

Review of the Primary Care Interpreting & Translation Service in Lambeth, Southwark and Lewisham CCGs

LSL Engagement Report

16th April 2019

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BACKGROUND INFORMATION

Timeframe	Deliverables
July 2015	 Transfer of contracts from NHS England to NHS Lewisham CCG (management /administration) The service is for GPs, Dentists, and Optometrists as well as BPAS and Marie Stopes
April 2018	 LSL Commissioners outlined their intentions to review the existing primary care interpreting service
July 2018	 LSL CCGs reviewed 2017/18 activity and contractual arrangements. LSL CCGs agreed to undertake a Service User Review to assist in informing of long term commissioning arrangements
Sept 2018	 NHSE Guidance issued for commissioning of ITS (mapping exercise) Mapping exercise identified gaps in current service provision
Sept 2018	LSL Engagement Working Group developed
Oct 2018 – Feb 2019	LSL Engagement activity undertaken
Mar 2019	LSL Engagement Evaluation Report



BACKGROUND INFORMATION - KEY DRIVERS

Financially,
Operationally
&
Contractually
unsustainable

NHSE National Guidance

Equality
Impact
Assessment
(EIA)

Service User Experience

- experiences of current service
- Other intelligence e.g. Healthwatch



Project Approach - Development and Delivery

LSL Commissioners adopted a co-ordinated approach

- LSL engagement working group
- LSL Engagement Plan
- Individual CCG Engagement activity plans/engagement logs
- Agreed key messages for all materials, webpages, presentations and reports
- Developed LSL branding
- Independent provider (interpreters) to reduce conflict of Interest

Core Membership

Project lead (Chair)Yvonne Davies (Lew)

Commissioning LeadsAntoinette Scott (Lam)

Engagement leads
Antonia Knifton (Lam)
Rosemary Watts, (South)
Dorothy Muir (Lew)

Weekly Meetings



Engagement Approach - Development and Delivery

LSL Commissioners adopted a co-ordinated approach

- Actively engage with top 5 requested languages in each borough (approx. 62% of all 2017/18 activity)
- Actively inform with top 6-10 requested languages in each borough (approx. 14.5% of all 2017/18 activity)
- HealthWatch intelligence Applied findings of previous HW reports to inform of community groups to engage with
- Service user Surveys (paper and online) translated into top languages
- Focus groups/ community events



Engagement Approach -Top requested languages

The most requested languages across LSL

	Rank	LAMBETH	SOUTHWARK	LEWISHAM
Top 5 Languages	1	SPANISH	SPANISH	SPANISH
	2	PORTUGUESE	MANDARIN	MANDARIN
To actively	3	POLISH	PORTUGUESE	VIETNAMESE
engage	4	ARABIC	CANTONESE	TURKISH
	5	SOMALI	VIETNAMESE	PORTUGUESE

Top 6-10	Rank	LAMBETH	SOUTHWARK	LEWISHAM
Languages	6	MANDARIN	TURKISH	ARABIC
Languages	7	TIGRINYA	ARABIC	POLISH
To actively	8	FRENCH	POLISH	ROMANIAN
inform	9	CANTONESE	ALBANIAN	CANTONESE
	10	ITALIAN	FARSI	ALBANIAN



Engagement Approach – What we asked

We asked service users for their views on;

- Information made available to them about the service
- The booking process
- Challenges they may have experienced
- Waiting times
- What is good about the service
- How the service could be improved
- Views on how technology might improve access



Engagement Approach – How we did it

Patients / Public

- Online/ paper survey
- Translated materials (Posters/ surveys/ webpages)
- Engagement events with known community groups
- Patient Reference Groups
- Social Media (Tweet schedule of key events)

GP Practices

- Online /paper surveys
- Membership meetings
- Emails, newsletters, practice visits

Dentists/ Optometrists / BPAS & Marie Stopes

- Online surveys
- Communication / email briefings
- Informal meetings (Health promotion clinics)

Wider Stakeholders

- Briefings/ presentations
- Email communications
- Key messages advertised via stakeholder communication channels



Example materials



Tiếng Phố thông



Xem xét lại Dịch vụ Thông dịch và Dịch thuật dành cho Y tế Ban đầu tại khu vực Lạmbeth, Southwark và Lewisham

Xem xét lai Dịch vụ Thông dịch và Dịch thuật tại khu vực Lambeth, Southwark và Lewisham.

Cuộc khảo sát này chỉ riêng về Dịch vụ Thông dịch và Dịch thuật cho Y tế Ban đầu. Y tế Ban đầu là chăm sóc sức khỏe đầu tiên cho hầu hết mọi người, bao gồm trạm xá Bác sĩ gia đình, Nha sĩ và chuyên gia Nhãn khọa. Đây không phải là cuộc khảo sát về dịch vụ thông dịch cho bệnh viện.

Thông dịch viện giúp bệnh nhân về việc giao tiếp với Bác sĩ, Nha sĩ, Nhãn khoa và các nhân viện khác. Thông dịch Ngôn ngữ ký hiệu Anh (BSL) giúp những người khiếm thính sử dụng BSL để giao tiếp với mọi người. Thông dịch viên thông dịch ký hiệu ngôn ngữ Anh sang ngôn ngữ riêng của người khiếm thính.

Chúng tội cần được nghe ý kiến của quý vị, sư góp ý của các quý vị giúp chúng tội cải thiên và đảm bảo dịch. vụ thông dịch cho mọi người khi gặp Bác sĩ, Nha sĩ hoặc Bác s sĩ Nhãn khoa trong khu vực Lewisham, Southwark và Lambeth. Chúng tội cần điều tra để được biết những dịch vụ này đạt được yêu cầu hay không.

1. Xin quý vị bắt đầu bảng khảo sát này bằng cách cho chúng tôi biết quý vị nói ngôn ngữ nào. Quý vị có thể sử dụng hộp Ý kiến dưới đây cho chúng tôi biết nếu quý vị nói một phương ngữ khác. *

Tiếng Tây Ban nha (Vùng Châu âu)	
Tiếng Tây Ban nha (Vùng Châu Mỹ La tinh)	
Tiếng Bồ Đào nha (Vùng Châu âu)	
Tiếng Bồ Đào nha (Vùng Châu Mỹ La tinh)	
Tiếng Thổ Nhĩ kỳ	
Tiếng Việt Nam	
Tiếng Ả Rập	
Tiếng Somali	
Ţiếng Ba Lan	
Ngôn nhữ Ký hiệu Anh (BSL)	
Ngôn ngữ khác (Xin cho biết):	



Home

About Us

Get Involved

Your Health



Involving local people Get involved - and help shape NHS services in Lewisham

Our vision for engagement Engagement governance

Public Engagement Charter Public Engagement and

Equality Forum Healthwatch

Public Reference Group

Review of interpreting and translation service



NHS Lewisham Clinical Commissioning Group (CCG) is working with NHS Southwark and NHS Lambeth CCGs to review the interpreting and translation service for patients in GP surgeries. dentists and opticians.

Revisión del servicio de traducción e interpretación de cuidados primarios para Lambeth, Southwark y Lewisham.

Los intérpretes pueden avudar a las personas comunicarse con los médicos. con los dentistas y con los ópticos al iqual que con los demás. Los intérpretes del lenguaje de signos británico ayudan a las personas sordas a comunicarse





Necesitamos tus opiniones para asegurarnos de que las personas reciben servicios de interpretación en las consultas médicas, dentistas o los ópticos cuando lo necesitan en las zonas de Lewisham, Southwark y Lambeth

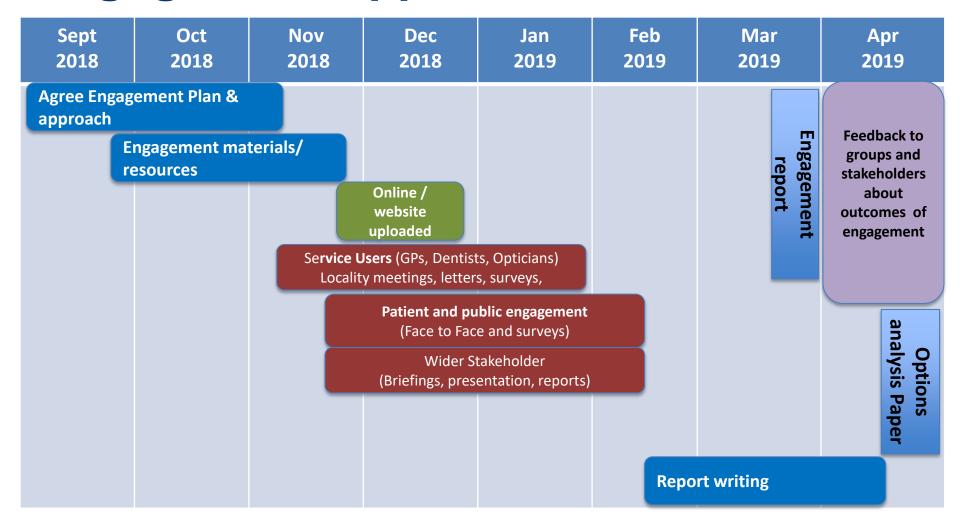
Por favor complete nuestra encuesta en línea en https://www.smartsurvey.co.uk/s/ITSLSL/

Spanish Español

NHS



Engagement Approach – TIMELINES



The engagement review ran from October 2018 until February 2019



Evaluation - Governance

LSL Commissioners adopted a co-ordinated approach **Authorisation:** CCG Commissioning Leads / LSL Report Working group For Information: **Governing Bodies Authorisation:** Southwark Lewisham Lambeth **CCG Primary Care** Report Report Report **Commissioning Committees** For Information: **Appendices: CCG Patient Engagement** CCG engagement plans / CCG activity plans / CCG and Equalities Groups engagement logs



KEY FINDINGS

Overall Summary



Information issues

- A lack of information about what is available at registration with GP
- Reception staff not consistently offering ITS
- A lack of awareness of or being offered interpreting at Dentist or Optician appointments.

Booking issues

Waiting times

- Delays for people using BSL and face to face interpreting
- Variation of waiting times for some services in each CCG area

Booking process

Telephone interpreting system log in process is viewed as too lengthy



Patients suggesting more provider quality checks on qualifications, language ability and knowledge of medical terms for interpreters

 Impact on patient of inaccuracy in language request information or ITS provider sending wrong interpreter

Quality issues

- Impact of GP late running delays on face to face interpreting and reports of interpreters rushing to next face to face appointment
- People being asked or choosing to use family members as unofficial interpreters and the risks of poor translation, confidentiality and safeguarding
- Privacy concerns re video interpreting
- Need for Deaf awareness training for GPs and primary care staff



Technical issues

- Some poor telephone connection and connectivity
- People willing to consider video interpreting but concerns around technical capabilities for video IT

Health Promotion Clinics

- There is variation in what is provided, and more data is required on their impact for patients.
- Apart from one Health Promotion Clinic in a Lambeth location, there were no responses from the on-line survey or visits that interpreting was used for health promotion activities.
- Fixed session interpreting was used for individual's GP and nurse appointments.



Summary of suggestions made by patient respondents

Suggestion	Consideration
More interpreters to be employed by the NHS or GP practices	The number of languages required across LSL mean that it would not be possible for the NHS or individual practices to directly employ large numbers of interpreters.
Better training for interpreters and checks on qualifications	Ensuring suitably qualified staff and robust quality checks can both inform the service specifications for commissioning. Ensure that interpreters undertake training in racial awareness and unconscious bias
Some training for receptionists in cultural awareness	Consideration could be given to updating training for reception staff
More accurate recording of exact language needs including dialects	Consideration could be given to raising awareness of the range of dialects and importance of accurate recording on patient record and request from. Consider how local organisations might support delivery of this
Deaf awareness training for staff reception and clinical	Consideration could be given as to how to achieve this locally and how local organisations might support this
Ensure that technical needs for a video relay can be met	Consider testing



KEY FINDINGS

Patients and Public



Key findings – Community events

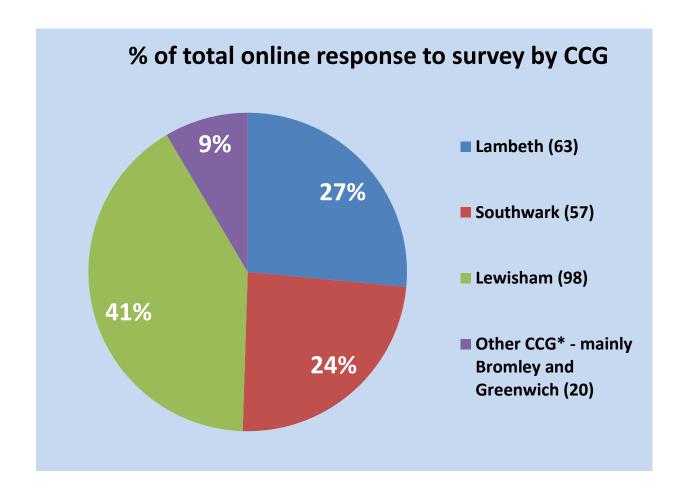
- wide range of community groups and organisations
- Spoke directly with 360 people at 22 events

Lambeth	Southwark	Lewisham
 The Clapham Deaf Group The Chinese Association A Latino Legal advice drop –in Spanish speaking churches Local Polish supermarkets (Streatham) 	 Advising Communities English Class for Spanish people Turkish Cypriot Elders Group Vietnamese Mental Health Services Advising Communities Spanish Advice drop-in Latin American Disabled Person Project FULA (Age UK Latin American Group) Latin American Women's Rights Service Southwark Day Centre for Asylum Seekers 	 Deaf is Cool Turkish Elders Group Lewisham Multi Lingual Advice Service Lewisham Refugee and Migrant Network Advice Lewisham Adult Learning ESOL Afghanistan and Central Asian Association Lewisham Deaf Forum Patients attending Health Promotion sessions in Vietnamese
193 people	88 people	81 people



Key findings – online responses

- 238 Online responses
- Heard from speakers of all top 10 languages (via online responses and events)



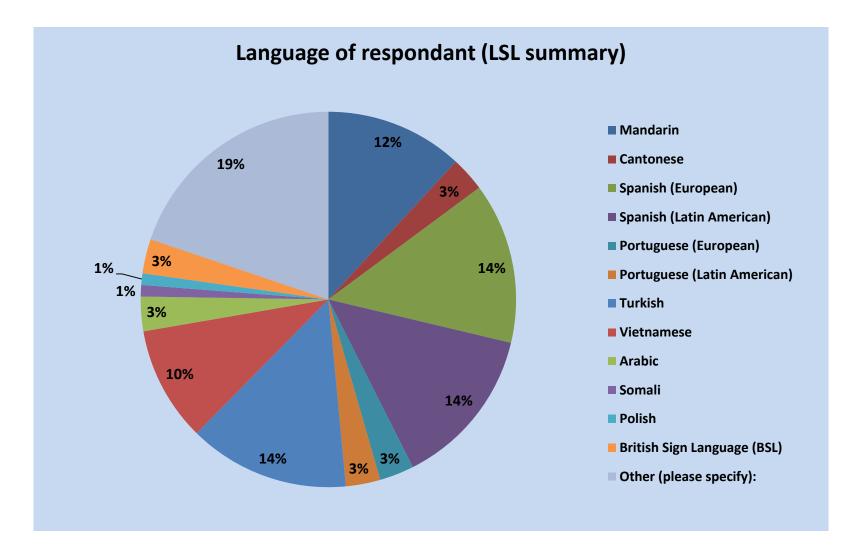


Key findings – online responses by CCG

Total across LSL area			Each CCG's respondents					
Language of respondent	% of total	Number	Lambeth numbe		Southwar numbe			nam % / mber
Mandarin	12%	28	21%	13	4%	2	11%	11
Cantonese	3%	7	3%	2	2%	1	3%	3
Spanish (European)	14%	33	22%	14	18%	10	7%	7
Spanish (Latin American)	14%	33	16%	10	23%	13	7%	7
Portuguese (European)	3%	7	8%	5	0%	0	2%	2
Portuguese (Latin American)	3%	6	5%	3	2%	1	2%	2
Turkish	14%	33	0%	0	25%	14	15%	15
Vietnamese	10%	23	5%	3	11%	6	14%	14
Arabic	3%	6	0%	0	4%	2	4%	4
Somali	1%	2	0%	0	0%	0	2%	2
Polish	1%	3	5%	3	0%	0	0%	0
British Sign Language (BSL)	3%	8	2%	1	11%	6	1%	1
Other (please specify):	20%	48	14%	9	4%	2	30%	29
TOTAL	100%	237	100%	63	100%	57	100%	97

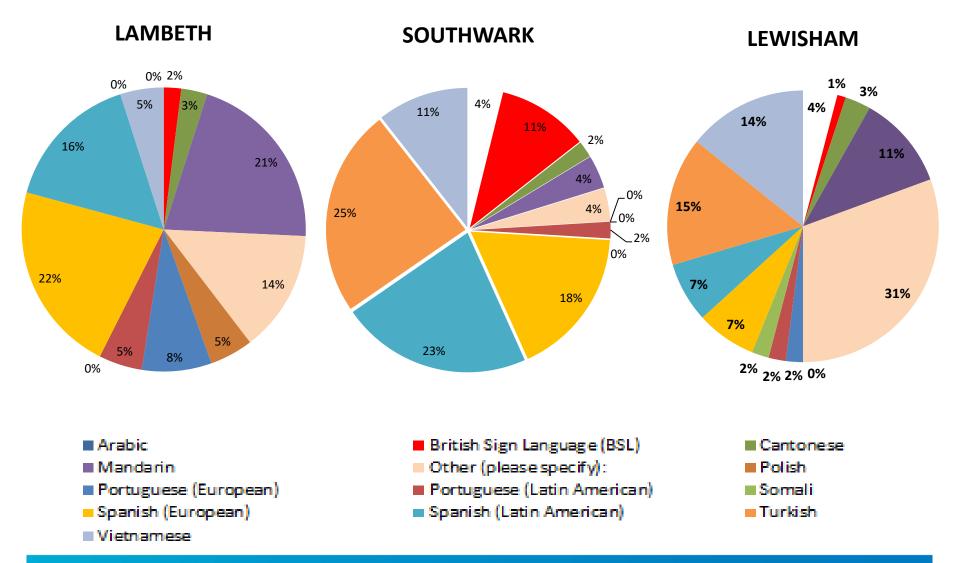


Key findings – online responses by Language





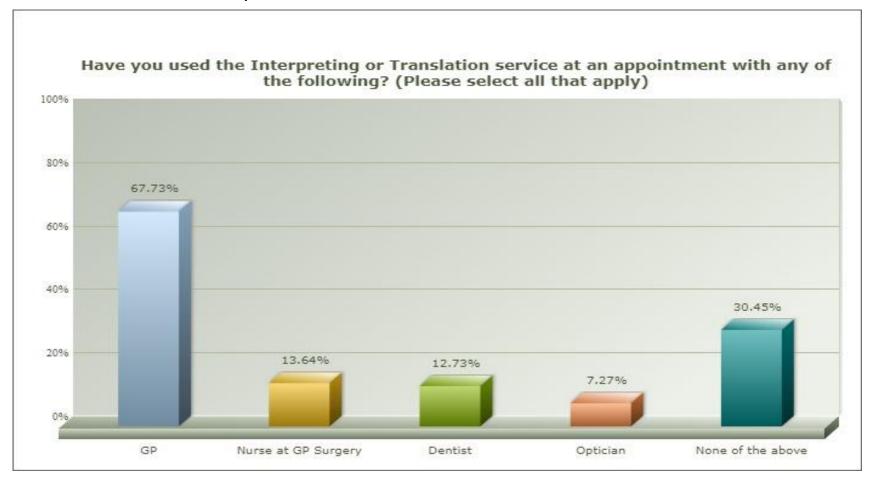
Key findings – online responses by CCG





Key findings – Use of service

- The majority of respondents had used the service with their GP.
- There was low use at opticians.





Key findings – Awareness of service

- 55% (120/219) of patients had used telephone interpreting
- 46% (102/221) of respondents said that they had not been told about the Interpreting and Translation Service when they registered at their GP practice
- 47% (114/216) of respondents said that they did not need an interpreter to book an appointment.
- At engagement events the "support" people told us they needed was
 to be able to speak with a receptionist face to face to book, as people
 struggled to understand when booking on the phone.



Telephone

- Experiences of telephone interpreting were broadly similar in the three CCG areas.
- 14% of respondents were told that they could not have an interpreter when requested
- 7% had an appointment cancelled because an interpreter could not be booked
- 7% were asked by their GP practice to bring a family member or friend to interpret
- 8% experienced an interpreter that did not speak or understand their dialect
- 66% of people accessed telephone interpreting the same day but 5% had waited longer than 2 weeks for a telephone interpreter.

Comments included

" I had a telephone interpreter who could not interpret. I had a good friend with me (at appointment) who said that the person interpreting could not speak English! I have not used telephone interpreting since"

"Sometimes it is difficult to understand phone interpreting due to bad line or different accent"

"Interpreting over the phone is not as good, especially with the medical terminologies"

"An interpreter via telephone could not understand me and hung up"



Face to Face

- 21% of respondents across said they had been told they could not have an interpreter
- 20% of respondents experienced an interpreter not turning up
- 24% reported being asked to bring family members of friends to interpret
- 15% had an appointment cancelled because an interpreter could not be booked

Comments included

"Yes, I was told that there was no Cantonese interpreter available"

"When thereon the day was not an interpreter available on the day , Dr asked me to bring someone in to help interpreting"

"I am very happy with the service and attention in my surgery and I am happy that an interpreter is always available"

"I have always rely on family members to help me with interpreting, the only issue is the appointment has to suit their schedule. I have heard of many other people's bad experiences of interpreters not turning up at appointments"



BSL

- 5.2% of respondents had been told that they could not have an interpreter
- 32% of respondents indicated that they can get an interpreter on the same day which was unexpected given previous intelligence and ITS service data that indicated waits of 2-3 weeks were common for BSL interpreters
- 25% of BSL respondents said that they waited between 1 and 2 weeks and 11% longer than 2 weeks.

Comments included

"Imagine emergency without interpreter BSL. I need to book for a BSL interpreter for a few days"

"I have gone to hospital and BSL interpreter has been cancelled. Have not turned up sometimes at GP"



Have you ever experienced any of the following when using the interpreting service? Please select all that apply. You can tell us more about any of your answers in the comments box. 100% 81.87% 80% 73.54% 69,95% 65.24% 59.62% 60% 40% 24.06% 21.13% 19.67% 20% 14.81% 4.08% 3.3% 7.14%.69 5.95% 5.16% 3.74% 3.28% 0% Have you asked for an Have you had an Have you had an The interpreter did not Have you ever been interpreter who did not interpreter but been turn up for the appointment cancelled asked by your GP appointment? because an interpreter surgery to bring family speak or understand told you cannot have could not be booked? or a friend to interpret one? your dialect? for you, instead of an interpreter being booked for you? . I have never experienced this Face to Face BSL Telephone issue **FusionCharts**



Key findings – Video Interpreting

• 70% of total respondents would consider using a video service (Lambeth (60%), Southwark (65%), Lewisham (76%))

 Speed of access and strength of Wi-Fi were the most important influences for people in deciding whether they would use it

Speed of connection was an issue for BSL users

Reasons for NOT using it included;

- Concerns about freezing or poor signal
- Preferring a person to be present in the room
- Concerns about recording and privacy





Key findings – what works well?

Key themes included;

(130/238 patients responded)

- Improving communication
- Supported better understanding of the patient of their condition.

Comments included

"I can have a better understanding of my own condition"

"I can understand my problem clearly and understanding what they are saying to me and asking me".

"The translation, I understand what the doctor says about my symptom"



Key findings – what could be improved?

Key themes included;

(119/238 patients responded)

- Ensuring the correct language and dialect is requested
- Quality checking of interpreters, their skills and knowledge of English and medical terms (Interpreter training)
- Improve speed of access

Comments included

"The interpreter needs to understand our (Sri Lankan) Tamil. Some interpreters not understanding Sri Lankan Tamil"

"Interpreter needs more training and they need to interpret correctly, sometimes they do not listen to the client what do they say".

"Many times, the interpreters don't know what some words used mean"

"Make sure the interpreter is qualified and can speak and understand the languages"



Key findings – Demographics of respondents (online)

Ethnicity of all LSL survey respondents (21 people skipped this question)							
White British	3%	7	White Spanish	7%	15		
White Irish	0.5%	1	White Latin American	10%	22		
White Welsh	0%	0	White Portuguese	2%	5		
White Scottish	0.5%	1	Mixed White and Black African	0.5%	1		
White Northern Irish	0%	0	Mixed White and Black Caribbean	0%	0		
Black British	1%	2	Mixed White and Asian	0%	0		
Black African	6%	12	Asian or Asian British	3%	7		
Black Caribbean	1%	3	Chinese	15%	33		
White Turkish	5%	10	Vietnamese	11%	24		
White Turkish Cypriot	6%	13	Any Other Ethnicity	28%	61		
White Kurdish	0%	0	"Other Ethnicity included 12 people who identified as Latin American, 6 people who identified as Albanian and 4 people who identified at Italian				

Gender	%	number
Female	76%	162
Male	22%	46
Other	0%	1
Prefer not to say	2%	5

Gender reassignment differs to birth sex	%	number
Yes	3%	6
No	93%	177
Prefer not to say	4%	1
Question skipped by 48		



Key findings – Demographics of respondents (online)

Sexual Orientation	%	number
Homosexual	2%	3
Heterosexual	78%	141
Bisexual	2%	3
Prefer not to say	11%	20
Other*	7%	13

^{*} these other responses included "correct sexuality"
This question was skipped by the 58 people.

Marriage or civil partnership	%	Number
Single	16%	34
Married	54%	113
Living Together	6%	12
Separated	5%	10
Divorced	6%	13
Widowed	9%	19
In same sex relationship	0.5%	1
Prefer not to say	4%	8

AGE	%	Number
18-29	1%	1
30-50	64%	50
51-70	26%	23
Over 70	9%	8

Religion or Belief	%	number
No Religion	12%	25
Christian	35%	74
Hindu	2%	5
Buddhist	16%	13
Muslim	24%	50
Prefer not to say	4%	9

Carer	%	number
Yes	21%	17
No	79%	63

Disability	%	number	
No disability	65%	133	
Deafness / partial hearing loss	7%	14	
Blindness/ partial loss of sight	3%	6	
Physical	14%	28	
Mental ill health	4%	8	
Long term illness / condition	10%	21	
Learning Disability	2%	4	
Other*	7%	11	
* This included comments where people had recorded specific conditions which			

^{*} This included comments where people had recorded specific conditions which could have been recorded as long-term illness/ condition



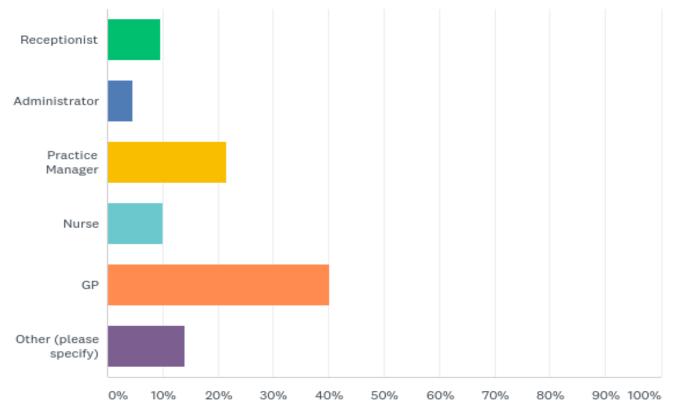
KEY FINDINGS

General practice



Key findings – responses

- 255 responses across LSL (88 Lam, 80 South, 87 Lew)
- Responses by respondents role

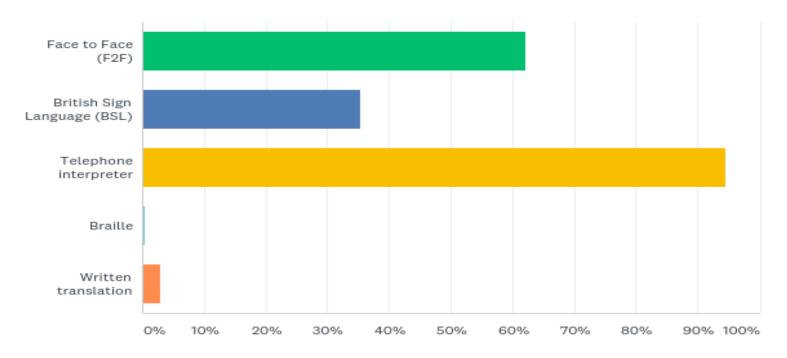




Key findings – Access

Telephone identified as most requested, easiest to book & most readily available

Most requested booking types

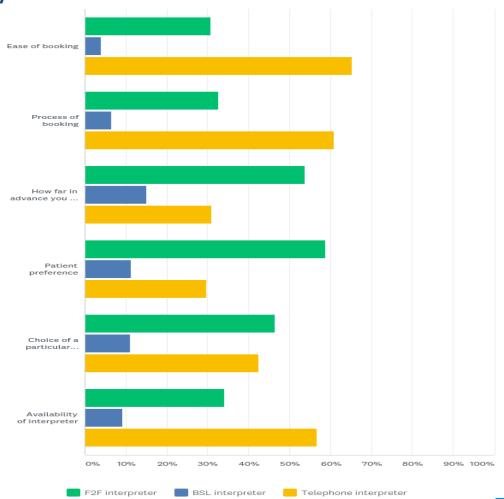


ISSUE: Length of time to log-in for telephone booked as an issue echoed across LSL



Key findings – ease of booking

Q: When deciding to book an interpreter, what influences your decision?

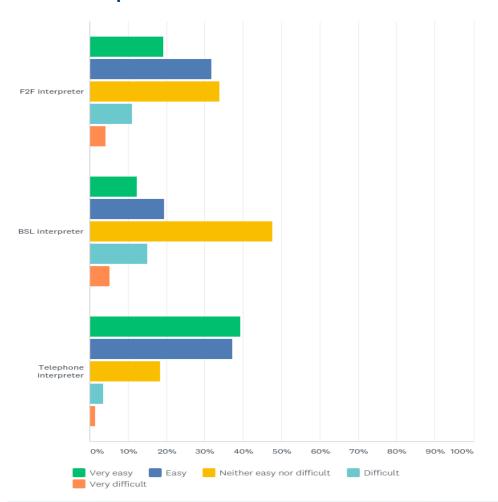


- 73% of respondents booked double appointments
- Patient preference was a significant factor for when choosing F2F
- Online bookings was the preferred process for booking an interpreter
- Booking on the day was the preferred timescale for booking an interpreter



Key findings – ease of booking

Q: Please rate below how easy or difficult it is to book an interpreter.



Comments included

'There would always need to be access to a same day element for urgent cases.'

'Booking too far in advance or even at all could be a waste of time if patients cancelled or did not attend.'

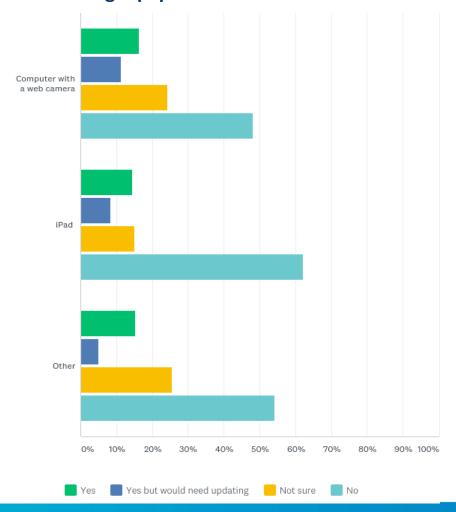
'Timescale depended on the medical condition'

'Waiting times for BSL need to be improved'



Key findings – practice equipment

Q: Please indicate whether your practice has access to the following equipment?



- The majority of practices have a telephone with a speaker (81%) and 13% have a manual handset
- The vast majority of practices stated that they do not have an ipad or computer with a webcam
- ➤ 54/90 staff said they do not need any training with regards to booking/using the service
- Some stated training would be needed if new technology was used



Key findings – Video Interpreting

- 221 responses (Q: consideration to use of video interpreting)
- 57.5% said they would consider using video consultation
- 14% would not use it & 28.5% were unsure
- Despite high response the majority of comments were negative and had reservations about the quality of signal and requirement to date IT equipment

Comments included

"Don't have time in 10 min consultations to set up. Software would need to be perfect, ha ha. never would be."

"Likely time consuming without additional value, would rely on internet connection which can be slow and also logging into additional programme"

Computer screen already in use for notes. Don't want another screen. iPad would get lost/stolen/ be in wrong room. No WiFi in most practices"

"Really depends on the needs of the consultation and if a video consult adds anything positive to this or not"

BSL identified as the main group that could benefit from video interpreting



Key findings – what works well?

Face to Face	Telephone	BSL
'Good for booking in advance'	'easy quick and effective'	Excellent quality of interpreter
'very reliable and flexibility'	'Simple process to book	very rare that interpreter does not attend
'Reliable Service, Great Availability'	interpreter. Fairly short wait times dependent on language'	Excellent. Patient benefits,
'Easy request form. Interpreting		communication can take place
team are very quick, efficient and respond almost straight away'	'Overall effective service'	Have to book in advance, but
'Better communication during the consultation'	'WORKS WELL, AVAILABILITY EXCELLENT'	professional, prompt, polite, generally knowledgeable.
'Using a reliable and regular interpreter who the patients know	'Usually interpreting request can be met immediately'	Helpful to have this service available
well and trust. Reliability and level	can be met immediately	avanable
of professionalism of interpreters that we use. Ability to communicate	'ease of access , fast response time'	Wonderful- used It recently- don't cut it!
well with patients and explain concisely and clearly what is going on'	'Hard to critique. It works very well'	



Key findings – what needs improving?

Face to Face	Telephone	BSL
'Quicker response time/waiting time'	'To improve response time' 'More languages at short notice'	'Time frame for booking appointments'
'Booking appointments can be time consuming'	'Accessibility, not so long waiting for the interpreter to take the call'	'If patient has a problem on the day not easy to access BSL'
'interpreter not always available for some languages'	'Connection can sometimes be poor and i have been cut off	'can be a long wait for patients to get appointment due to interpreter availability'
'Not always available at time of appt and needs to be booked quite far in advance'	several time. when I call back I have to go through the whole process again and usually start	'More information on how to arrange appointments'
'some interpreters do not understand medical terminology'	with a new interpreter' 'Quality, availability of language specialist and connection'	'need video interpretation for urgent med needs'
'continuity, literal and actual translation can sometimes vary'	'Accessibility, not so long waiting for the interpreter to take the call'	'Needs to book 2 weeks in advance'



KEY FINDINGS

Health Promotion* Clinics

- A small number of GP practices provide an interpreter at what have historically been identified as 'Health Promotion Clinics'.
- Health promotion clinics is where practices 'block book' an interpreter to allow patients that do not speak English as a first language to see a GP or nurse with interpreting support
- These arrangements were in place when Lewisham CCG took over the administration of the ITS contract from NHS England in 2015.



Key findings - summary

- 6 / 8 Health Promotion clinics continue to operate in Lambeth and Lewisham
- 5 online responses received (4 from Lambeth and 1 from Lewisham)

Lambeth	Southwark	Lewisham
(5 clinics)	(0 clinics)	(1 clinic, 1 LES)
Cantonese, Spanish, Portuguese	Previously had 2 clinics (Spanish & Vietnamese) which both ceased operation in September 2018	1 Vietnamese 1 LES (Vietnamese)

- All of the Lambeth clinics have operated for more than 10 years
- The Lewisham clinic and LES have operated for 5-10years
- The clinics are only available to patients registered at the GP practice where the clinic is located
- Clinics vary in terms of prebookable or drop in sessions
- No recent HP Clinic patient feedback captured



Key findings - Lewisham

- 1 online response from HP clinic
- Engagement carried out at both the HP clinic and also the practice that have a LES

Health Promotion Clinic - Vietnamese

- 2 engagement events
- Offers face to face interpreting at 5 x 3 hr GP sessions per week (Mix of drop-in / prebookable)

Spoke with 6 patients (5 Vietnamese, 1 Cantonese)

- 1 happy with service and stated nothing to improve
- Book their appointments around interpreter (not aware of ITS service)
- Prefer F2F but would consider video

"As it would be convenient when the interpreter was not available (in the practice)"

"I prefer video than telephone, as you can see the interpreter for body language".

On one visit the interpreter was booked (& stays)
 9am – 12noon but no patients were booked in.

Local Enhanced Scheme - Vietnamese

- 1 engagement event
- Offers face to face interpreting (1 x week)
- Prebookable appointments
- Assist with GP/Nurse / HCA appointments, health promotion & booking appointments/ helping patients with documents

Spoke to 3 patients;

- All happy with the service
- Prefer to telephone because of

"misunderstanding" and "having to repeat myself"

Would be open to video interpreting

"As now I usually book on a Wednesday only to see a GP, so if video interpreting is available. I will not have to wait "



Key findings - Lambeth

- Paper surveys made available at reception in all clinics
- Interpreters in clinics sat with patients to complete the paper surveys

	Languages /clinic frequency	Services	Staff comments
Practice A*	 Portuguese 1 x 2-hour session Vietnamese 2 x3 hour session Cantonese 3 patients per session per week Other languages 4- 10 patients per session per week There are long standing interpreters who are well known to the practice who provide interpreting support and additional support to admin staff contacting speakers of other languages. 	 Pre – bookable appointment only. Offer; GP consultation /Nurse Consultation / Health Advice 	 drop ins will be seen COPD singing class available for Cantonese and Portuguese patients Stop smoking advocate is Portuguese Not sure if patient feedback Staff value and trust their interpreters. Interpreters are established and well known to the patients.
Practice B*	 Portuguese 1 x 3-hour clinic and some afternoon clinics Spanish 4 x 3-hour clinic. Portuguese 4 per session and Spanish 3 per session. There are long standing interpreters who are well known to the practice who provide interpreting support and additional support to admin staff contacting speakers of other languages. 	 Pre – bookable appointment only. receptionist speaks Spanish Nurse & administrator speak Portuguese 	 Patients value F2F interpretation. Staff describe the service as "gold standard" Patient survey 3 years ago Staff value and trust their interpreters. Interpreters are established and well known to the patients.

Key findings - Lambeth

	Languages /clinic f	requency	Services	Staff comments
Practice C	Portuguese and Spanish (1x3hr & 1x3.5hr)Vietnamese session	– 2 x sessions.	Mix of pre – bookable and drop in.	No patient survey
Practice D	 Portuguese –varying len (approx 13 hours a week Spanish – as above cove 	()	Mix of pre bookable and drop in	 Regular team of trusted interpreters Saves time on our appointments plan rota /capacity in advance No patient survey

Patients comments

- Spoke to 4 Portuguese patients; who like the service and had no complaints
- Spoke to 2 interpreters in the Spanish clinic who fed back that patients were happy with the service. A patient feedback to add "They have time for people who don't speak the language".



KEY FINDINGS

Dentist, Opticians, BPAS, MSI



Key findings

- 7 staff responded to online survey / 2 email responses from BPAS
- No response from opticians or Marie Stopes
- NHS England assisted in disseminating the online survey (Dentist/Opticians)

Key Themes

- Difficulty in accessing face to face interpreters
- The dentist found all services difficult to book
- For pregnancy advice services the lack of availability after 5pm was an issue
- Would want a future service to have same day telephone interpreting and next day face to face.

BPAS	Dentist
Reservations were expressed on the potential use of video as opposed to telephone: "I feel it could be more intimidating for any vulnerable clients who do not wish people to know they are accessing our services" With regards to equipment the BPAS service had a speaker phone, no web cam, but did have an iPad.	 use F2F and book double appointments, Better if patients book themselves Would consider video interpreting



Next steps



NEXT STEPS

- An options paper outlining future commissioning options will be drafted for commissioners to consider. This will incorporate findings from the engagement.
 - 1. Do nothing
 - 2. Procure a new LSL service (revised service spec)
 - 3. Individual CCGs to procure their own service
 - Procure a service at a South East London (SEL) level to align to Sustainability and Transformation Plan (STP) approach



QUESTIONS



Key Contacts

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LSL

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Lambeth

The Clapham Deaf Group, The Chinese Association, A Latino Legal advice drop –in, Spanish speaking churches, Local Polish supermarkets (Streatham), Lambeth residents, Clergy, congregations and patients at local Catholic Churches, Lambeth Patient Participation Group Network, Lambeth Council, Lambeth Healthwatch, Lambeth Health Promotion clinics (Staff, patients and Interpreters), Lambeth residents

Southwark

Advising Communities, Advising Communities English Class for Spanish people, Turkish Cypriot Elders Group, Vietnamese Mental Health Services, Advising Communities Spanish Advice drop-in, Latin American Disabled Person Project, FULA (Age UK Latin American Group), Latin American Women's Rights Service, Southwark Day Centre for Asylum Seekers, The Forum for Equality and Human Rights in Southwark, Healthwatch Southwark, Southwark residents

Lewisham

Deaf is Cool, Turkish Elders Group, Lewisham Multi Lingual Advice Service, Lewisham Refugee and Migrant Network, Advice Lewisham, Adult Learning ESOL, Afghanistan and Central Asian Association, Lewisham Deaf Forum, Lewisham Healthwatch, Lewisham Health Promotion clinics clinics (Staff, patients and Interpreters), Patients attending LES practice, Lewisham residents

