Use of Interpreters

Guideline

Background
Western Australia (WA) is the most multicultural state in Australia and the WA health system welcomes expressions of culture which can be manifested by dress, habit, custom, courtesy, language and religion.

Language and cultural differences should not be a barrier to accessing health care. The WA Health System Language Services Policy (the Policy) ensures that WA health services provide interpreting and translating services. These services facilitate effective and consumer-focussed communication between consumers and carers and health service staff, and promote fundamental consumer rights such as access to high quality care, safety, respect, communication and participation.

Under the Policy, health services must provide access to appropriate interpreting for all consumers and carers who need assistance with English or who are Deaf or hard of hearing. People who need assistance with English may include Aboriginal and Torres Strait Islander people, and people from culturally and linguistically diverse backgrounds.

Interpreters must be engaged at critical points of patient care including but not limited to consent, assessment and history taking, medications, discharge care, medico-legal matters, treatment and therapeutic interventions.

Family members, children, friends or other bilingual individuals should not be used to help the patient or family communicate in English.

To determine whether you should engage an interpreter, consult the WA Health Language Services Policy and the WA Health Language Services Guidelines.

Delivery of interpreter services
In light of COVID-19, interpreter services should now be delivered remotely through telephone or video to minimise unnecessary contact with health service provider clients and healthcare workers.

Contact the Telehealth team for assistance with establishing Scopia or other methods of remote access. It is also acceptable to use telephone conferencing as available at your site.

Exceptions
The presence of an onsite interpreter may be allowed in some exceptional circumstances such as psychiatry/mental health appointments, palliative care family meetings, appointments where a procedure is being carried out or when a health care provider needs to provide a visual description or explanation to the family.
Health services are encouraged to engage interpreter services provided through the Interpreting and Translating Services Common Use Agreement (CUAITS2017). However, in circumstances where this is not possible, such as when there are no accredited interpreters in a given language, interpreters may be engaged outside of this agreement provided they are tertiary qualified and/or certified by the National Accreditation Authority for Translators and Interpreters.

It is a requirement that all visitors entering a health care environment, including interpreters, adhere to government recommendations regarding COVID-19.

Interpreters should not enter a hospital if they:

- have a fever or a cold or a flu-like illness, including symptoms such as fever, sore throat, cough, fatigue and difficulty breathing; and/or

Any person coming to a hospital who does not comply with the above requirements will be asked to leave the hospital immediately.

Interpreters should be encouraged to help keep patients safe through good personal hygiene and social distancing:

- Wash hands often for at least 20 seconds with soap and water, or an alcohol-based hand sanitiser.
- Cover coughs and sneezes with a tissue or use your inner elbow.
- Keep a safe distance (1.5m) between yourself and others and refrain from physical contact.

References


Revision History

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This document has been developed using the best available evidence and resources and is believed to be accurate at the time of publication. Information in this document is subject to change and it is essential that users of this document ensure they are accessing the most up to date online publication.

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