Executive Summary

Greenville Hospital System (GHS) collaborated with three other area hospitals and received a grant from the Robert Wood Johnson Foundation to improve patient/provider communication for the Latino population. A not-for-profit organization called MedVerse was created to hire and train interpreters and then test their competencies to provide a well-trained group of professionals. This organization offers its services at a much lower rate than hospitals and physicians paid previously for interpretation and translation.

If MedVerse develops a financial surplus, it plans to partner with other organizations such as the March of Dimes to provide prenatal care for low income, non-English speaking Latina women. The projects that improve the quality of life of the targeted populations will be given priority by MedVerse for community reinvestment.

Organization Size: 1,200 beds

Program/Initiative Description

Hablamos Juntos: Improving Patient Provider Communication for Latinos: In 1997 Greenville Hospital System (GHS) recognized that its community was becoming increasingly international and that it was unprepared for that challenge. GHS created a diversity office as a strategic business initiative designed to maintain the hospital’s position as the provider of choice in the region, and began to actively recruit to create a more diverse workforce. While GHS recognized that in the short term this strategy would address the immediate challenge, they were looking at the long-term benefits that could be attained by establishing a trusting relationship with area families. In 1998, GHS formalized its language program by testing employees who, in addition to their regular duties, provided translation and interpretation services (dual-role employees). In exchange, these employees received a small increase in their hourly wage. In 2000, the size of the Latino population had grown so large that dual-role interpreters could not keep up with the demand, and GHS hired its first dedicated interpreter. The System now has 13 full-time interpreters and 13 dual-role interpreters who help people in 14 different languages.

When The Robert Wood Johnson Foundation sent GHS a request for proposal to develop a program to serve as a national model for health care providers to bridge language barriers and to increase access to health care for non-English speaking populations, a consortium submitted a proposal using GHS’s current program as the model. GHS chose to collaborate with three other regional health care providers on this project. The group received the grant, and Hablamos
Juntos, a division of the Tomas Rivera Policy Institute of the University of Southern California School of Policy Planning and Development, was chosen to manage the grant and provide fiduciary responsibility. “Hablamos Juntos” translates from Spanish to English as “We Speak Together.” The result of this collaboration was a program called “MedVerse,” a not-for-profit interpretation and translation service.

The four partners developed MedVerse as an alternative to hiring expensive contract interpreters who are not always trained professionals. Interpreters hired by MedVerse are trained in medical terminology, anatomy, ethics, law, and HIPAA, and they are tested on their competency. Their services are provided at a lower cost than hospitals and physicians paid previously for interpretation and translation. MedVerse continues to work with Hablamos Juntos to establish standards and create tests for interpreters. This service has removed a significant barrier to health care for non-English speaking Latino people.

In the future, if there are excess revenues from MedVerse, that money will go to support projects that improve the quality of life such as Comenzando Bien, a regionally sponsored program based on a model by the March of Dimes that is focused on providing prenatal care to non-English speaking, low-income Latina women.

**Establishment of Program/Initiative**
- GHS Diversity Initiative: 1997
- Hablamos Juntos: 2001

**Racial or Ethnic Disparities Problem the Program/Initiative Was Designed to Address**
- The cost of existing interpreters
- Lack of qualified interpreters
- Quality translations of consensual and educational materials

**Major Objectives**
- Develop a self-sustaining national model that can be duplicated
- Enhance access and remove barriers for non-English speaking Latino patients
- Improve quality of health care by raising standards of professional medical interpreters
- Manage cost

**Significant Results**
- Four major hospitals collaborated successfully to create MedVerse.
- Costs related to interpretation and translation have decreased.
- Qualified medical interpreters are more readily available when needed.
- Delays in the provision of services have been minimized.
• This program has enhanced these hospitals’ ability to envision new services and programs that will further contribute to increased access to care. For an example, providing services to social service agencies and private physicians’ offices enhances access and the sustainability of the project.

External Sponsors in the Program/Initiative
• Bon Secours-St Francis Health System, Greenville, SC
• AnMed Health, Anderson, SC
• Spartanburg Regional Health Care System in Spartanburg, SC
• Hablamos Juntos, a division of the Tomas Rivera Policy Institute of the University of Southern California School of Policy Planning and Development, (manages the grant)
• The Robert Wood Johnson Foundation in Princeton, NJ, the nation’s largest philanthropic foundation devoted exclusively to health and health care (provided program funding)

Limitations or Problems Encountered
• The development of MedVerse was very time-consuming.
• The four sponsors are in different geographic locations, which makes it difficult to get together easily.
• Assembling a management team and staff to run the project who have all of the necessary sensitivities and skills was a challenge.
• Developing and maintaining an egalitarian environment in which consensus can be reached on every decision in an expedient manner was challenging.

Estimated Cost of the Program, To Date: $1,250,000; $1,000,000 – Robert Wood Johnson Foundation, and $ 250,000 – in-kind from the sponsors

Advice to Other Organizations That May Want to Start a Similar Program
• Apply for grants or pool the resources to attempt this type of project.
• Collaboration should be attempted. It is not always easy but it can be done.
• Stay focused on the purpose of the project, and recall your mission frequently.

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