

Our role in the interpreted encounter:

According to Title VI, we are there to provide meaningful access to services.

Definitions of modes of interpreting in Oregon

"Consecutive Interpretation" is the rendering of statements made in the Source Language into statements in the Target Language, intermittently, with a pause between each completed statement of approximately 40-50 words. Consecutive Interpreters wait until the speaker of the Source Language has finished before rendering speech into the Target Language. Consecutive Interpreting takes 50% more time than Simultaneous Interpreting, and may take a Bilingual interpreter 100% more time to provide Consecutive Interpreting Services due to less developed recall memory. Consecutive Interpreters frequently take notes to assist in Consecutive Interpretation.

"Simultaneous Interpretation" is the rendering of one spoken language (Source Language) into another (Target Language), continuously at the same time someone is speaking but lagging slightly behind the speaker. Simultaneous Interpreting is spoken in whispered tones or by using special audio equipment. Simultaneous Interpreting speed usually ranges from 80-120 words per minute.

"Sight Translation" or "Sight Interpretation" is the oral rendering of written text into spoken language by an Interpreter based on a brief visual review of the original text or document. "Sight Translation" and "Sight Interpretation" are used for short, non-technical documents only, whereas "translation" is for longer, more complex documents.

"Summary Interpreting" is when less skilled Interpreters of consecutive and simultaneous modes, or when Bilingual individuals shorten, paraphrase or condense the words of a speaker rather than Interpreting meaning for meaning, therefore providing an incomplete rendition.

RFP DASPS-2860-17 Interpreting Services

Sight translation

Sight translation requires the interpreter to immediately convey into the spoken target language the meaning of a document written in the source language. It occurs in such settings as medical interviews, witness interrogations, court proceedings, and international meetings.

[ILR \(govtilr.org\)](http://govtilr.org)

Sight Translation—the rendering of a written document directly into a spoken or signed language, not for purposes of producing a written document.

ASTM F2089-15

When is sight translation used?

Sight translation is often used when LEP defendants are given forms in court that are written in English, such as rights forms, plea forms, and probation orders. It is also used when foreign-language documents such as birth certificates, personal letters, and identity documents are presented in court.

Activity: Give two sight translation assignments, one for each extreme.

Keys for proper sight translation

Recommended practice is to afford the interpreter sufficient time to review the document's contents before rendering it. When performing sight translation, the interpreter must:

- *possess a wide vocabulary and knowledge of the specific type of document presented*
- *have the ability to quickly scan and understand the main points of the document*
- *accurately interpret the document into its equivalent meaning in the target language.*

NAJIT Position Paper on Modes of Interpreting: Simultaneous, Consecutive and Sight Translation

https://najit.org/wp-content/uploads/2016/09/Modes_of_Interpreting200609.pdf

Activity: scan document for tripwires. Discuss tripwires.

<https://www.mayoclinic.org/documents/mc0389-pdf/DOC-20078765>

<https://sportydoctor.com/physical-therapy-exercises/>

NCIHC Standards of Practice:

22. The interpreter **avoids** sight translation, especially of complex or critical documents, **if he or she lacks sight translation skills**. For example, when asked to sight translate a surgery consent form, an interpreter instead asks the provider to explain its content and then interprets the explanation.

<https://www.ncihc.org/assets/z2021Images/NCIHC%20National%20Standards%20of%20Practice.pdf>

Benefit of asking the provider to explain or stay during ST:

- If LEP has questions, the provider is there to answer.
- People may not ask questions, and just nod assent with a deer in the headlights look.
- They may ask questions, and you are not qualified to answer any of them.

Activity: role play telling doc to stay in the room for sight translating patient handouts.

<https://www.mayoclinic.org/documents/mc0389-pdf/DOC-20078765>

<https://sportydoctor.com/physical-therapy-exercises/>

Audio translation

Audio translation is the process of rendering live or recorded speech in the source language to a written text in the target language. It is a cross between interpretation (speech-to-speech) and translation (written text-to-written text), and requires a skill set that includes not only language but also the ability to overcome input interference.

Audio translation directly from live speech is not likely to result in a full translation. There are also a variety of tasks that may not require a full translation of the audio source, such as summarizing, identifying significant items, listening for details, or preparing analytical reports for a specific user or purpose.

This document covers only products that transfer audio materials as fully as possible into another language. They are prepared from recorded speech, and are often used for legal purposes by many government agencies, particularly courts, which require either certified translations based on transcripts, or transcript and translation side by side.

A successful audio translation is herein defined as one that fully and accurately conveys the content and meaning of the source language in a script format, and reflects the style, register, and cultural content of the source message, without additions and omissions. From the standpoint of the user, the translation must also meet the prescribed specifications and be completed in a timely manner.

Competence in two languages is necessary but not sufficient for any audio translation task. The audio translator must be able not only to (1) comprehend the source language; and (2) write intelligibly and idiomatically in the target language; but also (3) choose the equivalent expression in the target language that both fully conveys and best matches the meaning intended in the source (congruity judgment).

ILR (govtilr.org)

NAJIT TT paper:

<https://najit.org/wp-content/uploads/2016/09/Equal-Access200609.pdf>

NAJIT on onsite simo interpreting of a sound file:

<https://najit.org/wp-content/uploads/2016/09/Onsite-Simultaneous-Interpre.pdf>

Savvy blog on TT:

<https://atasavvynewcomer.org/2018/12/11/forensic-transcription-translation/>

Activity: fill out a form with a patient.

[Mental Health intake form](#)

Sending material home in the non-English language

How can we give the patient follow up materials in a language they understand after the session?

- Instructions for medications.
- How to prepare for surgery
- Post surgery instructions

A lot of surgeries are rescheduled because of lack of communication. Interpreters could...

- Perform a sight translation of the documentation given to the LEP, recording it on their phone.
- Provide a brief translation of key points, on the fly, with no access to dictionaries.
- Provide a graphic summary of important facts (for example, a chart for taking medications).
- Write down the non-English language translation next to the English text.

If they take something home that they don't understand, is that meaningful access?

Activity: record a short patient summary

[Clinical Summary Example \(hpsm.org\)](http://hpsm.org)

Issues to consider when filling out forms

- a. Medical providers need the medical intake forms in a language they can understand. Typically, medical interpreters have been involved in this process,
- b. Medical interpreters have a limited scope of practice. They are not expected to give medical advice (explain the meaning of medical terms, which can be construed as giving medical advice), or have side conversations (this can happen often while filling out forms).
- c. Medical interpreters are called on to limit their activities to interpreting and protecting patient autonomy and promoting patient self determination, besides privacy in the waiting room. Forms contain very private information. Oral discussion of these issues in a public setting, where the discussion can be overheard by others, can easily violate these privacy concerns.
- d. As a court interpreter and a medical interpreter, I have seen these forms be presented as evidence in depositions. They are, therefore, legal documents. I have discussed options for how to fill them out with doctors and with attorneys, and come up with practical alternatives that satisfy most of these concerns.

Practical steps for filling out forms with an LEP

1. Sight translate the form to the LEP, line by line. This is a one-way sight translation, English to Non-English language. The non-English speaker holds the pen and fills in the blanks. This promotes patient autonomy and privacy by keeping the answers private.

If the form is already translated, we generally assume that the office is prepared to deal with forms in foreign languages. This isn't always the case. The translation step may still be needed.

This promotes respect and patient autonomy, according to standard #13 of the National Standards of Practice for Interpreters in Health Care, published by the National Council for Interpreters in Health Care ([NC SOP #13](#))

The interpreter promotes patient autonomy

NCIHC Standard of Practice #13

2. When the questions have open-ended answers, have the LEP fill out the answer in their language. Immediately, next to the answer given by the LEP, write a draft translation into English for the provider's use. I carry two pens, with different colors of ink, so my writing is in a different color from the LEP's writing.

2.1. In the event that the LEP is unable to write, take dictation from the LEP and write the LEP's answer in the LEP's language, and write the English translation next to it.

The interpreter promotes direct communication among all parties in the encounter

NCIHC Standard of Practice #12

3. If there are any questions that require clarification, ask the staff to clarify the question and interpret the clarification. Otherwise, leave the answer blank with a question mark indicating that it needs clarification.

Some of the questions on the intake forms are very personal and may require some cultural intervention. What is the role of the interpreter here? I recommend that if there are questions the patient is reluctant to answer, the patient be allowed to leave them blank and the provider may bring them up in the interview. This promotes direct communication and patient autonomy.

"The Interpreter limits his or her professional activity to interpreting within an encounter."

For example, an interpreter never advises a patient on health care questions, but redirects the patient to ask the provider.

NCIHC Standard of Practice #17

Typical document:

Name	Juana Pérez
Date of birth	Feb 18 1930
Why are you here?	<i>Creo que estoy intoxicado.</i> I believe the food didn't sit well with me. <i>Vomitó mucho hoy.</i> I vomited a lot today.
What is your pain level?	<i>Me duele mucho.</i> It hurts a lot.
Where does it hurt?	<i>Me duele el estómago.</i> My stomach hurts.
When did it start to hurt?	<i>Después de comer pescado.</i> After eating fish

Activity: fill out a form this way.

[Microsoft Word - Patient Intake Form 01-04-21 YFRF.docx \(eliteptwny.com\)](#)

[Sample Medical Record: Monica Latte | Agency for Healthcare Research and Quality \(ahrq.gov\)](#)

[RTF Clinical Summary Example 1.pdf \(galenhealthcare.com\)](#)

[RTF Clinical Summary Example 2.pdf \(galenhealthcare.com\)](#)

[Untitled \(galenhealthcare.com\)](#)

How to sign the document submitted:

4. You should identify yourself as the interpreter as follows:

I am a [IDENTIFY CERTIFYING BODY] [CREDENTIAL] [LANGUAGE] language interpreter.

- or

I have been found otherwise qualified by [ENTITY] to interpret in the [LANGUAGE] language.

I hereby certify under penalty of perjury under the laws of the state of Oregon that I have

a) sight translated the [identify document] to [language]

b) interpreted the explanations of the [identify person] to [language]

c) written down the answers provided to me by the LEP [patient, defendant, petitioner, client, etc.] [if applicable] [may include LEP's name] per his request and provided a draft on the spot translation to the best of my ability.

d) the interpreter provided this translation without access to translation resources to verify spellings and technical terms.

Location: Place, City and County

Dated: _____ Interpreter Signature:

Print Name & License or Certification #:

LEP Name : _____ LEP Signature:

This procedure should be satisfactory in most situations. In reality, this process is much briefer than filling the form out for the patient, because it avoids a lot of conversations!

If the form is already translated, we generally assume that the office is prepared to deal with forms in foreign languages. This isn't always the case. The translation step may still be needed. Please verify with the receptionist. The LEP may still need assistance writing for a variety of reasons.

Additional resources:

[avs-tech-guide.pdf \(healthit.gov\)](#) - Providing clinical summaries - a technical guide

[Untitled \(galenhealthcare.com\)](#) - Encounter Clinical Summary

[Patient Summary Information \(AKA Clinical Summary\) - Galen Healthcare Solutions - Allscripts TouchWorks EHR Wiki](#)

Helen Eby, helen@gauchatranslations.com