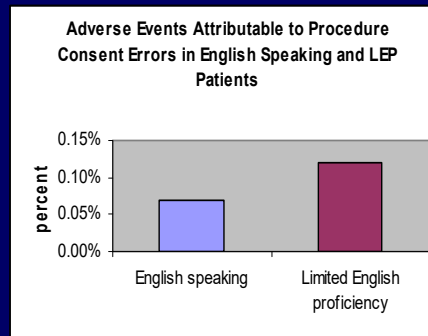
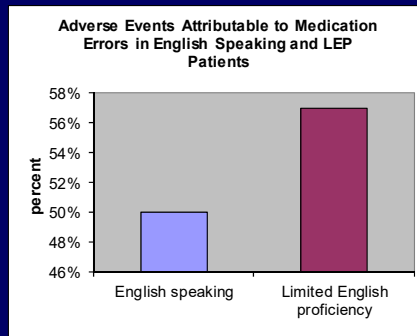
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# Key Findings

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## Adverse Events Database

- ◆ From 2006-2008, 840 events in LEP patients (of 16,708 total)
- ◆ LEP patients are more likely to have adverse events attributable to medication errors (57% vs 50%) and procedure consent errors (.12% vs .07%) compared to English speaking patients\*



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## MGH Interpreter Pilot Project

- ◆ Overview of Key Themes
  - Misuse of interpreter services
    - ◆ no interpreter present, use of family members, providers using poor language skills
  - Miscommunication between patients and providers
    - ◆ poor communication skills, not listening to patients' complaints, lack communication between patient and broader care team
  - Cultural issues
    - ◆ Inappropriate questions posed to patients (e.g. religion); Providers' lack of understanding
  - Professionalism
    - ◆ Rudeness to interpreters and not respecting or understanding their role
  - Informed Consent
    - ◆ Consent signed without interpreter present

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## Broad Key Themes Interviews & Town Hall Meeting

- ◆ Current Hospital Strategies/Efforts to Address Linguistic and Cultural Sources of Error
- ◆ Common Causes of Medical Errors for LEP
- ◆ High Risk Scenarios
- ◆ Role of Behaviors and Communication

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## Current Hospital Strategies/Efforts to Address Linguistic and Cultural Sources of Error

- ◆ Language data collection – not systematic or routine across hospitals
- ◆ Safety reporting systems often do not include fields to identify “language” or “interpreter” as playing a role – *precludes stratification of errors and impedes root cause analyses*
- ◆ Hospitals do not routinely monitor medical errors for LEP and rarely generate reports for high-risk scenarios
- ◆ Challenges with data collection (merging of databases not designed for this purpose)

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## Common Causes of Medical Errors for LEP

- ◆ Use of non-qualified interpreters
- ◆ Use of family members/friends or house staff
- ◆ Provider use of basic language skills to “get by”
- ◆ Cultural beliefs/values impacting patient care

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## High Risk Scenarios

- ◆ Medication Reconciliation
- ◆ Informed Consent Processes
- ◆ Patient Discharge
- ◆ Emergency Department Visits
- ◆ Pre, Peri and Post-Operative Care

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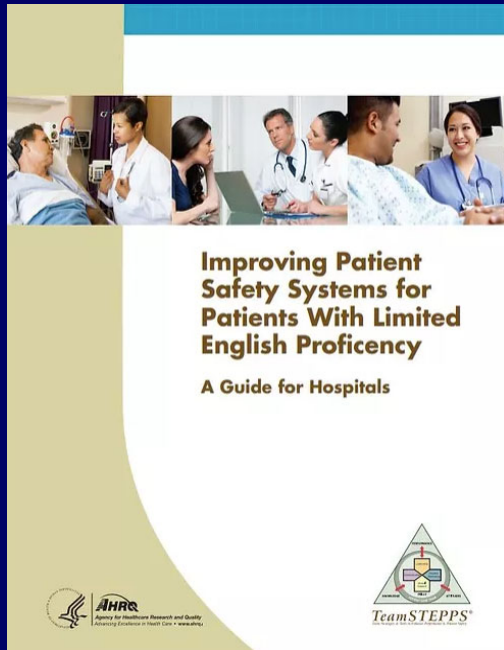
## Role of Behaviors and Communication

- ◆ Failure to identify patient language needs in a timely manner
- ◆ Failure to get an interpreter to the encounter
- ◆ Failure to fully integrate the interpreter into the patient safety team
- ◆ Failure to address interpreter shortages

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## Recommendations

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## Hospital Guide and TeamSTEPPS Training

[www.mghdisparitiessolutions.org/guides-tools](http://www.mghdisparitiessolutions.org/guides-tools)

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## Hospital Guide

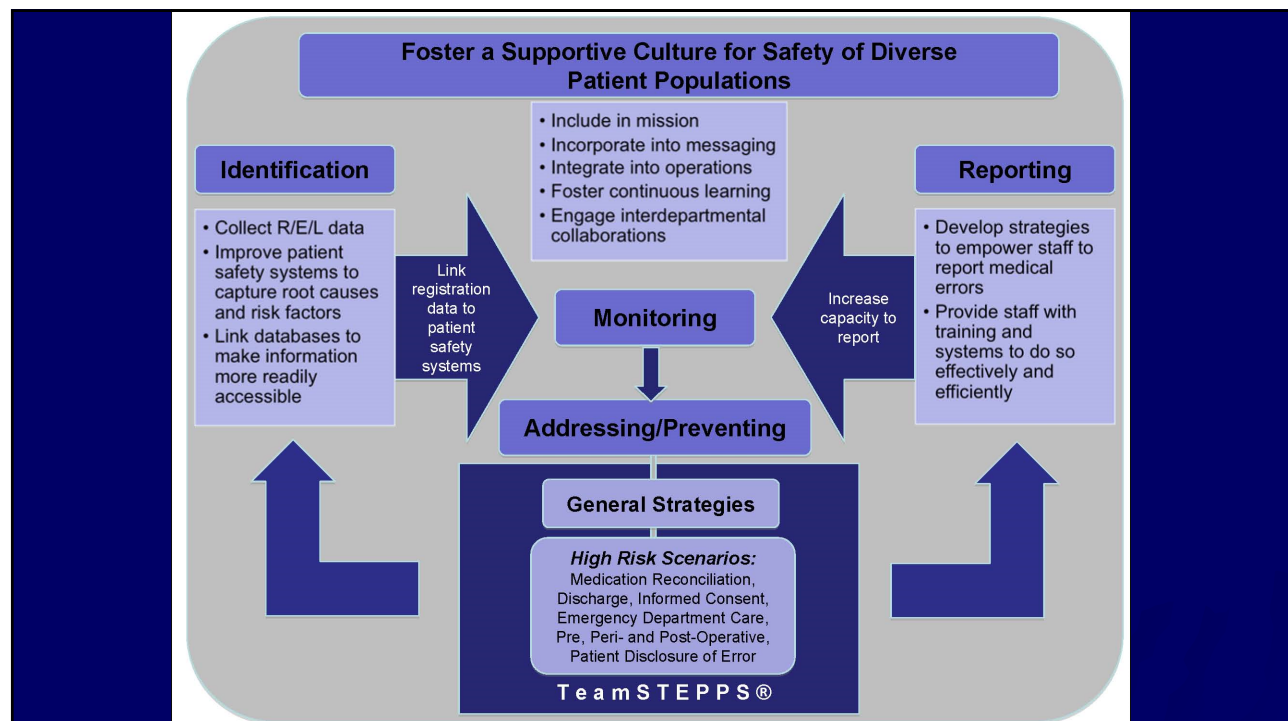
- ◆ Educate leaders with the background and evidence on medical errors that occur due to language barriers
- ◆ Present a set of strategies and training tools to create systems and an organizational culture to better identify, prevent, report, and address medical errors that occur due to language barriers in a variety of hospital settings
- ◆ Provide a set of practical case examples that solidify learning
- ◆ Provide resources which can be useful in developing a robust LEP patient error reporting and response system

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## TeamSTEPPS Training Module

- ◆ Teamwork system to improve patient safety
  - Rooted in 20 years of research on teamwork
  - Helps persons of lower hierarchical status communicate about patient safety risks
  - Teaches persons of higher hierarchical status to better respond
  
- ◆ Video vignette with LEP patient safety scenarios and training manual
  
- ◆ TeamSTEPPS structured communication skills (e.g. SBAR, check-back, CUS words) to facilitate communication between the medical team, bilingual frontline staff, and LEP and culturally diverse patients

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## MGH New LEP Safety Initiatives

### ◆ Interpreter Rounds

- Medical interpreters conduct rounds to assess quality of care and patient experience of LEP patients

### ◆ Executive Quality and Safety Rounds

- Executive rounds include manager of interpreter services to incorporate focus on role of language and cultural factors

### ◆ Training

- **Interpreter Training:** Patient Safety 101, Reporting, Communication Tools via TeamSTEPPS® LEP Module
- **Provider Training:** E-Learning Program with guidelines for working effectively with interpreter services

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## Summary

- ◆ There is a growing body of evidence that has identified link between LEP and medical errors
- ◆ Hospitals can play a major role in addressing these errors by building safety systems with attention to LEP issues
- ◆ Hospital Guide and TeamSTEPPS will provide guidance and some practical tools

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## Questions



## Thank you

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