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Oral Proficiency Language Testing for Medical Students

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INTRODUCTION

Access to language services in health care settings is a requirement of Title VI of the Civil Rights Act that serves to ensure limited English proficient (LEP) persons have safe, accurate, complete, and meaningful access to health care. The use of standardized language proficiency tests is one mechanism to ensure that providers who deliver care in another language, have the language skills to do so safely. At UNM School of Medicine, many students report having other language skills and the desire to become bilingual health care providers.

METHOD

All 3rd and 4th year medical students (200 total) received an email invitation to take a general oral language proficiency test. Once students expressed interest, they received more information and were scheduled to test in the language they chose. Depending on the language, testing was offered via computer or phone. UNMH Interpreter Language Services (ILS) received, filed, and sent to each participant their report, threshold guidelines and a link to a survey for their feedback.

RESULTS

13.5% of students expressed interest in testing in seven distinct languages (Burmese, Dari, Farsi, Nepali, Romanian, Spanish, and Ukrainian); 67% of this group completed testing; 83% met the minimum threshold of Advanced Low; 30% met threshold for Advanced High.

DISCUSSION

UNM School of Medicine has an untapped pool of students with skills in languages other than English. Many students enter medical school with conversational proficiency. They are allowed to interact with patients to the degree they feel comfortable and are trained to partner with professional interpreters when they reach their limits. The slightly low interest shown by students to be tested could have been due to the time of year and conflicting commitments for students. Testing was offered for only a 3 week time period. Despite the limited pool, the results showed that over ¾ of the students that completed testing scored in the advanced to superior categories. It was agreed upon that scoring in any of the advanced categories was sufficient proficiency for the role of medical student.

Evaluating medical students’ oral language proficiency skills in languages other than English allows the School of Medicine to support medical students in their desire to become bilingual providers. Creating required standards for proficiency is a critical piece in ensuring clear communication and patient safety in health care settings.

NEXT STEPS

(1) Create and institute a program that qualifies medical students to directly communicate and care for LEP patients in their preferred language.

(2) Establish language training programs for medical students with skills in other languages to improve their skills during medical school.

(3) Explore challenges and opportunities to create similar proficiency testing programs for residents and attendings in order to verify that all providers who deliver care in a language other than English meet a minimum oral language proficiency standard.

References

