

BACKGROUND

A study conducted by the Joint Commission (TJC) found that Limited English Patients (LEP) are at higher risk of having bad outcomes compared to English speaking patients. In our institution, a 500 bed urban safety net hospital, 32% of patients are LEPs. Last year Interpreter Services Department completed a total of 317,007 requests in over 250 languages. The number of Face to Face (FTF) requests fulfilled by our staff was 62,030. We project an increase of 10% more requests by the end of FY18. However, the number of staff in our department remains stagnant.

The interpreter services department leaders noted that only 20% of the requests hospital wide are fulfilled with face to face (FTF) interpretation and 80% over the phone (OTP) or video (VRI). In order to help us better allocate our resources, 2 years ago we created an acronym NISA (New, Intervention, Sensitive, and Acute) to help us prioritize our resources in the most efficient way. Currently staff completes 70% of NISA requests FTF hospital wide. The main challenges that we face are our tracking system (Crothall), the fluctuating number of requests we receive every month and limited number of staff members.

AIM

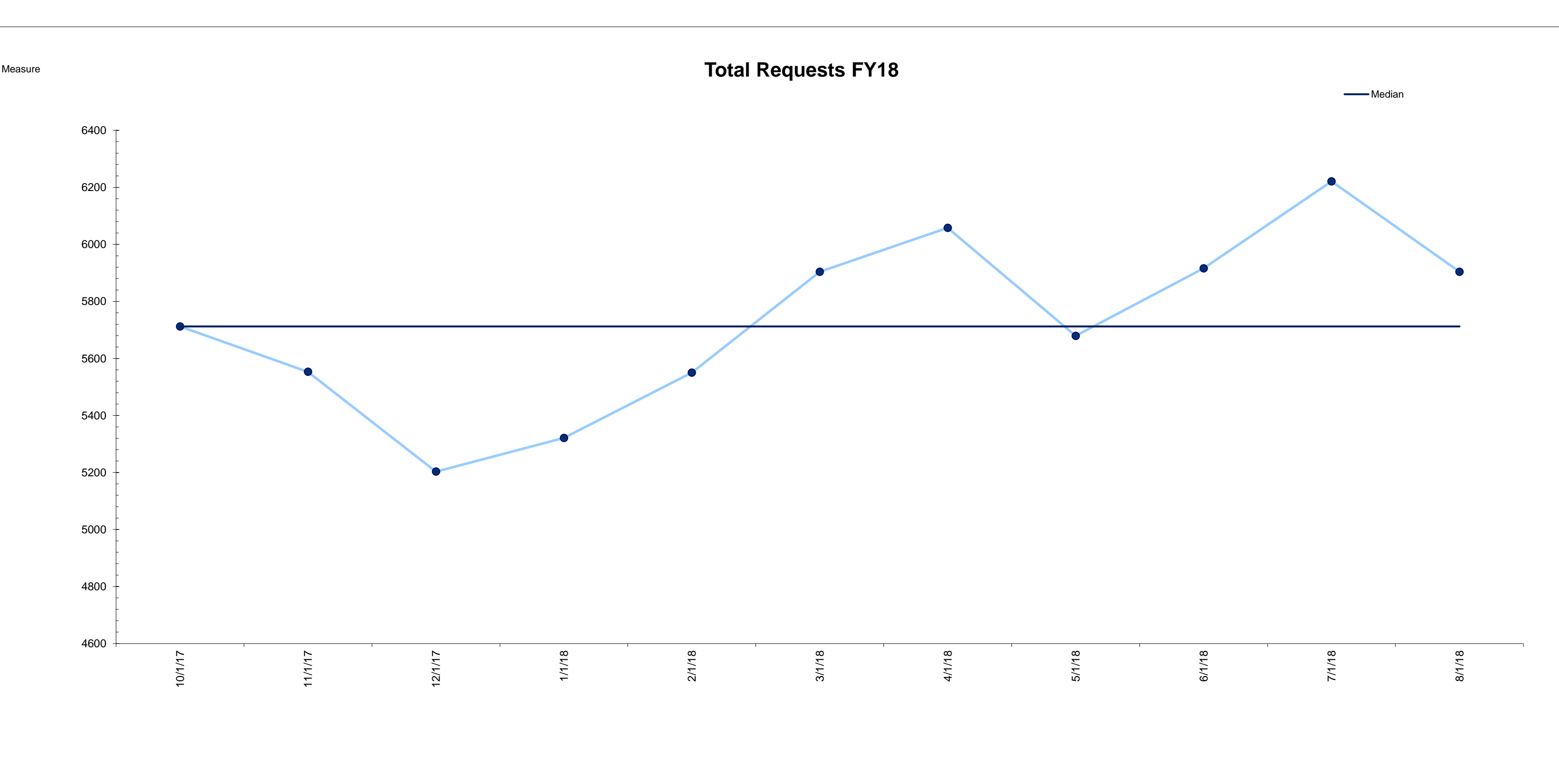
Increase the number of Face to Face NISA requests completed by the Interpreter Services Department on the pilot unit from 70% to 85%.

METHODS

- Test interpreter specific tracking system ID-QUEUE
 - Gave stakeholders a preview of the new system
 - Held conversations with IT in preparation for pilot
 - Trained dispatchers and interpreters from our top 4 languages on how to use system
 - Identified and trained staff on pilot unit on how to use ID-QUEUE
 - Tested ID-QUEUE for 1 month on 22 bed inpatient pediatric floor.
 - Gathered feedback from dispatchers and interpreters regarding system and made changes during pilot with rapid Plan-Do-Study-Act (PDSA) cycles.
 - Resolved connectivity issues with IT Department
 - Met multiple times with vendor to address questions or concerns expressed by interpreters, dispatchers or users
 - Sent survey to project participants to get their feedback

SOLUTIONS

- Conducted a 1 month pilot with a new tracking system in an inpatient pediatric unit during May 2018.
- NISA requests are automatically labeled by ID-QUEUE.
- Made changes to system in real time:
 - Added time tracker to dispatch screen so staff can know how long they have been on break/lunch
 - Added note section for dispatchers
 - “Select Interpreter” button greys out once interpreter has been dispatched
 - Added a message to requestor screen to avoid duplicates
- In an effort to increase joy in work, we rearranged staff schedules and ended the coverage for Spanish for the 3rd shift (11pm to 7am) due to low volume of patients
 - Staff schedule changes allowed for two more interpreters during our busiest hours.
- Hired 2 new Spanish interpreters
- Developed dashboard for ongoing evaluation of monthly metrics

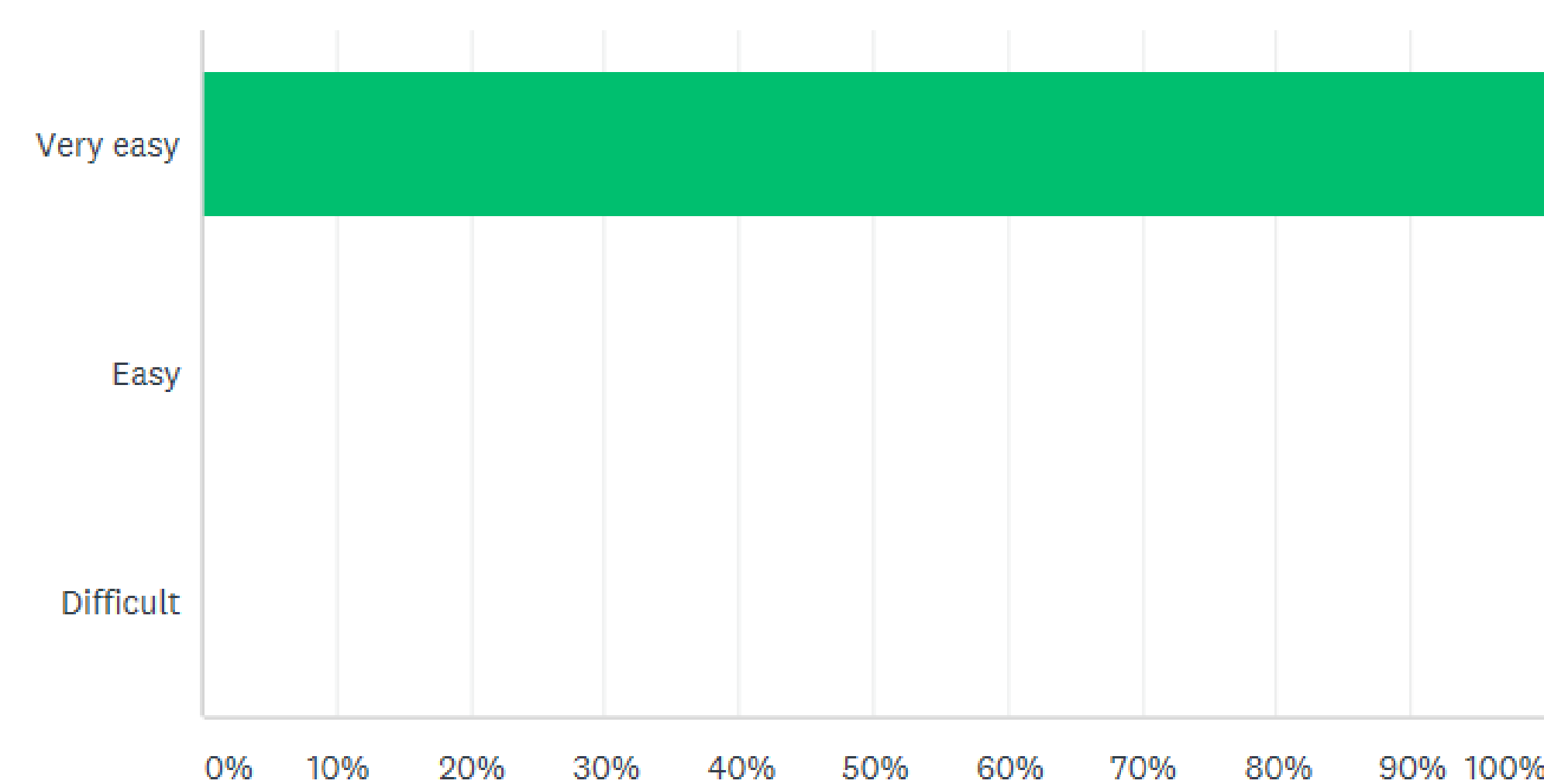


RESULTS

- Pilot data showed 97% completion of NISA requests, surpassing our 85% project aim.
- Positive results from Survey:
 - 85% of interpreters thought system was very easy to use
 - 100% of Pilot unit thought it was very easy to place a request

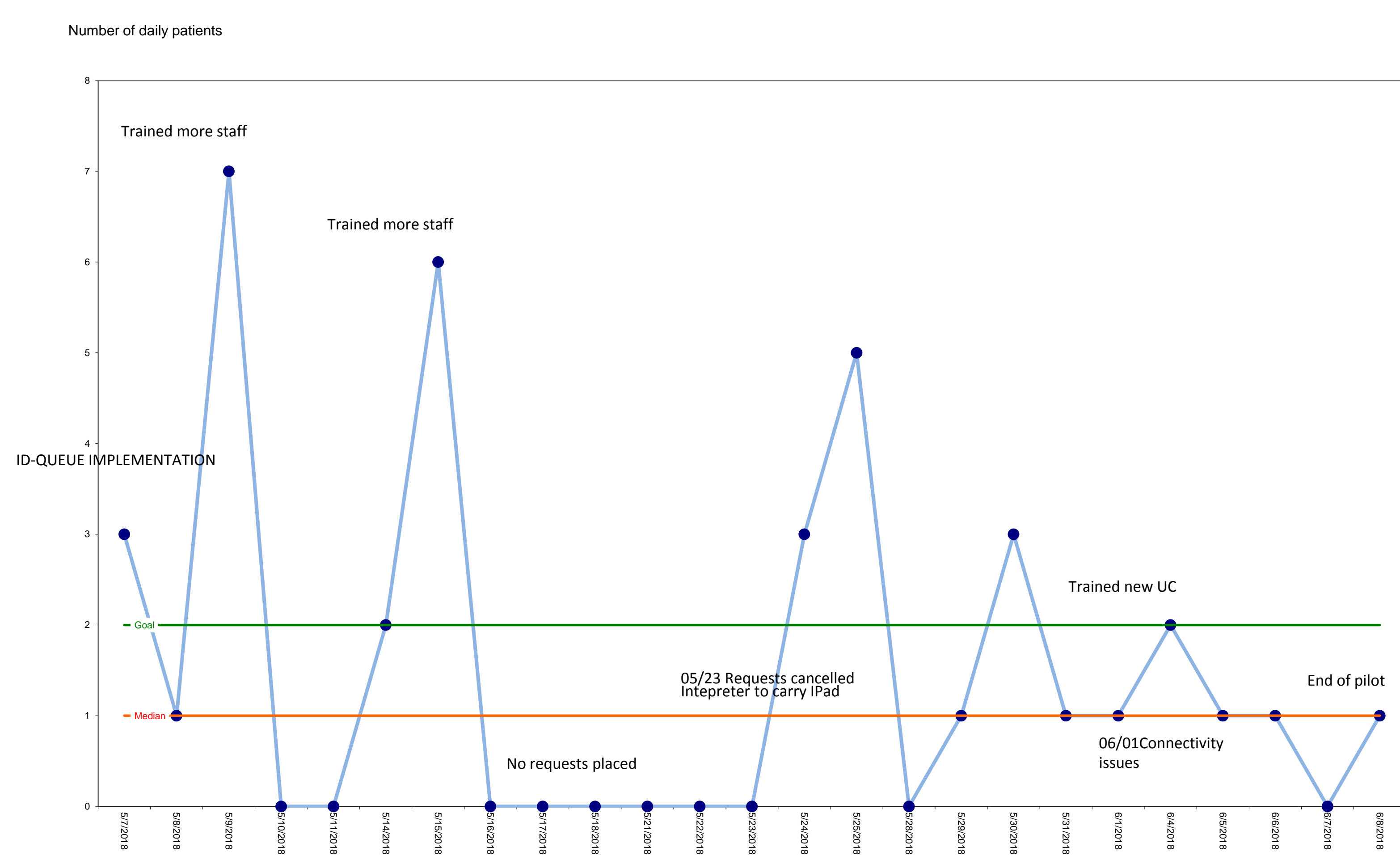
How easy was it to place a request in ID-QUEUE?

Answered: 3 Skipped: 0



ANSWER CHOICES	RESPONSES	Count
Very easy	100.00%	3
Easy	0.00%	0
Difficult	0.00%	0
TOTAL		3

NISA Requests (Pilot)



CONCLUSIONS

- The implementation of ID-QUEUE allowed our dispatchers to work in a more efficient way:
 - Dispatchers no longer had to manually arrange requests by language or priority because system does this automatically
 - Pilot unit was able to accurately track their requests.
- Monthly variation in number of requests makes staffing challenging.

NEXT STEPS

- Hold training sessions for ID-QUEUE hospital wide for 2 weeks during different shifts
- ID-QUEUE platform will be launched in December 2018
 - This will be the 1st time Interpreter Services has a tracking system created and designed for interpreters.
- Continue meeting with our stake holders to track progress after implementation of ID-QUEUE
- Change interpreter’s schedules to offer consistent coverage for top 4 languages
- Change staff’s lunch break hours to offer consistent coverage.

“We can have the info faster. We can help multiple patients without having to call the office. Easy for us to log in and out. Saves us time.”