

FALL/WINTER ISSUE

# peakHEALTH

 **Natividad**  
Inspiring healthy lives.

## Conquering Tragedy

and Regaining Life

De vuelta para una  
copia de la revista  
en Español

inside

Beating  
the Flu

Interpreting  
Services

Movement  
in the ICU





# Announcing Natividad's **SPANISH WEBSITE**

Last summer, Natividad extended their language services online. Instead of relying on Google Translate, we created a separate, mirrored website in Spanish, allowing the same content to be available to mono-lingual, Spanish-speaking patients.

"Translating the website from English to Spanish was a monumental job," explained Natividad Interpreter Ser-

vices Manager Victor Sosa. "It's not just translated, but also localized for our area and region's dialect. We went the extra mile to translate from English to Spanish in a way that's intuitive and easier to understand."

The website is a resource for the community. It features stories about health, wellness and education. It hosts an online physician directory,

so patients or their referring doctors can search medical staff by name, specialty, language and gender. Users can also get directions and information for Natividad and clinics as well as access medical records and information through a Patient Portal. To see the Spanish website, visit [espanol.natividad.com](http://espanol.natividad.com).

# Fall/Winter Issue | 2019

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We hope you enjoy this edition of PeakHealth.  
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### ONE STEP CLOSER TO HEALED

A trauma survivor shares his journey to regain mobility.

## FEATURES

### THE KIDS' PLACE

In-patient pediatric unit puts children first.



### CARING FOR SPECIAL NEEDS

A pediatric patient bonds with doctors.





# Greetings

Every day, our experienced and caring staff takes care of people who live, work and visit Monterey County. We love our diverse community, and we're proud to be part of it.

Our hospital's mission is to continually monitor and improve the health of the people, including the vulnerable, through coordinated, affordable, high-quality health care. We go the extra mile to make sure every person feels welcome. Our staff accommodates special needs, understanding each patient and the medical care they need is unique.

In this issue, we feature Eddie, a trauma patient who is recovering remarkably well, in part thanks to our "early mobility" physical therapy program. We also meet 6-year-old Makayla and see how compassionate caregivers provided patient- and family-centric care during her stay.

We believe it's critical that everyone understands their care and can communicate effectively with their nurse, doctor or staff member. For those who speak languages other than English, we provide free interpreting services. We currently employ between 10 to 12 staff and contract interpreters. We're also able to request on-site, video and phone interpreters, 24 hours a day, 7 days a week, for languages other than Spanish and indigenous languages. In addition to our interpreters, nearly 200 staff are bilingual, and approximately 50 are qualified Spanish interpreters. Look for their ID badge that says, "Hablo Español."

Our commitment to communication goes beyond our interpreting services. We're excited to announce that we recently launched a website entirely in Spanish. Unlike many websites that rely on a translation app, ours is mirrored and localized in a way that's easier to understand.

Monterey County is home to a large population of indigenous language speakers. Many come from remote villages in Mexico and know very little to no English or Spanish. Go to page 6 and 23 to read more about how Natividad Foundation's Indigenous Interpreting+® is connecting these patients with doctors, nurses and staff.

On page 26, you'll find our new, healthy makeover recipe section. We hope you enjoy this issue of PeakHealth and are inspired by our patient stories and innovative services.

**Dr. Gary Gray**

CHIEF EXECUTIVE OFFICER, NATIVIDAD

"We love our diverse community, and we're proud to be part of it."



# Special Edition Photo Album

## Honoring Our Staff



**E**arlier this year, Natividad honored staff, nurses and physicians who make the hospital a remarkable place.


Above, staff gathered for **National Hospital Week** outside Natividad. The week celebrated hope and healing and the dedication of health systems to serve their communities.

Top right, Natividad participated in **Medical Staff Day**. Reflecting on the special day, Chief Medical Officer Craig Walls, MD, PhD, said, “I have really fallen in love with the hospital, the community and the region. We really make a difference in our patients’ lives. We deliver them into the world. We help them grow to be healthy babies and adolescents. We support people in their later years. We save people on the worst day of their lives, when they are brought

to our emergency and trauma departments. There is the mission that we share, and we are all extremely proud of that.”

Right, James Hlavacek, MD, was named the Monterey County Medical Society **2019 Physician of the Year**. An anesthesiologist at Natividad since 1999, Dr. Hlavacek is the past president of MCMS and currently serves on its board of directors. He is pictured here after receiving recognition from the California Assembly, California Senate, Monterey County Board of Supervisors and the Monterey County Medical Society.



Bottom right, Natividad celebrated **Nurses Week** by honoring nine nurses with the Florence Nightingale Excellence Award and treating everyone to donuts and sweets. 



# Breaking Language Barriers

## Indigenous Interpreting+® Trains Community Members to Help Patients

In the Salinas Valley, an estimated 30,000 people speak an indigenous language. Until five years ago, Natividad and other local hospitals did not have specialized interpreters on staff to communicate with patients who spoke languages other than English or Spanish. Patients who spoke an indigenous language often brought their child or relied on a friend who could speak some Spanish to communicate with hospital staff.

An indigenous language is a unique communication between local groups of people that is not widely known outside of those areas. Many indigenous language speakers come from remote villages in Mexico and know very little to no English or Spanish. In Mexico, there are 11 language families, 68 indigenous languages and 364 linguistic variants. In 2018, Natividad's patients spoke Mixteco San Martin, Mixteco Guerrero,

Triqui, Purepecha, Chatino and Zapoteco. These languages sound much different from Spanish or other Latin-based languages. Most indigenous languages have no written form. Each region holds unique cultural beliefs, as well.

"If you don't speak a common language with your health care provider, you can't understand what they are saying, which means you might not be able to get the care you need," said Jennifer Williams-Carpenter, Natividad Foundation President and CEO. "Helping patients communicate and get necessary treatment seems like a simple goal. But it's more complicated than you'd think."

### FIRST OF ITS KIND

In 2014, Driscoll's, The Agricultural Leadership Council (TALC), the Community Foundation for Monterey County and the University of California, San Francisco teamed up to create Indigenous Interpreting+®.

Indigenous Interpreting+ is the first program of its kind in the U.S. that helps interpreters from Mexico and Central America get credentials. Indigenous language speakers must complete a 63-hour training course to become certified interpreters in community and health care settings. Each year, several interpreters go through the six-month internship program with the Natividad Foundation. Many people in the program were agricultural workers who are now able to attend college.

### INTERPRETING VS. TRANSLATING

#### WHAT'S THE DIFFERENCE?

Interpreting is the verbal, or oral, translation of one language to another. Translating is the written translation. Both often paraphrase content to make it understandable in the target language, while preserving the original meaning in the source language.





“We use our local community to provide a trusted link between the patients and providers. Many of our interpreters come from the same agricultural fields of the patients they serve,” said Victor Sosa, Natividad’s Interpreter Services Manager.

In 2018, the program provided 1,565 indigenous language interpretations. That averages six per day, up from 1.6 interpretations per day in 2015.

### ACCESS FOR ALL

When an indigenous language speaker is hospitalized at Natividad, an indigenous interpreter is assigned to help them understand their treatments. They also help patients understand how to follow doctor’s instructions when they go home.

“Misunderstanding is extremely dangerous,” Sosa said. “Poor communication can lead to poor decision-making by both the provider and their patients.”

Peter Chandler, MD, Natividad OBGYN, explained, “before we had indigenous interpreters, it was



Manager Victor Sosa and Indigenous Interpreting+ team stand in front of the hospital.

*“If you don’t speak a common language with your health care provider ... you might not be able to get the care you need.”*

— Jennifer Williams-Carpenter, Natividad Foundation President and CEO

intimidating and very scary to take care of these patients. It was also unrewarding because they didn’t really understand that we were there to help them, and they didn’t trust us. Now that situation doesn’t happen. It’s been amazing for us.”

The Foundation also spearheaded a one-of-a-kind parent education program for indigenous language speakers to give new parents tools they need to care for their babies in a safe, healthy environment.

Interpreting services are free for patients and available 24 hours

a day, 7 days a week for any patient who needs it. Services include in-person, telephone and video interpretation.

The Foundation offers the Indigenous Interpreting+ program to the hospital, government agencies and courts. For a fee, they can pay for Natividad Foundation’s network of interpreters and interpreter training.

For more information about Indigenous Interpreting+, visit [interpretnmf.com](http://interpretnmf.com). 

# Healing through Movement

## A Look at Natividad's Early Mobility Program

F

or decades, critically ill patients in a hospital intensive care unit (ICU) were kept in their beds for days, weeks or months. Patients were told to move as little as possible. The long-held belief was that bed rest was ideal. But research is showing that movement is actually the best medicine for ICU patients.

The concept is called “early mobility.” The goal of the program is to get patients up and moving as soon as possible, with the support of physical therapists. It can be as simple as sitting up in bed or standing, or as tough as moving to a chair or walking.

Natividad began its Early Mobility Program five years ago, and it is now the largest program in Monterey County.

“The road to recovery for ICU patients starts with movement,” explained Physical Therapist Venkatesh “Kenni” Ragavan, PT, OCS, DPT, MSPT. “As a physical therapist, this is exciting for me. Our program at Natividad is making a true difference in the lives of

ICU patients. It’s helping them heal and regain strength more quickly. The program is forward-thinking and research-based.”

Studies show many benefits of early mobility. Having ICU patients sit, stand or walk can decrease their stay in ICU by three days. It can also shorten the length of hospital stay overall and keep them from coming back in the future. Patients in this program have a lower chance of death in the first year, meaning they are getting better and staying that way.

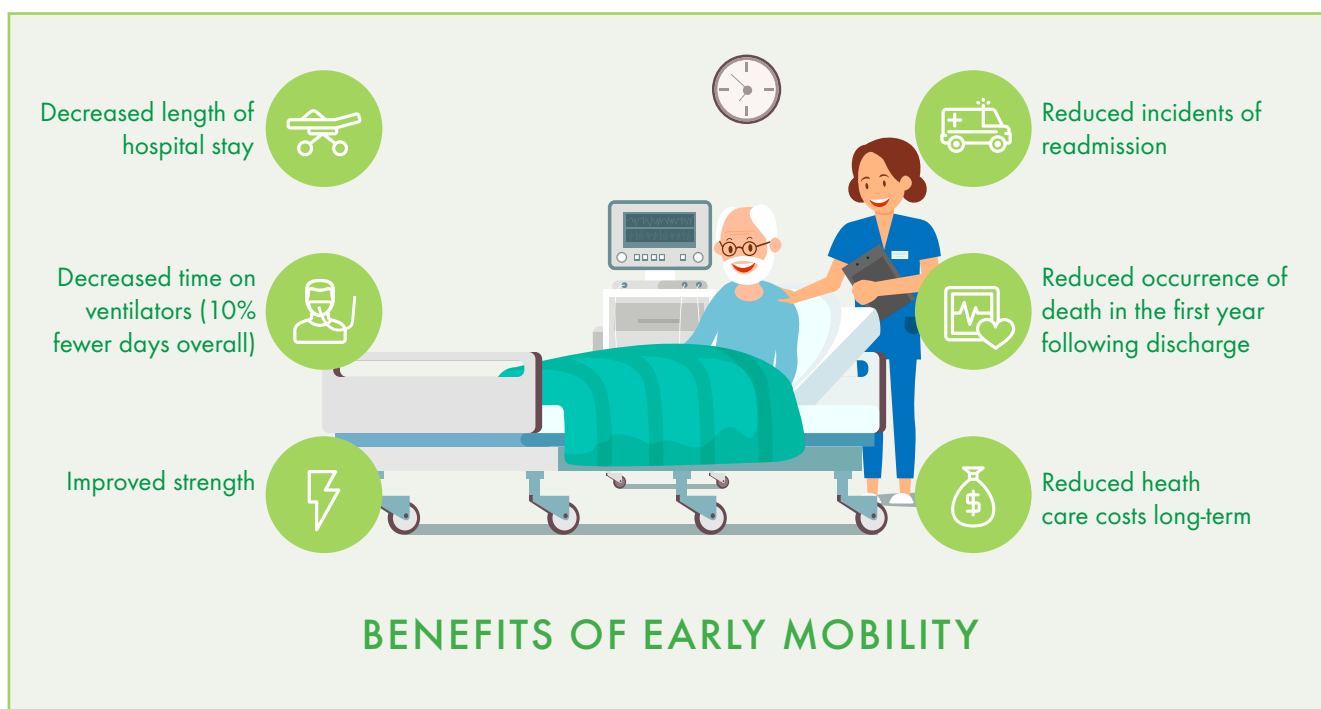
“As home to the area’s only trauma center, it is very important that Natividad lead the way with early mobility,” explained Therapy Services Manager Blair Limon. “Patients are typically carrying on their normal life when a traumatic event happens. For that person to then suddenly be confined to bed will slow his healing a lot. The sooner we get him up, the better the health outcome.”

Natividad’s specially trained physical therapists are available to ICU patients seven days a week. The





Early Mobility is a program that gets ICU patients up and moving as soon as possible.



physical therapy team meets with physicians and hospital staff many times a day to find patients who qualify for the program. Understanding the benefits and risks, they review when to start and stop. They also talk about goals and how the patient should respond. Patients are again reviewed before each session to ensure continued progress and safety.

“Our program is great in that we can get people up who are

connected to ventilators, IVs and lines,” Ragavan said. “We work with both critically ill medical/surgical patients and trauma patients, as long as they are stable.”

Despite that many ICU patients can sit up, get into a chair or walk, only a handful of hospitals are doing this program. Natividad understands that immobility among ICU patients can result in complications such as muscle weakness, joint stiffness, blood

clots, insulin resistance, pneumonia and excessive administration of sedatives.

“We are doing our best to limit these unnecessary complications that may delay or prevent recovery. We are seeing great results. In the past five years, there have been zero serious negative events – only positive impact,” Ragavan said. 🏔️



Eddie Jauregui shows he now walks with a handcrafted cane.







# *Smile* ON

A JOURNEY OF  
RECOVERY



Eddie shows the cane he handmade with wood and jewels.







# Eddie is a miracle.

*Natividad gave him  
strength.*

Eddie has regained his hand-eye coordination and can make jewelry again.

“I like your smile,” Eddie says as he sits down to begin the interview. Being in his presence brings a smile to everyone who meets him. From the custodians who walk by, to the nurses who wave from across the room, everyone smiles at Eddie, and he smiles back.

In February 2018, Eriberto “Eddie” Jauregui was hit by a large SUV while riding his 1960s vintage bike on Hall Road in Las Lomas. The 24-year-old jewelry artist suffered life-threatening traumatic injuries including a severe brain injury, fractured bones and torn intestines, kidney and liver. After stabilization at Natividad’s Level II Trauma Center, Eddie transferred to Natividad’s Intensive Care Unit

(ICU). This began his healing journey at Natividad.

“Eddie is a miracle,” said his mother Eva Jauregui. “If we would have gone to another hospital, I don’t think he would have made it. Natividad gave him strength.”

## PROGRESS AND PERSISTENCE

When Eddie transferred to ICU, Natividad deemed him a candidate for its Early Mobility Program. Adopted five years ago, the hospital initiative promotes movement as soon as it is medically appropriate. From simply rolling over to the side or moving to the end of the bed, a patient is guided by specially trained physical therapists. The program is incredibly

effective in helping the most critically injured patients recover more quickly than those who don’t move during hospitalization. To read about the program, turn to page 8.

Physical Therapist Venkatesh “Kenny” Ragavan, PT, OCS, DPT, MSPT began working with Eddie when he was still in critical condition in the ICU. At the time, Eddie was intubated and coming off a medically induced coma. Initially, the goals were small.

“Eddie’s condition and severe brain injury made his case one of the most challenging,” Ragavan recalled. “Without early mobility, it would have taken three to six months longer to get to the stage he is in today.”


“They don’t push you, but they encourage you,” Eddie said of the early mobility process. “Moving made me feel like I was going to come back to normal soon.”

### **MORE THAN HE COULD HAVE EXPECTED**

This spring, Eddie participated in his sister’s wedding. Eva recalled, “Eddie got to show off his walking skills to all our family who attended the wedding in March. With a cane and walker, he stood proud.”

Eddie is slowly regaining his ability to make jewelry, crafting three wire-wrapped necklaces for physical therapists Alan, Merri and Allison. He developed a passion for making essential oils by hand after researching that they could help his scars.

Eddie’s next goal is to increase his ability to communicate and eventually become an advocate for pedestrian safety.

“One of the great things about Natividad is that the same therapist can see a patient in the ICU, all the way through intermediate care, the medical surgical unit, rehab and in an outpatient setting,” explained Therapy Services Manager Blair Limon. “There is a continuum of care. One of the greatest things for me, like in Eddie’s case, is seeing how far a patient has come. It is really inspiring.” 



Eddie shows his hobby that has been a source of inspiration.





# A Night and Day DIFFERENCE

Natividad Pediatricians Are Always Here  
to Give the Best Care

Dr. Carpenter checks on a patient at night.

**N**atividad's Pediatric Department is serving the youngest in our community better than ever.

Since expanding in July 2017, pediatric hospitalists are now available 24 hours a day, 7 days a week. The department is also treating children from infancy to 21 years old, an important expansion from the previous 18-year-old limit. (Adolescents, up to age 21, are different than fully-grown, adult patients. Being able to treat

them in the pediatric unit makes sure they are receiving the specialized care they need). Pediatrics also added a playroom for younger children and a lounge for older children. These dedicated spaces help kids of all ages feel comfortable during their hospital stay.

## INSIDE NATIVIDAD'S PEDIATRIC PRACTICE

In the last year, 28% of patients seen in the Emergency Department were 17 or under. Natividad is the

only hospital in Monterey County that offers an on-site pediatric hospitalist 24 hours a day. Previously — and like many hospitals nationwide — Natividad operated with home-based doctors. When a pediatric patient needed to be admitted, a doctor would be paged to either come to the hospital or sign off on transporting the child to another hospital. Now, doctors are available around-the-clock to care for every child.



Dr. Carpenter and Dr. Woodel discuss a patient's treatment.

## WHAT IS A PEDIATRIC HOSPITALIST?

A hospitalist is a doctor who works exclusively in the hospital, and only looks after patients who have been admitted. A pediatrician treats children, typically up to 18 years old. At Natividad, there are currently four pediatric hospitalists and at least one is always on staff. They now treat patients up to 21 years old.

Natividad's pediatric hospitalists also care for infants in Labor & Delivery and in the Mother-Infant Unit and for children in the Emergency Department.

"Our goal is to give every patient excellent care here at Natividad," explained Christopher Carpenter, MD, MPH, Director of Natividad Pediatrics Services. "With these increased offerings, we can keep children who are very sick, eliminating the need to transfer them. This makes it easier on parents who want to stay close to their communities and families."

The Pediatric Department is affiliated with University of California San Francisco (UCSF) Benioff

Children's Hospital. The hospital cares for all pediatric conditions except critically injured children. As a Level II Trauma Center, Natividad helps save lives by stabilizing those critical patients, before transferring them to one of the pediatric trauma centers in the Bay Area.

Sarah Smith, MD, Chief Pediatric Hospitalist added, "just having your child in the hospital is a huge stress for the family. Having to transfer that patient to the Bay Area, two hours away is even more of a hardship. They would have to figure out how to live there, miss work, etc. Now that we have a 24-hour presence, we feel comfortable keeping the kids who

require a higher level of care. We can check on them every hour, if needed. Our hospital is the only one in the area to offer this."

Accredited by California Children's Services, the Pediatric Department includes 10 individual rooms, two double and one mother-infant unit. To ensure safety of every child, the unit is in a separate, locked wing from the main hospital, and visitors must go through clearance to enter. The unit is alarmed, and all infant and high-risk children receive security bands.

Natividad treats children with severe infections, asthma, pneumonia, appendicitis and many other conditions that require hospitalization. The hospital has the equipment necessary to treat significant breathing difficulties. Doctors have access to specialists at Stanford and UCSF who can weigh in on diagnoses, lab and imaging tests and treatment plans. The nursing staff are specifically trained to care for pediatric patients, and all are certified in Pediatric Advanced Life Support.

"Our doctors are extremely well-trained and have completed residencies at top institutions including Harvard, UCSF, Valley Children's and Children's Hospital Oakland," Dr. Carpenter said.

The pediatric hospitalist staff includes Dr. Carpenter, Dr. Smith, Dr. Raul Lara, Dr. Chiquita Palha De Sousa and Dr. Reiko Sakai. The nursing staff is supervised by Angela Ledesma, BSN, RN-BC.



## JOY IN HEALTH CARE


The pediatric unit offers toys and a video game console for children to check out. They have several service groups and individuals who donate toys and stuffed animals throughout the year. Often, they will come from former patients who want to give back. The staff also offers seasonal activities to kids.

There is a dedicated playroom for young children, designed for toddlers to children up to 6 years old. Kids can play with toys and bikes in an engaging play space with beautiful view of Salinas. A separate teen lounge, typically for patients 12 and older, gives adolescents their own separate space to read books, play video games and watch TV. It is a colorful ro-

om with youth-sized furniture and cabinets full of board games. The teen lounge has a connecting kitchen for families to enjoy a meal together.

“Our bedside manner is amazing. It’s a sentiment that trickles down from leadership,” Dr. Carpenter said. “It’s all about the patient experience, and we make sure our children know how much we genuinely care.”

Natividad Foundation partners with Teddy Bears with Heart, giving every pediatric patient a stuffed animal.

The pediatric practice encourages all parents to stay with their children as often as possible. The hospital can provide free meals for parents. 



Nicole Woodle, MD, third-year resident, interacts in the playroom.

## LANGUAGE AND UNDERSTANDING

Several of the pediatric hospitalists at Natividad are multi-lingual. Dr. Carpenter speaks English, Haitian and Spanish. Dr. Lara, Natividad Pediatric Hospitalist, is from Mexico City. “Patients are often relieved to see a doctor who is from their native culture and fluent. They love having Dr. Lara,” Dr. Carpenter said.

Dr. Lara tells a story about a pediatric patient whose family was from a rural part of Mexico and only spoke an indigenous language. “I often treat patients who only speak an indigenous language. Thankfully, Natividad has interpretive services to help us in these cases.

I remember an infant who came to the hospital who was very sick. We found a very serious condition that required immediate surgery. It was the middle of the night, and I could tell his mom didn’t understand me, despite the fact I was speaking Spanish. I called for support from the Indigenous Interpreting+® program; and soon, an interpreter who spoke their native language arrived. By the time the patient was airlifted to a Bay Area hospital, a Triqui language interpreter fully informed his mom about the patient’s condition and treatment he needed. We even provided her with a note for any future providers with the number for Natividad’s interpreter services.”





Makayla Paez loves to color and paint her nails.


# The POWER - of PLAY

Healing through a Different Lens









**T**he world looks different to an autistic child. That same world often looks even more overwhelming and uncertain to a parent of a child on the spectrum. Finding a health care provider who understands those feelings is key.

Autism can be described as a difference in the way a person's brain develops and functions, and it may cause a wide range of problems with language, social skills and behavior. It can affect a child's ability to lead a normal life, often struggling with understanding the meaning of words, making friends, dealing with change or adjusting to loud noises, bright lights or people. Some children may need a lot of help, while others only have mild issues. This is why it is now referred to as Autism Spectrum Disorder (ASD).

When a child with autism gets sick, it can be a fearful time for a parent. How will your child manage a new doctor — who is a stranger — wanting to examine her? Will the bright lights and loud noises of a hospital be too overwhelming? What if she needs to get admitted to the hospital and face all the unpredictability that comes with new surroundings? A million questions can race through a parent's head; the first of which is “what do I do?”


Makayla Paez is a joyful 6-year-old who was diagnosed with ASD when she was 4. She loves the color blue, writing her name and painting designs on her nails with markers. She is a sweet, smart and playful little girl with a swinging ponytail and big smile. With autism, Makayla's biggest struggle is with communication. Her mom, Klaudelle Paez, is the only person who understands her limited speech.

In February, Klaudelle picked her daughter up from childcare. Makayla had a terrible cough, and she knew something was wrong. As a skilled rehabilitation nurse by profession, Klaudelle knew about Natividad's Pediatric De-

partment and decided she needed to take Makayla to Natividad's Emergency Department.

“The nurses really took the time to get to know her before they did any tests,” Klaudelle explained. “They took extra care to make sure she was comfortable. This is so important for a child with autism.”

Raul Lara, MD, a pediatric hospitalist, diagnosed Makayla with pneumonia, an infection that causes the lungs to fill with fluid, phlegm or pus. It causes severe coughing, fever, chills and difficulty breathing. He admitted Makayla to the hospital.



Makayla is  
back to hugging her  
favorite stuffed animal  
named “Skye”  
and eating yogurt  
with sprinkles.





so amazing. Because of their understanding of her special needs, she was able to get all the necessary treatment.”

“Makayla and her family were absolutely a pleasure to take care of,” Dr. Lara said. “Our nurses and doctors are caring and compassionate. I’m proud to be part of a team that takes such a child-centered approach to caring for our patients. I was so moved that I was able to befriend Makayla, even after an experience that I’m sure, in her eyes, was quite traumatic.”

A child with autism has special needs, and doctors, nurses and staff who understand that is incredibly important.

“Makayla is a huge blessing to me,” Klaudelle said. “Parenting a child with special needs takes a lot. I make sure she has activities that provide opportunities for communication and social interaction. I bring her to church with me every Sunday. I take her to Applied Behavior Analysis (ABA) Therapy five days a week, for three hours each day. We go to speech therapy twice a week. She struggles, but she is progressing.”

Makayla recovered completely from pneumonia. After one follow-up appointment at Natividad, she was released from care. She has no long-term side effects from the sickness. She continues to participate in ABA therapy (a learning environment that helps develop proper reactions and behaviors) and work with her primary physicians. 🏡

Natividad’s Pediatric Department has a doctor on staff 24 hours a day, 7 days a week. A pediatric hospitalist is a highly trained pediatrician who specializes in caring for children who have been admitted to the hospital. Having at least one on staff at Natividad around the clock ensures quick response to any and all emergency or medical situations involving children. (Read more about the Pediatric Practice and the Pediatric Hospitalist Program on page 15.)

During Makayla’s three-day stay at the hospital, nurses made sure Klaudelle was always able to be with her daughter. She was placed in a kid-friendly, individual hospital room with a convertible bed for her mother. The hospital provided complimentary meals for Klaudelle. Every effort was made to make sure Makayla’s needs were met and she was comfortable and calm.

“It was uplifting as a mom, knowing that the staff would do anything they could to accommodate Makayla’s needs,” Klaudelle said. “Since her language is limited, I told them what words I used for things and explained how to use simple phrases. They made sure to speak to her like that. ‘No owie. No pokey,’ they’d say. All the people

who came in the room understood her diagnosis and were kind and gentle.”

Natividad is family-centric, and parents are considered part of the care team. Makayla’s mom used visual examples and showed her Disney’s Doc McStuffins cartoons to help explain what was happening.

Makayla and Klaudelle walked around the halls, visiting the playroom in the pediatric wing. Makayla played on the bikes. On Valentine’s Day the nurses brought her a flower. “It felt almost like a home environment. They try to make it feel normal and comfortable,” Klaudelle said.

Accredited by California Children’s Services (CCS), the Pediatric Department offers toys and a video game console to check out. It has a dedicated play room for young children and an adolescent lounge for older ones.

During her hospitalization, despite autism, Makayla was able to comply and do an IV, X-ray and other tests and treatments. “The doctors and staff in the pediatric wing were able to treat Makayla without her suffering a single tantrum,” Klaudelle said. “This is

# VOICES OF OUR INTERPRETERS

Natividad Foundation's Indigenous Interpreting+® Program serves the estimated 30,000+ Monterey County residents who speak indigenous languages. There are 11 language families, 68 indigenous languages and 364 linguistic variants from Mexico.

To our patients, interpreting is more than words. It links cultures and fosters understanding between patients and physicians. Our services communicate the nuances of meaning and help Natividad's doctors, nurses, administrators and patients connect to improve care and speed healing.

We asked our interpreters why the program is important to them.

## LUCIA

I've been interpreting in Mixteco for a couple of years. Patients are always very thankful and appreciate that they are able to understand what was explained in their own language, so they can know the benefits and risks of treatment and what they're being offered. It makes me feel proud and very lucky to have the opportunity to be part of something that helps people and changes lives.

## ISRAEL

I've found that every indigenous language patient who comes in the hospital is really thankful about the services that we have here. Once, in the Emergency Department,

we had a patient who didn't speak Spanish or English. The staff identified her as a Triqui speaker and called me to come interpret. As soon as I started talking with her in Triqui, her face lit up with happiness. The patient even told me, "I feel like I have a family here in the hospital, and I feel more protective." I told her, "we're here to help and support you."

## RAMIRO

Indigenous Interpreting is important to me, because it provides help to patients who cannot communicate from one language to another. They are always very happy that there are interpreters to make communication easier with providers.

## SERGIO

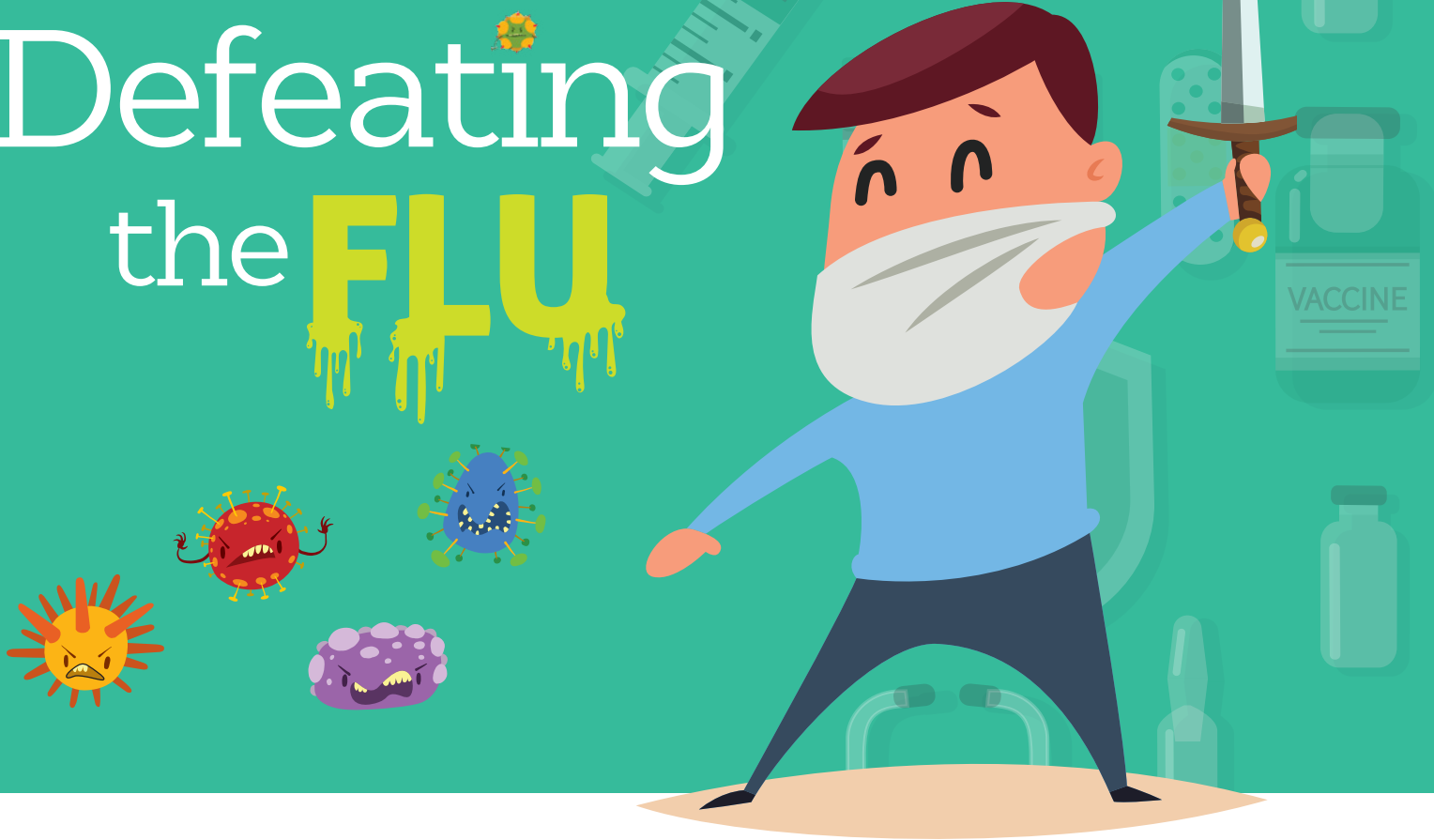
I want to help everyone I can in Triqui. There's something so amazing about hearing that someone clearly understands what you're saying. Many patients I interpret for have never had a Triqui interpreter. They've only had interpretations in Spanish, because that's all that was available to them — and many spoke little to no Spanish. Working as an interpreter has inspired me to pursue my education with a goal of becoming a doctor, hopefully at Natividad.

To read more on Indigenous Interpreting+, turn to page 6. Learn more or donate at [natividadfoundation.org](http://natividadfoundation.org)





# Defeating the FLU



T

here are simple steps you can take to keep you and your family healthy during flu season. An easy way to not get sick is to get a flu shot.

“It’s never too late to get the shot,” said Natividad Infection Preventionist Drew Massengill, RN, BSN. “You can get one when the season begins in October until the end of the season in April.”

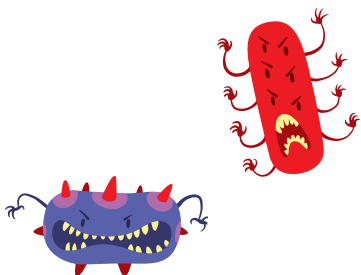
Flu shots are very important for kids and the elderly because they’re most at-risk of complications from the flu. Even if you’re healthy, you can get the flu and suffer from complications or require hospitalization.

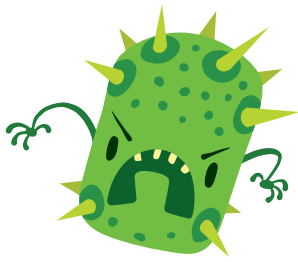
“No one likes to be sick,” Massengill said. “When you get the flu

vaccine, you’re protecting yourself and others around you from what can potentially be a life-threatening illness.”

Natividad offers flu shots for every patient and staff member. Natividad also partners with the Monterey County Health Department to bring free shot clinics to the community. Vaccines are available for people who are 6 months and older at no cost. Children must be accompanied by a parent or legal guardian. A complete list of clinic locations, dates and times is available on the county’s website.

“At Natividad, our goal is 100% vaccination for all employees,” Massengill said. “It’s surprising that some doctors and nurses





hate getting shots, but they do it because they prioritize their patients' health. Anyone who doesn't get a shot takes precautions like wearing a mask in patient areas."

## HOW IT SPREADS

The flu virus can live outside the body for up to 12 hours and can spread when a person comes in contact with something an infected person has touched.

"Public transit can be ripe with viruses," Massengill said. According to MSN, the three most germ-infected things you touch include: smartphones, paper money and reusable water bottles. "One study found cell phones have 10 times more bacteria than a toilet seat. Swabs from water bottles of 12 athletes contained 100 times more bacteria than the average dog toy," the report stated.

The flu virus usually enters the body through the "t-zone"—membranes in your eyes, nose and mouth. People tend to touch their face about 150 times a day, which creates many opportunities for infection.

"The number one way to prevent the spread of flu is to wash your hands," Massengill said. "Our hands are very dirty, and a lot of people cough into their hands or wipe their noses constantly."

The CDC recommends you wash your hands for at least 20 seconds

— about the time it takes to sing "Happy Birthday" twice. Make sure you wash your thumbs, the backs of your hands and your cuticles. Massengill always keeps a bottle of hand sanitizer nearby to use when water and soap aren't available.

## WHAT TO DO IF YOU GET SICK

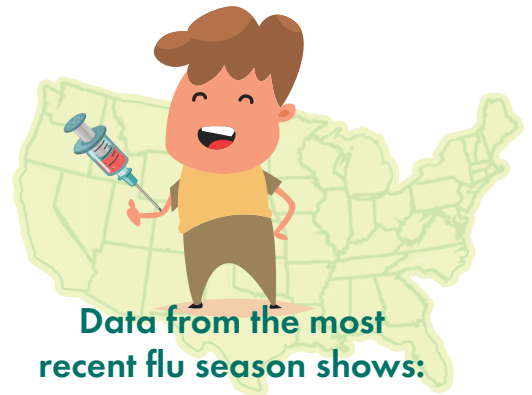
If you do get the flu, it's important to get treatment and make sure you don't spread the virus to other people. Some people wait the flu out at home, but Massengill recommends getting medical help if you have a sustained high fever and breathing problems. This is caused by thick mucus that reduces oxygenation in the lungs.

You may be prescribed Tamiflu, which shortens the severity of the illness. Natividad can admit patients for breathing therapy or an IV help with dehydration.

"If you have a fever avoid work or school," Massengill said. "If you have to return, try to stay away from your coworkers, wash your hands often, sneeze and cough into your elbow (of shirt), and wear a mask." Protective masks are available at most drug stores.

"Be careful about returning to work too soon," Massengill said. "If you are coughing and sneezing, you're contagious. The worst flu symptoms typically last about a week; but if symptoms linger, you can still spread the virus."

For more information about the flu and flu shot, visit [cdc.gov/flu](http://cdc.gov/flu).



Data from the most recent flu season shows:

**48.8 million**  
FLU ILLNESSES

**22.7 million**  
FLU-RELATED DOCTOR VISITS

**959,000**  
FLU-RELATED HOSPITALIZATIONS

**79,400**  
FLU-RELATED DEATHS

\*According to the Centers for Disease Control and Prevention (CDC)

## DID YOU KNOW?

➤ Flu vaccines typically contain protection against two types of flu: strains predicted more prevalent in the fall and strains dominant in the new year. Because the flu shot protects against just three or four strains, and there may be more circulating, it can't guarantee 100% protection, but it will shorten/lessen symptoms if you do get sick.


➤ A virus causes the flu. Taking an antibiotic won't help you get better from the flu. Also, taking antibiotics when you don't need them can also lead to antibiotic-resistant infections, putting you and your family at risk of much more serious health concerns.



# Veggie Verde

## Enchilada Bake

Hands-on time: 25 minutes (ready in 1 hour), Serves 8

Similar to a casserole, this meat-free veggie enchilada bake is packed with healthy ingredients and flavor — and tastes surprisingly rich and creamy. It's also kid-friendly and sure to become a family or potluck favorite! Save time by chopping as you go. Feel free to add or substitute other vegetables. Tomatoes, mushrooms, corn and fresh cilantro would all be tasty. We like to use mild enchilada sauce to appeal to everyone. If you like it spicy, just add your favorite hot sauce later. 



**Nutrition facts per serving:** calories 430; calories from fat 200; total fat 22g; saturated fat 9g; cholesterol 35mg; sodium 790mg; total carbohydrate 44g; dietary fiber 4g; sugars 5g, protein 16g

## INGREDIENTS

- 2 tablespoons extra virgin olive oil
- 1 large yellow onion
- 3 carrots
- 1 bell pepper
- 1 zucchini
- 7 cups spinach, lightly packed
- 2 garlic cloves
- 4 cups mild verde enchilada sauce
- (one 28 ounce can)
- 2 cups Monterey Jack cheese
- 1 cup light sour cream
- 8 medium flour tortillas

**1.** Heat oven to 400°F. In a large saucepan, heat oil over medium-high heat.

**2.** Chop onion and add to pan. While onion is cooking, peel and chop carrots, then stir into pan. While carrots are cooking, chop bell pepper then stir into pan. While peppers are cooking, chop zucchini and mince garlic then stir into pan. Continue cooking for 5 minutes, or until vegetables are tender. Add spinach and stir until it wilts.

**3.** Turn off heat. Add 1 ½ cups enchilada sauce, 1 cup cheese and the sour cream. Mix until creamy.

**4.** Spread ½ cup enchilada sauce over bottom of ungreased 9-by-13-inch (3-quart) baking dish.

**5.** Place about ¾ cup mixture in center of each tortilla; roll up. Place seam side down over sauce in baking dish. Add remaining enchilada sauce to any remaining mixture and pour over top of filled tortillas. Sprinkle with remaining cheese.

**6.** Bake at 400°F for 25-30 minutes, or until cheese begins to brown. Let stand for five to 10 minutes before serving. Cut into sections like a casserole, rather than serving as individual enchiladas.