

Dear Sir/Madam

This is a follow up response relating to foreign language interpretation.

**Please find our response below:**

**Interpretation services in maternity care for 2013/14, 2012/13, 2011/12, 2010/11 and 2009/10**

It is not possible to break down the costs into maternity services. The Trust has an in-house bi-lingual advocacy service that provides support to all acute and community services via a number of ways i.e. internal staff, interpreters from external agencies and provision of telephone interpreting (see summary below).

The total cost over the years for the bi-lingual health advocacy service across both acute and community services is listed below:

	Acute	Community
2013/14	271,212	953,618
2012/13	297,953	842,172
2011/12	326,117	862,926
2010/11	952,000	443,386
2009/10	1.2m	400,248

**The most common language for which interpretation was required in each of those years?**

In each year the most common language requested was Turkish.

**Include both consultant led and midwife led maternity units?**

Unable to breakdown demand by maternity services.

**The following is a summary of the advocacy service provided by the Trust:-**

Homerton University Hospital NHS Foundation Trust (HUHFT) has an in-house bi-lingual health advocacy service divided into two teams working across the acute setting and community health services. The advocacy model of support assist users of health services who are in an unequal power relationship in their dealings with service providers, and health service staff. This is particularly so for people who come from a different ethnic and cultural backgrounds and who cannot communicate fluently in English, or those who have a physical, and, or sensory disability. The fundamental emphasis and focus of advocacy is that it sees things from the user's perspective and aims to support the user through their NHS journey and improve the user's health and well-being.

Bi-lingual health advocacy is primarily an advocacy service but there are occasions when it is appropriate for an advocate to act solely as an interpreter. For example, when just passing information or when the service provider and or service user require only interpreting.

Bi-lingual health advocacy aims to supply any language requested including BSL (British Sign Language) and meet the needs of services and users as much as is reasonably possible. Where the in-house teams cannot provide the language either because they do not have this language in-house or staff who speak that language are not available then interpreters will be booked from external suppliers.

In addition HUHFT commissions and monitors telephone interpreting services used by hospital staff and community staff to support them in emergencies or out of hours.

HUHFT also has service level agreements (SLAs) with three local community organisations that provide both bi-lingual advocacy in Turkish and Kurdish, Cantonese and Mandarin as well as advocacy for the physically and sensory disabled on its behalf.

If you have any queries about this response please contact the information governance manager at [foi@homerton.nhs.uk](mailto:foi@homerton.nhs.uk) , in the first instance. If, following that, you still have any concerns, you may contact the Information Commissioner either by letter, FOI/EIR Complaints resolution, Wycliffe House, Water Lane, Wilmslow, Cheshire SM9 5AF, or by email [www.informationcommissioner.gov.uk](http://www.informationcommissioner.gov.uk) to take them further.

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Yours sincerely

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