

NHS Rotherham Clinical Commissioning Governing Body

Operational Executive – 20.02.17

Primary care sub-group – 22.02.17.

LMC Officers – 27.02.17.

Primary care committee – 08.03.17

Rotherham Interpreting Services

Lead Executive:	Chris Edwards
Lead Officer:	Jacqui Tuffnell / Rachel Garrison
Lead GP:	Jason Page

Purpose:

To give an overview of current interpreting provision and make a recommendation for practices with the highest number of BME patients.

Background:

SCAIS, who provided interpreting services for Rotherham, recently gave notice in relation to their services which prompted a review of our arrangements. We have now put in place arrangements to continue the same service provision with a new provider 'Big Word' via NHSE. However it has identified an inequity in service provision particularly in relation to the practices with a concentration of Slovak patients as there is a more significant requirement for interpretation.

In 2014, Shakespeare Road requested a new arrangement to group their Slovak patients together and enable an interpreter to attend practice once a week instead of requesting face to face each time. This arrangement was agreed by NHS England but is unique within Rotherham. It has been suggested that the telephone service is just as effective as face to face, therefore I visited to review the arrangement at Shakespeare Road. In my opinion, this service would be difficult to provide via telephone. The interpreter builds a rapport with the patient from coming into the room and the majority of the appointments involved a physical examination behind curtains. There is also significant patient education taking place as this community often attend with numerous concerns and do not conform to practice policy e.g. repeat prescriptions ordering, attending screening. My main concern is the rigidity of these patients being only able to attend practices on a particular day and time however I consider this is mitigated by the improved service available to patients with very little English. Patients do attend the practice at other points of the week but are required to bring someone with them who can interpret on their behalf.

Analysis of key issues and of risks

From review of arrangements in Sheffield who have a similarly large Slovak community, all the practices in the Page Hall area have at minimum 1 interpreting 'clinic' per week.

LMC officers have requested a review of the face to face interpreting arrangements because of concerns in relation to the equity of provision of service. This review has established that the practices with the highest number of patients from an ethnic background (the cut-off point being 2,500 patients) are:

Shakespeare Road – 59.2% / n3186 patients

The Gate – 66.15% / n4745 patients
 Woodstock Bower – 23% / n2598 patients
 St Anns – 14.3% / n2551 patients

Practices are currently using a variety of arrangements to support these patients e.g. Shakespeare Road and The Gate have employed Czech speaking reception staff as the proportion of patients are so high their ethnicities are 59.2% and 66.15%, compared to 23% and 14.3%.

Unfortunately, some practices have not been requesting face to face therefore the provision of a consistent service will be a cost pressure for the primary care budget.

The options therefore are as follows:

1 – No change – Shakespeare Road continue to receive interpreting services on a clinic basis as per their agreed request in 2014

2 – Cease the interpreting clinic arrangement at Shakespeare Road

3 – Enable the 4 practices with the highest concentration of BME (it is not possible to determine where the Roma Slovak population is concentrated as the data is not being consistently collected) to have the same clinic arrangement as Shakespeare Road.

<i>Practice</i>	<i>Current Usage</i>	<i>Cost</i>
St Ann's	Use of SCAIS - 100 Face to Face Interventions + 54.91 telephone hours (01.11.15 to 31.10.16)	£2,213.19
The Gate	Use of Language Line – details not available (01.04.16 to 31.01.17)	£4,312.30
Woodstock Bower	No information available	£0
Total		£6,525.49

Patient, Public and Stakeholder Involvement:

Not applicable

Equality Impact:

To be discussed with Alison Hague.

Financial Implications:

Based on a 4 hour clinic per practice per week provided by Big Word, the following costs apply:

<i>Service</i>	<i>Unit</i>	<i>Cost</i>
Face to Face Spoken Word	First 60 minutes	£27.00
Face to Face Spoken Word	Subsequent 15 minutes (x12 15 minute blocks per clinic)	£90.00
Face to Face Booking Fee	Per Booking	£3.50
Total cost per clinic per week		£120.50

£120.50 x 4 practices x 52 weeks = £25,064 minus current costs £6,525.49 = £18,539 cost

pressure to the primary care budget.

Human Resource Implications:

Not applicable

Procurement:

Not applicable

Approval history:

OE 20.02.17 – Supported as an interim measure for six months, with a view to moving to a locality model in the long term.

Recommendations:

All 4 practices should be offered the opportunity to have 1 face to face 'clinic' per week however they will be expected to not make ad-hoc requests for face-to-face to offset the additional costs of the new arrangements.