Interpreter sessions

Checklists for clinicians

Please use the following checklists during interpreter sessions to meet briefing, debriefing, medicolegal documentation and reporting requirements.

Interpreter session details

Date:

Clinician name(s):

Patient name and Identifier:

Interpreter full name:

Language/dialect:

Ethnicity:

Aboriginal: Y/N

Torres Strait Islander: Y/N

Gender:

Interpreter booking ID:

Interpreter level of accreditation:

Briefing

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| **Acknowledge and Introduce**   * Interpreter’s full name * Check that language, dialect, ethnicity and geographical location matches that of the client (e.g. Dari can be spoken in Afghanistan and Iraq) * Any other languages spoken (accredited and non-accredited) * All clinicians’ names and roles * Interpreter’s previous experience working in healthcare and with the specific types of professionals in the room |
| **Duration**   * Length of the session +/- possibility of extended session or subsequent session |
| **Explanation**   * **S**ituation: Type of session (e.g. case history, assessment, therapy, combination) * **B**ackground: Health, communication and social background (including migrant vs. refugee vs. asylum seeker background) * **A**ssessment: Tasks, resources, purpose, interpreter’s role in each activity * **R**ecommendations:   + Expectations for interactions   + Confidentiality and professionalism   + Interpreting style (consecutive vs. simultaneous vs. whispered)   + Signal/procedure for pausing/resuming interpreting and resolving miscommunications   + Seating/standing arrangements   + Specific terminology for the session |
| **Thank You**   * Consent for audio/video/photo recordings * Questions * Conflicts of interest * Other potential ethical issues * Opportunity for interpreter to decline assignment |

Adapted from Studer Group (2019) AIDET® Patient Communication and Institute for Healthcare Improvement (2016) SBAR: Situation-background-assessment-recommendation.

Debriefing

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| * Content of session * Interpreting issues and clarification * Ethical issues * Traumatic/emotional content (and appropriate follow up) * Further learning opportunities |

Documentation

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| At a minimum:   * Interpreter’s full name * Specific language/dialect * Consents obtained via interpreter * Consents for audio/video/photo recordings of the interpreter (if applicable) * If interpreter not available, full name of person interpreting * Family members who have declined an interpreter despite clinician request   If available:   * Booking ID * Level of accreditation   If applicable:   * Conflicts of interest * Conflicting information * Factors impacting validity of assessment * Ethical and professional issues   Scan to client’s records:   * This checklist * Photocopy of interpreter timesheet (clinician to sign) * Any sight translated English documents |

Reporting issues

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| Issues directly attributable to an interpreter/translator request, booking or session:   * Speak directly with the interpreter to discuss the issue and reach a resolution * Flag the issue with your line manager and clinical team * If the issue is unresolved, email [CHQ-InterpreterServices@health.qld.gov.au](mailto:CHQ-InterpreterServices@health.qld.gov.au) * Full name of interpreter * Specific language/dialect * Booking ID * Session date, time * Specific issue (refer to relevant [AUSIT](file:///C:/Users/BaylyLu/Desktop/SP%20training%20handouts/AUSIT%20Code_Of_Ethics_Full.pdf) or [ASLIA](file:///C:/Users/BaylyLu/Desktop/SP%20training%20handouts/ASLIA-Code-of-Ethics.pdf) Code of Ethics)   All issues, risks, potential harms and actual harms related to interpreting, translation, language, culture or communication difficulties as a result of these:   * Flag the issue with your line manager and clinical team * Report via Riskman |

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