The search for greater understanding and appreciation of people and cultures that are different from our own has been a longstanding goal of many organizations because of the great value that synergistic relationships bring to organizational success. In 2001, United Nations Educational, Scientific and Cultural Organization (UNESCO) adopted the Universal Declaration on Cultural Diversity and in December 2002, the United Nations General Assembly declared May 21 to be World Day for Cultural Diversity for Dialogue and Development. As they envisioned it, this was a day set aside to deepen our understanding of cultural diversity and to advance the goals of the UNESCO Convention on the Protection and Promotion of the Diversity of Cultural Expressions, which has among its guiding principles dignity and respect for all cultures.

At MUSC Health, the concept of diversity is not limited to cultural differences. Instead diversity is a multi-dimensional concept that encompasses a wide range of attributes including age, race, gender, socioeconomic status, education, gender identity, religion, ethnicity, ability/disability, among other factors. We work to raise awareness about the importance of intercultural dialogue and promote respect for everyone in order to combat polarization and stereotypes and to harness positive collegial relationships and interactions. Our goal is to improve understanding and cooperation among our diverse care team members and patients to create inclusive experiences across the clinical enterprise. We believe that diversity and inclusion not only breeds innovation but simultaneously helps to keep patients safe and enhance the overall care experience. Our commitment is demonstrated by the array of on-going educational opportunities provided for care team members, students and leaders. Over the last several months we have offered in-person education on a variety of topics including unconscious bias, intimate partner violence, Alzheimer's disease, weight bias, and race in the workplace. During the month of May, we will feature a panel presentation in recognition of Asian American Heritage Month and in the month of June an educational program on Lesbian Gay Bisexual Transgender (LGBT) Health will be offered. Additional educational opportunities can be accessed from our online education tool, MyQuest. Also, departmental leaders are encouraged to contact Stephanie Taylor, Director, Diversity & Inclusion at taylorst@musc.edu to request additional training.

Learning is not limited to opportunities provided by MUSC Health. Care team members can take advantage of many local cultural and social events, including visiting an art exhibit or museum dedicated to other cultures, listening to music from a different culture or even challenging themselves to learn a new language.

Recently, we asked a few care team members to describe what the word “diversity” means to them. Here is a sample of what they said:

- “Diversity is embracing everyone, regardless of their culture, background or beliefs. Without diversity, our world would be plain and boring” - Natalia
- “Understanding and embracing the differences in culture, beliefs, and lifestyles. Maintaining an open mind to everyone in a place where no judgement is passed” - Toni

Whether we are students, care team members, providers or patients, MUSC Health is a place that embraces and celebrates diversity. Navigating a diverse environment can be challenging but it also presents opportunities for change and growth. We celebrate and embrace diversity, not because we have to, but because it is the right thing to do.
Case Study: A Series of Communication Breakdowns

The Issue—A patient who speaks Spanish arrived at the Emergency Department complaining of “fatiga”, which can mean breathlessness. The triage nurse assumed that the word meant “tired” and explained to the patient and family that the emergency room is extremely busy and they would have to wait. After waiting for two hours, the patient developed chest pressure. A medical interpreter was called. The decision and consent for an angioplasty procedure and possible stent, due to myocardial infarction, was made very quickly, without the patient fully understanding the procedure. The interpreter did not feel confident that the patient understood the procedure but did not intervene. The patient is allergic to IV contrast dye but this was never discussed during the hasty process to obtain consent. Several hours after the initial presentation, the patient was admitted to the intensive care unit due to a severe allergic reaction to the contrast dye.

The Solution—There were numerous breakdowns in communication during this patient encounter. The patient should have been immediately identified as limited English proficient (LEP). The triage nurse should have immediately accessed interpretation services, telephonic or in-person. The physician should work effectively with the medical interpreter to ensure informed consent. The interpreters should have adhered to the standards of practice for medical interpretation and could have advocated for the patient, particularly when it became apparent that the patient did not fully understand the information. Source: Agency for Healthcare Research and Quality

Q&A CORNER

Over the coming months, we will feature a Q&A section. The first person to respond with the correct answer to all questions will be recognized in a future edition of the newsletter. Email answers to interpreterservices@musc.edu Subject: Cultural Spotlight - Q&A

What can you do to celebrate and embrace diversity?

a) Engage with people of different backgrounds/interests

b) Visit an art exhibit or museum or read

c) Respect differences

MEET THE MEDICAL INTERPRETATION TEAM

Introducing ….Elena Moore

Name one interesting thing about you? I love to create realistic drawings using pencil and charcoal.

How many years have you been an interpreter at MUSC Health? I started as a volunteer interpreter in 1993. For the last 12 years I have been a full-time interpreter.

What do you like most about interpreting? The challenge of daily learning about medicine, patients and their cultures. The most satisfying aspect is helping patients and their families during the most vulnerable moments and situations of their lives.

Please submit newsletter topics or ideas to
Editor: Stephen "Lee" Morris Authors: Geraldine Torres & Stephen Morris

Next Issue: July/August 2017

HOW TO ACCESS INTERPRETATION SERVICES AT MUSC

PATIENTS WHO SPEAK SPANISH

- In-person medical interpretation, 24/7/365
- Use Service-Hub to request an interpreter. (MUHA Intranet)
- Conference calls – extension 2-4595
- Telephonic Interpretation—24/7/365

ALL SPOKEN LANGUAGES - Telephonic Interpretation Services

- Available 24/7/365, over 200 languages
- Call 1-855-305-0998
- Request language, including any dialects. Can schedule a time for a phone interpreter for uncommon dialects.

PATIENTS WHO ARE DEAF OR HARD OF HEARING

- In-house Medical Interpretation is Available Mondays through Fridays, 8:00 am—5:00pm
- In-Person Interpretation (After-Hours/Weekends)- Contact Charleston Interpreting Services at 678-446-7780
- Video Remote Interpretation- (ASL), Available 24/7/365 – Equipment is stored in Security Offices at ART and Main Hospital

ALWAYS DOCUMENT THAT INTERPRETATION SERVICES WAS USED.. IF IT ISN'T DOCUMENTED, IT WASN'T DONE!!!

To schedule a department training or provide compliments/complaints about Interpretation Services, please contact Antwan Walters, Coordinator, Interpretation Services at waltea@musc.edu (2-5078) or Stephanie Taylor, Director, Diversity & Inclusion at taylorst@musc.edu or (2-2341).