

The following is a brief set of tips abridged from the *Mothertongue/Pásalo Good Practice principles for therapists when working with interpreters*

ISSUES TO OBSERVE:

- Allow time for a pre-meeting with the interpreter to establish ways of working together
- In the pre-meeting explain your working methods and expected outcomes to the interpreter
- Let the interpreter know if you will be using any specific terminology
- Arrange seating so that everyone can see each other
- Clarify that you, the clinician, have ultimate responsibility for the session. It is necessary that the interpreter feels able to trust you to hold that responsibility
- In the session, speak directly to the patient
- Introduce yourself and the interpreter. Think how you will manage beginnings and endings of sessions – is it OK for the interpreter and patient to be left alone?
- Set the ground rules including confidentiality and the fact that everything spoken by everyone in the room will be translated
- Be transparent in the way you work
- Reassure the patient about how important hearing their message and their voice is and how you will do your best to listen very carefully to them
- Explain that you will be summarising and checking your understanding with the patient regularly
- Reassure the patient about interpreting accuracy/confidentiality
- Speak in small meaningful chunks so that the interpreter can translate accurately
- Be aware of potential political conflicts between patients and interpreters who are from war-torn countries
- Be aware of cultural differences and check if and how your patient experiences those differences
- If the patient can speak some English, discuss together, between the three of you, how the interpreter can be most useful in the session. (Talk about the Talking)
- Thank anyone from the family who wants to interpret so that they feel validated but explain that you are required to have a professional interpreter for your work. You may want to suggest that you might appreciate their support with other aspects of care if they are willing. It is important that the family member does not feel rejected or humiliated, for the wellbeing of everyone involved (Hadziabdic et al., 2014)
- Allow enough time for de-briefing at the end
- Prepare in advance so that you allow enough time for the whole session
- Work collaboratively together with the interpreter

ISSUES TO AVOID:

- Use of jargon
- Referring to the patient in the third person
- Giving responsibility for the session to the interpreter
- Speaking in unmanageable chunks
- Leaving the interpreter and the patient alone together
- Having a private conversation with the interpreter in the patient's presence
- Expecting the interpreter to be a general assistant or to look after the patient)