Using Interpreters

This section should be read in conjunction with the Language Issues section of Guidelines to Practice, which gives other essential information about the effective use of interpreters, such as the interpreter's role, organising appropriate interpreters, working with professional interpreters, and accuracy of interpretation.

Are you aware that an interpreted interview may take more than twice as long as an ordinary interchange, because careful interpretation often requires long explanatory phrases?

Have you considered the gender, ethnicity and language/dialect of interpreter? For example, it may be inappropriate to provide a Serbian interpreter for a Bosnian Muslim, or a male interpreter for a female patient or vice versa.

Before the session, do you meet with the interpreter to explain the purpose of the session?

Do you encourage the interpreter to meet with the patient before the session to learn about educational level, and to determine the depth and type of information and explanation needed?

Do you speak in short units of speech, without using long involved sentences or paragraphs, and without holding complex discussions of more than one topic in a single session?

Do you use simple language, avoiding technical terminology, abbreviations, professional jargon, colloquialisms, abstractions, idiomatic expressions, slang and metaphors?

Do you encourage the interpreter to refrain from inserting his or her own ideas or interpretations, or omitting information?

Do you check the patient's understanding and the accuracy of the translation by asking him or her to repeat the message or instructions in his or her own words, facilitated by the interpreter?

During the interaction, do you look at and speak in the first person directly to the patient, not the interpreter?

Do you listen to the patient and notice nonverbal communication which indicates emotion associated with the topic?

Are you aware that you could be legally liable if you do not organise an interpreter when necessary? It is advisable to cover yourself by making notes in the chart if the patient refuses to have an interpreter. The telephone interpreter service should be offered if an onsite interpreter is refused.