CHECKLIST

WORKING MORE EFFECTIVELY WITH AN INTERPRETER

BEFORE A VISIT WITH A PATIENT OR CLIENT WHO NEEDS AN INTERPRETER:

- ☐ Use a trained interpreter. Interpreters should be trained and hold a national certification in medical interpreting (for available languages), especially when working in a clinical setting
- ☐ Treat the interpreter as a respected healthcare professional
- ☐ The interpreter should do a pre-session with you and one with the patient to outline how the interpreting session will be conducted
- ☐ Allow extra time for the visit. Everything will be communicated at least twice (once by the speaker and once by the interpreter), unless using simultaneous interpretation
- ☐ Ensure that there are no (or minimal) distractions, such as noises that may interrupt your full engagement with the patient
- ☐ Give the interpreter a brief summary of the individual, goals, and/or procedures for the session
- ☐ Document the name and credentials of the interpreter (i.e., national certification) when available

DURING THE VISIT:



- ☐ Introduce yourself and have others in the room introduce themselves directly to the patient upon entering the room, allowing the interpreter to interpret the greeting. Do not address your introductions to the interpreter. Introductions help set the tone and establish you as the one directing the interaction
- ☐ Use first person, and ask the interpreter to do the same
- ☐ Face and speak directly to the patient. Even if the patient maintains eye contact with the interpreter, you should maintain eye contact with the patient, not the interpreter
- ☐ Observe and monitor your and your patient's nonverbal communication
- ☐ Speak clearly, being careful not to raise your voice or shout
- ☐ Use simple language and avoid medical or healthcare jargon
- ☐ Use sentence-by-sentence interpretation. Multiple sentences may lead to information being left out
- ☐ Allow the interpreter to ask open-ended questions, if needed, to clarify what an individual says
- ☐ Observe what is going on before interrupting the interpreter. Interruption may be warranted, for example, if the interpreter is taking a long time to interpret a simple sentence, or if the interpreter is having a conversation with the patient outside their role
- ☐ Ask the interpreter if they are filling in details for the patient. The interpreter may have interpreted for the patient before and be familiar with their history, or the interpreter may be filling in based on assumptions. It is important that the interpreter maintains professionalism, and that you obtain an accurate and current history each time the patient is seen

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NEAR THE END OF THE VISIT:

- ☐ Use the "teach back" method to rephrase and confirm that the patient understands your directions and recommendations
- ☐ Allow time for the patient to ask questions and seek clarifications

REMEMBER:

- ☐ Some individuals who require an interpreter may understand English well. Comments you make to others might be understood by the patient.
- ☐ If your patient declines language assistance services, ask them to sign a form that says they understand that language assistance is available and choose to decline these services
    - This form must be available and signed in their primary language, or communicated orally by the interpreter through sight translation if they are unable to read in their primary language
    - Document that the individual has been notified of these rights, as well as the patient's preferences in utilizing language access services
    - These are precautions in case of issues regarding whether certain information was provided to and understood by the patient



SOURCES:

Flores, G., Abreu, M., Barone, C. P., Bachur, R., & Lin, H. (2012). Errors of medical interpretation and their potential clinical consequences: a comparison of professional versus ad hoc versus no interpreters. Annals of emergency medicine, 60(5), 545-553.

Flores, G. (2005). The impact of medical interpreter services on the quality of health care: a systematic review. Medical care research and review. 62(3), 255-299.

Poss, J.E., & Beeman, T. (1999). Effective use of interpreters in health care: Guidelines for nurse managers and clinicians. *Seminars for Nurse Managers, 7*(4), 166-171.

Enslein, J., Tripp-Reimer, T., Kelley, L.S., Choi, E., & McCarty, L. (2002). Evidence-based protocol: Interpreter facilitation for individuals with limited English proficiency. *Journal of Gerontological Nursing, 28*(7), 5-13