September 30th: Happy Interpreters / Translators Day!

By Nina Vassilian, MPH, MCHES

In recognition of our DHS-wide Healthcare Interpreters

As September 30th marked the International Observance of the Interpreters / Translators Day, the Office of Diversity, along with our Limited English Proficiency (LEP) Administrators throughout DHS Hospitals and Ambulatory Care Network (A.C.N.) facilities, extend our sincere appreciation for all the hard work our Healthcare Interpreter staff do every single day of the year. The ongoing dedication of our Interpreters demonstrates pride and commitment to the very respectable profession of Healthcare/Medical Interpretation.

What is the Role the Healthcare Interpreters Play in DHS’ Service Delivery?

Healthcare Interpreters play a key role in DHS’ service delivery system, partnering with our medical providers to provide excellent care to our patients, with the aim of earning DHS the title of “Provider of Choice”. Healthcare Interpreters are a vital part of the DHS care teams serving our patients representing a wide range of language, ethnic, and cultural backgrounds. Improved patient care interactions are identified by the following key elements:

- Improved quality in the delivery of care
- Improved patient safety compliance
- Improved patient adherence with the medical regimen
- Improved patient experience and customer satisfaction

Patient & Clinician Success Stories

What a Healthcare Interpreter does - From a Patient’s own words:

*After my total hip replacement, I wasn’t able to walk normally. I was learning how to take care of myself with the help of the Healthcare Interpreter. I was able to share my thoughts and worries and mediated the situation so that I could receive the appropriate care. I am lucky and grateful for the services of Mikayel and the wonderful help I received at Rancho.”

What a Healthcare Interpreter does - From Sarah Gustafson, MD, Harbor-UCLA Medical Center:

“On the pediatric ward, we were caring for a young girl who unfortunately needed an appendectomy on her birthday, but the surgery went very well. The girl spoke English, but her father spoke only Spanish. Victor Quiriz, one of our Harbor-UCLA HCI and the Language Center Coordinator, came to provide in-person simultaneous translation for our morning family-centered rounds. This enabled the team to seamlessly communicate with both the patient and the family in both Spanish and English. We were able to provide the good news about going home, discharge instructions, and meaningfully answer all of their questions. After rounds, her father was beaming. When asked what the interpretation service meant to him, he said: “...Some of us don’t speak English... It’s not enough to understand just half, to have to guess the other half. You have to understand everything, because it’s about the health of our loved ones.”

Be sure to thank your local Healthcare Interpreter today!

Director’s Desk

Christina R. Ghaly, MD Director

For the majority of our patients who have a preferred language other than English, seeking health care can be an anxiety-provoking event. Will they be seen by a provider who listens and understands them? Will they receive the same quality of care and communication as those who speak English? We owe it to our patients to make sure language is not a barrier to receiving exceptional care.

A core element of the solution is making sure that we have interpreters available in person or by phone/video at all times. As I’ve shared in prior issues, this is a big focus area for DHS and we have invested heavily in building up our staffing and improving our practices in this area. There is no better time to say thank you to our fantastic interpreter staff as they celebrated International Interpreter’s Day on Sept 30th. We are indebted to your passion, skills and cultural intelligence.

Among other areas of progress in DHS, turn your attention to the results of this year’s Pulse Survey. Particularly impressive is the increase (by 19%) of those who feel they have a good understanding of Just Culture. Awareness and understanding is a critical first step. We will continue to work to embed the principles of Just Culture – principles of fairness, accountability, and systems-thinking across all levels of the organization. I encourage you to continue to look for ways to learn about and apply Just Culture principles wherever you work. To learn more, please visit the Just Culture DHS website.

Finally, this month’s issue highlights two hidden jewels of DHS: Juvenile Court Health Services and their work on combating Commercial Sexual Exploitation of Children, and DHS’ own Emergency Medical Services (EMS) Agency, which is the focus of this month’s Spotlight. In so many ways, we all benefit from the EMS Agency’s work in coordinating and regulating emergency medical services in the County. This impact is felt far and wide, the breadth of their responsibilities is remarkable. They coordinate pre-hospital care, designate specialty centers for such conditions as stroke and myocardial infarctions, manage the County’s trauma system, oversee ambulance transport, manage paramedic and EMT training programs and serve as a key agency in the County’s disaster preparedness infrastructure. My thanks to the entire EMS team for their work in service of residents County-wide. We are so glad you are part of the DHS family!

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September 30th: Happy Interpreters / Translators Day!
LA’s Story – Juvenile Court Health Services

By Marya Monares, MD

After attending the launch of Los Angeles County’s First Responder Program, our Juvenile Court Health Services (JCHS) Medical Director and two pediatrics attended a Nola Brantley Speaks Commercial Sexual Exploitation of Children (CSEC) 101 Training. Recognizing a call to action, the JCHS Nurses and Physicians CSEC Champions Committee was formed in 2014. Our dedicated team collaborated with local partner agencies and national experts. Together, we developed the JCHS Policy on CSEC with the purpose of outlining healthcare practices for detained victims and survivors of commercial sexual exploitation (CSE). JCHS seeks to ensure that these youth receive whole person support and appropriate medical attention. As per the JCHS Policy, physicians shall receive CSEC training as new hires and follow-up CSEC training every 2 years thereafter.

JCHS understands that an individual’s medical care is only one aspect of a person’s well-being, and that a person’s history of CSEC is only part of their story. Representatives from our Department have sat at the table with Michelle Guymon, Director of Child Trafficking Unit (CTU), and her team to help develop the Interagency Detention Protocol for CSE Children and Youth. JCHS is committed to continue working with our community partners and surrounding each youth with a village of support.

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2019 DHS Pulse Survey Results

By Marife P. Mendoza, RN, BSN, MBA-HCM

Thank you for taking part of the recent DHS Pulse Survey. The activity was part of DHS ongoing efforts to track our progress in our Just Culture journey. The survey provided an opportunity to rate your understanding of Just Culture, the ease of speaking up about errors and mistakes and your perception of fairness in the workplace. The many and continuous Just Culture in-person and online-based trainings provided have significantly increased the total number of staff who have a good understanding of Just Culture. DHS has improved its overall percent favorable (strongly agree + agree) responses in all survey questions. You can review the overall DHS and facility specific survey results here. In addition, see the infographic on the third page for overall DHS, DPH and DMH summary results.

Again, thank you for your survey participation and continued support in creating a just and fair work environment allowing us to provide great service and safe care to our patients every day.

Rancho Embraces Diversity

By Lily Wong, MA, MBA

Rancho Cultural Diversity Operations Council and LGBTQ Committee hosted the Interpreter/Translator Day and Bisexual Visibility celebrations along with the Hispanic Heritage Month celebration on September 4th at Don Knabe Plaza. Mr. Ben Ovando, Chief Operations Officer, provided a welcome speech, with music entertainment by Rancho Performing Arts. Useful cultural resources on Hispanic countries, information about interpreter services and Bi Visibility were distributed and well received by staff, visitors, patients and families who attended the celebration.

Bubbles!

By Charmaine Dorsey, MSW, LCSW and Anna Gorman

When is the last time you blew bubbles? Did you know that it can be used to decrease stress, anxiety and worry? A medical case worker at one of our DHS health centers is changing her patients’ lives with a simple, low cost and effective technique. And all it takes is a bottle of bubbles.

The medical case worker, Karineh Mahdessian, invites patients—some experiencing anxiety and distress—to blow bubbles during mindfulness breathing exercises. “It works wonders,” said Mahdessian, a medical case worker at Hubert Humphrey Comprehensive Health Center.

The bubbles are one small and innovative part of behavioral health integration, a project that launched at seven DHS primary care medical homes in April. The teams are using a variety of techniques to engage patients, teach self-care and address mental health, substance use and social needs such as housing, food insecurity and transportation.

Mahdessian said blowing bubbles is making a difference for her patients, including one woman with depression who cares for a 3-year-old granddaughter on the autism spectrum. Mahdessian used the collaborative care model to establish a rapport with the patient. She also introduced her to mindfulness breathing—and explained how breathing can change through blowing bubbles. The patient—who shared the bubble blowing with her non-verbal granddaughter—said it brought back childhood memories. The patient also said she feels better after she blows bubbles and that it brings her joy to share this with her granddaughter.

Mahdessian keeps bubbles in her office and often asks patients to blow bubbles with her as a way of relaxing and breathing. In addition to bubbles, Karineh has used a variety of other tools and techniques to encourage self-care and mindfulness, including affirmations and essential oils.

Now, even staff members are pulling out their bubble wands when they feel stressed. “The feedback I received from my patients encouraged me to coordinate and facilitate a bubble party for our staff at Humphrey,” she said. During the party, she said the staff also learned how to mindfully breathe.

Mahdessian said bubbles have proven to be a remarkable, accessible tool that makes everything fun (and soapy).
Thank You for participating in Just Culture training and responding to our survey.
Your voice matters: Stay engaged!

We’re making clear progress on Just Culture, our number one Labor Management Partnership priority.

13,178
Health Agency staff responded to the Pulse Survey

41%
Total Employees: 32,011

66%
Respondents said that "in my work unit, I am treated fairly."

86%
Respondents said they had a “good understanding of Just Culture.”

63%
Respondents answered positively to the statement, “It’s easy to speak up about errors and mistakes.”

63%
Respondents said that "when an error or mistake occurs, managers look at both employee actions and operational issues."

64%
Respondents said their "managers emphasize learning rather than blaming when staff makes mistakes."

55%
Over half of the respondents agreed that "managers respond appropriately to employees whose behavior or performance fails to meet expectations."
The EMS Agency ensures timely, compassionate and quality emergency and disaster medical services are provided throughout the County.

Prior to the establishment of the official EMS System in 1970, there was no consistent method for responding to sudden injury and illness. The patient may have self-transported to a local physician office or hospital, bystanders may have rendered care and/or transportation; local physicians may have visited the patient at home; or an ambulance usually owned by a mortuary, may have been called to take the patient to a nearby hospital. The mechanism of transport and treatment of emergency patients varied from city to city and often neighborhood to neighborhood.

During this time, the pioneers in EMS were looking at ways to improve this situation and develop a mechanism to ensure rapid transport and treatment for emergencies with all patients being delivered to a hospital. People such a Dr. J. Michael Criley, Dr. Walter Graf and Supervisor Kenneth Hahn blazed this path setting the foundation for the EMS system and 9-1-1 response we all now take for granted.

The EMS Agency ensures that the emergency care provided to the public is coordinated such that no matter where you live in Los Angeles County, if and when you have an emergency, the access to, and the care provided will be the same.

The Los Angeles County EMS Agency is one of 33 local emergency medical services agencies in the State. The EMS Agency is responsible for the coordination, planning and regulation of the countywide EMS System. This includes the following activities:

- Designating hospital specialty centers to include Trauma – Adult and Pediatric, ST Elevation Myocardial Infarction, Cardiac Arrest, Stroke – Primary and Comprehensive, Emergency Departments Approved for Pediatrics, Pediatric Medical Centers, Sexual Assault Response Team providers and Hospital Preparedness Program participant.
- Providing medical control and assuring medical accountability throughout the EMS system through the development of treatment protocols and medical control guidelines used by the over 4,000 licensed paramedics, 8,000 emergency medical technicians (EMT) and 800 Mobile Intensive Care Nurses (MICN) in providing care to persons who call 9-1-1 and on-going quality improvement and research.
- Licensing of private ambulance companies
It takes everyone who works at the EMS Agency and the 29 jurisdical fire departments, 25 private ambulance companies and 72 hospitals with emergency services working together to ensure that the EMS system meets the needs of emergency patients. Cathy Chidester, Director and Marianne Gausche-Hill, MD, Medical Director lead this effort along with the support of the Assistant Directors, Roel Amara, Kay Fruhwirth and Richard Tadeo and the Assistant Medical Director, Nichole Bosson, MD.

The medical policies and protocols established by the EMS Agency have improved the outcomes and lives of millions of patients in the prehospital setting over the last 50 years. Los Angeles County’s regionalized systems of emergency care include Trauma, Stroke, STEMI, Cardiac Arrest, Pediatric and Disaster care. These systems are nationally recognized and the program data are frequently presented in academic publications or at State and National conferences. We are proud of our accomplishments and successes, which are only possible through the hard work and dedication of EMS Agency staff and the support of the Department of Health Services and the Board of Supervisors.

With better data and increase in the amount of research, along with new medications, equipment, and technology, the future will continue to call for changes in prehospital care practice. However, the cornerstone of prehospital emergency care is truly the frontline paramedics, EMTs and hospital emergency departments who play a vital role in the safety net of emergency services for the County. Los Angeles County will continue to be a leader in EMS.

Certifying EMTs and taking disciplinary action on their certification when indicated, certification of MICNs and local accreditation of paramedics

Approving paramedic, EMT, public safety and continuing education training programs

Managing the physician and hospital reimbursement programs for indigent emergency care

Coordinating healthcare disaster preparedness, response and recovery activities

In addition, to these regulatory roles the EMS Agency also is responsible for the coordination of patient transfers through the Medical Alert Center (MAC) and ambulance transportation for DHS.

What has been the impact?

Where do we go from here?

Acknowledgments

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For more information on this publication, contact communications@dhs.lacounty.gov