

TOP TEN TIPS

Palliative Care Clinicians Should Know About Working with Interpreters



Palliative Care
South Australia

TIP 1 Ensure the presence of a professionally trained medical interpreter whenever possible and avoid assigning family members or bilingual staff to the role of the interpreter.

Identify the patient's preferred language/dialect (and gender, if it applies). For smaller communities that most members know each other, they may want to seek a phone consultation with an interpreter who is at another state to ensure confidentiality.

TIP 2 Conduct a pre-encounter huddle to provide interpreters with appropriate context for the encounter and facilitate the discussion. This allows the interpreter to provide relevant cultural context to the practitioner that may influence the patient's healthcare preferences and decision-making.

TIP 3 Partner with the interpreter to help them manage a family meeting and ensure effective communication.

TIP 4 Discuss with interpreters the best approach to handle "untranslatable" words to reduce miscommunication. Avoid using jargon and abbreviations, and explain complex medical matters in plain language.

TIP 5 Recognise that patients' family dynamics may reflect their cultures and include unique patient and family roles during end-of-life discussions.

TIP 6 The interpreter's role often extends beyond language translation and includes cultural contextualisation and occasionally patient advocacy – however, the interpreter should not be expected to take on medical mediation duties.

TIP 7 Use the "Teach Back" method with patients to ensure improved patient understanding (ask them to summarise what has been discussed in their own words).

TIP 8 Provide the patient and interpreter with contact information for palliative care clinicians to facilitate continuity and accessibility of palliative care to patients. Explain the information and confirm that patients will be able to access interpreters when needed.

TIP 9 Involve interpreters in post-encounter team debriefings to improve patient care and team dynamics.

TIP 10 Recognise that interpreters may experience emotional distress when delivering bad news and are vulnerable to experiencing vicarious trauma.

Encourage self-care resources such as palliativecare.org.au/resource/resources-self-care-matters



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BACKGROUND

The tip sheet functions as a quick reference guide for effectively working with interpreters. The content addresses critical elements, drawing from American research. However, it's important to note that while there may be similarities between diverse societies like the US and Australia, nuanced cultural norms and healthcare practices in Australia must be considered.

In adapting this resource for the Australian context, we've made minor adjustments based on our experiences collaborating with local communities and interpreters. To fully address the complexities involved, it is highly recommended that this sheet is not used as a standalone document, but as a supplementary tool for health professionals who have received training on working with interpreters and on cultural intelligence.

This approach will equip palliative care health professionals with the knowledge and abilities required for meaningful, culturally-responsive interactions.

Further information:

This resource has been adapted by Palliative Care Australia from the *JOURNAL OF PALLIATIVE MEDICINE* Volume 25, Number 9, 2022^a Mary Ann Liebert, Inc. DOI: 10.1089/jpm.2022.0091.

For more detail about these 10 tips please download the above article.

For more information about culturally and linguistically diverse (CALD) communities in South Australia and local resources visit Multicultural Communities Council of SA website: mccsa.org.au

