Justice Health and
Forensic Mental Health Network

NSW GOVERNMENT

Justice Health NSW Policy

Health Care Interpreter Services

Implementation Guide to NSW Health Policy Directive PD2017_044
Standard Procedures for Working with Health Care Interpreters

Issue Date: 04 January 2024

Together for
Healthier Tomorrows

Health Care Interpreter Services

Policy Number 1.230

Policy Function Continuum of Care

Issue Date 04 January 2024

Next Review Date 04 January 2027

Risk Rating High

Summary This implementation guide provides information on the use of Heath Care Interpreters and provides health staff with guidelines for the delivery of culturally appropriate Health Services to patients from who are not fluent in English or who are Deaf.

Responsible Officer Director, Nursing Midwifery and Clinical Governance

Applies to
☒ Administration Centres
☒ Community Sites and programs
☒ Health Centres - Adult Correctional Centres or Police Cells
☒ Health Centres - Youth Justice Centres
☒ Long Bay Hospital
☒ Forensic Hospital

CM Reference POLJH/1230

Change summary
- Update links/resources
- Align processes with NSW Health and local requirements
- Update branding
- Update HCIS contact and web details
- Updated title

Authorised by Chair, Policy Steering Committee

Revision History

#	Issue Date	Number and Name	Change Summary
8	January 2024	1.230 Health Care Interpreter Services	• Update links/resources • Align processes with NSW Health and local requirements • Update branding • Update HCIS contact and web details • Updated title

7	June 2019	1.230 Health Care Interpreter Services – Culturally and Linguistically Diverse and d/Deaf Patients	• Policy is reformatted as Implementation Guide to NSW Health PD2017_044. • Procedures and title updated to include services d/Deaf patients • Changes to reflect updates to the Ministry of Health Policy Directive
6	October 2016	1.230 Health Care Interpreter Services – Culturally and Linguistically Diverse Patients	• Updated contact details for interpreter services • Minor wording changes • Grammatical changes
5	September 2013	1.230 Health Care Interpreter Services – Culturally and Linguistically Diverse Patients	• Contact numbers and area services have been included as well as references to when interpreter services should be used in a forensic setting.
4	June 2013	1.230 Health Care Interpreter Services – Culturally and Linguistically Diverse Patients	• Revised and updated to include relevant information from the NSW Refugee Health Plan 2011-2016
3	September 2008	1.230 Health Care and Interpreter Services – Culturally Linguistically Diverse Patients	• Title change • Minor updates
2	June 2005	1.230 Health Care Interpreter Services	• Minor updates
1	September 2000	1.230 Health Care Interpreter Services	• New policy

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Printed copies of this document, or parts thereof, must not be relied on as a current reference document.

Always refer to the electronic copy for the latest version.

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1. Preface

This implementation guide provides Justice Health and Forensic Mental Health Justice Health NSW (Justice Health NSW) staff guidance with procedures aligned with the NSW Ministry of Health's Principles of Multiculturalism.

The provision of Health Services to patients who are not fluent in English and patients who are Deaf, is based on the following legislation and plan:

- Equality of access to health care services for culturally and linguistically diverse populations (the *Anti-Discrimination Act 1997*); and
- The responsibility of the health care system to respond appropriately to the specific needs of different groups in the community which include people from culturally and linguistically diverse backgrounds (*Multicultural NSW Act 2000*, and the *Mental Health Act 2007*).
- PD2019_018 *NSW Plan for Healthy Culturally and Linguistically Diverse Communities: 2019-2023* is the strategic state-wide policy for meeting the health needs of culturally and linguistically diverse consumers. The Plan aims to ensure people of culturally and linguistically diverse backgrounds have equitable access to the Health Care Services that are culturally responsive, safe and of high quality. The Plan serves as the NSW Health Multicultural Plan under the NSW Multicultural Policies and Services Program.
- PD2017_044 *Interpreters – Standard Procedures for Working with Health Care Interpreters* describes when and how to work with Health Care Interpreters to support safe, effective and clear communication between health care staff and patients, their carers and families.

It is a requirement of NSW Government that all Health Services are accessible and appropriate to the needs of patients. It is essential that professional Health Care Interpreters are engaged by health staff to be used in communication between staff of the NSW public health system and patients, families and carers not fluent in English and/or who are Deaf. This is achieved through access and provision of programs such as the *NSW Health Care Interpreting Services*, Transcultural Mental Health Service and Multicultural Health Communication Service. These services facilitate the provision of written and other communication styles to patients, and their carer/s where appropriate, in the language of their choice or in a form that can be understood.

Health care Interpreters are to be used in all health care situations where communication is essential including admission, obtaining consent, conducting assessments, counselling, explanation of treatment including associated risks and side-effects, health education, case reviews, Mental Health Review Tribunal hearings and discharge planning.

2. Policy Content

2.1 Mandatory Requirement

- Health Care Interpreters are to be engaged in all health care situations where communication is essential for patients, families and carers who are not fluent in English, including people who are Deaf and/or hard of hearing, and that cultural factors relevant to the diagnosis, assessment and management of a clinical condition are considered. Clinicians should use the Cultural Assessment Checklist located in Appendix A.

- All patients must be identified upon initial assessments in police cells, reception screening assessment or inpatient admissions as either a person who speaks a language other than English and/or are not fluent in English, and the need for a health care interpreter documented. This includes speakers of Australian Aboriginal English, people who are Deaf and users of Auslan. For correctional patients this is to be noted on a *Health Problem Notification Form* (HPNF) for adults and a *Health Problem Notification and Escort Form* (HPNEF) for adolescents, in the patient's Health Record and as an alert in the Justice Health NSW's Patient Administration System (PAS).
- Justice Health NSW staff are responsible for recording in the health record that they engaged an Interpreter. In each case, the purpose of the consultation and reason for engaging the Interpreter, the Interpreter's name and employee number, and the date and time of the attendance must be recorded.
- If no interpreter is available, or an unaccredited Interpreter is used or the patient refuses the use of an interpreter, this must be recorded in the patient's health record and an incident report must be completed using the Incident Management System (ims+).

2.2 Roles and Responsibilities

Nursing Unit Manager:

- Responsible for informing patients using an Interpreter that the patient is safe to express their health care needs.

All clinicians:

- All health workers need to respond to the expressed needs of patients, to help reduce any language or cultural barriers to health service provision and the delivery of timely and accurate information that promotes patient, family and carer independence and empowerment.
- Prior to commencing treatment, health care providers must disclose all relevant information regarding treatment, consent and any associated risks, side effects or possible adverse outcomes. This information must be communicated to patients, and where appropriate their family and carer/s, who are not fluent in English or are Deaf, through a professional Health Care Interpreter.
- Responsible for engaging Health Care Interpreter Services relevant to their location.
- Responsible for documenting use of services in the patient health record and adding relevant alerts in the electronic record system.

2.3 Assessing the need for an Interpreter

To determine whether a patient requires the assistance of an Interpreter, the health worker will need to:

- Assess if the patient can fully understand and communicate in a health care situation. Just because they can manage to give you their personal details do not assume that they have enough English to fully understand a medical situation.
- Establish if the patient would like to be assisted by an Interpreter. Stress that their services are free and confidential.

Clinicians who are uncertain whether a patient requires an interpreter should seek advice from their local Health Care Interpreter Service (HCIS).

Health Care Interpreter Services are to be engaged in all health care situations where communication is essential (NSW Health *Privacy Manual for Health Information* and *Consent to Medical and Healthcare Treatment Manual*). Consent may not be valid if it is obtained through family members, other patients, visitors or non-accredited staff acting as interpreters.

3. Definitions

Must

Indicates a mandatory action to be complied with.

Should

Indicates a recommended action to be complied with unless there are sound reasons for taking a different course of action.

Hard of Hearing

“Hard of hearing” refers to all people who have a hearing loss and use speech as their primary means of communication. It includes children who are born with hearing loss as well as people who experience deterioration of hearing at a later stage in life having always used speech to communicate

Deaf

Deaf” with a capital “D” refers to people who are born deaf or became deaf at an early age (before language acquisition). Deaf people identify themselves as part of a sociolinguistic minority group with a Deaf Culture and Community.

4. Procedures

4.1 Culturally Appropriate Care

All health staff providing clinical care for patients must be aware of cultural considerations when interacting with patients, and their family and carers where appropriate. Culturally appropriate services are to be provided, as required.

Examples of placing clinical interactions in a cultural context are:

- Communication Signals – people from different backgrounds use communication signals differently. For example, eye contact and style of speech.
- Health Care Management Plans – Treatment Plans should be developed in consideration of the patient’s cultural needs.
- Ethnic Stereotypes – ethnic stereotyping must not be attributed to groups or to any particular individual.
- Acknowledging and respecting the religion and/or cultural belief systems of patients.

When required, the SMR025.065 *Mental Health Transcultural Assessment Form* can be used during assessment or at any point of care where a patient has been identified as being from

a culturally and linguistically diverse background. The form provides a structural format for the documentation of cultural information.

4.2 Care for people who are Deaf

Many Deaf people experience barriers in accessing health care information because of limited English literacy and a lack of information being available in Auslan, apart from when Auslan interpreters are present in health care appointments.

Auslan interpreters are available through the Health Care Interpreter Service. Please refer to the flowchart in Appendix 1. For many Deaf people Auslan is the preferred primary language. An Auslan interpreter should be used as required, in line with this policy.

Lip reading and reading/writing are generally not considered substitutes for using an Auslan interpreter.

4.3 Health Care Interpreter Services (HCIS)

There are five HCIS in NSW - three metropolitan and two rural. They provide 24 hour 7 days a week onsite and phone interpreting services in over 120 languages including Auslan for people who are Deaf. Please refer to Appendix 1 for appropriate contact numbers.

All patients who are not fluent in English or who are Deaf must be informed of their right to access a professional Health Care Interpreter and be offered access to a professional Health Care Interpreter at their first point of contact with the Justice Health NSW, and on an ongoing basis as required.

A professional Health Care Interpreter must be provided when the patient, the patient advocate/family/carer or representative requests the use of a professional interpreter, even if the Health Centre staff do not consider one is required or necessary. Interpreter Services can also be initiated by health care staff.

The Justice Health NSW 'Interpreter Poster' must be displayed in every health centre clinic and treatment room and reception screening areas. It can be found on the *Patient Health Resource* section of the Justice Health NSW Intranet.

All patients who require the use of a Health Care Interpreter must be issued a Patient Interpreter Card to allow the patient to request to see a Justice Health NSW clinician and interpreter when they have a health concern. Instructions must be provided to the patients using a healthcare interpreter.

The *Translating and Interpreting Service* (TIS National) is an interpreting service provided federally by the Department of Home Affairs. The TIS National is only to be utilised if the local HCIS are unavailable at the time requested.

4.4 Patient Interpreter Cards

The Patient Interpreter Cards are aimed at improving capacity of people from non-English speaking backgrounds to request access to health care in custody.

Upon reception or as needed if a patient does not have a card, book an appointment with an Interpreter, and explain the use of the card with the patient and Interpreter present

The clinician must explain to the patient through the Interpreter that they can keep this card and present it to Corrective Services or Justice Health NSW staff if they have a health issue. Clinicians must document completion in the patient's clinical notes. It is important to ensure the patient's health summary reflects that they require an Interpreter.

Cards are ordered by contacting the Clinical Governance Unit, [redacted]

4.5 Health Care Interpreting using Telehealth and Virtual Care

Health Care Interpreter Services are available for Telehealth and Virtual Care consultations via the Health Care Interpreter Service. An interpreter can be used to provide virtual consultations, either by video or telephone. When providing virtual care either by telephone or video, always select a quiet and private place with no background noise.

When using a camera, the camera should be positioned to capture a clear view of all participants in the room. Always make a test call to check the camera, microphone and sound and know how to troubleshoot.

5. When an Interpreter is not available

Patient's health and safety may be compromised during times when an interpreter cannot be used.

When essential health information needs to be gathered and an interpreter is not available within one hour, health staff must:

- Contact the centre Nursing Unit Manager (NUM) during business hours or the After Hours Nurse Manager (AHNM) after hours to seek approval to use another patient, bilingual staff member or family member to act as an interpreter.
- Staff must be aware that this is a potential breach of the patient's confidentiality and therefore must seek consent from the patient before this can occur. The patient must be advised that only essential information will be asked and they can refuse to have a non-professional person interpret for them.
- If the patient refuses to have another patient or staff member interpret for them, this must be documented in the patient's Health Record and other means of attempting to gather essential information should be used, for example basic questions/pictograms requiring a yes or no response.
- Health staff must ensure that close monitoring of the patient is maintained until such times as an Interpreter can be accessed. This may require the patient being placed in a Health Centre observation bed or an assessment cell until an Interpreter is available to assist with fully assessing the patient and gathering accurate information.
- If a healthcare interpreter is not available, health staff must record an incident notification in ims+.

6. When a patient refuses the use of an Interpreter

When a patient declines the use of an Interpreter, health staff must:

- Explain that s/he is obliged to ensure that all communication is accurate and impartial; this includes medical information provided by the health care provider as well as information given by the patient.

- Explain that the service is free to the patient.
- Explain that all communication is confidential and private and will not be breached if an interpreter is used; and
- Encourage the use of an Interpreter with the patient and explore their reasons for refusal.

While some patients may refuse a professional Health Care Interpreter in favour of using a relative or friend, the patient must be advised that this is not suitable for meeting the legal requirements of professional interpreting.

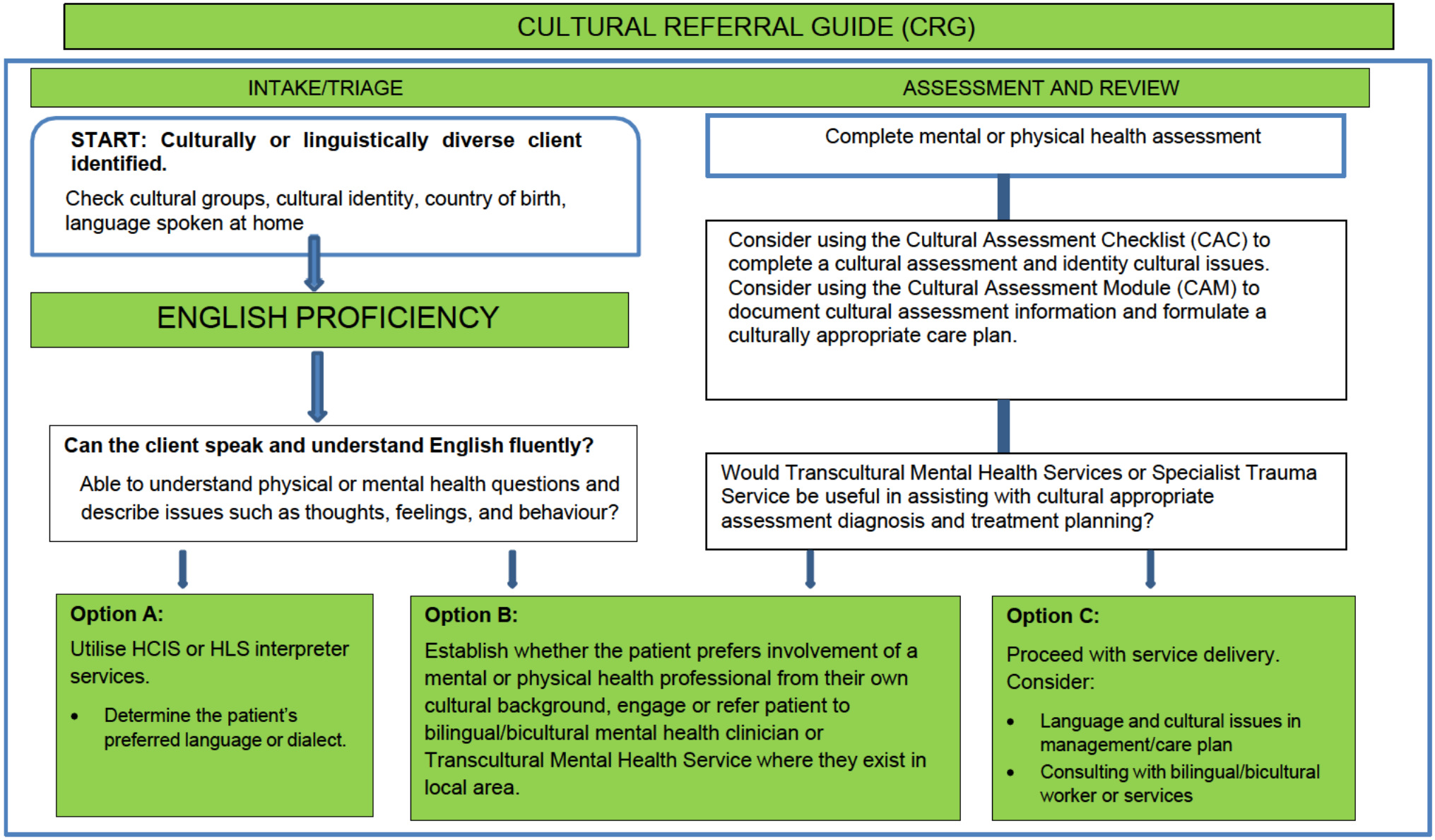
Pictograms and other resources are available from the NSW *Multicultural Health Communication Services* (MHCS) to assist with conveying this information.

When a professional Healthare Interpreter is not used because the patient has declined, the health care provider must record the details in the patient's Health Record, and complete an incident notification on ims+ including the details of the discussions that have taken place about the use of an interpreter.

7. Related Documents

Legislations	*Anti-Discrimination Act 1997* *Multicultural NSW Act 2000* *Mental Health Act 2007*
Justice Health NSW Policies, Guidelines and Procedures	*Patient Health Resource*
Justice Health NSW Forms	Health Problem Notification Form Health Problem Notification and Escort Form SMR025.065 *Mental Health Transcultural Assessment Form*
NSW Health Policy Directives and Guidelines	PD2019_018 *NSW Plan for Healthy Culturally and Linguistically Diverse Communities: 2019-2023* PD2017_044 *Interpreters – Standard Procedures for Working with Health Care Interpreters* SMR025.065 *Mental Health Transcultural Assessment Form* *NSW Health Care Interpreting Services* *Privacy Manual for Health Information* *Consent to Medical and Healthcare Treatment Manual*
Other documents and resources	

Appendix 1 – Process to follow for using Interpreters



CULTURAL REFERRAL GUIDE (CRG)

Accessing culturally appropriate health services for Culturally and Linguistically Diverse (CALD) patients and/or their families/carers

The Cultural Referral Guide (CRG) will help you to decide on and access appropriate cultural health service option(s) for your CALD patient. This guide should be used during intake/triage and assessment and review stages of care or at the earliest possible opportunity.

Cultural health service options for CALD patients

	Service Name	LHD	Contact Information
Option A Health Care Interpreting Services Health Languages Services	Health Care Interpreter Service (HCIS)	Western Sydney Nepean Blue Mountains Northern Sydney	(02) 9912 3800
	Health Care Interpreter Service (HCIS)	Northern; Hunter New England; Mid North Coast Central Coast ; Mid North Coast, Tablelands; Western & Far West ;	After hours 4921 3000 Fax 4924 6287 Call 1800 674 3000
	Health Care Interpreter Service (HCIS)	Illawarra Shoalhaven; Murrumbidgee; Southern NSW	(02) 1800247 272
	Sydney Health Care Interpreting Service (SHCIS)	Sydney, Forensic and Long Bay Hospitals , South Eastern Sydney	1800 477 233
	Health Language Service (HLS) Interpreting & Translating	South Western Sydney	(02) 8738 6088
Option B Culturally specific mental health services for clients, their family/carer and clinicians. • Services range widely from providing referral, assessment and treatment information to providing culturally and linguistically specific mental health consultations.	Transcultural Mental Health Centre (TMHC) in partnership with local mental health services.		Ph: (02) 9912 3851 or 1800 648 911
	Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS)		Ph: (02) 9794 1900 Fax: (02) 9794 1910
	National Translating and Interpreting Service (TIS) Bicultural mental health clinician or GP (if available)		Ph: 131 450 (fee for this service)
	Other:		Ph:

Option C Proceed with usual service delivery with consideration for culturally diverse presentation needs.
The Cultural Assessment Checklist (CAC) and Cultural Assessment Module (CAM) can be downloaded from the NSW Health MHOAT clinical documentation intranet site.

For more information and resources for culturally and linguistically diverse clients go to the Diversity Health Institute at http://www.dhi.health.nsw.gov.au/ Information adapted and updated from the Transcultural Mental Health Centre and NSW Health guide distributed in 2010

Appendix 2 – Patient Interpreter Cards

Instructions:

a. Upon reception screening or as needed if a patient does not have a card and is identified as requiring an interpreter, book an appointment with an interpreter, and explain the use of the card with the patient and interpreter present.
b. Explain to the patient through the interpreter that they can keep this card and present it to Justice Health or Corrective Services staff if they have a health concern.
c. Document completion in the patient's clinical notes. Ensure the patient's health summary reflects that they require an interpreter.

To order cards, contact the Clinical Governance team, [redacted]

