

5-Minute Briefing ...

*A periodic issues briefing on healthcare's hottest topics
from the New Jersey Hospital Association*

SEPTEMBER 2010

Minority Health

New Jersey is a model of diversity. The state's residents hail from more than 100 nations, and the U.S. Census Bureau ranks the Garden State third in the nation in the percentage of foreign-born residents.

But a state rich in diversity also faces healthcare challenges. They include health disparities between different ethnic groups, access to care problems and communication barriers.

With that landscape as a backdrop, the State of New Jersey has declared September Minority and Multicultural Health Month. And at the New Jersey Hospital Association, work is ongoing to help the state's hospitals and healthcare facilities meet the wide-ranging healthcare needs of an increasingly diverse state.

"Cookie-cutter healthcare won't cut it in a state as diverse as New Jersey," said NJHA President and CEO Betsy Ryan. "We've invested our energy into a number of programs that help healthcare facilities better serve the varied needs of their unique communities."

The challenges facing hospitals and other healthcare providers are broad and varied, said Firoozeh Vali, PhD, NJHA's vice president of research.

"Morbidity and mortality rates for a number of conditions like heart disease and diabetes vary between different ethnic groups," said Vali. "Plus, communicating with people who aren't native English speakers creates added challenges for patient safety. It's an absolute imperative that healthcare providers are prepared to address these types of issues."

New Jersey hospitals are engaged in a number of culturally and linguistically sensitive programs offered through NJHA. They include:

- **COLLECTING RACE, ETHNICITY AND PRIMARY LANGUAGE DATA.** NJHA offers education, training and a variety of resources in different formats to help train hospital registration staff to gather race, ethnicity and language information from patients. Hospitals use this information to identify disparities in healthcare services and outcomes, develop targeted programs for the local population and tailor written resources and interpreters to the unique needs of their communities.

MICRO-UPDATE

- *September is Minority and Multicultural Health Month in New Jersey.*
- *N.J. residents hail from more than 100 nations and speak more than 100 languages.*
- *NJHA and its members have invested in numerous programs to address the state's minority health needs.*

NJHA is an education and information resource for New Jersey's elected leaders. For more information on this briefing or other healthcare issues, contact NJHA's Randy Minniear at 609-275-4119 or Jessica Cohen at 609-275-4192.

5-MINUTE BRIEFING, continued

- **INTERPRETER SERVICES.** More than 100 languages are spoken by New Jersey residents, and about 28 percent of the state's population reports speaking a language other than English at home. While federal and state mandates require hospitals to provide effective communication with all patients, New Jersey has experienced a serious shortage of trained interpreters. In response, NJHA has developed the Interpreter Training Program for Bilingual Staff, which helps hospitals identify bilingual individuals on their own staffs and provides a rigorous program to help them become trained medical interpreters. The program has been offered in 14 hospitals across the state and trained about 200 new interpreters since its launch in 2007. Recognizing that hospitals need options in interpreter services, NJHA also recently signed a partnership agreement with CyraCom, a national company that provides interpreter services via telephone and video remote. These services are available 24/7. In related efforts, NJHA also provides training and resources to help healthcare providers communicate with patients who are deaf or hard of hearing.
 - **DULCE NEW JERSEY.** Research shows that about 7 percent of New Jersey residents have diabetes, but the rate is much higher for minorities, who also exhibit poorer disease management and are at higher risk for complications. In Dulce New Jersey, NJHA partners with healthcare professionals in hospitals across the state to develop diabetes management services specifically for the hardest-hit and underserved minority groups. The program includes nurse-managed care, peer educators recruited from the minority community and education programs in varied languages using simple written materials and pictorial messages.
 - **EXPECTING SUCCESS: EXCELLENCE IN CARDIAC CARE LEARNING NETWORK.** This program from NJHA's Institute for Quality and Patient Safety developed and disseminated quality improvement strategies, models and resources to improve cardiac care for African-American and Hispanic/Latino patients diagnosed with heart failure. Ten hospitals participated in this initiative, which ran from June 2007 to July 2009. Participating hospitals achieved significant improvements in their processes in caring for these patients, as well as in helping patients follow medical instructions for managing their conditions. While the formal program has ended, the successful models and lessons learned remain in place to help current and future patients.
 - **HEALTHCARE PARTNERSHIP TO INSURE NJ KIDS.** NJHA is part of a national effort funded by the federal government to maximize outreach and enrollment of children who are uninsured and eligible for Medicaid or NJ FamilyCare. A key component of this effort is outreach to underserved groups, including racial and ethnic minorities. NJHA is reaching out to families at the point of healthcare services – such as hospital emergency rooms, health centers and local health departments – and providing information and enrollment support in 14 languages.
 - **COUNTY HEALTH PROFILES.** New Jersey's 21 counties all have their own community health needs, often linked directly to the mix of ethnicities within their patient population. NJHA examines those unique county characteristics in a series of county health profiles that hospitals use to develop focused programs and services. These profiles are updated every five years with the next update due in 2012.
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