

Caring for Patients with Limited English Proficiency:

Proficiency:

A Skills-Based Preclinical Curriculum

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Context

- Approximately 1 in 10 people in the U.S. have **limited English proficiency (LEP)**
- In a 2018 survey distributed to all U.S. medical schools, only 10/38 respondents reported skills-based curriculum for working with interpreters
- Prior to 2019, our preclinical curriculum included only a 1-hour lecture about interpreter use; prior to 2018, no curricular content existed specifically regarding care of LEP patients

Objective: to develop a skills-based workshop that better prepared preclinical students to work with interpreters to care for patients with LEP

Intervention/Study Design

- UCSF medical students in the class of 2022 received 2-hour case with monolingual Spanish- or Cantonese-speaking Standardized Patient; *see right*
- Anonymous survey distributed to class of 2022 after they started clerkships, and to class of 2021, asking for:
 1. Self-reported confidence around caring for patients with LEP in person & via telehealth
 2. Frequency of performing 5 patient-centered tasks for LEP vs. English-speaking patients
 3. Qualitative feedback for the session

Standardized Patient Case

A Spanish/Cantonese-speaking patient is scheduled with your family medicine preceptor with a chief concern of abdominal pain. Your preceptor asks you to work with an interpreter to take a focused history, making sure to elicit the patient's perspective and concerns.

For full cases:



2019 Case

Conducted in person

H&P for cc of abdominal pain in the ED

Consent for blood transfusion

Hospital discharge teachback

Δ in response to feedback & COVID-19

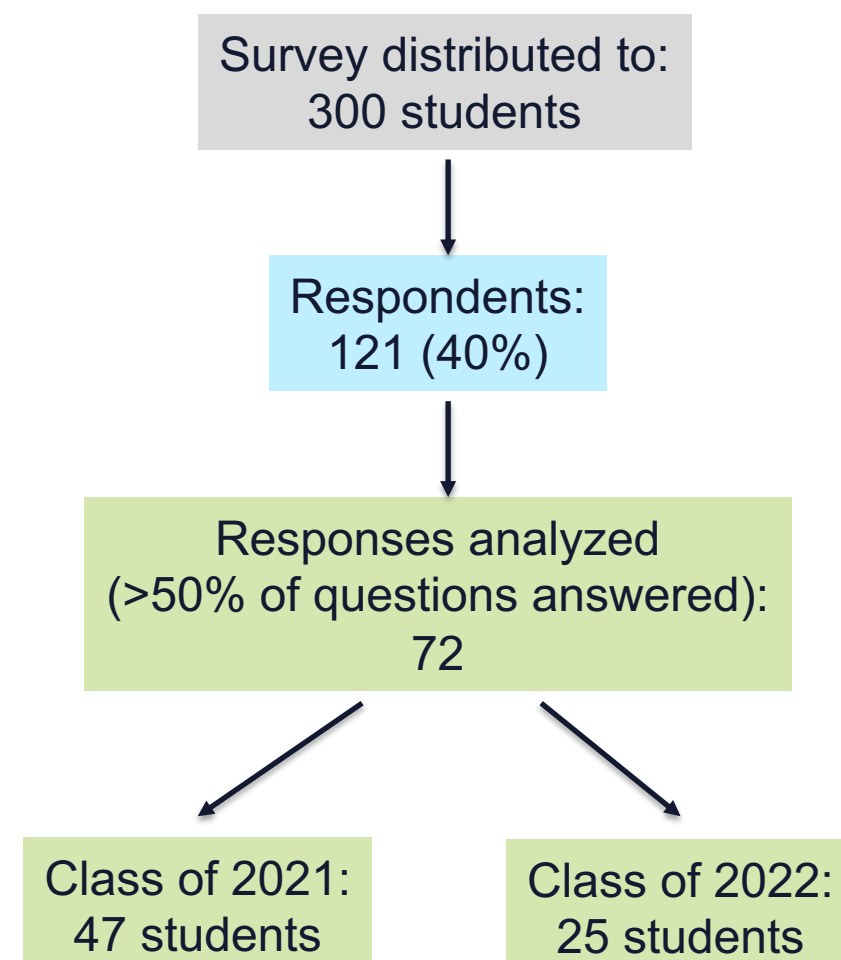
2020 Case

Conducted virtually

H&P for cc of abdominal pain at virtual visit with video interpreter

Hospital discharge teachback with phone interpreter

Survey Respondents



Student Confidence

- No interclass differences in confidence around care for English-speaking patients or patients with LEP.
- Respondents were more likely to report higher confidence in a hypothetical encounter with English speaking patient vs. patient with LEP ($p < 0.001$).
- Respondents reported a lower rate of confidence overall working with interpreter during in-person encounters than telehealth encounters: respectively 30% (21/64) vs. 61% (44/48) ($p < 0.001$).

Task Frequency

- >40% of respondents reported completing each of the 5 patient-centered clinical tasks less frequently with LEP patients than with English-speaking patients
- As high as 78% (46/59) and 66% (39/59) of respondents reported asking patient's non-medical interests less frequently with LEP patients during in-person and telehealth encounters respectively
- Differences across settings were not significant

Qualitative Feedback

- "This was a fabulous small group! I have received multiple comments on the wards complimenting my use of small phrases with interpreters, which was a direct result of this small group training."
- "Great that we had this content at [the end of didactics] and the opportunity for everyone to practice."
- "This was an excellent [session] and I frequently use skills that we practiced during this session with real life patients."

Discussion

- Medical students have less confidence caring for LEP compared with English speaking patients, and complete patient-centered tasks less frequently with LEP patients
- Gaps remain despite addition of practice-based curricula
- Medical schools need additional strategies to support students in overcoming language barriers during patient encounters

Future Directions

- Expanding recruitment of standardized patients & interpreters beyond Cantonese and Spanish, given the proportion of students who also speak these languages
- Improving training to target specific skills

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