

Interpretation and Translation Policy



Title:

Interpretation and Translation Policy

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Executive Summary

This policy applies to all healthcare professionals/care staff working in NHS Lothian including locum, bank and agency staff who, on behalf of NHS Lothian, are involved in the direct care of the patients.

NHS Lothian is committed to providing excellent health care services for all users to ensure that all patients and public can access services effectively and efficiently. The potential for misunderstanding and clinical error and subsequently poor-quality care is greater when means of communication, language and culture differ.

Patients have a fundamental legal, ethical and moral right to determine what happens to their own bodies under the Equality Act 2010. To exercise this right, Health Service staff should establish effective communication, not just with the patient but with their significant other(s).

It is the responsibility of the healthcare professional to organise appropriate and professional communication support. This includes interpreting, Sign Language and Tactile Sign Language interpreting, translation, alternative formats, electronic note takers and lip speakers.

This policy sits alongside the [NHS Scotland national policy for interpreting and communication support](#) which should be consulted for more detail.

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1.0 Purpose

The purpose of this policy is to ensure that people whose first language is not spoken English are able to access all NHS Lothian services and receive high-quality health care.

This policy should be made available in all clinical areas.

It is the responsibility of all healthcare professionals to consult this document when there is a language or communication difference between them and their patient. Throughout this document the term healthcare professional has been used when referring to doctors, nurses, Allied Health Professionals (AHPs), dentists and others.

2.0 Policy statement

2.1 Patients' Rights

Patients have a fundamental legal, ethical and moral right to determine what happens to their own bodies under the Equality Act 2010. To exercise this right, healthcare professionals should establish effective communication, not just with the patient but with their significant other(s).

NHS Lothian is committed to providing excellent health care services for all users to ensure that all patients and public can access services effectively and efficiently. The potential for misunderstanding and clinical error, and subsequently poor-quality care, is greater when means of communication, language and culture differ. Poor communication contributes to non-compliance with treatment, cancelled appointments, repeat admissions, delayed discharge and exposure to litigation for negligence and errors. Illness and other stressful healthcare situations can have a negative impact on anyone's ability to communicate effectively but especially that of someone whose first language is not spoken English. A person who might usually cope well with English may find it more difficult to communicate or may revert to their first language in stressful situations. Similarly older people with dementia may revert to the language they spoke as a child.

Patients without an effective communication method with a healthcare professional may have difficulties to do the following without an interpreter:

- Give informed consent (not legal without proper explanation).
- Ask questions or seek assistance.
- Have awareness of what services are available to them.
- Use medication properly or follow care plans.
- May come from cultures with a different understanding of health and illness.
- Understand how to use NHS services.
- Understand their rights and responsibilities.

This is why the need for high-quality and efficient communication support is of the utmost importance and should be understood by all NHS staff, so the appropriate service is in place for a delivery of care that is patient-centred.

2.2 Phone First

NHS Lothian operates a remote first policy for interpreting services. Phone interpreting should be used for all appointments under 45 minutes, unless there is a clinical need for an interpreter, as well as all routine and non-complex appointments. Please see the [guidance on the Intranet](#) which provides more information on when remote should be utilised and situations which may necessitate face-to-face interpretation.

2.3 Unqualified Interpreters

The use of untrained staff, friends, other patients, family members (especially children) or automated tools is not acceptable unless there are exceptional circumstances, as this creates a risk in breaching patient confidentiality, amongst other risks. Exceptional circumstances in this sense would be if there is a risk to patient safety outweighs the risk of using an unqualified interpreter.

Relatives and carers may not be trained interpreters and while they may be able to communicate in a social situation there is no guarantee they have the level of proficiency required to interpret in a health care situation. There are serious risks that information is filtered either deliberately or because the family member or carer cannot interpret accurately. The same applies to the use of automated tools. Further guidance on the risks of using untrained staff can be found on the Intranet and in the national policy.

2.4 Additional Materials

The policy is accompanied by a variety of materials available on the NHS Lothian intranet which describe the services available within NHS Lothian, including how to request a [translation](#) or [book an interpreter for a patient](#), [how to use the on-demand phone service](#) and [how to work with interpreters](#). ITS is also building up a series of [Case Studies](#) on the Intranet page to provide staff with an insight into a range of scenarios.

3.0 Scope

This policy relates to all patients receiving care within NHS Lothian and all NHS staff.

Information contained within this document is also applicable to indirectly employed staff whilst conducting business within NHS Lothian e.g., conducting research and the general public who have an interest in interpreting and translation services within NHS Lothian.

4.0 Definitions

Interpreter: An interpreter is defined as a professional who orally transmits a spoken or signed message from one language to the other. This includes British Sign Language, which is a recognised language in its own right. This can be either face-to-face, by telephone or video.

Chuchotage: a form of interpreting where the interpreter stands or sits alongside a small target audience and whispers a simultaneous interpreting of what is being said. The term chuchotage is French for “whispering”.

Consecutive interpreting: is when an interpreter waits for the speaker to pause before interpreting. The interpreter may interpret after every sentence or may interpret several sentences at once.

Translation: Translation is a transmittal of written text from one language into another, including Braille and British Sign Language.

Sight translation: is an interpreting method where the interpreter reads a text in one language and simultaneously interprets it into another one. This can be used for documentation, for instance a leaflet or a flyer.

Transcription is the process of producing a written copy of something, including the representations of speech or signing in written form.

British Sign Language (BSL) is the first, only, or preferred language of many people who are deaf. It is a registered language in its own right, with its own grammar and syntax. It is a visual-gestural language which bears little resemblance to English. Translation of a document into BSL requires the production of a BSL video version to ensure that it is accessible to people who are Deaf who use this language. BSL videos should also include subtitles or closed captions as standard.

Tactile BSL is used by people who are Deafblind. It is a form of British Sign Language that uses touch (hands on) as a medium to communicate.

Lipspeaker: is a hearing person who has been professionally trained to be easy to lipread. Lipspeakers reproduce clearly the shapes of the words and the natural rhythm and stress used by the speaker.

Electronic and manual notetakers work with people who are deaf, hard of hearing, or who are comfortable reading English. The electronic notetaker types a summary of what is being said on a computer and this information appears on the deaf person’s screen. Please note: not all deaf people are able to read or understand written English and, if they can, it may not be their first or preferred language; BSL interpretation should therefore be used.

Deafblindness (Dual Sensory Impairment): the term defines people who are Deafblind and can neither see nor hear to the extent that their communication, mobility and access to

information is significantly impaired. Some Deafblind people have enough sight to use BSL interpreters, others do not and use Tactile or Manual Sign.

Relay Interpreting: the term defines a process used for people who may not be fluent in a certain language, particularly in relation to sign language. This may be because they are a foreign national who uses a different sign language or because of cognitive issues, such as learning disabilities or dementia. A BSL interpreter will interpret to a relay interpreter, who will often be a deaf person, who then in turn communicates to the individual.

5.0 Implementation roles and responsibilities

5.1 NHS Lothian Board

NHS Lothian Board is responsible for ensuring that there is access to a trained and professional interpreting and translation service.

5.2 Executive Lead

This policy and procedure has both Clinical and Information Governance aspects. The Deputy Director of Nursing has strategic leadership of this policy.

5.3 Interpretation and Translation Service Manager (ITSM)

The ITSM will be responsible for monitoring and reviewing the policy and associated protocols and procedures. The ITSM will also provide reports on a regular basis to the Deputy Director of Nursing on usage, expenditure, quality and patient satisfaction.

5.4 Managers

As with other areas of clinical and corporate governance it is the responsibility of the senior manager of each Clinical Management Team or Community Health Partnership to ensure that this policy is implemented correctly. He or she might devolve responsibility to an appropriate manager. The designated manager will be responsible for ensuring that the policy is correctly followed and for liaising with the Interpreting and Translation Service Manager (ITSM) for interpreting and translation support.

Managers are responsible for ensuring that staff are aware of and implement this policy, and for bringing any issues which may affect implementation to the Assistant Director for Nursing Workforce and Business Support.

5.5 All NHS Lothian staff

It is the responsibility of all staff within NHS Lothian to ensure that all patients with communication needs for whom they are providing services receive the appropriate support. This includes recording language and support needs, arranging interpreters and providing translations as appropriate in accordance with this policy and the associated guidelines which will be made available on the Intranet.

All NHS Lothian staff are responsible for implementing the policy effectively and for bringing any issues which may affect implementation to their manager. They also need to:

- Recognise when an interpreting or translation need exists.
- Assess which language is being spoken (using the [Language Identification Card](#))
- Assess and make provision for that need.
- Liaise with the Interpretation and Translation Service to arrange for an interpreter or communicator or for translated information, or access the on-demand phone service directly. It is not the responsibility of the patient to book an interpreter or a translation.
- Accurately record the interpreting or communication support required for the patient, giving essential detail such as the language required, and any patient wishes into TRAK to ensure continuity of support and avoid delays in appointments. There are ongoing plans to improve the recording and visibility of patients' communication requirements within TRAK.

6.0 Associated materials

[Form to gain access to the online booking system](#) (available on the ITS pages of the NHS Lothian intranet)

[Using the phone service](#) (available on the ITS pages of the NHS Lothian intranet)

[Language Identification Card](#), (available on the ITS pages of the NHS Lothian intranet)

[ITS Instruction Guide](#) (available on the ITS pages of the NHS Lothian intranet)

[Remote and Face-to-face Guide](#) (to be made available on the ITS pages of the NHS Lothian intranet)

[Instructions to use thebigword \(TBW\) for Hospitals](#)

[Instructions to use thebigword \(TBW\) for Home Visits](#)

[Instructions to use thebigword \(TBW\) for Dentists and Opticians](#)

[Instructions to use thebigword \(TBW\) for GPs](#)

[Presentation - How to Work with an Interpreter](#)

7.0 Evidence base

There is a legal requirement in the UK to ensure that individuals whose first language is not English are not disadvantaged in terms of access to, and quality of health care received (Race Relations (Amendment) Act, 2000 and Scotland Act (1998)). All patients have a fundamental legal, ethical and moral right to determine what happens to their own bodies under the Equality Act 2010.

The British Sign Language (Scotland) Act 2015 is an act of the Scottish Parliament to promote the use of British Sign Language, including by making provision for the preparation and publication of national plans in relation to British Sign Language and by requiring certain

authorities to prepare and publish their own British Sign Language plans in connection with the exercise of their functions; and to provide for the manner in which such plans are to be prepared, and for their review and updating. British Sign Language is now protected as a Native Language and put on an equal footing with Scottish Gaelic.

Legal responsibilities are embedded in Scottish, UK European and International law.

[NHS Scotland Interpreting, Communication Support and Translation National Policy](#)

[NHS Scotland Competency Framework for Interpreting](#)

[NHS Code of Practice on Protecting Patient Confidentiality, 2002](#)

[EU Directive 2016/2102 on the accessibility of the websites](#)

[See Hear – A Strategic Framework for Meeting the Needs of People with a Sensory Impairment in Scotland](#)

[Getting It Right For Every Child \(GIRFEC\)](#)

[Education \(Additional Support for Learning\) \(Scotland\) Act 2004](#)

[British Sign Language \(Scotland\) Act 2015](#)

[Gaelic Language \(Scotland\) Act 2005](#)

[Human Rights Act 1998](#)

[Disability Discrimination Act 2005](#)

[Race Relations Act 1976 amended 2000](#)

[European Charter for Regional or Minority Languages 1992](#)

[UN Convention Relating to the Status of Refugees 1951](#)

[Convention on the Rights of Persons with Disabilities 2007](#), United Nations

[Equality Act 2010 \(Specific Duties\) \(Scotland\) Regulations 2012](#)

[Equality Act 2010, Chapter 15](#)

[Equality Act 2010, Chapter 15, Schedule 3 \(correction\)](#)

[Patient Rights \(Scotland\) Act 2011](#)

[Data Protection Act 2018](#)

[Adults with Incapacity \(Scotland\) Act 2000](#)

[The Children and Young People \(Scotland\) Act 2014](#)

8.0 Stakeholder consultation

This policy will be highlighted in relevant groups.

Feedback and consultation with interpreting team is ongoing, as well as with staff members. A new feedback process is now in place to provide regular assessments of interpreting staff and engage with NHS Lothian staff members accessing the service about their experiences and expectations. The Interpretation and Translation Service conducted an Impact Assessment with members of the team and service users in 2023. Regular meetings with

managers and service users will be conducted to ensure ITS meets the needs of patients and staff. This policy was also placed on the NHS Lothian Consultation Zone for a period of 4 weeks to give all NHS Lothian staff an opportunity to provide feedback.

9.0 Monitoring and review

This policy will be reviewed every three years unless there are any changes in our processes or in the legislation before this date.

The Interpretation and Translation Service Manager will ensure that key staff are made aware of the revised version of the policy and the ITS team will refer to policy and guidance documents when carrying out daily service coordination.

This policy will be monitored through monthly reports, feedback from staff, DATIX investigations and Patient Experience feedback. ITS service will also be preparing and updating a series of more specific guidance documents and case studies which will be available on the Intranet. These will provide more details on NHS Lothian's approach to specific situations.