



(Formerly Spanish Coalition for Jobs, Inc.) 2011 West Pershing Road Chicago, Illinois 60609 Ph: 773-247-0707 Fx: 773-247-3924 www.nlei.org

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Illinois Department of Public Health Damon T. Arnold, M.D., M.P.H. 535 West Jefferson Street Springfield, Illinois 62761

Dear Dr. Arnold:

We respectfully submit our testimony on the impact of skilled healthcare workers on preventive and quality of care.

Introduction

Health and wellness, preventive medicine, and caring for behavioral and mental health all positively affect one's ability to gain and maintain employment and economic self-sufficiency. Poor physical and mental health is correlated to economic independence. Illness, whether acute or chronic, is directly responsible for higher absenteeism, increased healthcare costs, loss of productivity, higher injury rates, and low employee morale and retention.

Organizational Background

NLEI is a nationally accredited nonprofit education institution recognized by the U.S. Department of Education, accredited by both the Commission on Accreditation of Allied Health Education Programs and by the Accrediting Council for Independent Colleges and Schools and is approved by the Illinois State Board of Education as a nonprofit career training organization. Additionally, NLEI is a testing center for the National Center for Competency Testing in Phlebotomy Technician, Medical Office Assisting, Medical Assisting, and Certified Post-Secondary Instructor.

National Latino Education Institute (NLEI) has been transforming lives through a holistic approach that includes innovative employer-driven programs for nearly four decades. It is through many strong partnerships with both the state and a broad range of health-care institutions that together we are not only putting people to work but launching life-changing careers where families are able to break cycles of underemployment and become transformative contributors to society and to our economy.

Statistics

According to the Bureau of Labor Statistics, jobs in healthcare make up 10 of the 20 growing occupations. Approximately 3.2 million healthcare-related jobs will be added between now and 2018 (BLS). Spanish is spoken in 92% of Latino Households. Source: Nielsen Universe Estimates 2008-2009. "Hispanics are twice as likely as blacks and three times as likely as whites to lack a regular healthcare provider." Source: Pew Hispanic Center, August 2008, "Hispanics and Healthcare in the United States", Centers for Disease Control and Prevention (CDC).

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Access to Quality Healthcare

The problem of health literacy and wellness is not confined to just the Latino population. One study found that as many as 50% of the US population cannot participate in a dialogue regarding healthcare and wellness education. This problem is intensified in the Latino community by a lack of educational attainment (55% of Latinos in the US have a high school diploma as compared to 85% of non-Hispanic whites) as well as cultural barriers. Often due to poor health literacy, the leading causes of illness and death among the Latino community include heart disease, cancer, stroke, diabetes, asthma, HIV/AIDS, and liver disease. In addition, Latinos face critical disparities in mental health treatment when dealing with depression, the effects of immigration and acculturation, chemical use and dependency, domestic violence, and suicide prevention.

Latinos also have higher rates of obesity than their Caucasian counterparts. Poor food choices and inactivity are primary causes of obesity in the community. Immigrant community members tend to be healthier than their American-born children as sugar-laden and fattening foods are widely available in the U.S. Physical activity is often a challenge as low-income neighborhoods tend to have fewer well-equipped playgrounds, parks and recreational facilities, bike-friendly streets and safe/affordable places to exercise and be active.

Workforce and Patient Care

Despite the rapid growth of the population, Latinos tend to be underrepresented in a variety of industries and occupations. Healthcare is no exception. Within medical facilities, there is a growing challenge to meet the needs of this demographic. A study by the National Council of La Raza found that monolingual Spanish-speaking Latinos have a more difficult time accessing healthcare than primarily English-speaking Hispanics. One quarter of limited English-speaking Latino patients reported having problems communicating with or understanding their doctors. Indeed, more than half of all Latinos surveyed have reported having problems understanding instructions for prescriptions as well as written information from a doctor's office while less than half were provided with interpretation services. A study released by Hispanic Business Magazine reports that "...language is a barrier that caused 70 percent of primarily Spanish-speaking Hispanics who were sick to not seek out health care ..."

Oftentimes, limited English-speaking Latinos are forced to rely on family members as interpreters or a non-medically trained hospital volunteer. Aside from being forced to share sensitive personal information, such situations can also prove to be dangerous as valuable health information may be lost between the doctor and patient. This opens the door to a misdiagnosis, poor patient compliance as well as higher health costs such as unnecessary lab tests and other diagnostic treatments, according to the National Alliance for Hispanic Health. This can lead to poor patient satisfaction as well as possible malpractice lawsuits.

Model Collaboration

Aunt Martha's Youth Service Center and Healthcare Network (AMYC) based in Illinois is one of NLEI's workforce training healthcare partners. AMYC's mission is: To be a caring community resource for children, youth, and families.

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NLEI provides training to AMYC's workforce in Electronic Health Records (EHR). This allows AMYC medical associates to move from a labor intensive paper- based recordkeeping system to a faster and more efficient electronic record system. Integrating this system will allow this healthcare network and its associates more time to provide one-on-one patient care which leads to improved patient knowledge and self-care behaviors.

NLEI's Bilingual and Bicultural training approach also helps improve patients ability to communicate with their healthcare provider and become more aware of and more comfortable in accessing providers and other community resources that can assist them with their healthcare needs. An integral component of the model is to ensure that the workforce is well-versed in Spanish medical terminology which assists in eliminating language barriers to care.

Electronic Healthcare Records is a subset of the growing industry known as health information technology (HIT). The field is expected to grow by 20% in the next 6 years (source: BLS). One of the coming major changes in healthcare is the push to create electronic patient records to change the delivery of customer/patient service by September 2011.

Other areas that will experience exponential growth are in medical assisting, phlebotomy and various healthcare occupations. Investment in training not only provides the community with a career in the medical field, but also meets the demand in the community for qualified, bilingual and bicultural medical staff in local medical facilities, creating improved access to health care for Latinos.

Summary

Building a strong skilled healthcare workforce directly addresses a number of systemic barriers such as culturally competent health education. NLEI recognizes that a healthy worker is a productive and successful one. Health and wellness strongly impacts the financial stability of individuals, families, and communities. With negative health outcomes – lack of exercise and proper eating choices, ignoring mental/behavioral health issues- the diseases prevalent in the Latino community such as heart disease and diabetes are likely to continue unabated thereby negatively affecting workforce participation and earning potential.

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Elba Aranda-Suh Executive Director

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