

Clinicians develop strategies to address virtual care disparities for patients with limited English proficiency

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Although telephone and videoconferencing visits allowed many patients to safely access medical care during the worst of the COVID-19 pandemic, these virtual care platforms unintentionally disenfranchised a large segment of the population, especially individuals with limited English proficiency. Clinicians at Massachusetts General Hospital (MGH) implemented several strategies to address these disparities, and they describe their efforts in an article published in the *American Journal of Managed Care*.

With the explosion in use of telemedicine to provide care during the COVID-19 pandemic, the MGH team deployed three strategies at their academic medical center: to increase access to virtual platforms and technologies for [patients](#) with limited English proficiency, to address the privacy concerns of immigrant patients, and to integrate interpreters into virtual platforms.

"With an increased reliance on virtual care for [health care](#) during the pandemic, it's important to make sure we are not increasing disparities for patients who have [language barriers](#)," says lead author Aswita Tan-McGrory, MBA, MSPH, director of the Disparities Solutions Center and administrative director of the Mongan Institute at MGH. "Also, addressing challenges with these three strategies will actually increase care and access for all patients."

Tan-McGrory and her colleagues addressed access to [virtual platforms](#) and technology by offering patient education in multiple languages, encouraging patient portal enrollment through multilingual tip sheets and videos, and using tablets and bilingual interns. Easy-to-understand patient education materials in multiple languages that the team uploaded to a public online repository have received 3,388 page views as of August 19, 2021 and could be used at various points of care, such as virtual visits.

Strategies for addressing [privacy concerns](#) included developing a simplified script that addresses patient concerns about privacy and what is shared with Immigration and Customs Enforcement, as well as identifying a secure virtual platform that does not require a patient to download an application to their phone or computer to join. Finally, integrating medical interpreters into virtual visits was achieved by actions such as changing the electronic health record scheduling software to allow both a clinician and an interpreter to join a video visit.

"We really had to put ourselves in the patient's shoes and walk through all workflows to make sure language and health literacy needs were being addressed," says senior author Esteban A. Barreto, Ph.D., MA, director of Evaluation of Equity and Community Health at MGH. "Our findings suggest that as health systems continue to address such needs, patients with limited English proficiency should be able to have an active role in managing their own health which, in turn, may positively impact their health."

More information: Addressing virtual care disparities for patients with limited English proficiency, *The American Journal of Managed Care* (2022). [DOI: 10.37765/ajmc.2022.88814](https://doi.org/10.37765/ajmc.2022.88814)

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