INTRODUCTION
Communication in the Emergency Department (ED) is profoundly important given the acuity of patients and lack of prior medical history. In India, patient care is further complicated by the diversity of spoken languages that vary by region. In addition, medical training is primarily delivered in English. Our objective was to document language diversity among clinicians in Indian EDs linked to an international training program and explore issues related to clinician-clinician and clinician-patient communication.

METHODS
A mixed-methods investigation was performed at 6 EDs in Kerala and Karnataka from May to July of 2017. A single researcher conducted onsite semi-structured interviews and focus groups with emergency department nurses, paramedics, residents, and consultants. The interviews were transcribed and analyzed using a rapid assessment process. Additionally, a cross-sectional survey of ED clinicians was conducted via on-site convenience sampling and physician email. ANOVA and binary logistic regression were used to perform subgroup analysis.

RESULTS
73% of providers reported that they used a non-English language to speak to their fellow providers most of the time. 64% felt that information was lost or changed when English medical knowledge was explained in a different language. 53% reported at least one critical incident over the last year where poor communication played a part. Based off binary logistic regression, doctors were more likely to report fluency in English than other providers (p<0.003). 64% felt that information was lost or changed when English medical knowledge was explained in a different language. 39% of residents reported that they communicated with fellow providers in English, while 71% of nurses reported they use Malayalam. "Most of the communication errors do happen when you are not keeping the patient and the bystanders in the loop right from the beginning of your treatment." Consultant. "It’s like a fish market here when handovers happen. As it is, the ED is always very busy and it’s very chaotic." Resident. "Between the nursing staff, its not much big factor, because everyone knows Malayalam and also English, but between the doctors and the nurse there comes the issue, because some of the doctors don’t know Malayalam." Nurse.

Sample Populations

CONCLUSIONS
Our study is the first to document language diversity in Indian EDs. Important findings include the common use of non-English language in clinician-clinician communication and the frequent perceived loss of information in clinician-patient communication. The reported rates of critical incidents linked to poor communication are higher than reported in comparable studies1 and warrant further research and action. Additionally, the interviews revealed the challenges that bystanders can bring and the gap that exists in health literacy in the general population. Moving forward the benefits of language training in residency programs, and greater health information interventions for the public would be worth pursuing.

REFERENCE

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