Communication, interpreters and records in another language

Standard operating procedure (SOP) | PTR-SOP-010

Document type	Standard operating procedure (SOP)
Title	Communication, interpreters and records in another language
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Prepared by	{{roles.quality_lead.name}}, Quality lead
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Replaces	None (new document)
Standards and criteria supported	System S6 (Patient transfers and referrals), criterion S6.41
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Speak to each patient in a language they understand.
2. Use a qualified interpreter when the patient or family needs one.
3. Record the language and the interpreter used.
4. Records that travel to another country are in a language the receiver can read.

Stop and get help straight away if: a patient cannot understand the crew about the transfer and no interpreter is used.

1. Purpose

To make sure patients understand their transfer and that the receiving team can read the record (S6.41, S6.35).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of {{facility.legal_name}}
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions and abbreviations

Term	Meaning in this SOP
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background and rationale

A patient who cannot understand the crew cannot give consent, report pain or follow instructions. A way to communicate in the patient's language is part of safe transfer.

5. Responsibilities

Role	Duties in this SOP	Competence needed
Crew lead	Arranges the interpreter	Trained crew
Dispatch lead	Books the interpreter and records the language	Trained dispatcher

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Records and forms named in this document	Current version	Checked before use

7. Safety and infection prevention

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Identify language.	• Ask the patient and family which language they understand best. • Record it on the transfer log.	Ask first.
2	Use an interpreter.	• Book a qualified interpreter when needed, by phone if necessary. • Record the interpreter's name or reference.	No family as interpreter for clinical information.
3	Translate the record.	• Provide the key handover information in the receiver's language.	The receiver can read it.

Decision points

- No decision points in this procedure.

10. Special situations

Situation	What to do
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

11. Problems and escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Transfers with language recorded	100%	Monthly	Dispatch lead	Escalate to clinical lead

What is checked	Target	How often	Who	If the target is missed
Patients needing an interpreter with one used	100%	Monthly	Crew lead	Escalate to clinical lead

13. Records

Record	Where it is kept	Kept for
Record named in this document	Patient record or the area file	{{facility.records_retention_years}} years

14. Training and competence

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

15. Related documents

ID	Title	Relationship
HOS-SOP-013	Vulnerable patients and safeguarding	Vulnerability

16. Evidence

ID	Source and status
E-009	ASF Expert Committee consensus.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval