

# Translation and Interpreting Policy

## Patient Advice Liaison Service (PALS)

Postholder responsible for document: Head of Patient Experience

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### Version Control

1.1	Head of Customer Care	16/03/2011	Disability Discrimination Act 1995 changed to the Equality Act 2010
1.2	Head of Customer Care	02/05/2014	Issues for Children and Interpreting Safeguarding Children and Vulnerable Adults.
1.3	Head of Customer Care	06/01/2017	General Update.
1.4	Head of Patient Experience	09/04/2019	Customer Care changed to PALS throughout the document Updated email address

2.0	Head of Patient Experience	Aug 2021	Complete re-write to reflect new contract. Ratified by CMB 18/8/21
2.1	PALS Lead Sophie Rolfe	June 2023	Amended with updated details and forms
2.2	Head of Patient Experience Victoria Aldridge	June 2024	Addition of appendices and inclusion of on demand BSL and audio transcribing services.  Updated quick reference infographic.

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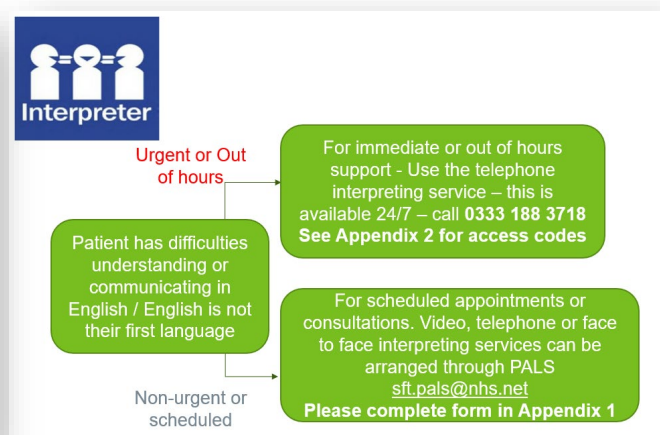
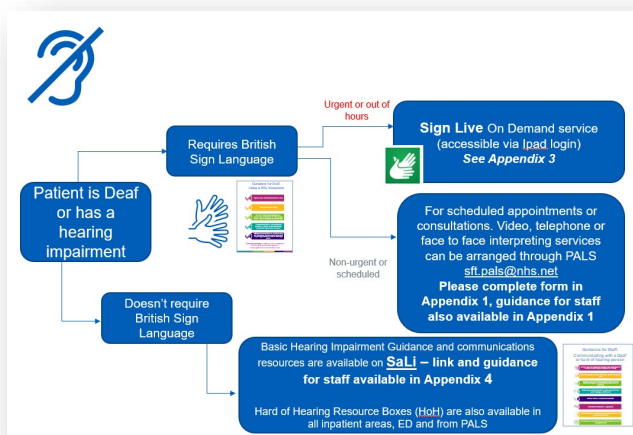
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## Background and Purpose

All patients of Salisbury NHS Foundation Trust have the right to clear, effective communication in a language and manner that enables them to understand information that is being given to them.

It is required by law, as well as good practice, that when our patients cannot understand English or require an interpreter because they are Deaf that we facilitate access to a suitable interpreter or translation. This policy covers provision of translation and interpreting services for patients attending an outpatient appointment (virtual or face-to-face), the Emergency Department, admitted as an inpatient or attending our maternity services. This is a Trust wide Policy.

## Quick Reference Guide



**Use of translation or interpreting services should be assured for a patient, particularly for discussing diagnoses, treatment options, any planned procedures or investigation, obtaining consent and discharge planning.**

## Policy statement

This policy provides a framework to support communication with patients and carers who are **non-English speakers** and people who may have other communication needs related to a **disability or impairment**.

The policy sets out clear standards across the organisation to promote good practice and minimise risks which stem from communication barriers. It covers the use of telephone interpreting, face to face interpreting and written translation services in accordance with the identified need.

The following legislation provides guidance for compliance:

- Equality Act 2010
- The Race Relations Act 1976 and the Race Relations (Amendment) Act 2000

The provision of interpreting services is the responsibility of the Trust and not the patient or their family.

Clinical treatment and care should always be provided in a manner to ensure that all people involved can communicate clear and accurate information, ensuring that consent, diagnosis, clinical procedures, symptoms, and their meaning are understood.

## Definitions of terms used

**Interpreting is the oral or visual/gesture of communication** from one language into another. It includes community languages and sign language.

**Translation** is the **written or spoken word from one language into another.**

**Language Empire** is the service provider used by Salisbury NHS Foundation Trust for foreign language interpreting and translation.

**Deaf Action** and **Sign Live** are the service providers used by Salisbury NHS Foundation Trust for British Sign Language (BSL).

**A2i** are the service providers for audio transcribing of documents, letters and other information for those with visual impairments.

#### Duties and Responsibilities Trust staff

All Trust Staff are responsible for following this policy and in turn are responsible for:

- [Identifying interpreting or translation requirements](#) for patients
- [Accurately documenting](#) within the patient's clinical records, their specific needs and requirements for the use of an interpreter or reasonable adjustment. Equally, any declines for such provisions should also be clearly recorded.
- [Liaising with PALS to arrange for an interpreter](#)
- [Using an interpreter correctly](#)
- [Communicating any issues](#) regarding booking an interpreter or using an interpreting service.

#### PALS

The PALS team will arrange interpreters (either on the telephone or in person), they can also arrange for translation of documents, letters or information as needed.

The PALS team will keep a log of all requests and will keep the requesting department up to date with the status of their booking.

Where fulfilment of the translation or interpreting need cannot be fulfilled, PALS will work with the requesting departments to explore alternative options for interpreting services where appropriate.

#### Translation and Interpreter Providers

All providers are contracted by Salisbury NHS Foundation Trust to provide translation and interpreter services, the specifications and remits of this are set out in the relative service contracts.

**Will work within the hospital policies and regulations.**

**Ensure accuracy and impartiality of interpreting** by facilitating communication between people who do not have a language in common.

**Minimise legal risk** of misinterpretation of important clinical information (for example informed consent to undergo clinical treatments and procedures)

**Minimise safeguarding risk** (for example for victims of human trafficking, where the trafficker may introduce themselves as family member or friend and speak on behalf of the patient)

**Foster trust** with the patient.

**Advise on cultural differences** as interpreters sometimes know important information about the patient's culture or community, country of origin and religious beliefs that others may not be aware of. It is useful to ask the interpreter to point out any areas of cultural significance that they would help to improve the understanding of the patient's world. In particular, interpreters may help to establish whether certain behaviours, beliefs or reactions are usual within the patient's culture or community.

### Providing interpreter and translation services

#### Identify interpreting or translation requirements for patients

An interpreter is required when:

- The person has a limited use of English.
- There is a concern that the person does not understand the clinical information being given.
- The person is deaf or has a hearing impairment, a learning disability or uses sign language.
- The person is known to require an interpreter from information such as referral forms and case notes.
- There are concerns that the patient or carer, family or friend is unable to express themselves fully and freely due to language barriers or conflicts of interest.
- The assessment is complex and carers, family members and friends may not be appropriate to provide the translation.
- There is a safeguarding concern meaning the use of carers, family members or friends may not be appropriate.

#### How to assess if an interpreter is required

There may be no previous request for an interpreter or it is not clearly indicated as required on the document you currently have e.g., a referral form or case notes. You may meet the patient or carer and then realise an interpreter is required. If you are not sure whether an interpreter should be used or not, try the following:

- Ask an open question that requires the person to answer in a sentence. Avoid closed questions, that can be answered 'yes or no' or a very familiar question such as 'age or where do you live?'
- Ask the person to repeat a message that you have just given them, in their own words.

If the person cannot articulate a sentence in English or cannot relay back to you the message you have given them, then an interpreter is most likely required.

It is important not to make assumptions about the language or the dialect that the person speaks; where only the ethnicity is stated or information is sparse you will need to check further to ensure a correct match.

#### Using relatives, carers and friends of the patient

Relatives, carers and friends **must not** routinely be asked or expected to interpret. If used, there is an increased risk to patient safety, inaccuracy, compromised confidentiality. Family members and carers may wish to speak confidentially with staff about the needs of the patient or their own needs.

## Using members of staff

Staff members, without an accredited interpreting qualification may be used to identify language or to help communicate basic information for example, personal history, menu choices. This must be with the consent of the patient. Complex clinical information, medical terminology or decisions made about clinical care should **always** been done through a qualified interpreter, except in an emergency.

## Other things to consider

There may be sensitivities around inter-ethnic, regional, dialect, political tensions and all efforts should be made to accommodate the patient's sensitivities and preferences, such as asylum seekers who may have been victims of torture.

In addition, the patient may require an interpreter of the same gender for cultural reasons or if the conversation is of a delicate, personal nature.

If unsure, please check with the patient.

## Using a telephone or a face-to-face interpreter

Before you book, identify whether a telephone or face-to-face interpreter would be appropriate for the patient. The information below may help you to decide if you can use a telephone interpreter or face-to-face interpreter:

**Telephone interpreting** is where the interpreter delivers the interpreting over the phone.

Telephone interpretation is usually easier to accommodate, especially for uncommon languages or at short notice and is appropriate where the communication is straightforward or in circumstances that cannot be planned for, such as when someone visits unexpectedly, in emergency situations when you need immediate assistance or when all other attempts to get a face-to-face interpreter has been exhausted and unsuccessful.

Telephone interpreting can also be used to establish the language spoken and the nature of an enquiry before a face-to-face interpreter is requested.

**Face-to-face interpreting** is suitable for some appointments when the information needing to be communicated is complex or the situation is volatile. It is advisable to use in situations that would exacerbate the services user's symptoms such as paranoid delusions or auditory hallucinations.

Face-to-face interpreters can take account of non-verbal signals that telephone interpreters would not be able to.

Face-to-face can be done via video or in person. Interpreters are required for providing:

- BSL - British Sign Language
- Sign Supported English
- Finger Spelling
- Notetaking (Electronic & Manual)
- Speech to Text
- Lip Speaking
- Lip Reader
- Deafblind Communication
- Foreign sign languages.

**Important to note – video or telephone interpreting services cost a fraction of the price of face-to-face interpreters and are more likely to be fulfilled at short notice.**

### **Written translation**

You can also arrange to the translation of written information (for example letters, information sheets) into different languages or formats with Language Empire. Please email PALS who will organise this for you - [sft.pals@nhs.net](mailto:sft.pals@nhs.net)

### **Audio translation**

We can also provide written information (for example letters, information sheets) into audio transcriptions for those who have a visual impairment or who are blind. Please email PALS who will organise this for you - [sft.pals@nhs.net](mailto:sft.pals@nhs.net)

### **Paying for an interpreter, or any other form of translation**

Interpreting services are paid for through a centralised budget held by the Head of Patient Experience.

Staff need to be mindful of the use of public funds when booking and using an interpreter. For example:

- Consider using a telephone interpreter wherever possible.
- Make sure the booked appointment starts on time.
- Only use an interpreter for conversations between professionals and patients/ carers and consider using families or appropriate staff members for general day-to-day conversation.
- Cancellation of these services if the appointment or service is no longer required to prevent unnecessary charges.

### **Record keeping**

Accurately document within the patient's clinical records, their specific needs and requirements for the use of an interpreter.

All communication needs must be recorded in the patient's health care record.

**Also document if they refuse the use of an interpreter.**

### **Booking an interpreter**

Email [sft.PALS@nhs.net](mailto:sft.PALS@nhs.net) to book an interpreter with a completed booking request form

See [Appendix 1](#).

### **Using an interpreter correctly**

When working with a language interpreter it is important to ensure the following:

- Would it help to request an interpreter of the same gender?
- Would it help to request a named interpreter that the patient knows and has confidence in?
- Would booking an interpreter who speaks the same language but is of a different nationality help provide extra reassurance to a service user's concerns about stigma from members of their community?

- What concerns may a patient from a country where there has been conflict have about who their interpreter is? For example, would factors such as the ethnicity, religion, nationality of the interpreter present barriers to open communication?
- Any additional requirements should be specified when making a booking.

When using British Sign Language interpreters ensure the following:

- Speak at your normal pace, don't shout
- Keep your speech simple
- Talk to the Deaf person directly
- Provide information in advance where possible (a copy of a consent form that needs to be explained for example)

See [Appendix 1](#) which can be printed as a quick reference guidance for using BSL interpreters.

### Concerns regarding interpretation

#### Inform the service provider

If you have any concerns about an interpreter's performance or behaviour (such as punctuality, accuracy of translation or attitude towards the patient/family/carer) you should inform PALS. The service provider will then be contacted via their feedback system. This will help the interpreting provider to find more appropriate interpreters for the patient or carer in the future and support the service's quality monitoring.

#### Inform your manager

Any issues when making a booking or using an interpreter should be reported to your manager.

### Monitoring Compliance

If the Interpreting or Translation Service Provider is unable to provide an interpreter at the required time, please report this via the Datix system.

The Patient Experience Team will monitor the incidents related to non-provision of interpreters that are logged on Datix and will liaise with the provider to reduce the incidents of non-provision.

### Policy Review

This policy will be subject to a planned review every two years as part of the Trust's Policy Review Process. It is recognised however that there may be updates required in the interim arising from amendments or release of new regulations, Codes of Practice or statutory provisions or guidance from the Department of Health or professional bodies. These updates will be made as soon as practicable to reflect and inform the Trust's revised policy and practise.

### References

Equality Act 2010 - <https://www.legislation.gov.uk/ukpga/2010/15/contents>

Race Relations Act 1976 - <https://www.legislation.gov.uk/ukpga/1976/74/enacted>

Race Relations (Amendment) Act 2000 - <https://www.legislation.gov.uk/ukpga/2000/34/contents>



## Appendices

### Appendix 1 – Non-urgent/scheduled booking form (Language and Deaf Action)



Interpretation  
Booking Form.docx



Guidance for Staff  
using BSL interpreter

- Complete the attached form and return to PALS [sft.pals@nhs.net](mailto:sft.pals@nhs.net)
- Please ensure to give as much notice as possible to process this request

### Appendix 2 – Out of hours/urgent interpreting services (Language Empire)

- Your location ID (this is an 8-digit access code)



On Demand  
telephone interpreti

- Your name and the department from which you are calling
- The language you require from the interpreting service
- You will be connected with an interpreter over the phone.

### Appendix 3 – Out of hours - BSL on Demand Service (SignLive)

- Ipad's are available from ED, Maternity and PALS
- Access the SignLive App installed on the device
- Input the username and password as indicated on the Ipad's tag
- Once signed in, "Connect with Interpreter"
- You will automatically be connected with a BSL interpreter.

Please see Guidance in [Appendix 1](#) for additional information.

### Appendix 4 – Hearing Impairment Guidance and Intranet Resources link



Guidance for Staff  
v2.docx

- [Link](#) to Staff Intranet Resources