



How to book and work with an interpreter using videoconference

Video remote interpreting can be a cost-effective alternative to onsite or telephone interpreting.

Common reasons for using a video remote interpreter

- when an onsite interpreter is requested but is not available
- when a telephone interpreter is not a suitable option:
 - for mental health appointments
 - for appointments with deaf clients who communicate using Auslan (Australian sign language) or other sign languages
 - for hearing impaired clients that require visual cues to assist with communication
 - for appointments requiring a deaf relay interpreter or Indigenous deaf relay interpreter
- when an onsite interpreter is requested but is not available locally, which results in the payment of travel time for interpreters.



Booking a video remote interpreter

- make your request in the Interpreter Service Information System (ISIS) in advance to make sure videoconference equipment is available at both locations
- keep to the schedule as interpreters and videoconference equipment are heavily booked and used by a number of different areas
- allow for extra time in case of technical difficulties or other problems
- request your interpreter using ISIS or by contacting your district interpreter service coordinator if you do not have access to ISIS.
- in ISIS, at the *add request* screen, select *video conference* from the *service type* drop down list
- if you know the details of the videoconference unit you will be using at your end, include name and location details in the *notes to coordinator* section
- your district interpreter service coordinator will then create your booking and find a suitable videoconference unit for the interpreter to access
- your district interpreter service coordinator will contact Telehealth to ensure that the line speed is adequate (384kps is required for clinical services)
- when more than two sites are involved in an appointment (eg. the health professional is at a different location to the interpreter and different again to the client) a bridge must be booked through Telehealth. Link ups (or bridge) between more than two videoconference units are not suitable for use with Auslan interpreting due to the reduction in picture quality.

Preparation

- the requester/health professional should check that the interpreter is aware of the nature and overall aim of the session
- if possible, the health professional may have a pre-session discussion with the interpreter on how to deal with cultural and other issues that may arise during the session
- if there are forms to be completed or complex issues to be discussed, the requester/health professional should arrange for copies to be sent to the interpreter (eg. an aged care assessment) wherever possible.

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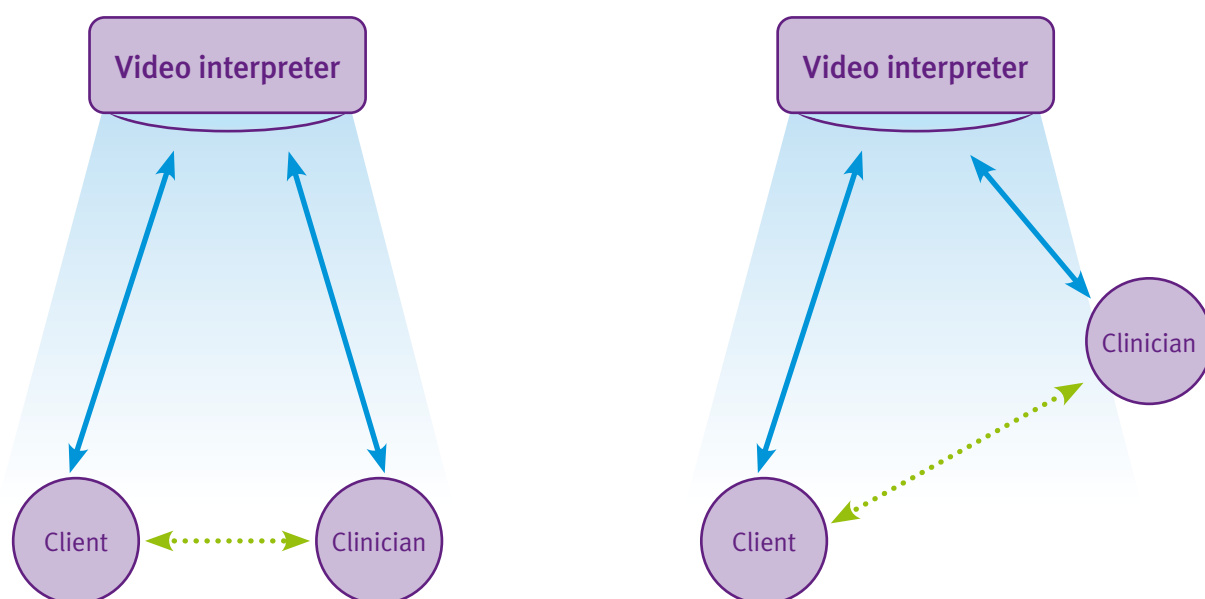
Session arrangements

- make sure you have the name, number and location of the videoconference unit the interpreter will be using
- it is the requester's/health professional's responsibility to dial-in to the interpreter's videoconference unit when you are ready to start
- check that the units at both ends are switched on and operational
- if you experience technical problems, call the Telehealth Help Desk on 1800 066 888 during business hours (8.00am – 5.00pm)
- if your clinic is running behind schedule, move the client requiring the interpreter forward in the queue to ensure the session commences as close as possible to the scheduled time. You may only have access to the interpreter and the videoconference equipment for the specific time that was originally booked
- arrange the seating to allow for easy communication (refer to diagram below)
- the ideal seating arrangement is where the client can clearly see the videoconference screen and the person conducting the session. For Auslan/sign language sessions the clinician and interpreter should sit side by side. However, this may not always be possible
- minimise visual distractions and clutter in view of the camera where possible.

The session

- dial the videoconference location for the interpreter when the appointment commences
- introduce yourself and the client to the interpreter
- sessions involving Auslan/sign language communication may need extra time for the client and interpreter to familiarise themselves with each other's communication level and signing style. There can be differences in signing across Queensland and the interpreter may not be familiar with the client's signing dialect
- work through the video remote interpreting checklist to ensure that the camera positioning, lighting and volume are suitable for all parties involved (this may take a few minutes while adjustments are made)
- make sure the client knows you are conducting the session and understands the interpreter's role
- clarify that both you and the interpreter are bound to maintain confidentiality by a strict code of ethics
- explain the purpose of the session and how it will proceed, and allow the client to raise any concerns they may have
- look at the client and speak directly to them in the first person. For example, say "How can I help you today?" instead of "Ask him/her how I can help"
- speak normally to the client and pause after two or three sentences to allow the interpreter to relay the message

Seating arrangement examples:





- Auslan interpreting is usually conducted simultaneously, speak normally and keep a moderate pace. If there are complex concepts to be discussed you may need to work out the best way to communicate these together with the interpreter
- if the person does not understand, it is your responsibility (not the interpreter's) to explain in simpler terms
- maintain your role in managing the session. The interpreter does not conduct the session
- seek the client's permission if you need to obtain cultural information from the interpreter. If you need to talk to the interpreter directly then the interpreter may explain the nature of the conversation to the person.

Finishing the session

- check that the person has understood the key messages in your session. Ask if they have any questions
- if the person requires another appointment, make these arrangements with the person while the interpreter is still in attendance
- thank the client and formally say goodbye
- you may need to have a post-appointment discussion with the interpreter. For example, you may require clarification on a language or cultural issue. It is suggested that you make a separate call to the interpreter after the client has left the room so as not to cause confusion or raise suspicion that they are being *talked about*
- debrief the interpreter if the session was emotionally taxing and clarify any questions you have from the session
- provide feedback to the health service district interpreter service coordinator if required
- remind the interpreter to turn their microphone off before you disconnect
- disconnect the call ensuring you leave your microphone off.

Deaf relay interpreting

- deaf relay interpreters are sometimes used in addition to a sign language interpreter to facilitate communication between the hearing interpreter and the deaf client
- a deaf relay interpreter may be required if your deaf client is Aboriginal or Torres Strait Islander, has minimal Auslan skills or uses a sign language from another country that the interpreter is not accredited in
- a deaf relay interpreter works closely with the Auslan interpreter and clinician to facilitate effective communication. They are bound by the same code of ethics and confidentiality requirements as all interpreters
- be aware that working with two interpreters will take more time than working with one. However, it will make it easier for messages to be clearly interpreted.

DO

- repeat and summarise the major points
- be specific (eg. *daily* rather than *frequent*)
- use diagrams, pictures and translated written materials to increase understanding
- clarify that you have been understood and that you have understood the person.

DON'T

- use metaphors (eg. *like a maze*), colloquialisms (eg. *pull yourself up by your bootstraps*), and idioms (eg. *kick the bucket*) because such phrases are unlikely to have a direct translation
- use medical terminology unless the interpreter and client are familiar with the equivalent term
- block the client's view of the screen by moving in front of the camera or screen
- wear bright or heavily patterned clothing (eg. *vivid striped or floral shirts*)
- give the videoconference remote to the client and ask them to position camera or change sound (this is your responsibility).

For more information, refer to the
Queensland Health Working with Interpreters Guidelines
on the QHEPS multicultural website
<http://qheps.health.qld.gov.au/multicultural>

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Checklist

- It is the clinician's responsibility to make the call to the interpreter

Camera/picture positioning

- Camera angle and position of **interpreter** on the screen is satisfactory with client – clear line of sight, close enough, can see clearly
- Camera angle and position of the **client** on the screen is satisfactory with the interpreter – clear line of sight, close enough. If not, make necessary adjustments
- Ask the client if they would like to see **themselves** as well as the interpreter on the screen (use the layout button on the remote) or just the interpreter

Sound/volume

- Clinician can clearly hear the **interpreter** and interpreter can clearly hear the **clinician**

Position of the videoconference unit in relation to clinician

- Client is comfortable with positioning of **clinician and interpreter** (videoconference unit) in relation to each other. The interpreter may like to take control of both camera ends to reposition the camera angle at this time

Interpreter to facilitate usual interpreting pre-interview discussion

- Interpreter and clinician** – have you ever worked with an interpreter before (video remote interpreting, Auslan, spoken language)?
- Interpreter and client** – have you ever worked with an interpreter before (video remote interpreting, Auslan, spoken language)?
- Agreement on process for moving the camera when physical examinations are required

Technical difficulties

- If at any time you (the interpreter) experience any technical difficulties please let me (the clinician) know immediately
- At the end of the session remind the interpreter to mute the microphone at their end before disconnecting the call.

Technical difficulties

Call Telehealth Help Desk on **1800 066 888** and they will assist you with any technical difficulties (eg. slower than optimum line speed, poor picture or sound quality, unable to connect to the other site).

Queensland Health External Interpreter Service Provider:

ONCALL Interpreters & Translators Agency Pty Ltd

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