



Access to interpretation increases healthcare efficiency and equity.

ISSUE: The lack of centralized professional interpretation services creates administrative inefficiencies and increases patient risks.

Newcomers to Canada accounted for 80% of Canada’s labour force growth between 2016 and 2021. Their well-being is essential to our workforce and our communities. The 2021 census revealed that 69.4% of recent immigrants do not speak English or French as their mother tongue. Time and money are wasted when they cannot effectively communicate with their healthcare providers.

Negative impacts from lack of interpretation include:

PATIENT EXPERIENCE

- Decreased access to care
- Increased family burden by taking on interpreter role
- Lower satisfaction with care

- Lack of engagement in the care plan
- Increased risk of medical errors and complications
- Repeat visits

PROVIDER EXPERIENCE

- Administrative burden
- Staff frustration
- Litigation and reputational risk

SOLUTION:

A pan-Canadian standard where healthcare interpretation is centrally organized and funded by the province’s Ministry of Health.

This model has been proven to promote equity, increase safety and lead to significant savings for the system.

Physician time is saved using interpreters. In this study, a time savings of **17,627 minutes** (294 hours) per year would correspond to over **580** additional **30-minute** physician visits.

Manitoba’s centrally funded interpretation service costs just **\$63.07** per **29,367** interpreter visits.

Source: Bowen, Sarah. [Language Barriers Within the Winnipeg Regional Health Authority: Evidence and Implications](#). 2004

WHAT YOU CAN DO:

Advocate for provincial interpretation services by:

- **Tabling** this at your Standing Committee on Health with N4’s support.
- **Sharing** this information with those invested in healthcare equity.
- **Connecting** with N4 to learn how your province can benefit from a centrally funded interpretation service.
 - Connect with Catherine Penney, Quality Improvement Specialist cpenney@cheo.on.ca

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NATIONAL NEWCOMER
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NOS NOUVEAUX ARRIVANTS



Pan-Canadian Standards for Healthcare Equity: The Case for Provincial Interpretation Services

ISSUE: Inconsistent access to professional interpretation services in healthcare creates both risks and inefficiencies, and negatively impacts newcomers' integration into our workforce.

BACKGROUND:

In Canada's economic engine, newcomers are the future drivers. **Between 2016 and 2021, immigrants accounted for about 80% of Canada's labour force growth.** Ongoing health challenges can, however, impact participation in our workforce and communities. In order to be effective, like all Canadians, newcomers need to be healthy. The ability to communicate in one's preferred language is an essential component of healthcare consent and the formation of an effective diagnosis and treatment plan by clinicians. **The 2021 census revealed that 69.4% of recent immigrants do not speak English or French as their mother tongue, highlighting the need for interpretation.**

ANALYSIS:

A lack of interpretation services leads to extensive and often hidden costs for health providers and institutions. **Negative impacts of working without a trained healthcare interpreter include increased use of emergency services, hospital readmissions, and medical errors, an increase in delayed referrals and diagnostic tests, and an increase in unnecessary tests.** In other words, it is straining our already strained health services. These negative impacts are ultimately more costly than interpretation services.

Compare these negative impacts to the powerful results of 2003 hospital-based study, which found that **physician time was saved using interpreters.** In this study, a time savings of 17,627 minutes (294 hours) per year would correspond to over 580 additional 30-minute physician visits.

"In our hospital, we found that patients who didn't have an interpreter were often brought back for additional rehab visits to ensure they understood their treatment. Communication that could have been accomplished in one visit with an interpreter took much longer and required booking extra appointments with a physiotherapist."

- Manager at a large urban hospital

CASE STUDY: WINNIPEG REGIONAL HEALTH AUTHORITY

The Province of Manitoba's Ministry of Health has established a centralized interpretation service which covers all healthcare services. From their analysis, they found "the immediate and long-term costs of failing to address language barriers, are often hidden from view, compared to the more 'visible' costs of responding to the needs for language access services. The reality is, however, that language barriers 'cost' the organization in one way or another." The WRH Language Access Annual Report noted that from 2015 to 2021, the average cost per service was \$63.07 based on an average of 29,367 services.

RECOMMENDATIONS:

A Pan-Canadian standard of provincially funded healthcare interpretation services supported by:

- Establishing funding models for professional interpretation to support the spectrum of healthcare service delivery, from health promotion to tertiary care
- Creating legislative amendments and policies which ensure the use of professional interpretation in healthcare
- Creating policies that recognize health interpretation as a "medically necessary" service

1 http://torontohealthequity.ca/wp-content/uploads/2013/02/Language_Barriers_within_the_Winnipeg_Regional_Health_Authority_Evidence_and_Implications.pdf

Source: Bowen, Sarah. [Language Barriers Within the Winnipeg Regional Health Authority: Evidence and Implications](#). 2004

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