

## Multilingual Health Resources by AHS, DoH and NGOs Funded by NSW Health (Guidelines for Production)

**Document Number** GL2005\_032

**Publication date** 27-Jan-2005

**Functional Sub group** Corporate Administration - Communications  
Clinical/ Patient Services - Information and data  
Clinical/ Patient Services - Non-English speaking

**Summary** Describes the steps that health workers should follow to find out about existing multilingual resources about producing new materials and about sharing them across the NSW health system.

**Author Branch** Media and Communications

**Branch contact** 9391 9574

**Applies to** Area Health Services/Chief Executive Governed Statutory Health Corporation, Board Governed Statutory Health Corporations, Affiliated Health Organisations, Community Health Centres, NSW Ambulance Service, NSW Dept of Health, Public Health Units, Public Hospitals

**Distributed to** Public Health System, Community Health Centres, NSW Ambulance Service, NSW Department of Health, Public Health Units, Public Hospitals

**Review date** 27-Jan-2010

**File No.** 01/5093

**Previous reference** 2001/99

**Issue date** 09-Oct-2001

**Status** Active

<b>File No</b>	01/5093
<b>Circular No</b>	2001/99
<b>Issued</b>	9 October 2001
<b>Contact</b>	Michael Kakakios (02) 9391 9462 Primary Health & Community Care Branch Justine Waters (02) 9391 9471 Health Public Affairs

## GUIDELINES FOR THE PRODUCTION OF MULTILINGUAL HEALTH RESOURCES BY AREA HEALTH SERVICES, NSW HEALTH DEPARTMENT AND NGOs FUNDED BY NSW HEALTH

The attached guidelines concerning the development of new multilingual health resources apply to all Area Health Services, the NSW Health Department and Non Government Organisations (NGOs) funded by NSW Health. This circular should be read in conjunction with the Circular 94/10: "Standard Procedures for the Use of Health Care Interpreters"

### What this circular says

It is NSW Government policy that people not fluent in the English language should receive, when possible, information, instructions and health education material in the language of their choice.

This circular describes the steps that health workers should follow to find out about existing multilingual resources, about producing new materials and about sharing them across the NSW Health system.

### Who this circular is for

This circular applies to all providers of health care services within the NSW Health system, central administration and NGOs funded by NSW Health.

## Contents:

1. POLICY BACKGROUND
2. OBLIGATIONS OF NSW HEALTH WORKERS
3. STANDARD PROCEDURES
4. EXISTING RESOURCES

Distributed in accordance with circular list(s):

A 98	B 17	C 90	D	E	73 Miller Street North Sydney NSW 2060
F 21	G	H 85	I	J 68	Locked Mail Bag 961 North Sydney NSW 2059
K	L	M	N	P	Telephone (02) 9391 9000 Facsimile (02) 9391 9101

In accordance with the provisions incorporated in the Accounts and Audit Determination, the Board of Directors, Chief Executive Officers and their equivalents, within a public health organisation, shall be held responsible for ensuring the observance of Departmental policy (including circulars and procedure manuals) as issued by the Minister and the Director-General of the Department of Health.

## **1. POLICY BACKGROUND**

1.1 As a result of a comprehensive review conducted by the NSW Government in 1995/96 a number of positive changes were made to the Ethnic Affairs Commission Act. These changes reinforced the Government's commitment to ensuring that people from culturally and linguistically diverse communities are included as an integral part of the social, cultural and economic future of NSW. More recently, the *Community Relations Commission and Principles of Multiculturalism Bill 2000* enshrined the principles of multiculturalism (formally known as the Principles of Cultural Diversity) as the policy of the State.

1.2 In summary these principles are:

### **Principal 1**

All individuals in New South Wales should have the greatest possible opportunity to contribute to, and participate in, all aspects of public life.

### **Principle 2**

All individuals and public institutions should respect and make provision for the culture, language and religion of others within an Australian legal and institutional framework where English is the common language.

### **Principle 3**

All individuals should have the greatest possible opportunity to make use of and participate in relevant activities and programs provided or administered by the Government of New South Wales.

### **Principle 4**

All public institutions of NSW should recognise the linguistic and cultural assets in the population of New South Wales as a valuable resource and promote this resource to maximise the development of the State.

1.3 Implementation of the Charter within the context of NSW Health continues to rely upon two policy principles:

- The right of equality of access to health care services regardless of cultural origin or linguistic skill; and
- The responsibility of the health system to respond appropriately to its target populations which include people of non-English speaking background. This responsibility includes modification of existing health services to reflect consumer needs and to develop and provide bridging programs and services which can deliver appropriate and effective health care (Health for a Culturally Diverse Society: An Implementation Plan, 1995).

1.4 The implementation of the principles of the Charter requires NSW Health to provide information and health resources in languages other than English. Individuals who are not

fluent in English should receive written information such as instructions and health education material, where it is available, in the language of their choice.

- 1.5 However, written patient information should not replace communication in clinical practice. For accurate communication with a patient/client a professional interpreter should be used.
- 1.6 In 1997 NSW Health Department established the NSW Multicultural Health Communication Service (Multicultural Communication) to produce, coordinate, collect and disseminate multilingual health resources of statewide applicability in NSW.
- 1.7 NSW Health Department is committed to the production new multilingual health resources based on identified priorities and statewide significance. Four or five resources are produced annually. Multicultural Communication provides advice to Health Public Affairs on subjects, languages and format.
- 1.8 Multicultural Communication produces a minimum of 11 multilingual fact sheets annually. Consultation, requests and research determine topics and languages. The content of all fact sheets is approved by the Chief Health Officer and are published on the Multicultural Communication website.
- 1.9 Sections of NSW Health, Area Health Services and NGOs producing multilingual resources should inform and negotiate with Multicultural Communication for inclusion of the resource on the website. Any multilingual resource placed on the website needs to be of statewide significance and approved by Health Public Affairs.

## **2. OBLIGATION NSW HEALTH WORKERS**

- 2.1 When developing multilingual resources the level of literacy of the community must be taken into account and alternatives to written information such as signs/symbols and audiovisual formats should be considered.
- 2.2 NSW health workers have three obligations in relation to multilingual health resources. These include enhancing duty of care by:
  - locating and using available resources
  - producing new material where appropriate resources are not available
  - sharing such resources across Area Health Services.

## **3. STANDARD PROCEDURES**

- 3.1 To ensure that good practice operates in the development and usage of multilingual

resources, all NSW Health employees involved in the production of new multilingual health resources are required to:

- familiarise themselves with multilingual health resources currently available
- observe the "*Procedures for Producing Multilingual Health Information*" set out in Appendix 1

There are two options for developing new material:

- to develop the content in English for translation into other language/s or
- to develop the content in the other language/s to be checked by back translation into English.

In either case, only accredited translators should be given the task of translating and checking the information as recommended in the *Procedures for Producing Multilingual Health Information*. In some new arrival and minority groups there are no accredited translators. In those cases advice should be sought from the NSW Health Care Interpreter Service.

- 3.2 To build a freely available and readily accessible store of resources for use by all employees of the NSW Health system, a copy of all new multilingual health resources is to be provided to the NSW Multicultural Health Communication Service.
- 3.3 NSW health workers and health workers employed by NGOs need to inform the Multicultural Health Communication Service about their resources. The Multicultural Health Communication Service will determine the statewide significance of these resources and will arrange for approval by Health Public Affairs to include them on the NSW Website.

#### **4. EXISTING RESOURCES**

- 4.1 Over recent years the NSW Health system has accumulated a significant number of multilingual health resources. Many of these resources are listed on the Multicultural Health Communication Service website and can be downloaded and printed from:
  - NSW HealthNet (Intranet):  
<http://internal.health.nsw.gov.au/health-public-affairs/mhcs>
  - NSW HealthWeb (Internet):  
<http://www.mhcs.health.nsw.gov.au>.
- 4.2 For the cost of a local call, a catalogue and individual multilingual health publications are available by fax from "the Health fax-back service: 1300 859 659"
- 4.3 Where Intranet or Internet access is not available the NSW Multicultural Health Communication Service can be contacted by telephone (02) 9382 7516 or, Facsimile (02) 9382 7517 to provide advice on local distribution points.

## **APPENDIX I**

### **PROCEDURES PRODUCING MULTILINGUAL HEALTH RESOURCES**

The information that follows relates to the preparation of multilingual resources. Detailed guidelines on every step of the translation, checking and production process are available from the website of the NSW Multicultural Health Communication Service. See *“Guidelines for health staff producing multilingual information”* and *“Seven steps-guidelines for checking a translation”*

### **RESEARCH**

To avoid duplication, before developing new multilingual health resources a check should be made as to whether any other resources are available to meet the need.

- See Catalogue Online,  
Intranet: <http://internal.health.nsw.gov.au/health-public-affairs/mhcs>,  
Internet: <http://mhcs.health.nsw.gov.au>); or
- Check with the NSW Multicultural Health Communication Service to ascertain if anyone else has worked on, or is currently working on, something similar; or
- Consult with the person responsible for Multicultural Health in the Area about possible new projects.

If other resources are not available, consideration should be given to producing a new resource. However, the following issues should be considered before developing a new resource.

- Is there suitable information already available in English?
- In which format will the resource be produced?
- How much money is available to undertake the work?
- ***What language/languages should the new publication be available in?***
- Who will do the work?
- Is written material the most appropriate way to reach target groups or would another medium be more effective (e.g. signs/symbols or audiovisual)?
- How will the resource will be distributed?

### **CONTENT**

Where clear, unambiguous English text is already available, it is preferable to use that text rather than attempt to rewrite it or develop something new. If new text is required, it should be written in plain English, avoiding medical or specialist health jargon, wherever possible. The final draft should be approved by the person responsible for Multicultural Health or the NSW Health Care Interpreter Service of the Area in which the new resource is to be provided. Statewide services, NGOs and Head Office sections should consult Multicultural Communication. Representatives of the target community should be involved in pilot testing the resource. This will ensure that the text is in a form that will be culturally appropriate when translated. Advice on how to obtain an interpreter should also be included.

### **COSTING**

Costs involved in the production of translated material can be broken down into translation, checking, proofreading, and typesetting. Printing costs will need to be estimated as well. Costs

depend on the number of words to be translated and the layout required. It is advisable to negotiate job fees with each translator or agency and to obtain estimates for these costs.

For Area Health resources and subject to availability of staff, the NSW Health Care Interpreter Service may be able to translate documents of up to 50 words which are essential for individual patient care. For documents over 50 words or languages not available to the NSW Health Care Interpreter Service, fees may apply.

### **LANGUAGES**

The languages selected for translation should reflect the need for the resource. This does not always mean that the information should be produced in all of the major languages. Consideration should be given to the relevance of the information to various communities, as well as the English language proficiency of the specific target groups. It is often the smaller, newer communities that have the greatest need for information in their own language. However, the literacy level in each target group should also be checked because a written resource is not always the most suitable format.

### **TRANSLATION**

Translators accredited by the National Accreditation Authority for Translators and Interpreters (NAATI) at the professional level (former level 3 or above) should, whenever possible, undertake translation and checking. However, professionally accredited translators of the desirable level may not be available for some of the newly arrived groups. In such cases Paraprofessional accreditation may be accepted or equivalent demonstration of competence to undertake translation.

It is possible to contract translators individually, or to engage the NSW Health Care Interpreter Service, South West Sydney Area Health Service Translation Unit, or a translation agency to undertake the work. If translation is to occur in only one language, it is relatively easily managed on an individual basis. However, if many languages are required, it may be advisable to work through the NSW Health Care Interpreter Service or a commercial agency. A list of agencies is available from the NSW Multicultural Health Communication Service. Always check with agencies that they are using accredited translators.

### **PRODUCING THE RESOURCE**

Details to be included when producing new resources include:

- who owns the publication
- the date of the publication
- name of agency or individual responsible for translation
- title headings and sub-headings are to be in the other language first (with the title in English following in a smaller font). This will help English-only health staff identify the publication and use it effectively.
- the name of the language should be printed on the front page in English and in the other language as well (e.g. Italian, italiano)

### **SHARING THE RESOURCE**

When a new resource is developed, it should be shared with other staff across the State. This process will be facilitated by the NSW Multicultural Health Communication Service through the inclusion of all relevant material on their website. All material, in English and other languages,

should be forwarded to the NSW Multicultural Health Communication Service (GPO Box 1614, Sydney 2001, or fax: (02) 9382 7517 or email [mhcs@sesahs.nsw.gov.au](mailto:mhcs@sesahs.nsw.gov.au)) for inclusion on the site.