

Advisory Committee on Qualifications for Health Care Translators and Interpreters

Meeting Site:

Health and Human Services Commission (HHSC)
Brown-Heatly Building, Room 4501
Austin, Texas 78751

December 5, 2014

Meeting Minutes

Members in Attendance:

Jacque Burandt
Gel Detrick
Ryan Foley
Esther Diaz
Miguel A. Fuentes
Manuel Higginbotham
Tony Martin
Irma Rubio
Detra Stewart

Members Not in Attendance:

Zee Broussard
Chris Moreland
Nancy Miller
Fabio Torres

Non-voting Members in Attendance:

Patricia Hosey, Department of State Health Services (DSHS)
Randi Turner, Department of Assistive and Rehabilitative Services (DARS)
Barbara Wright, Department of Aging and Disability Services (DADS)

1. Call to order

Tony Martin, chair, called the meeting to order at 10:16 a.m.

2. Approval of minutes for September 19, 2014 meeting (vote required)

Approved unanimously.

3. Report on administrative action items from last meeting

Ryan: Will send CRO the proposed features for the registry based on the discussion.
Done.

Esther: Will send the updated PowerPoint presentation to Randi.
Incomplete

4. Discussion on disseminating information on the committee recommendations

Jacque gave a small presentation and led a group discussion on how best to disseminate information about the committee's recommendations. First she asked the members to

clarify their purpose in disseminating the information. Jacque helped the group to come up with the following statement of purpose:

“Improve health care by raising awareness of need for and role of qualified health care interpreters and translators by promoting best practices in health care interpreting and translating.”

She said that each committee member could use that statement to develop his or her own elevator speech.

Next she addressed the committee’s communication plan. She explained that a communication plan tells *who* (multiple audiences), *what*, and *how*. Members set up different approaches to *what* and *how* depending on audiences. She reviewed an article from the Public Relations Society of America, entitled, "How to Develop a Communications Plan." The article, she noted, listed the benefits of having a plan -- a written document that describes what you want to accomplish (objectives). The article suggested the following goals, which the committee could adopt:

1. Define audiences (who): stakeholders and others.
2. Define goals (what): setting priorities.
3. Identify tools (how).
4. Establish timetable (when).
5. Evaluate the Result.

Paula reminded the committee that the HHSC Executive Commissioner had already sent out the current recommendations and they are public.

Jacque set up a large sheet of paper on the wall, on which to post brainstorming ideas. Jacque proposed that the committee tackle the *who*, to identify the committee’s constituencies, and leave the *what* and *how* for the next meeting. The committee was able to break down the following categories of target audiences:

Texas state agencies

- HHSC
- DSHS
- DARS
- DADS
- DFPS (Child Protective Services, Adult Protective Services)
- TDI (Texas Department of Insurance)
- TSD (Texas School for the Deaf)
- TSBVI (Texas School for the Blind and Visually impaired)

Professional organizations

- American Society for Healthcare Risk Management
- Texas Medical Association
- Texas Hospital Association

- Psychiatric Association
- Texas Nurses Association (TNA)
- Allied Health Societies Association
(<http://www.bhsi.com/Left+Navigation/For+Physicians/Allied+Health+Professional+Societies+%26+Associations>)
- Promotoras (<http://www.dshs.state.tx.us/mch/chw.shtm>)
- Home health agencies
- Patient advocates and advocate organizations

Interpreter / Translator Associations

- International Medical Interpreters Association (IMIA)
- Metroplex Interpreters and Translators Association (MITA)
- Austin Area Translators and Interpreters Association (AATIA)
- Texas Association of Healthcare Interpreters and Translators (TAHIT)
- Houston Interpreters and Translators Association (HITA)
- Texas Society of Interpreters for the Deaf (TSID) and other associations
- National Council on Interpreting in Healthcare (NCIHC)

Other

- Media
- Facebook (or LinkedIn) groups and users
- LEPs
- General Public
- People who aren't interested in any more training (Irma's)

Consumer Groups

- Deaf and Hard of Hearing
- Hearing Loss Association of America (HLAA)
- Immigration Concern Group
- Consumer organizations, such as United Way
- Centers for Independent Living
- Senior citizen organizations
- Texas Association of the Deaf (TAD)
- Hispanic and Black deaf organizations
- American Association of the Deaf-Blind

Health System Operations

- Language access services managers
- Hospitals and healthcare providers
- Hospital and clinical administrators
- Teaching hospitals
- City / county clinics

Standards and Accreditation Organizations

- Interpreter and translator certifying bodies
- ASTM
- DNV GL [accrediting organization]
- International Standards Organization (ISO)
- Joint Commission

Language Service Providers

- National vendors
- Video remote interpreters
- Over the phone interpreter services
- Language agency owners

Training programs

- Interpreter training programs
- Nursing programs
- CATIE Center
- Allied Health Training Programs
- Medical Schools

5. Discussion on developing a registry for health care interpreters and translators.

Ryan Foley presented his vision of how the committee's registry for health care interpreters and translators might look and highlighted the following features as ideal:

- Less than thirty minutes a week maintenance.
- No cost.
- Easy and fun to use.
- Agency profiles.
- Interpreter uploads information about self.
- Credentials can be verified via search links ("click here to verify").
- User can report inaccurate info (self-policing).
- Once a year auto-emails to remind interpreters to update information. Include a button to click to acknowledge or update. The email is automated and asks the interpreter to update by:
 - Acknowledging that the profile is still good.
 - Making any necessary updates.
 - Noting that he or she no longer wants to be in the registry.
- Autoreply to questions from emails.
- Auto form to contact interpreter.
- Must pick at least 1 professional affiliation to qualify to be on the registry.
- Highest qualified appear first or randomized list.
- Possible ways to fund:
 - Ads (agencies or interpreting organizations) and renegotiate quarterly and allow few ads to create a sense of scarcity - policies for ads.
 - Cost for in-depth search of registry.

- Agency dues for searches = funds for operations.
- Interpreter fee to register.
- FAQs page.

Discussion:

The committee discussed how to pay the costs of creating and maintaining the website. Esther clarified that under Ryan's proposal, interpreters don't pay. Gel said that interpreters would be more likely to sign up with no fee.

Since the committee could not maintain the registry officially without permission from HHSC, Manuel and Esther suggested TAHIT could possibly sponsor the registry.

Randi expressed concern about privacy of addresses and telephone numbers listed. Esther pointed out that they could have their private contact information on resume, which would be in the form of a pdf and so not searchable by web search bots.

Whitney Gissell suggested having a disclaimer on the registry stating that the committee does not take responsibility for the quality of interpreters found on the registry. Ryan noted that interpreters with an agency should have insurance through their agency.

Esther recommended the committee do the following:

1. Get confirmation about cost to develop registry.
2. Ask TAHIT to be owner of this.
3. Come up with RFP or ask TAHIT to develop an RFP

Ryan suggested preparing a preliminary design and wireframe layout and **User Experience/User Interface (UX/UI) design.**

Comment [A(1)]: Check out this beginner's guide to UX/UI: <http://justcreative.com/2014/04/08/beginners-guide-ux-ui-design/>

Miguel will head a subcommittee on the registry, with Esther, Ryan, and Manuel as members.

The committee will vote on Ryan's recommendations for registry next meeting.

6. Public comment

Alma Rivera (Parkland Hospital):

"I just want to commend you for work so far. I am head of board of Dallas chapter of Hispanic associations and I would like to volunteer us to team up for registry. We have technical people there, and I have connections with United Way and we may be able to help get the word out."

Whitney Gissell:

“ATSM (Group F2089) is interested in speaking to this advisory committee about the national standards they're working on for RFPs, etc. They would make a good contact.”

7. Discuss goals and work plan of the committee for 2014 and meeting schedule for 2015

Other Discussion

Manuel noted that the TAHIT conference would take place September 11-12 in the Greater Houston / Galveston area.

Manuel also showed the committee a form put out by TMHP that AMA is making internal interpreters sign, the GN.5 Hysterectomy Acknowledgement Form: <http://www.tmhp.com/HTMLmanuals/TMPPM/2011/2011TMPPM-28132.html>. He showed all the problems with the form and asked how the committee should address this. Gel said she would ask Dr. James Rohack, Baylor Scott & White, director of strategy and protocol, to get his take.

ACTION ITEMS for next meeting

1. Work on communication plan
2. Continue work on the registry proposal
3. Esther: Will send the updated PowerPoint presentation to Randi.
4. Ryan: Will draft FAQs for websites
5. Paula: Will send Ryan's slide on the registry proposal to committee

Schedule of meetings for 2015

January 23
March 27
May 29
July 24
September 25
December 4

8. Adjourn

The committee adjourned at 2:12.