The University of Connecticut Migrant Farm Worker Clinic Experience

Created by the Connecticut Area Health Education Center (AHEC)
Who Are Migrant Farm Workers?

Connecticut hosts between 7,000 and 20,000 migrant farm workers each growing season to work at orchards and nurseries, as well as tobacco, mushroom, dairy and vegetable farms.
Several different populations of migrant farm workers pass through the state each summer, including Jamaicans, Mexicans, South and Central Americans.
Some live in camps and barracks provided by the growers at the farms. Others live in crowded apartments shared with co-workers and are bussed or carpool out to the farms each day.
These migrant farm workers may be documented or undocumented. Many laborers from the West Indies are brought to Connecticut on special visas (H2A) supplied through the Department of Labor.
All these populations hold in common their lack of access to health care...
What We Do…

The mobile clinic visits farms 3 evenings per week (Tues, Wed, Thurs) in the summer and one evening per week in the fall (Wed) arriving as the workers are returning from the fields.
The clinic is staffed by licensed physicians, medical and dental students as well as an array of high school, undergraduate, and health professions students.
The scope of service provided by this mobile clinic includes blood pressure and diabetes screenings, as well as primary care screenings for mild and/or self-limiting conditions.
Patients in need of laboratory services or who need more intense treatment or follow up are referred to one of the partnering Community Health Centers.
A limited formulary of medications are provided to patients at the clinic. These medications are donated from local pharmacies or are purchased wholesale using grant funds.

All non-formulary medications are dispensed by prescription or by referral to partnering Community Health Centers where medications may be covered by a federal voucher program.
What You Need to Know About Population Health & Patient Privacy

1. Cultural Competency
2. Health Literacy
3. HIPAA – Patient Privacy
What is Cultural Competency...

The knowledge and interpersonal skills that allow providers to understand, appreciate, and work with individuals from cultures other than their own. It involves an awareness and acceptance of cultural differences; self awareness; knowledge of the patient’s culture and health beliefs; and adaptation of skills.

-Culturally Competent Health Care for Adolescents, AMA 1994
Samples of Culturally Competent Behaviors for Health Care Providers

- It is best to use the patient’s last name and formal pronouns when addressing the patient.
- Gestures can mean very different things in different cultures. For example, in Latin America, a shrug with palms upwards may be interpreted as a vulgar gesture. Use hand and arm gestures with great caution.
- Don’t force a patient to make eye contact with you. The patient may be treating you with greater respect by not making eye contact. Sustained eye contact may be considered rude in some cultures.
What is Health Literacy?

Health Literacy is the degree to which individual have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions. ~Healthy People 2010

Anyone including the very educated & literate can still have a low health literacy level
Health Literacy Considerations with Migrant Farm Workers

The average migrant farm worker in Connecticut has a 6th grade reading level; many are also illiterate or literate in a language other than English. Therefore, communications in the appropriate language (both written and oral) should be in simple language.

Note: Treatment instructions must be given using the “teach-back” method.
HIPAA - Patient Confidentiality: Why is it important? It’s the law.

Health Insurance Portability and Accountability Act (HIPAA) was developed by the federal government to safeguard individual’s protected health information.
How HIPAA applies to this clinic

- Keep distance from other medical teams and farm workers while interviewing patients
- When using the exam rooms (pop up tent) only student leading the encounter and the physician are allowed in. Otherwise, you must receive verbal confirmation that the entire team can enter the exam room.
- Speak quietly while discussing a patient’s condition with the physician in public areas (farm)
- Do not use identifying information when discussing a case in public areas
- Never discuss protected patient information with anyone not involved in their care unless the patient has given specific and documented permission
- Do not discuss patient cases after the clinic (in the car, unpacking supplies, etc.)
About Volunteering at the Clinic...
How to Prepare for the Clinic....

When dressing for the clinic, consider the following
- Inclement weather (rain gear, layers)
- Insects at dusk (bug spray)
- Non revealing clothing (absolutely NO low-cut shirts or high-cut shorts- you will be sent home from clinic if you arrive in non-appropriate attire)
- T-shirts and scrubs are ok
- If later in the season, bring headlamp and flashlight (if available)

Prior to the clinic be sure to
- Use the restroom (there are no public restrooms at farm)
- Eat dinner & drink water (can bring bottled water)
- Fill up your gas tank in case you are elected to drive
What to Expect as a Volunteer...

- Park on roadway. DO NOT USE VALET PARKING
- Meet at the UConn Health Center Hospital Entrance at 4:30 sharp (or carpool from Storrs campus with your fellow classmates)
- Student coordinators will need your help loading supplies into vehicles
- Caravan will be organized (you may be asked to drive other volunteers)
- Caravan departs by 5:00 p.m. SHARP
- Most of the farms are north of Hartford, so plan to drive through rush hour traffic
- Estimated arrival at the farm location is 6:00 p.m.
After Arriving at the Farm....

Help unload supplies from vehicles

Help set up registration, vitals, and pharmacy station as well as pop-up exam tents

Then, medical student coordinators will organize volunteers into teams
Clinic Patient Flow

A: Patient Recruitment and Signup

A: Form Collection

(Patient flow)

B: Registration

MFW Clinics

(Vitals station managed by undergrad coordinators)

C: Med Teams
During the Clinic
Members of the Medical Teams...

After patients have been registered and visited the “Vitals Station”, the patient will be assigned to a medical team that will conduct the History and Physical (H&P).

The medical team is comprised of:
- TEAM LEAD: Either a PA student, 2nd, 3rd, 4th year Medical student or Resident
- pharmacy student
- medical interpreter
- Undergrad/High school student
When interpreting:

- First introduce yourself to the patient:
  Say your name, that you’ll be interpreting, and that you’re going to repeat everything the patient says directly to the medical team. Remind the patient to pause so that you have time to interpret, and tell him/her to look directly at the medical team – you are only a conduit.

- Then introduce yourself to the medical team, giving the same information.

- Stand behind the medical team (specifically behind whoever is conducting the interview). When the patient is speaking, look at the provider (this helps to encourage the patient to do the same).
THE TRIADIC INTERVIEW

Interpreter:
Speaks in the first person and draws as little attention as possible.

LEP Individual:
Interacts directly with the provider, speaking directly to him or her.

Provider:
Maintains control of the interview; focuses on the patient or client.
If you forget a word, that’s okay, but do not guess. You may:

1. Ask the individual to restate it or express it using different words
2. Look it up
3. Try to define it yourself and ask for confirmation

If you notice that a cultural or linguistic reason that the patient may not be understanding the provider, pause and explain it to both parties (patient first)

Remember to check for patient’s understanding at the end of the encounter – employ the teach-back method if the medical team fails to do so
Things to avoid during the Interview

Avoid jargon or overly technical terms. Remember that the use of complicated terms not only may confuse the patient, but there may not be an equivalent Spanish term for what you wish to communicate. Use simple, patient-friendly language. Your patient has “high blood pressure”, not “hypertension”; he should “eat less salty foods”, not “reduce his dietary sodium intake”.

Avoid “small talk” with the medical team members during the session, because the patient may wonder what is being said or feel disrespected.
Patient Privacy and Cultural Concerns

Be aware of your non-verbal technique. You may wish to ask the interpreter beforehand which non-verbal tactics – such as body language or tone of voice – should be employed or avoided based on what is usual and customary for that patient and his or her culture. What is normal in one culture or context may be perceived as a sign of disrespect in another.

Remember to treat your patients as adults. There is a power disparity inherent to the interactions between provider and patient; this can be particularly pronounced when the patient has little usual access to care and does not speak your language. Patients are aware of this and may feel intimidated. Avoid behavior that patients can perceive as patronizing – like smiling excessively, or patting them on the back – which can compound this problem and cause them to be less receptive to your care.
Common Interpretation Problems

- Linguistic equivalency
- Poor paraphrasing
- Substitution or addition of terms
- Ask for pausing, clarifying, definition as needed
After this, the teams will present the H&P to the physician who will determine the treatment plan for the patient.
What Are the Common Health Issues for Farm Workers?

- Musculoskeletal disorders
- Pesticide-related conditions
- Traumatic injuries
- Respiratory conditions
- Infectious diseases
- Eye conditions
- Mental health disorders
- Dermatitis
After the Clinic....

- We stay until the last patient has been seen so end time is variable
- Neatly put supplies back in their storage units
- Carpool/caravan to respective campus
- Return supplies to CT AHEC office
  - IMPORTANT: Put items back in labeled area. If muddy, please brush off before returning supplies to office.
CT AHEC thanks you for volunteering with the UConn Migrant Farm Worker Clinic and we hope you will continue service learning projects with medically underserved populations as a future health care professional!