GUIDANCE

Working with interpreters online or via the telephone

This guidance should be read in conjunction with the BPS working with interpreters: Guidance for psychologists (2017).

Introduction

This guidance aims to help psychologists working remotely with interpreters and was developed with psychologists and interpreters. It can be challenging when working with an interpreter using either video conferencing or telephone. It is important to realise that interpreters may also be adjusting to this new way of working and it may also be unfamiliar to service users. Interpreters and service users may also be preoccupied with the issues resulting from the wider Covid-19 context.

Initially everyone may be experiencing some anxiety. Preparation and time with the interpreter before a session starts may be helpful to ease this anxiety for the interpreter and the psychologist. Recognising that this way of working is a different experience for all participants may be helpful in preparing for the session.

It is equally important to consider making time to debrief with the interpreter after the session. The issue of vicarious trauma for interpreters using any medium of work needs to be considered and interpreters and psychologists might find the BPS document on Taking the trauma home: Reducing the risks useful. Psychologists should make sure that interpreter timesheets reflect additional time spent thinking about the work together.

It may also be important to develop guidance for service users (that can also be sent to interpreters) to help them prepare for appointments. Psychologists may wish to learn a few words within the applicable language for checking in with the service user.

BENEFITS OF WORKING WITH INTERPRETERS:
ONLINE OR BY TELEPHONE

Despite the challenges and adjustments needed to develop this way of working, there are valuable benefits of working online or by telephone with interpreters. These include:

Equality of access – all service users continue to be able to access services

Access to a wider range of interpreters – working remotely means psychologists can draw from a wider range of people, even those living quite far from where they are geographically located
Reduction in travel time and travel cost for interpreters – this may encourage interpreters to engage in the work, but also to offer more consistency for appointments without the juggling that is sometimes needed to attend different places one after another.

**PRACTICAL ISSUES**

**SENDING INVITATIONS FOR VIDEO CONFERENCING APPOINTMENTS**

A psychologist or administrator might need to set up different online meetings so that the psychologist has time for briefing and debriefing the interpreter. Sending invitations separately to each attendee for the main session is also helpful to protect confidentiality, as this limits the chance of sharing email details or phone numbers; this may be dependent on the system or platform used.

**SETTING UP MEETINGS AND EQUIPMENT**

Some interpreters and service users may have no experience of using online platforms and they may not have access to the most appropriate equipment. Psychologists may wish to explore this ahead of time to make sure that the appointment can go ahead effectively.

Equipment needs to be set up properly and positioned so that the individual (interpreter or service user) can be seen clearly and the screen is not wobbling due to being handheld. For video calls it may be helpful to ask the participants to position their camera so that everyone can see the upper half of their bodies, so that facial expressions can be seen easily, but being careful that personal documents and items are out of sight. All participants need to ensure that phones and laptops are fully charged.

Psychologists may wish to discuss any issues with interpreting providers who could ensure training and support for interpreters. Psychologists could also consider a short practice with the interpreter some days prior to the appointment just to be sure that these areas are negotiated effectively.

Some service users may struggle to log onto virtual platforms – it is helpful for them to have instructions in their own language beforehand. In some cases, psychologists may need the interpreter to talk the service user through this process by telephone. Instructions in some languages can be found here but it may be worth considering developing local resources in some commonly used languages to help service users (and potentially interpreters) manage the appointments effectively. In some cases administrative staff or contacts may be able to help with meeting set up.

**MANAGING PRIVATE SPACES**

Anxieties may be exacerbated by concerns for all parties about confidentiality, personal boundaries and possible noise (especially when connecting at home). Some interpreters and service users might have limited private space. Interpreters might prefer to use a virtual background to protect their privacy and provide a professional boundary.

Sometimes, people do not think through the implications of appointments in communal spaces or of having family members walking in and out of a room while an appointment is going ahead. It may be useful to discuss this at the beginning of the session, ensuring that appointments are private whilst also respecting that people may be living in restricted spaces or under lockdown. The use of headphones can help with confidentiality.
OTHER CONSIDERATIONS

The chat function which is often available on video conferencing platforms should be avoided during remote interpreting as it could be distracting or isolating for people in the session. The exception to this may be when British Sign Language (BSL) interpreters are working in a team and the interpreters may use the chat amongst themselves to clarify missed details. (See section below for more info on working with BSL interpreters).

CHANGES TO THE INTERACTION/CONSULTATION

Working remotely using video restricts the degree to which the psychologist can use body language to better understand service user communication. Using the telephone removes these cues entirely. There is a danger that much could be lost, particularly if the psychologist is focused more on the interpreter’s communication than on the service user’s way of speaking and non-verbal cues. The psychologist may need to be mindful of this, check in with service users more regularly and maintain extra attentiveness to all available cues. Checking and clarifying what has been said can be difficult but is vital to make sure that understanding is maximised. It may be necessary to ask for more information in situations in which you would not need to do this face-to-face, for example, if a service user turns away from the screen.

There are ways in which online behaviour can be different and these differences can appear in remote psychological work. In addition, the interpreter may also behave differently, perhaps offering opinions more than usual, or noting stronger emotional reactions to you or to the service user(s) than they are used to feeling. It can be useful to reflect on this with service users and interpreters. If there is an opportunity for this to be explored and normalised within the work it is less likely to be disruptive.

Additionally, using remote media may change the way in which psychologists work; impacting on the extent to which they feel they are able to build trust, use the relationship to learn about the service user, manage difficulties and use silences. All of these differences are useful to reflect upon and discuss in supervision, involving the interpreter where possible.

During the Covid-19 pandemic, it is most likely that all participants will be in their own locations and each will join using either video or audio platforms. However, it is also possible that in the future, psychologists may work in situations which some participants are in the same place and are joined by other(s) virtually. It is important to consider how the process of therapy is changed by the impact of one or more parties joining the appointment remotely. It may be important to think about how this changes the strength of relationship or therapeutic alliance between the parties involved and build in ways to manage any problematic dynamics.

TELEPHONE INTERPRETING

‘Psychological work with its complex and relational nuances is usually better conducted with a face-to-face interpreter, who like the clinician, would use the non-verbal communication of the service user as a vital part of what they are able to feedback. Telephone interpreting is even more challenging where service users present with added communication issues (for example due to underlying intellectual disabilities)’.

It is recommended that video media is used rather than telephone unless there are particular circumstances which suggest telephone is more appropriate. There can be some advantages in using telephone interpreting in a considered way as it can provide additional confidentiality and working in audio only can help service users feel more comfortable. This is particularly true if the person is from
a language community that is small, making it more difficult to maintain confidentiality. It has also been noted that using audio platforms can aid some service users to disclose issues of shame that might be impossible to talk about face-to-face or using video platforms.

In all situations in which the decision is made to use telephone for psychological work, this should be discussed with the service user in appointments and checked periodically for its impact on the process of psychological work. Whenever interpreting by telephone is used, a recognised and accredited agency should be employed.

In sessions using audio only it can be difficult to pace communication and there is a risk of speaking over one another. It may be important to establish turn taking, perhaps having a way to signal that you have finished speaking, using features such as ‘raise hand’ on the video call platform or with a specific word or gesture. This is particularly important to prevent the interpreter beginning to interpret too early and being inaudible because the service user has continued to speak.

**WORKING WITH BRITISH SIGN LANGUAGE (BSL) INTERPRETERS ONLINE/REMOTELY**

Most considerations for working with spoken language interpreters are also relevant for working with BSL interpreters. In addition, psychologists should consider the following.

The Association of Sign Language Interpreters (ASLI) stipulate that profoundly Deaf BSL users should not undertake any mental health (MH) assessments (for legal purposes) or psychometrics online. It should also be noted that only National Register of Communication Professionals working with deaf and deafblind people (NRCPD) registered interpreters with between two to three years MH experience post registration should be employed. Trainee sign language interpreters should not be booked for mental health work.

Payment terms differ from spoken language interpreters. When booking a BSL interpreter National Union of British Sign language Interpreters (NUBSLI), working and payment standards will be used. As well as the practical considerations set out above, the BSL interpreter should have a neutral background.

As above, the BSL interpreter will benefit from access to preparation information regarding history and diagnosis as well as aims of sessions before commencing, this will allow the interpreter to prepare before the session, making sure they have the suitable skillset and readily available contextual signs.

BSL Interpreters, particularly in mental health settings are likely to not just interpret what someone is saying, but also how they are saying it. Interpreters can also comment on language use and behaviours linked to deaf culture, which may be useful for the therapeutic process as this will allow the professional working with the service user to have an accurate understanding of their behaviour, emotional state and/or needs.

For best practice when working with a BSL interpreter remotely, sessions should last no more than an hour, this would mean that a co-worker would not be needed as this can often confuse the deaf service user (having two interpreters). Due to BSL being a visual language, the processing time will be lengthier than spoken language, so extra time will be needed to ensure the deaf service user fully understands.

Due to the new working conditions with Covid-19 and the implementation of face masks, face-to-face working may be challenging for BSL therefore remote working would be more suitable. If face-to-face sessions are required the professional may use a face mask. As deaf people are
now exempt from face masks, the BSL interpreter will/should have either a full-face shield or a clear face mask.

BSL Interpreters who are fully registered and have the relevant experience, are competent in their ability to follow NRCPD’s code of conduct. They should have clear boundaries during any meetings, sessions and appointments. The BSL interpreter is there to facilitate access for both the deaf and hearing participant equally. Psychologists can use the interpreter’s expertise to discuss what is needed and how, as they are part of the therapeutic process rather than just there for translation.

WORKING WITH DIFFERENT CLIENT GROUPS

Psychologists should consider variations in ways of working for all clients they engage with including those with complex needs, learning disabilities, autistic spectrum disorders, children, older people and other groups. Every effort will be made to provide equality of access, however, differences in needs and abilities will shape how services are delivered. Psychologists may refer to their member networks or practice networks for specialist advice.

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