

# Uniting to Promote Language Access

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**P**alm Beach County, FL, well-known as the winter home of some of our country's wealthiest families, is sometimes called the "golf capital of the world." But there is a lesser-known side to this county of 1.3 million residents, in which 15 percent of the children live in poverty and nearly 19 percent of all residents are uninsured.

Because many Palm Beach Countians are immigrants from non-English-speaking countries, language differences are a barrier to access to health care for many. According to the 2000 census, 10.3 percent of Floridians are Limited English Proficient (LEP), a 61 percent increase over the 1990 census. In parts of Palm Beach County, the figures are even higher: Twenty-eight percent of the residents of Lake Worth and 24 percent of those of Belle Glade are considered LEP. The primary languages spoken by the LEP residents in Palm Beach County are Spanish and Haitian-Creole, along with several Mayan languages. In 2004, the local health department reported that 43 percent of the patients visiting its clinics in Belle Glade and West Palm Beach were best served by a language other than English.

Unfortunately, local hospitals and clinics do not employ dedicated staff interpreters, and there is no comprehensive system for the provision of language services. Many health care facilities tell non-English-speaking patients that they will not be served unless they bring someone with them who speaks English. Health and human service providers frequently ask a patient's child, friend, or other family member to act as an interpreter. However, using such untrained interpreters (who also have personal relationships with the patient) creates significant problems related to privacy and medical accuracy.

## CREATION OF LAP

In 2005, a local coalition decided to improve access to care through the creation of what they called the "Language Access



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Program" (LAP). This coalition, known as the Palm Beach County Community Health Alliance, includes hospital administrators; university officials; and representatives of not-for-profit community-based organizations, county government, private foundations, physician networks, free clinics, the state's Medicaid program, and others. Through LAP, the alliance planned to address the language and cultural differences that obstruct access to health care.



Glades Initiative

and cultural differences that obstruct access to health care. Allegany Franciscan Ministries, Clearwater, FL, a Catholic grant-making organization dedicated to improving access to health care for all, was an early partner in the alliance and an early funder of the LAP. Several factors, all of which appealed to the organization's sense of Catholic identity and mission, made the LAP a

natural fit for Allegany Franciscan Ministries's funding:

- The collaborative nature of the project, which includes public and private funders, human and health care providers, and members of the community being served
- The shared values of improving the quality of care and access to care for populations that have not traditionally been well served in the community
- The potential to create systemic change

Allegany Franciscan Ministries tapped Glades Initiative, a local organization that was already active in the community, to lead and implement the program. As a consortium of providers dedicated to developing a local system of care, Glades Initiative had the experience, community knowledge, health care knowledge, and community relationships to be successful.

## THE LAP MODEL

Corinne Lemal Danielson, one of this article's authors, designed the initial two-year phase of the LAP program with assistance from representatives of Glades Initiatives and input from alliance members, including Allegany Franciscan Ministries. The designers made it comprehensive, including various program elements.

We formed a LAP staff of two full-time and two part-time employees (the part-timers handled administrative and fiscal matters). The staff began its work by educating local health care providers about the federal law—Title IV of the Civil Rights Act of 1964—that requires entities receiving federal funds to provide equal access to those seeking their services. This includes interpreters for people who are LEP. Besides making the community aware of the law and the need for interpreters, the LAP staff identified existing interpreter resources and developed new resources

that providers would need in order to create equal access.

The LAP staff also trained a core group of people in professional interpretation skills and cultural competency, equipping them to work effectively with LEP clients. The staff researched "best practices" and models from around the country and gauged the current capacity of local providers. Staff members also worked with individual organizations in developing policy and language services.

LAP was developed on the understanding that collaboration at all levels would be required for success. As a result, all providers involved were encouraged to interact, integrate program elements, and share ideas and resources in a way that has been innovative and effective. Because of this collaboration, the program has had a far greater impact than it would have had otherwise.

## RESULTS TO DATE

Since the program's beginning, the LAP staff has trained 124 interpreters, through an internationally recognized 40-hour training program, and provided continuing bimonthly education workshops to trained interpreters. More than 600 providers participated in awareness presentations and discussions that included language resources and strategies.



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The staff has surveyed hospitals, hospices, free clinics, and other major health care providers about their current capacity to provide interpreter services. LAP has trained more than 250 people from 35 different health and human service organizations in basic Spanish, Haitian-Creole, or American Sign Language so that they can greet LEP clients and ensure they receive access to care.

The interpreter-training curriculum has been a significant

factor in the LAP program's success. This training involves not only accurate word exchange but also culture, idioms and symbol-



Glades Initiative

ic meaning, medical and specialized vocabulary, and appropriate advocacy. Untrained interpreters are not able to provide this level of understanding and professionalism. Well-trained interpreters are an investment that will reduce medical error and increase patient involvement in medical decisions as well as patient satisfaction.

Trained interpreters are now providing volunteer services for those providers with the greatest need for language services.

Already, organizational cultures are changing as health care providers adapt their policies, procedures, and data collection methods to address language access. Staff from several agencies have reported that relationships among co-workers have improved and become more trusting and open.

## NEXT STEPS

LAP's first two-year phase was recently completed. Several funders, including Allegany Franciscan Ministries, are committed to its continuation and expansion. Future initiatives will include ongoing training, more basic language classes, and educational presentations for providers on how to work effectively with interpreters. New partnerships with other community groups will focus on developing cultural competency, thereby expanding the program's reach and strengthening other related programs.

Palm Beach County looks forward to greater results as all involved work together to reduce barriers to health care.

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## About the LAP Program's Sponsors

**Allegany Franciscan Ministries, Inc.**, is a not-for-profit Catholic organization focused on improving the overall health status of individuals through increasing access to health services and information. Guided by the tradition and vision of the Franciscan Sisters of Allegany, and a member of Catholic Health East, Newtown Square, PA, Allegany Franciscan Ministries provides grants to organizations in three regions of Florida. Allegany Franciscan Ministries strives to be a catalyst for systemic change; committing resources and working collaboratively to promote physical, mental, spiritual, societal, and cultural health and well-being in these communities.

**Glades Initiative** was formed as a membership organization

to identify and coordinate health and human service needs in the western Palm Beach County community and to develop and encourage collaborative relationships to collectively address the community's needs. The initiative's focus is on shifting to a more holistic system of care, with collaboration and coordination designed to affect systemic changes.

The simple focus of the **Palm Beach County Community Health Alliance** is to improve access to health care in Palm Beach County; it facilitates the coordination of and access to high-quality health care for the uninsured and underinsured residents of the community and promotes enrollment in appropriate health and human services programs.

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