

Account of Equality Review of HSE Interpreter Services
in Community Healthcare West

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Glossary

CHW - Community Healthcare West (also known as Community Healthcare Organisation Area 2 and covering counties Galway, Mayo and Roscommon)

ESA - Equal Status Acts 2000-2018

HSE - Health Service Executive

IHREC - Irish Human Rights and Equality Commission (the Commission)

1. Introduction

The Commission invited the HSE under s. 32(1) of *the Irish Human Rights and Equality Commission Act 2014* (“the Act”) to carry out an Equality Review in relation to the provision of professional linguistic interpreter services to non-Irish nationals accessing free GP services.

Pursuant to s28(2) of the Act, this account provides a summary description of the Equality Review undertaken by the HSE in relation to this issue.

2. The reason for requesting the Equality Review

The *Equal Status Acts 2000-2018* (“the ESA”) prohibit certain kinds of discrimination in the provision of goods, facilities and services, including healthcare. The legislation protects against discrimination on ten specific grounds, including race. Under section 3(2)(h) the race ground protects those “of different race, colour, nationality or ethnic or national origins”.

Under the ESA, service providers - such as the HSE in the provision of General Practitioner services to those who are entitled to this service for free – must not discriminate unlawfully on grounds of race.

The Health Professionals (Reduction of Payments to General Practitioners) Regulation 2013, SI No 277 of 2013, provides for payment in respect of services rendered by a General Practitioner to or on behalf of the HSE, under the General Medical Services Scheme and other relevant statutory and non-statutory schemes. General Practitioners are paid a capitation fee in respect of those with full or limited eligibility for the relevant health service in respect of medical card, and GP visit card holders.

In 2009 the HSE published “On Speaking Terms: Good Practice Guidelines for HSE Staff in the Provision of Interpreting Services” (the ‘2009 Guidelines’) which recognises the importance of providing professional interpreting services to patients. The 2009 Guidelines make specific reference to the HSE’s obligations under the Equal Status Acts (the ‘ESA’), providing that:

“...failing to provide interpreting facilities in relation to service provision, when it is known that there is a language barrier, could be construed as unlawful racial discrimination”.

The 2009 Guidelines further identify the importance of informed consent in the context of providing medical services. It also directs medical staff to inform patients of their ‘right’ to have an interpreter present during consultations or, other medical procedures. The 2009 Guidelines also state that there is no cost implication on the patient and that HSE staff will arrange this.

However, in January 2016, it came to the Commission’s attention that, despite the 2009 Guidelines, there appeared to be a lack of clarity over the availability of a scheme and its sufficiency and workability for GPs to cover the cost of professional interpretation or translation services where such services were deemed necessary for patients holding a medical card or a GP visit card. In 2017 the Commission sought clarification from the HSE on the availability of funding for such services and the HSE confirmed that central funding was not available to cover the costs of these services in all cases.

The Commission was concerned that a lack of central funding for professional linguistic interpreter services, or a lack of clarity as to the availability and accessibility of such funding,

had the likely outcome of non-Irish nationals being treated less favourably in accessing primary healthcare services.

3. Invitation to conduct an Equality Review

On 6 April 2018, the Commission wrote to the HSE inviting it to undertake an equality review to examine the treatment of non-Irish nationals who are entitled to free GP services and who cannot speak English, or have limited English, in accessing those services in a particular one of the HSE's functional areas, having regard to the HSE's obligations under the ESA.

It was further asked to review its practices, procedures and other relevant factors in relation to the provision of interpretation services to these service-users, again having regard to the HSE's obligations under the ESA.

The Commission identified Community Healthcare West ("CHW", also known as Community Health Organisation Area 2 and covering counties Galway, Mayo and Roscommon) as the functional area to be the focus of the equality review on the basis that it contains a major urban centre as well as county towns and more rural areas and would therefore be reflective of the different contexts in which GP services operate.

4. Timeframe

In June 2018, the Commission requested that the HSE complete the equality review within a set time period. The HSE requested an extension of time to complete the review and the Commission agreed to the extended timeframe.

The HSE carried out a survey of a selection of GPs in CHW between 19 July 2018 and 3 August 2018.

The Commission received the HSE's Equality Review on 4 September 2018.

5. Scope of the Equality Review

As part of the Equality Review process, the HSE examined its records to establish the level of interpretation services in place in CHW and advised the following:

- a) A system was put in place in 2004 that allowed GPs to engage and pay for an interpretation service chosen from a list of companies provided by the HSE and to recoup the cost from the HSE. The uptake of this service had declined in recent years;
- b) A large number of people had moved to the area in recent years as part of Resettlement/Relocation Programmes. In respect of those patients, GPs could engage HSE approved interpreters whose fee is paid directly by the HSE on receipt of an invoice. This service is used extensively by GPs; and
- c) Approximately €1000 was recouped by GPs in 2017 in respect of the service at (a), whereas approximately €80,000 was paid directly to companies providing services at (b).

Further, by letter dated 19 July 2018, the HSE sought the views, by way of questionnaire, of 50 GPs in the CHW area in relation to the provision of interpretation services. The HSE advised that this represented approximately 15% of GPs in the area. The questionnaire sought the GPs' views in relation to their awareness of HSE funded interpretation services, the number of patients holding medical cards requiring interpretation services, the number of times interpretation services were availed of in 2017, the type of interpretation service used and whether any difficulty was experienced in accessing interpretation services in 2017. The questionnaire also invited GPs to make any other comments in relation to interpretation services in CHW.

6. Survey responses

The Equality Review advised that there was a 70% response rate to the questionnaire, with responses received from 35 of the 50 GPs asked to complete it, and that the responses indicated that:

- 31% of GPs reported that they were not aware that a HSE funded interpretation service was available, while 69% were aware of this;
- 2% of patients holding a medical card require interpretation services;
- 26% of GPs availed of interpretation services in 2017;
- The type of interpretation service used was
 - Interpreter in surgery - 44%
 - Telephone – 25%
 - Other – 31% (including “provided own interpreter”, “provided by a friend or relation of patient” and “Google Translate”); and
- 17% of GPs reported difficulties in accessing interpretation services whilst 43% reported no difficulties. The remaining 40% reported that this question was not applicable to them.

Some of the reasons given by those who experienced difficulties in accessing interpretation services included being unaware of the availability of the service or how to access the service, a lack of availability of a suitable and qualified interpreter and a lack of notice from patients that an interpretation service was required.

General comments received from GPs in response to the questionnaire raised the need for more information on how HSE-funded interpreter services could be accessed.

7. Findings of the Equality Review

The findings of the Equality Review highlighted the need to improve the provision of HSE-funded interpretation services in CHW and to increase awareness amongst GPs in the area as to how these services can be accessed.

Based on the findings of the Equality Review, the HSE identified a number of measures it hoped would increase the uptake of HSE-funded interpretation services by GPs in CHW and result in the provision of an improved service to non-Irish nationals who cannot speak English, or who have limited English. These measures included:

- Seeking additional funding for the enhancement of interpretation services in CHW;
- Notifying all GPs of the availability of a HSE funded interpretation service;
- Providing GPs with contact details of companies in a position to provide interpretation services;
- Advising GPs that payment will now be made in all cases directly by the HSE to the company providing the interpretation service rather than the GP being responsible for payment and having to recoup the costs from the HSE;
- Encouraging GPs to engage professional interpretation services rather than depending on other means such as a family member or Google Translate; and
- Keeping the matter under review.

8. Conclusion

The Commission welcomed the HSE's positive engagement with the Equality Review process but noted with concern the findings in relation to the current model for the provision of professional interpreter services to GP practices. The Commission welcomed the recommendations arising from the Equality Review to address these findings. The Commission subsequently invited the HSE to develop an Equality Action Plan to ensure the implementation of the findings of the Equality Review undertaken in respect of HSE CHW.