

Good Practice in Caring for the Patient with limited English

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Professional Guidance:

GMC Decision making and Consent



Patients need relevant information to be shared in a way they can understand and retain, so they can use it to make a decision. To help patients understand and retain relevant information you should:

Use an interpreter or translation service if they have difficulty understanding spoken English

The NMC states that 'nurses must take reasonable steps to meet people's language and communication needs'



The Basics: Speaking

Speak slowly with longer pauses:

- Enunciate as you normally would, but add longer pauses
- Learn to be comfortable with longer periods of silence while your client is processing your words
- Do not talk louder – just more slowly
- Be patient – your clients may need time to find the right word

Rephrase – Don't just repeat yourself:

- Rephrase in clearer or simpler language – you weren't understood the first time, so try a different tactic.
- Remember that repeating yourself can sound like impatience





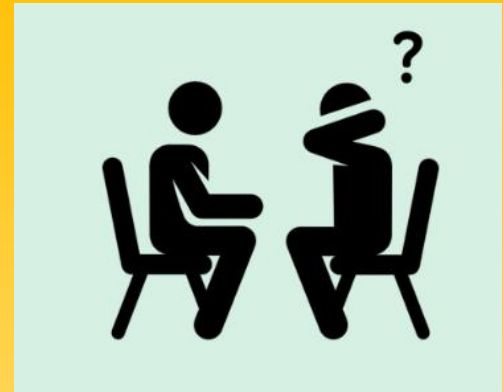
Speak in specific and simple English:

- Don't use jargon or idioms or potential culturally incongruent metaphors.
- Avoid using double negatives and compound words like "can't". Often the "n't" is not heard. ie CAN is what is heard
- Focus on clear and simple nouns and verbs.

Learn to be comfortable with lack of eye contact when speaking:



The Basics - Listening



- It's okay to ask your patient or interpreter to speak more slowly so you can understand.
- Remember to communicate patience and respect with your voice and facial expressions.
- Don't say you understand the patient/interpreter when you truly don't.



Why use an interpreter?



- To provide effective communication.
- To empower patients and families by providing information
- To promote active participation enabling people to make informed choices.
- To personalize care to be culturally sensitive; interpreters can be a useful source of cultural knowledge.
- To ensure care is appropriate, equitable and effective.
- To comply with Equality Legislation



Did you know?

- It is **your duty** to let people know that they have the right to an interpreter free of charge
- It is **your responsibility** to arrange for an interpreter to be present at any appointments where language assistance is needed
- You should **record** a patient's language in case notes



Does my patient need an interpreter?

How to find out

Ask non-judgmentally:

- Do you speak a language other than English at home?

If the answer is yes, ask :

- How well do you speak English?

If the person says anything other than 'very well' you should arrange for an interpreter.

What take note of

Avoid asking:

- You won't need an interpreter will you?
- Do you speak English?

People often overestimate their fluency levels.

Patients may think they have to arrange the interpreter themselves



ABIDE: A structure for an effective consultation in end of life care

Arrange

Brief

Interview

Debrief

Evaluation



A: Arrange the interpreter

- Know the process in your organisation for arranging an interpreter (usually a Trust policy with e-referral form or contact details for phone booking)
- Identify the language required
- State date, time, location and gender of interpreter required
- Give a brief overview of what the context and what the consultation may include of an emotionally sensitive nature.

NRPSI National Register of Public Service Interpreters

1994-2019 25 YEARS

www.nrpsi.org.uk

Language Identification Chart by Dr. Lucila Makin/APCI

I speak English	English																
Unë fllas shqip	Albanian	Mind puhun suomea	Finnish	Aš kalbu lietuviškai	Lithuanian	Wahan ku hadaa	Somali										
Հայերէն լեզուսիրտ	Armenic	Je parle français	French	Jas zboruvam makedonski	Macedonian	Hablo español	Spanish										
أنا أتحدث اللغة العربية	Arabic	Ich spreche Deutsch	German	Saya Bicara Bahasa Malay	Malay	Ninosema Kiewahili	Swahili										
Мен сөзбөм дилимиз азыркычарам	Azeri	Μιλώ τα ελληνικά	Greek	Mo koze créole	Mauritian Creole	Jag talar svenska	Swedish										
আমি বাংলা বলি।	Bengali	ᲙᲗ ᲙᲗ ᲙᲗ ᲙᲗ ᲙᲗ ᲙᲗ	Georgian	Eu vorbesc Moldovenește	Moldovan	Tagalog ang aking salita	Tagalog										
Govorim bosanski	Bosnian	Na yla Hausa	Hausa	ᠮᠤᠮᠠᠨᠤᠯᠤᠯᠤᠰᠤ	Mongolian	தமிழ் மொழியில்	Tamil										
Британски језик	British Sign Language	אני מדבר עברית	Hebrew	ਥਾ ਜਾਮਾਨੀ ਬਾਮਾਵਲ 1	Nepalese	ฉันพูดภาษาไทย	Thai										
Аз говоря български	Bulgarian	ਬਿੰਦੀ ਬੋਲੀਆਂ ਹੈ	Hindi	Jeg snakker norsk	Norwegian	ᠲᠢᠨᠯᠤᠰᠤ ᠤᠯᠤᠰᠤ	Tigrinya										
မြန်မာ ဝေါဟာရ	Burmese	Ἐν μαγνηται βεσπέλεκ	Hungarian	Say salita: et Pangasinan	Pangasinan	Ndi ngakula Tshiluba	Tshiluba										
Parlo català	Catalan	Saya bicara bahasa Indonesia	Indonesian	Say salita: et Pangasinan	Pangasinan	Ben Türkçe konuşuyorum	Turkish										
我講廣東話	Cantonese	Indonesia		I sadi speak pidgin or broken english	Pidgin English	Mekan Twi	Twi										
我講客家話	Hakka	Anam asu igbo	Igbo	Mówię po polsku	Polish	የገንዘብ ማሳካሪያው ነው	Ukrainian										
我说普通话	Mandarin	Ti sara: ket Ilocano	Ilocano	Eu falo português	Portuguese	Мен язабена гапирман	Uzbek										
Govorim hrvatski	Croatian	Parlo Italiano	Italian	زۇ پښتو خبری کولای شم	Pushto	سۆزگۆرۈش ئۆتۈم	Urdu										
Mluvim cesky	Czech	私は日本語を話す	Japanese	سۆزگۆرۈش ئۆتۈم	Punjabi	Ti si nà tiéng Vêl	Vietnamese										
Jeg taler dansk	Danish	Мен казашша дилемени	Kazakh	ᠮᠤᠯᠠᠮᠤ ᠤᠯᠤᠰᠤ	Punjabi	Mo le so Yoruba	Yoruba										
من قرى صحبتت مي كلم	Dari	Nvuga kinyarwanda	Kinyarwanda	Eu vorbesc limba Română	Romanian												
Ik spreek Nederlands	Dutch	나는 한국어를 읽힌다	Korean	Я говорю по-русски	Russian												
Ik spreek Vlaams	Dutch /Flemish	Kurmançî zimanê min e	Kurdish Kurmanji	Говорим српски	Serbian												
Ma räägin Eesti keelt	Estonian	حەو بە ئەوەی هەرێمان ههتاڵێ ههتاڵێ	Kurdish Sorani	ᠮᠠᠨᠤᠯᠤᠰᠤ ᠤᠯᠤᠰᠤ	Sinhalese												
Medoa Ewegebe	Éwé	Es runđju lahiski	Lahian	Ndino tauro Shona	Shona												
من فارسی صحبتت مي كلم	Farsi	Ngai natibaka Lingala	Lingala	Hovorim po slovensky	Slovak												
				Govorim slovenski	Slovenian												

Discussions with interpretation take longer so allow sufficient time



B: Briefing the Interpreter

Meet with the interpreter before the consultation. The briefing should include agreement about the nature of the interview and respective roles during the interview. It is difficult to solve problems during the interview



Consider the following aspects:

- The key tasks for the consultation and what you hope to achieve
- Decide how to work together. Is the interpreter to take a passive or active role?
- The terminologies that might need to be explained (such as palliative care, hospice, dying) and how this can be done sensitively but unambiguously. Make sure the interpreter understands concepts and services
- Acknowledge potential emotional impact on interpreter
- Give the interpreter information regarding the family
- Ask the interpreter for suggestions on any etiquettes or social observances. Are there elders in the family that need to be addressed first?
- How will the presence of some members of the family affect the others?
- Agree a debrief after the consultation



I: Interview

Positioning for face to face consultations

- Maintain eye contact with the patient or family member that you are talking with. This keeps them as the central focus of the consultation and enables non-verbal elements of communication.
- Position yourself so that patient can face you both you and the interpreter at the same time

Introductions

- At the beginning of the interview allow time for the interpreter to make the introductions and explain to the patient and family his/her role and how they will do this.



D: De-brief with the interpreter

The interpreter is a valuable member of the multi-disciplinary care team and may bring differing perspectives and knowledge important for the patient's care

Consider the following aspects:

- What are the interpreter's views on the patient's understanding of the issues in the consultation?
- Were there any non-verbals?
- Are there any faith or cultural underpinnings that may help care?
- Were the roles played by both parties satisfactory?
- How has the emotional and sensitive content of the consultation affected the interpreter? Do they need any support?



E: Evaluation

Reflecting on your performance and learning is always important in terms of providing quality service and seeking ways of improving.

Consider the following aspects:

- Are you becoming more familiar with your patients' background and customs through working with interpreters?
- How does working with interpreters make you feel?
- How might you further improve your confidence?



Summary Tips

Do

- Seek the patient's consent for an interpreter and make sure the one booked is acceptable
- Identify the patient's language
- Brief interpreter about context and key content/tasks
- Make sure interpreter understands terminologies
- Expect the consultation to take longer
- Keep messages and language simple
- Debrief with interpreter

Don't

- Make assumptions about patient's language
- Use google translate for health related discussion
- Look at interpreter when speaking to patient, look at the patient
- Regard the interpreter as an automaton. They are a useful team member and may be affected by discussions



More information on supporting people from diverse ethnic backgrounds

[Supporting people from ethnically diverse backgrounds \(loros.co.uk\)](http://loros.co.uk)

e-LfH e-ELCA Resources to support equality diversity and inclusion



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