



# Bilingual Staff at the Women's Project - Language Aide Pilot

*Backing Your Bilingual Workers*

*CEH Forum – Nov 2011*

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# In today's presentation...

- Project overview, aims and governance
- Project tasks
  - Plan project
  - Prepare for Pilot
  - Recruit Language Aides
  - Complete Pilot
- Outcomes, challenges and achievements
- Lessons learned
- Questions



# Project Overview

- Pilot and evaluate the use of bilingual staff to work as Language Aides in the hospital, and assist patients with non-clinical communication
- Funded by the (former) Victorian Multicultural Commission, with in-kind support from the Women's
- 2 year project: 2009 to 2011
- 9 month pilot: Mar to Dec 2010



# Project Aims

In a health service setting:

- Define the role of a Language Aide
- Identify the value of this role
- Identify issues that need to be considered in the employment, management, and retention of bilingual staff
- Explore the extent to which bilingual workers can assist with communication about non-clinical issues
- Improve women's satisfaction with care
- Support interpreters to prioritise attendance at clinical encounters



# Governance

## Project Team – met weekly

- Project Sponsor - Chris Gamble, Exec Director HR
- Project Manager - Bridget O'Brien, Org Dev Manager
- Project Officer - Christine Hennequin / Jo Cisternino

## Reference Group – met every month or two

- External - VMC, CEH, Department of Health, Melb Uni
- Internal - Language Services Manager, Clinical Managers
- Community Representative - from the Women's Community Advisory Committee



# Tasks – Plan Project

- Develop Project Plan and Timeline
- Form Reference Group
- Establish contract for evaluation (Melb Uni)
- Define the role of a Language Aide
  - Focus groups: interpreters, clinical staff
  - Literature review
  - Review of other bilingual worker models
- Seek ethics approval for project

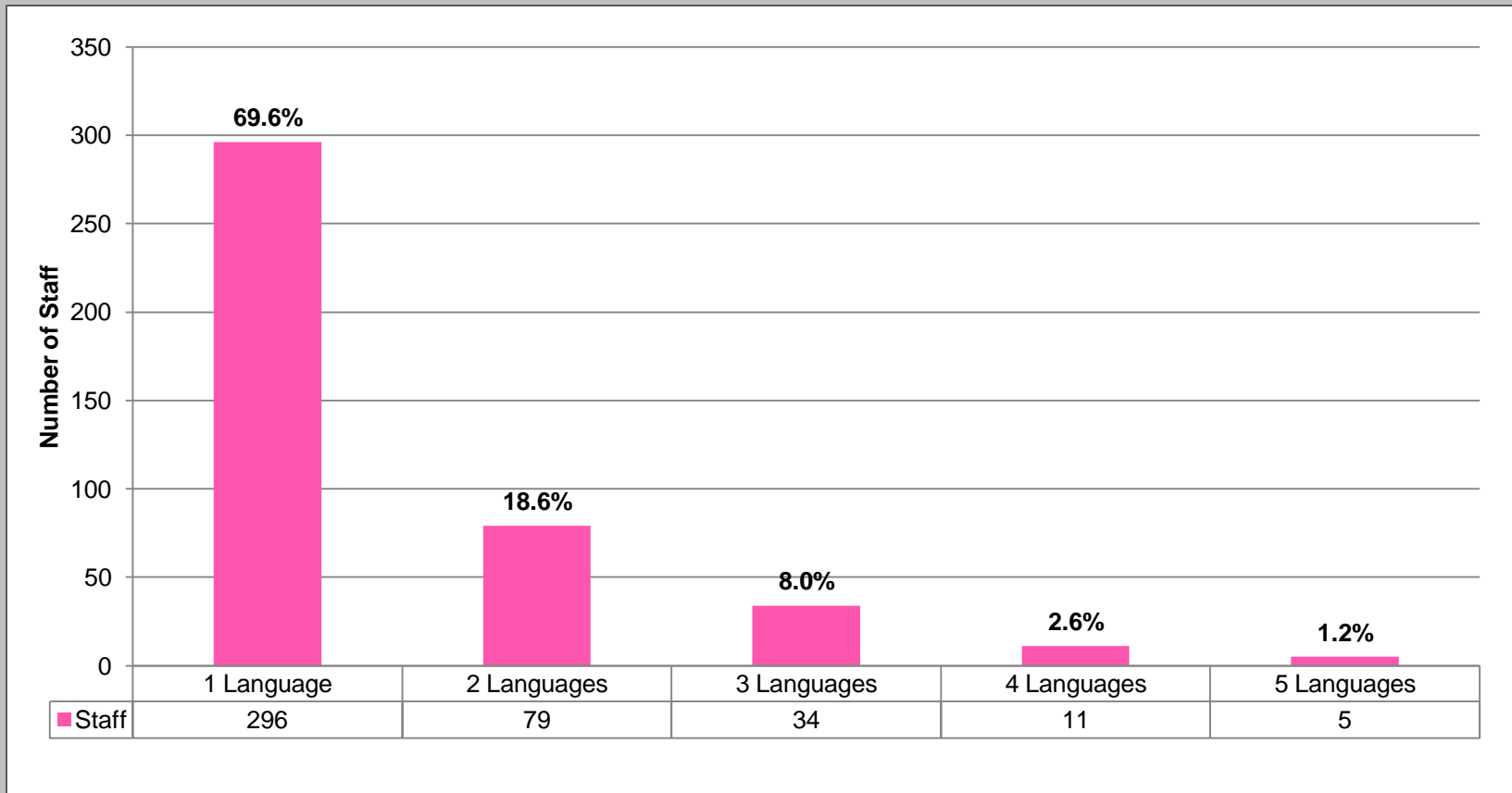


# Tasks – Prepare for Pilot

- Survey all staff to understand bilingual capacity and interest in the pilot
- Develop Language Aide Procedure
- Develop risk plan for the pilot
- Finalise evaluation framework
- Establish contract for training (NMIT)
- Develop training: training needs analysis
- Finalise training package



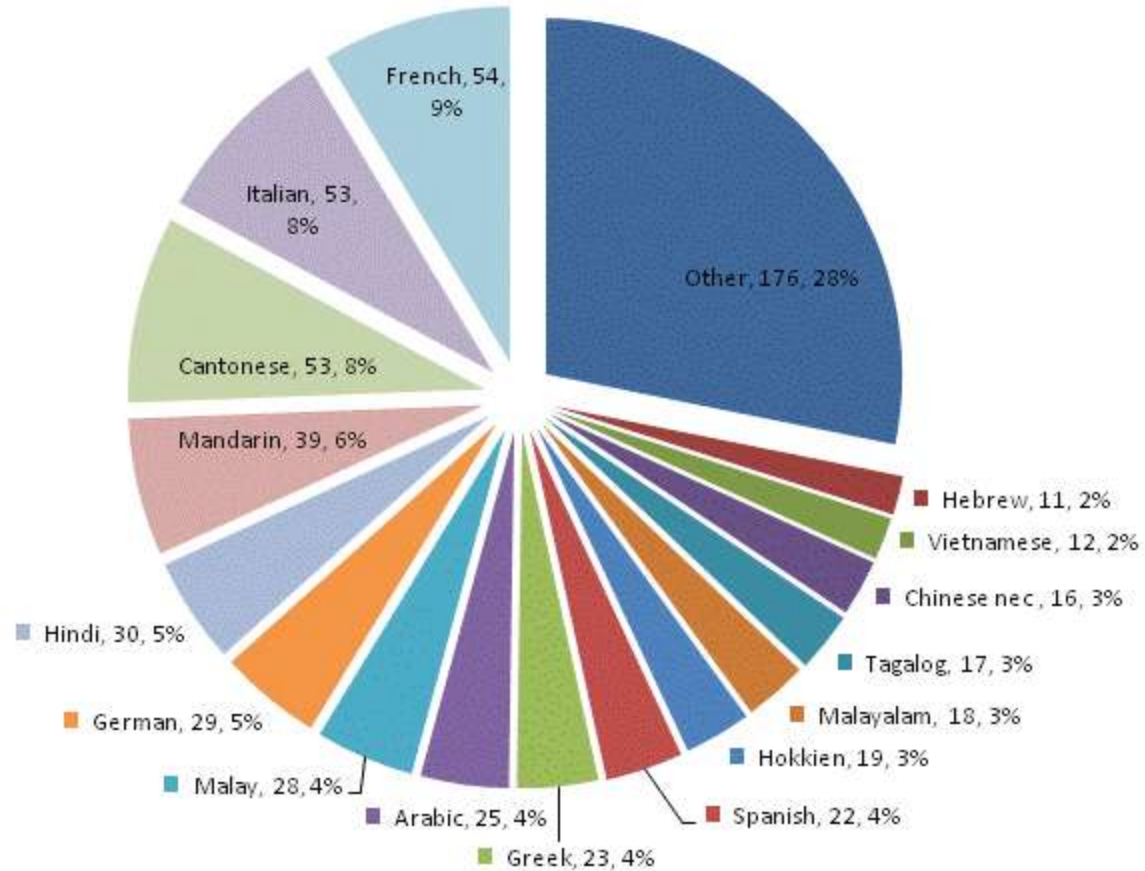
# Number of LOTE's Spoken



Based on 1239 Staff, 425 identified they could spoke one or more LOTE's



# LOTE's Spoken



Based on 1239 Staff



# Tasks – Recruit Language Aides

- Recruit Language Aides
  - Advertise/communicate role
  - Applications from staff
  - Manager approval
  - Interviews
- NAATI training and testing for applicants
- Internal training for Language Aides
- Develop Buddy Program for Language Aides

# Graduation Ceremony



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# Tasks – Complete Pilot

- Implement communication strategy
  - Emails, posters, intranet, staff presentations
- Launch the Pilot
- Monitor and collect data throughout the Pilot
- Evaluate the Pilot
  - Focus groups, surveys, interviews
  - Data analysis
- Prepare Final Report: outcomes and recommendations

# Launch of the Pilot



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# Outcomes

## Limited use of Language Aides during the Pilot

### Main barriers to more use were:

- Only 5 out of 60 patient languages were available (only 2 of the top 10 requested languages available)
- Low awareness of Language Aide role by staff
- Staff confusion how to access and use a Language Aide
- No consequences for using improper language assistance (e.g. non-accredited staff, family)
- Resistance to change - staff are used to using interpreters
- Limited opportunities for purely non-clinical communication in a hospital environment



# Outcomes

## When Language Aides were used:

- The requesting staff member rated the experience as good or excellent
- The requesting staff member said they would use a Language Aide again, and recommend to their colleagues to use one
- The Language Aide felt they met the needs of the requesting staff member, and the patient, and were satisfied with the experience

88% of staff said the Language Aide Role should continue at the Women's



# Challenges

- Resistance from the Women's Interpreters
  - Are they being replaced?
  - Concern for clients and quality
- Internal engagement
  - Language Services professionals ok
  - Clinical staff too busy
- Recruiting Language Aides
  - Resistance from Managers (no backfill, costs)
  - A lot of time/work to recruit
  - Internal staff too busy to be a Language Aide



# Challenges

- NAATI Testing
  - Only 5/11 passed Language Aide Test
  - Some languages not available
  - Up to 10 weeks for results
- Timing
  - Many staff missed the recruitment deadlines
  - Difficult to find times that suit all - training, launch, etc.
  - Training providers need lots of notice
- Sensitivities
  - Naming role – Bilingual Worker versus Language Aide
  - Defining role – what they can and can't do



# Achievements

- 1241 staff completed the staff diversity survey
  - Ongoing recording and use of staff diversity data
- Language Aide Procedure approved by Clinical Executive
- Considerable interest from staff for the role – 28 official applications (20 selected)
- 9 Language Aides tested and trained for Pilot
- Language Services (Interpreter) Department actively involved in the Project



# Lessons Learned

- Make sure the Interpreting Department are involved from the very start of the project (including any funding application)
- Check whether you actually need ethics approval before writing an ethics application
- Allow lots of time for recruitment, NAATI testing, and training of Language Aides
- Recruit at least twice as many Language Aides as you actually want to end up with



# Lessons Learned

- Beware of “scope creep” (Bilingual Health Worker)
- Make the most of other’s experience and abilities – the Reference Group were invaluable for our Project
- Properly resource the preparation for and implementation of Language Aides
- Ensure clinical leaders are heavily involved in engaging staff, and communicating the role



# Lessons Learned

- Make the process for requesting a Language Aide the same as that for requesting an interpreter
- Policies around improper use of language assistance must be enforced
- Consider other roles which allow bilingual staff to use their LOTE skills in their clinical work
- As with every project - be prepared for road blocks and delays!!

# Thank You



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# Questions

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