

## ENGLISH INTERPRETATION & TRANSLATION POLICY

### Meeting the Needs of People with Limited English Proficiency

#### 1) Purpose

The purpose of this document is to set out a policy to ensure that people who have limited ability to communicate in English are nonetheless able to work or visit our sites and communicate effectively.

#### 2) Introduction

IMS is committed to providing excellent services. We want to ensure that all patients and public can access our services effectively and efficiently. Within this policy the term **Limited English Proficient** is used. This is defined as being unable to speak, read, write or understand English at a level that permits an individual to interact effectively with all other workers, employers and visitors to sites. This term highlights the fact that people communicate at different levels within different contexts. The ability to communicate adequately in one context is no guarantee that an individual can communicate adequately in another. Communication presents a major barrier for people who are Limited English Proficient due to impairment or because their first language is not English. Equally, communication difficulties present IMS staff with barriers to the delivery of safe, effective work. This has major implications for quality, governance and risk management.

#### 3) Scope

This policy applies to all IMS staff, in all settings where IMS provides services in all contracts where IMS supplies services via a third party unless specific contract specifications apply.

#### 4) Guiding Principles

Where there are communication difficulties staff have a right to communication support. The responsibility to ensure effective communication lies with IMS staff. Communication support should be provided using approved interpreters and translators.

#### 5) Legal and Ethical Issues

IMS has legal, ethical and business responsibilities to provide effective communication support. Ethical responsibilities lie in ensuring people are treated equally and are fully informed and involved.

Management responsibilities lie in ensuring effective use of resources. Poor communication contributes to non-compliance, delays and exposure to litigation for negligence and errors.

Illness and other stressful situations can have a negative impact on anyone's ability to communicate effectively but especially that of someone whose first language is not 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.

People who are Limited English Proficient:

- may not be able to give informed consent.
- may not be able to ask questions or seek assistance.
- may not be aware of what services are available to them.
- may not be able to follow instructions properly or follow plans because the information is in English.
- may come from cultures with different understandings.

## 6) Policy Implementation and Service Management

It is the responsibility of the senior manager of each Team or Site 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 lead for interpreting and translation support.

The lead for interpreting and translation support will be responsible for monitoring and reviewing the policy and associated protocols and procedures. The lead for interpreting and translation support will report to the Associate Nurse Director (Strategic Development) on interpreting and translation usage, expenditure and quality issues. The lead will provide advice to IMS staff in relation to interpreting and translation support and will liaise with the designated managers.

It is the responsibility of all staff within IMS to ensure Limited English Proficient people for whom they are providing services receive the appropriate language support. This includes recording language and support need, arranging interpreters and providing translations as appropriate and in accordance with this policy.

## 7) Funding of Services

Interpreting services are centrally funded through IMS. This funding only covers interpreting services provided by or arranged through Interpreting and Translation Service. These services include the telephone interpreting service and communication support for Deaf and Deafblind patients. The funding is provided to support visitors/staff communication in works situations only. Translation of written records, professional to professional communications and letters from or to employees/visitors is funded from this allocation.

There is currently no central funding for any other translations. Any other translations must be met from the requesting departments own budget. Use of any language service providers other than Interpreting and Translation Service, or those arranged through Interpretation and Translation Service will not be funded from the central allocation unless previously authorised by the Associate Nurse Director, Strategic Planning. The costs of unauthorised use of other providers will need to be met from the requesting departments own budget.

## 8) When an Interpreter should be used

Other than for simple care and comfort situations an interpreter should be used when providing services to a Limited English Proficient employee/visitor to site. An **approved interpreter**<sup>1</sup> must be used where effective communication is critical to outcomes such as:

- Site inductions & Tool Box Talks.
- Site Meetings.
- Explanations of Procedures/Instructions.

Interpreting may be provided by face to face interpreting, or via telephone or video interpreting. The decision as to which means of interpreting is appropriate to use lies with the professional judgement of the professional. Generally using telephone interpreting should be regarded as the first option except in the following circumstances:

- Interpreting session lasts more than 30 minutes.
- When individual uses non-verbal communication such as British Sign Language, DeafBlind Manual, Moon, Makaton etc.
- When individual has a communication, cognitive or learning disability which would make telephone interpreting difficult.
- Where conversation needs to be recorded for legal reasons.
- Ethically difficult or challenging situations.

An approved interpreter refers to an interpreter provided by ITS or other professional interpretation service or a bilingual staff member assessed as having the equivalent skills to ITS interpreters.

## **9) When a Translation should be used**

Translations should be used for critical communications such as:

- Professional to professional letters
- Records
- Letters to or from employee
- Transmission of these and similar documents for translation between IMS and translation services must adhere to Data Protection and Information Governance requirements
- Electronic transmission must be via secure inter-agency routes
- Hard copy transfers must be enclosed in lockable, traceable tamper-proof bags

Interpretation and Translation Service is the approved provider for translation services. If a worker is Limited English Proficient use of translations should be considered for any leaflets or other information normally issued as part of our services.

A translation is not a substitute for an interpreter. Simply giving a translated document should not be considered as meeting the obligation to give communication support. If an interpreter is needed then one must be provided. As with spoken communication, staff must satisfy themselves that the individual understands the written document. This may require the assistance of an interpreter. The Limited English Proficient person may not be able to read their language. They may speak one language but read in another. Some spoken languages do not have a written form. When translated documents are developed, consideration should be given to the cultural appropriateness of the text and any graphics.

## **10) Monitoring**

The aim of monitoring is to ensure that across IMS efficient cost-effective interpreting and translation services are provided for all our employees, visitors and workers on site. Information collected from monitoring will be used to improve our services. Any feedback from staff is welcome.

Where English is not the individual's first or preferred language this must be recorded. This data is essential to ensure all individuals receive the communication support they actually need. This data will be cross-matched with communication support requests to identify unmet needs and gaps in support delivery. Data will also be gathered through an audit and incident reports.

The lead for interpreting and translation support will monitor the expenditure on interpreting and translation services across IMS. Usage patterns across IMS will also be monitored and analysed.

Interpreting and Translation Service will provide the necessary data on a monthly basis. There will be an annual review of the quality of the interpreting services to ensure value for money and that individual's needs are being addressed. Comments or suggestions to improve interpreting and translation services should be directed to the lead for interpreting and translation support.

### 11) Future Developments

This policy will be kept under review and will be reviewed at a minimum every three years. Revisions will be made in the light of changes in local demographics, technology, service delivery models, national policy and legislation.

Signed.......... (Charles Meadows)      Date..........