Speech Pathology

Interpreting and translation requests

Suggestions for clinicians

The following is a guide for clinicians to optimise interpreting and translation bookings. Booking processes will vary between workplaces and locations.

Interpreter bookings

Check whether bookings are routinely made by your workplace’s administration staff, clinicians or Interpreter Services team (if applicable)

Some workplaces may employ on-site in-house interpreters, allowing for greater availability and flexibility

**Regardless of who makes the booking, provide the following information:**

* Cross-check language, dialect and ethnicity in client records, and confirm with family if possible
* Specify
	+ Level of accreditation (accredited Level 3 interpreter or higher where possible)
	+ Type (on-site, phone, videoconference)
	+ Gender preference
	+ Ethnicity
	+ Full name of any preferred and/or non-preferred interpreter (if client has a preference)

If clinicians need to source an interpreter independently**\***: <https://www.naati.com.au/MyNaati/OnlineDirectory>

For long-term inpatient stays, work with the client/family to timetable a consistent daily interpreter booking.

**\*In larger organisations, administration/Interpreter Services teams may facilitate this process. Check your workplace procedures.**

Length of bookings

* Interpreter-mediated consults take longer than standard consults. Allow enough time to complete all planned activities, including interpreter briefing and debriefing.
* Consider adding more time for multidisciplinary sessions, or if other professions may also wish to work with the interpreter.
* Standard booking time is usually 1 hour. Extra time can be added in 15-minute minimum increments.
* If a session has begun and you need more time, ask if the interpreter can stay for longer. Interpreters can contact their service provider to extend the booking. Ensure the interpreter has the amended finish time on their time sheet.
* Consider client/family’s preference for extend sessions vs. additional sessions
* In clinics with back-to-back sessions:
	+ Book the first appointment in a clinic and add the extra time to the start of the clinic e.g. start at 9am instead of 9:30am, OR book the last appointment in a clinic and add the extra time to the end of the clinic e.g. finish at 12:15pm instead of 12pm.
	+ Check with your team about grouping longer interpreter sessions in one clinic – e.g. two x 90-minute interpreting sessions instead of three x 60-minute standard sessions in one clinic.
	+ If longer bookings cannot be achieved, book a follow up session as soon as possible.

Time left over in interpreter sessions

* If the client does not arrive 10 minutes after scheduled time, complete phone call with interpreter to check attendance and complete rescheduling if required.
* If you filmed a session, review the video with the interpreter.
* If the interpreter is competent to provide sight translations (see ‘Sight translations’ below)
	+ Provide the family with a written summary of information discussed.
	+ Discuss and obtain written translations of key terminology used. This can be used as an educational resource/briefing tool for other interpreters of the same language.
* Discuss any miscommunications or cultural factors that impacted the session (**general** information about language and/or culture) with the interpreter.
* Ask interpreter to help negotiate the next appointment/session time with the client/family and write this down for the family.

Formal translations

**\*In larger organisations, administration/Interpreter Services teams may facilitate this process. Check your workplace procedures.**

1. Check if client/family can read in their preferred language, and the specific *written* language required
2. Prepare document(s) in plain English (remove jargon)
3. Find a translator independently**\***: <https://www.naati.com.au/MyNaati/OnlineDirectory>
4. Filter results by country, state, postcode and surname
5. Check credentials
6. Contact translator(s) by phone, email or personal website
7. Obtain quotes and turnaround times from providers and finalise translator choice
8. Request to discuss and clarify document(s) for translation in more detail wherever possible (e.g. offer glossaries and terminology definitions)
9. Once translation is complete, if any issues are identified (e.g. by clients reading the translation), resolve this with the translator. If issue unresolved, seek second opinion from another translator.

Sight translations during interpreter sessions

* Verbal translation of written document
* Must take place in the presence of a speech pathologist
* Request interpreter who is also a **certified translator** or **certified (Level 3) interpreter**
* Add enough extra time to interpreter booking
* Prepare document in **plain** English
* Length: **200-300** **words** maximum
* Do **not** ask for sight translations of reports, complex procedures, health conditions, treatment options and risks, and participation in clinical trials, nor completion of consent forms on behalf of client
* Give interpreters handouts/written info before the session.
* Scan a copy of the English document for the client’s file and record date of sight translation.

For more information

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This handout is part of the [*Working effectively with interpreters and translators*](https://www.speechpathologyaustralia.org.au/SPAweb/Document_Management/Projects/elearning_for_speech_pathologists.aspx) e-learning package

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