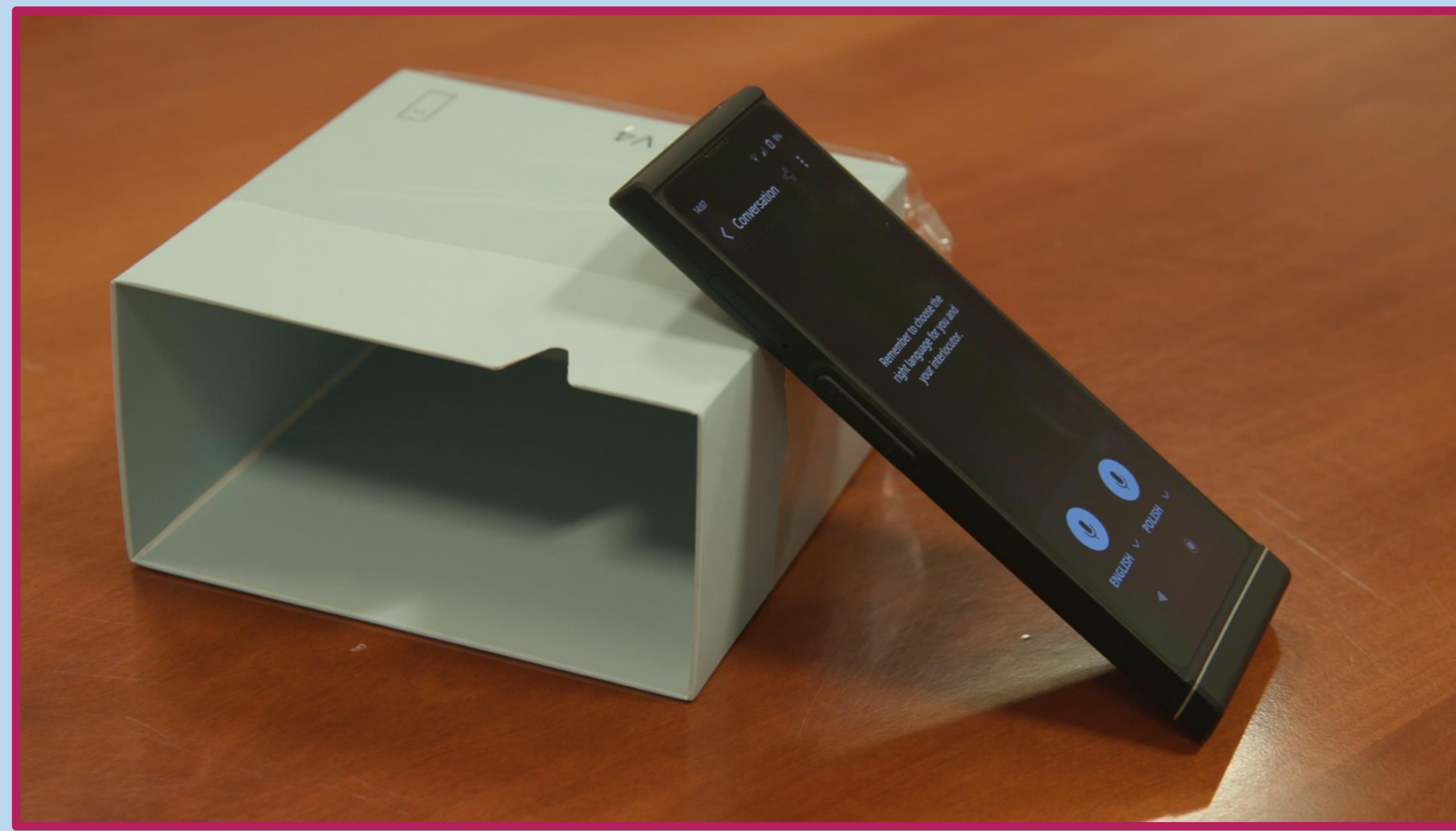


AIM

Partnership and Community Development to Reduce the Impact of Language Barriers within Ethnic Minority communities utilising digital translation devices.



Scan the QR Code to view the team discussing the project

WHY?

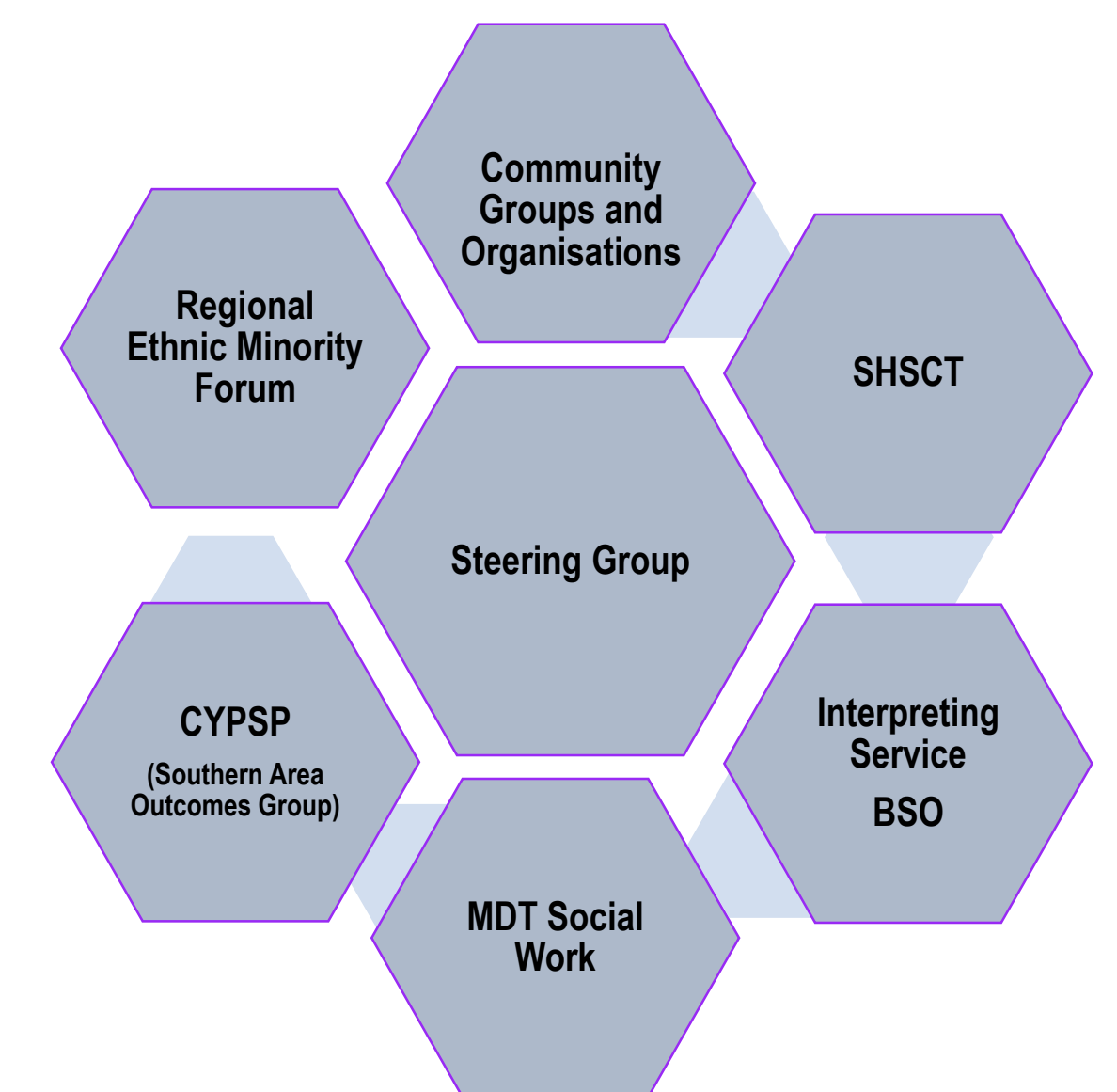
- Language support needs not always known by HSC services.
- Needs assessment (2022) outlined key barriers: Supported by National and international research.
- Language Identification Poster and interpreter card to be displayed in all Health care premises.
- 3rd sector organisations may not have access to interpreting support



Top languages used:



Co-production & Co-design



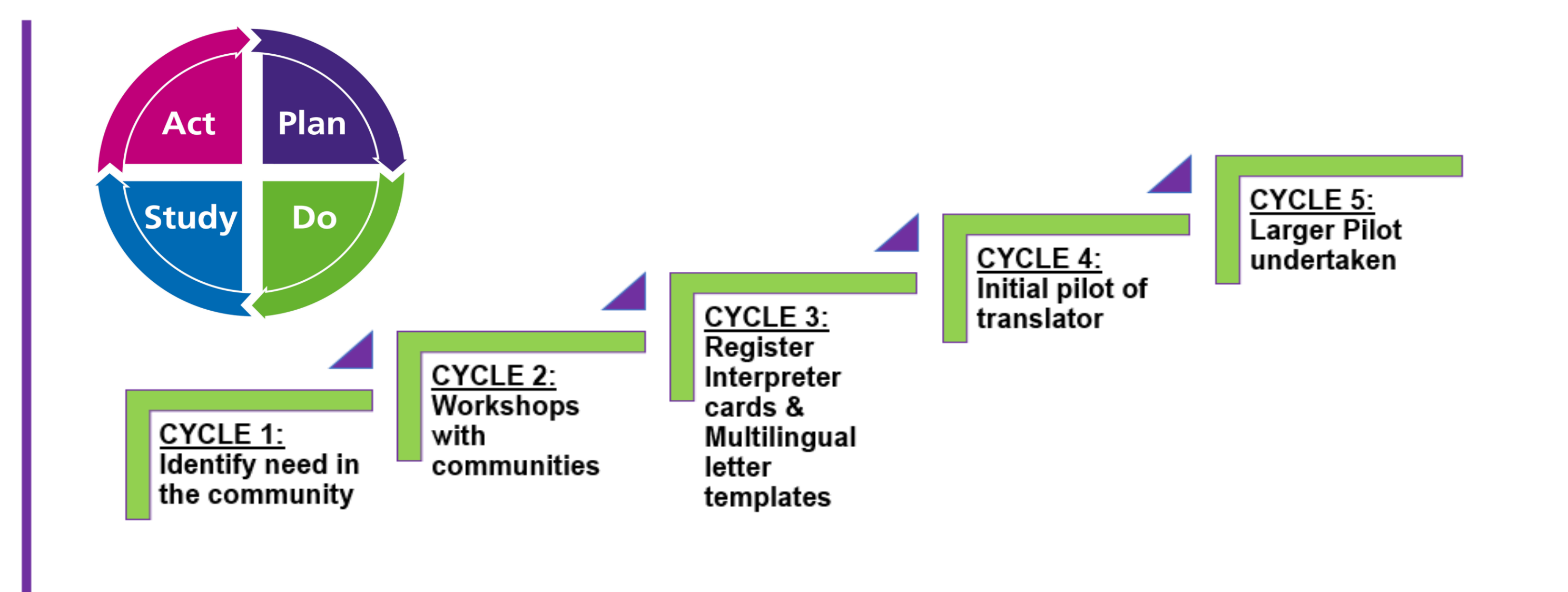
THE PROBLEM

Language barrier identified as biggest obstacle in accessing services for minority ethnic communities (CYPSP, 2022)

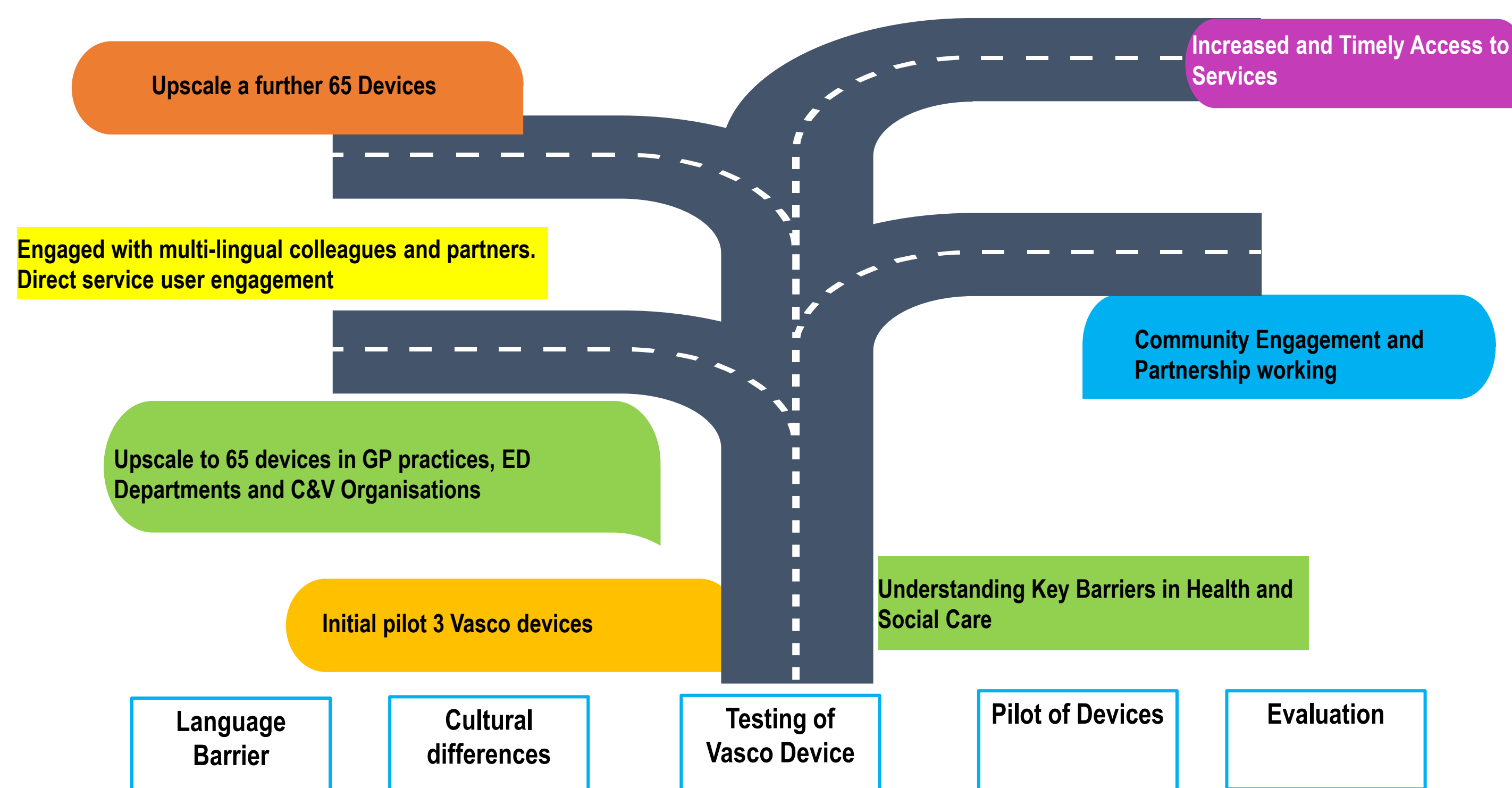
1. Language support needs not always known by HSC services.
2. Particularly challenging in unscheduled, crisis, emergency and community context.
3. Service users not receiving timely access to support services causing delays and escalation of issues.
4. Service users experience not positive, culturally sensitive and can lead to poorer health and wellbeing outcomes



PDSA CYCLES - Training and Development



What we did:

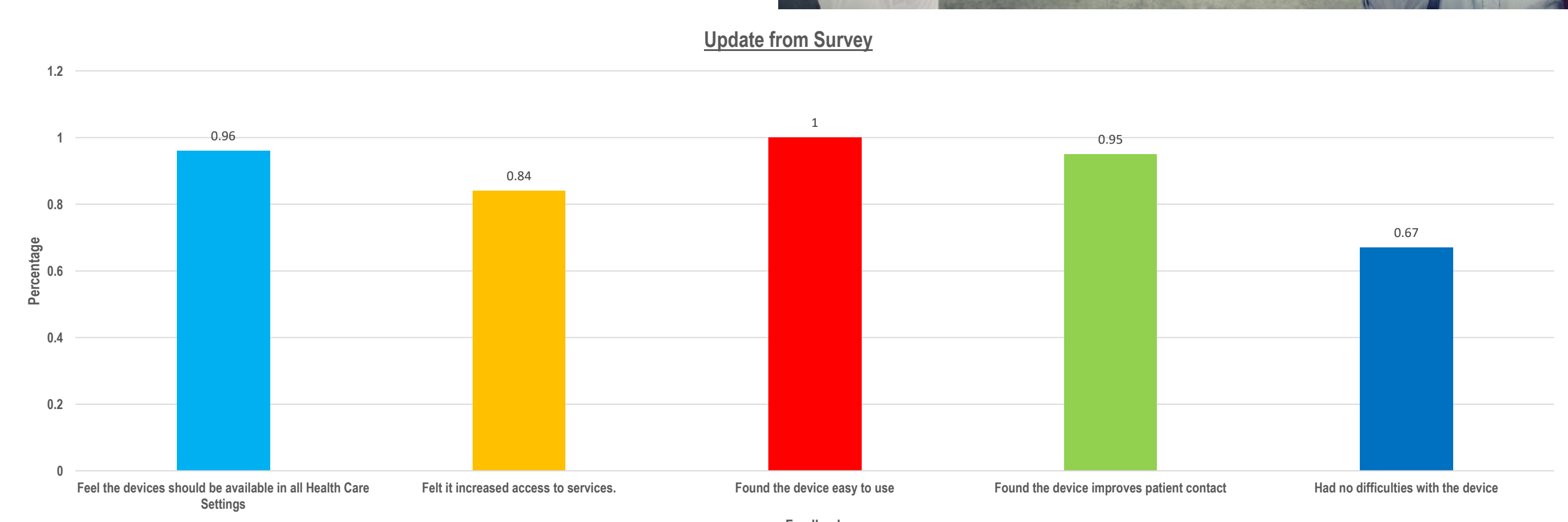


CONCLUSIONS AND LEARNING:

1. Improved accessibility to the right service at the right time with the right support.
2. Increased confidence for staff and service users during initial contact.
3. Easier referral pathways for both service user and staff to navigate.
4. Increased staff knowledge and skills re; impact of language barrier and HSC inequalities.
5. Improved co-working and communication with our colleagues across all directorates.

OUTCOMES

- 100% Found this device easy to use
- 95% found the device improves patient contact.
- 84% felt it increased access to services.
- 96% feel the devices should be available in all Health Care Settings.



NEXT STEPS

- Continue to review and monitor gathering feedback from staff and service users
- Establish review panel to share learning, recommendations and further funding.

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