# Guide for Clinicians Working with Interpreters in Healthcare Settings

JANUARY 2019

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- 2.1 Clinicians acknowledge and address barriers to discussing the risks and benefits of a proposed procedure, and obtaining informed consent.
- 2.2 Clinicians acknowledge and address barriers to quality use of medicines and ensure education about medication safety.

- 4.1 Clinicians respect people's right to communication assistance and ensure that an interpreter, appropriate to the person's language and gender-concordance preferences (including a Auslan/English or a Deaf interpreter), is engaged when assessed as necessary or requested by the person.
- 6.1 Clinicians undertake e ective handover of care, through both verbal and written communication, including information about relevant individual cultural and linguistic considerations, needs and preferences.
- 6.2 Clinicians build and use referrals—across community health and allied health sectors to support the provision of quality and safe health care.

- 5.1 Clinicians provide clear, accurate, culturally appropriate and timely information in appropriate formats to enable people to understand the health issues being discussed, including the diagnosis, management and recommended follow up.
- 5.2 Clinicians recognise that people may require involvement of their families in managing their health issues and provide adequate information to those whom the person wishes to include in their care.
- 5.3 Clinicians gather feedback from people in an appropriate manner and recognise the impact of language, literacy and cultural considerations on the person's participation in their care.

- 7.1 Clinicians recognise the role of interpreters in healthcare settings, including their skills, responsibilities and scope of practice.
- 7.2 Clinicians work e ectively with interpreters, following Practice points for clinicians working with interpreters in healthcare settings.

# 8.1 Clinicians lead the creation of culturally responsive and accessible environments by informing whole-of-organisation practices that:

- recognise and respond to cultural di erences in the provision of care;
- enable community input; and
- collect relevant data.
- 8.2 Clinicians promote a whole-of-organisation use of interpreting services by informing persons about their right to access interpreting services, and by ensuring that their clinical and non-clinical colleagues have information about:
  - when an interpreter may be required;
  - how to arrange for an appropriate interpreter; and
  - the importance of documenting the need for an interpreter in the patient management system once the need is identified.
- 10.1 Clinicians continually learn and develop cultural responsiveness, including learning how to work e ectively with interpreters, by attending courses, in-service programs and reading journals, and by demonstrating awareness of practical, informed and quality data and research regarding cultural diversity demographics and population health.
- 10.2 Clinicians maintain ongoing practice innovation through the use of resources, including technology, to facilitate the provision of culturally responsive care to people from migrant and refugee backgrounds.

- 9.1 Clinicians incorporate health literacy, preventative health education, and health system literacy in their work, taking into account relevant individual cultural, linguistic and literacy considerations, as well as pre-migration experiences.
- 9.2 Clinicians support migrant and refugee communities to facilitate community-led health literacy and preventive health activities by actively seeking community insights on their needs and by contributing to appropriate responses, including education and resource development.
- 11.1 Clinicians contribute to improving the cultural responsiveness of the profession, both within their own discipline and interprofessionally, through modelling appropriate conduct, teaching students, peer learning, review and practice support.

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- 12.1 Clinicians develop and maintain an awareness of their own culture, beliefs, values and biases, and their impact on the clinician's interactions in healthcare settings.
- 12.2 Clinicians recognise the presence, and understand the impact, of systemic biases in institutional policies, resource allocation, and laws.
- 12.3 Clinicians adhere to high ethical standards and are committed to the principles of:
  - person-centred and family-focused care;
  - access and equity;
  - quality and safety;
  - dignity and respect; and
  - e ective communication

when providing culturally responsive care to people from migrant and refugee backgrounds.

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