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MEDICAL SPANISH IN MEDICAL SCHOOL PROGRAMS

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OBJECTIVES

- Understand the Medical Education landscape and current state of Medical Spanish in medical schools
- Describe the role of the Latino student and physician as Heritage Spanish learners and educators
- Introduce the Medical Spanish Taskforce and Proposal for Standardization and Research

DEFINING MEDICAL SPANISH

the use of Spanish
in the practice of medicine
for direct communication
with patients

CURRENT STATE

- Communication skills and Cultural Competence are **curriculum content standards** in medical education, but do not explicitly address communication skills in/with non-English languages¹
- **Most (66%) medical schools claim to have medical Spanish,**² but quality is variable and best-practice data is lacking
- U.S. Latino population is growing, but **medical school Latino representation is stagnant (<5%)**³

¹LCME 2018, ²Morales et al. 2015, ³AAMC 2016

HERITAGE SPANISH MEDICAL SPANISH LEARNERS

- Many Hispanic students report being **asked to interpret**¹ yet may be unprepared & overburdened.
- Medical Spanish courses require an **intermediate** basic Spanish starting level.
 - 53.6% of all students meet this criteria²
 - >95% of Latino students
- Latino students are more likely to **care for underrepresented** minority patients when they graduate.³
- Attitudes and cultural factors affecting medical Spanish among heritage speakers **have not been studied**.
- **LMSA** has passed resolution to support standardization efforts.⁴

¹Vela et al. 2015, ²ERAS, 2013; ³Rodriguez et al. 2015; ⁴Aquino et al. 2018

STANDARDIZATION OF MEDICAL SPANISH EDUCATION

Create Network of
Medical Spanish
educators

- Develop consensus recommendations on **curriculum, competencies, and assessment**

Develop Pilot Study

- Evaluate process and outcomes

Engage
Multidisciplinary
Stakeholders

- Government, Foundations, Medical schools/centers, Community, Educators both clinical & linguistic



Medical Spanish Taskforce

Comité de Español Médico



Medical Spanish Summit
March 2018

Objective: To improve medical education and learner competency to provide language concordant care for Spanish-speaking patients



<http://MedicalSpanishTaskforce.weebly.com>

MEDICAL SPANISH TASKFORCE WORKING GROUPS



SPANISH LEVEL PRE-COURSE SELF-ASSESSMENT

Adapted ILR Scale for Physicians 18

Excellent	Speaks proficiently, equivalent to that of an educated speaker, and is skilled at incorporating appropriate medical terminology and concepts into communication. Has complete fluency in the language such that speech in all levels is fully accepted by educated native speakers in all its features, including breadth of vocabulary and idioms, colloquialisms, and pertinent cultural references.
Very Good	Able to use the language fluently and accurately on all levels related to work needs in a healthcare setting . Can understand and participate in any conversation within the range of his/her experience with a high degree of fluency and precision of vocabulary. Unaffected by rate of speech. Language ability only rarely hinders him/her in performing any task requiring language; yet, the individual would seldom be perceived as a native.
Good	Able to speak the language with sufficient accuracy and vocabulary to have effective formal and informal conversations on most familiar topics. Although cultural references, proverbs and the implications of nuances and idiom may not be fully understood, the individual can easily repair the conversation. May have some difficulty communicating necessary health concepts.
Fair	Meets basic conversational needs. Able to understand and respond to simple questions. Can handle casual conversation about work, school, and family. Has difficulty with vocabulary and grammar. The individual can get the gist of most everyday conversations but has difficulty communicating about healthcare concepts.
Poor	Satisfies elementary needs and minimum courtesy requirements. Able to understand and respond to 2-3 word entry level questions. May require slow speech and repetition to understand. Unable to understand or communicate most healthcare concepts.

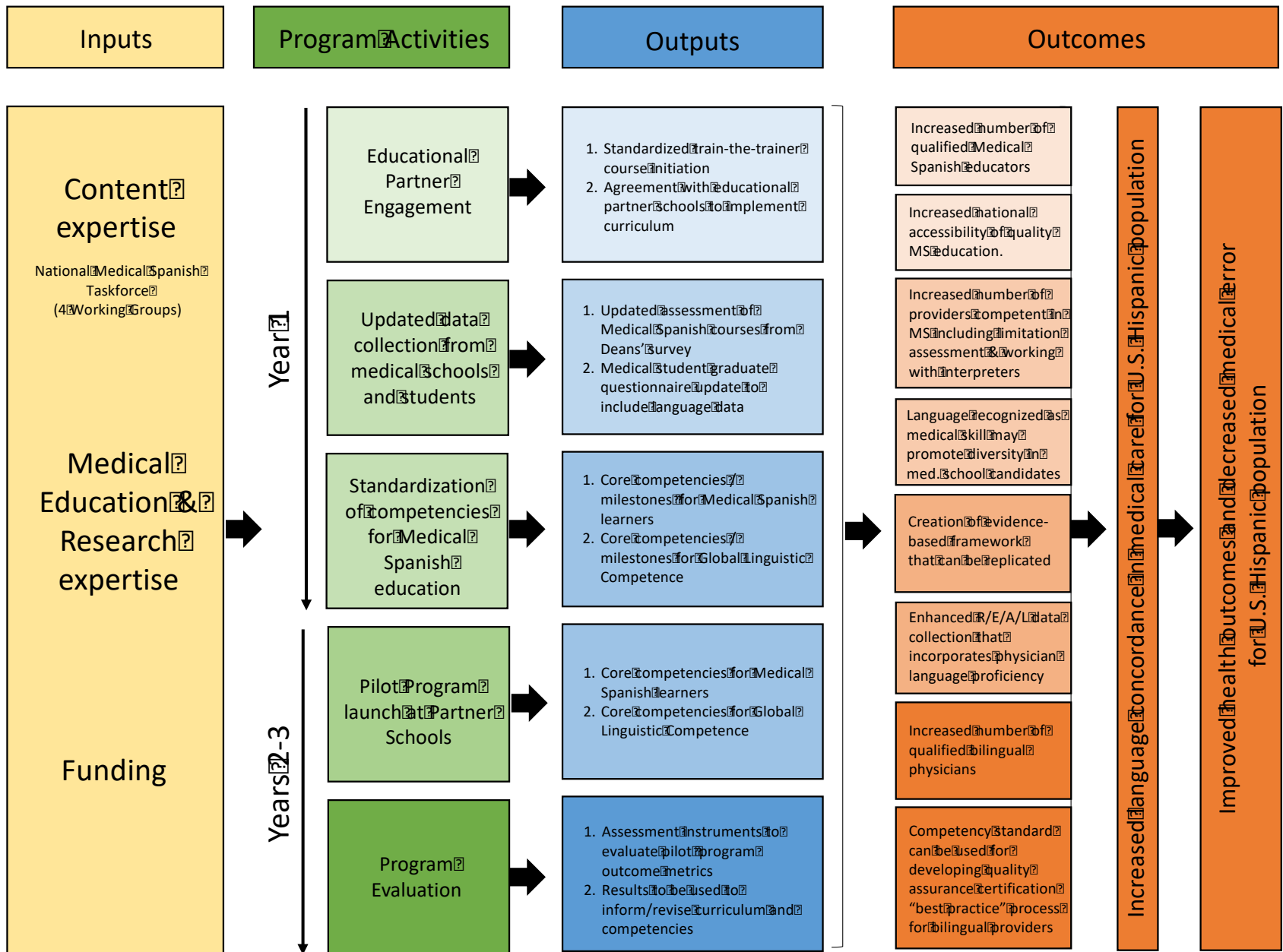
ORIGINAL RESEARCH

Evaluation of a Medical Spanish Elective for Senior Medical Students: Improving Outcomes through OSCE Assessments

Pilar Ortega^{1,2}  • Yoon Soo Park¹ • Jorge A. Girotti¹



Logic Model for Medical Spanish (MS) Standardization in Medical Education



CONCLUSIONS: BIG PICTURE

- Medical Spanish fits within **communication skills and health equity goals**.
- Medical linguistic skills are specialized and require **training, quality control, research, and sustainability**.

CONCLUSIONS: AT YOUR INSTITUTION...

- Demonstrate **student demand** to gain **administrative support**
- Identify a **faculty** educator or advisor
- Complete **curriculum committee review** process to gain official status
- Use a **standardized approach** – Join the Taskforce!
- Employ an **assessment plan**
- **Collect data** (and publish it!)
- Consider: Dedicated Medical Spanish course (focused) vs. Global linguistic competencies (integrated)

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¡GRACIAS!