



Anglo-Slovak Translations

Corascendea Cathar PhD
27 New Barn Avenue
Cheltenham, GL52 3LL
Tel: 01242 580287
Mobile: 07969511138
info@angloslovaktranslations.com

Normal spoken . Business . Legal . Medical

Direct Slovak Interpretation, Translations, Mediation

Proof reading and Editing

Simultaneous Conference Interpreting

In person, On Skype, over the phone

Experienced professional translator, with a superb track record, medical and business specialist.

Author on international business management, philosophy and ideological issues.

Alleged “indispensable” and “nice and caring personality” as per NHS Petition of 101, and many personal letters from medical professionals and patients.

Born and educated in Slovakia, British Citizen since 1983. Work experience included Anglo-German corporate management research for a major British University, and international business consultancy for British companies seeking to do business in central Europe.

Full CRB including for work with children and vulnerable people.

For a CV please refer to “Personal Details” via the Home Page at:

<http://angloslovaktranslations.com>

Proper understanding between individuals speaking different languages means more than a conversion of equivalent words. It also involves the understanding of where each of the participants is coming from, and what their expectations may be, based on their cultural experiences and upbringing. Cultural differences even between different countries of Europe are often substantial. In the UK they tend to be ignored.

Advice:

Many language companies will assert that they have many (it could be “thousands”) of qualified interpreters to choose from and they will ask you to commit to a contract before you can speak to one. The companies display accreditations on their website. You will be expected to imagine that the accreditations apply to all persons working for that company. That almost certainly will not be the case. Language companies have been seen winning major government contracts by quoting accreditations of non-existing interpreters. (For details of an example of a contract for Slovak interpreters the company did not have click here: <http://www.angloslovaktranslations.com/documents/interface.pdf> The consequences of failing to supply the contracted services to the NHS seemed of no concern to the company and to those involved in the selection.)

What you may want to bear in mind:



Slovakia in the European Union, circled

If quality matters to you and you are free to choose, you have the right to ask questions. You ought to ask to speak to the interpreter before you commit, and to be shown examples of written work.

If you speak with the interpreter beforehand, it gives you the opportunity to ask him or her about their experience and qualifications and how long they are working as a linguist. You will get a

taster of their English and an indication of their overall level of education. (So you are not surprised if your possible translation advises people to write their name and date of birth on tampons. This is not a joke; see the actual translation, on behalf of the NHS, in “Anglo-Slovak Interface” at the above link.) Substituting languages, particularly the Slovak language with other, believed to be “similar”, languages is also common. You expect a translation, but may end up with an approximate guess work, or even with an embarrassing laughing stock. Examples, in form of “letters by hospital consultants”, presumably by cleaning personnel via Google, but charged at hundreds of £’ to the NHS have been presented to various bodies, including those who accredited the agent.

You would not buy any other service based on the claims of someone willing to take your money. Not even if supported with references from their partners whose personal rewards may depend on self-praise in evaluating a delivery they commissioned, but which is “Chinese” to anyone else. You would not take any notice of certifications that cannot be linked to specific names. The accrediting bodies live off the fees of those who apply for accreditation and survive only if allowing a certain volume to pass.

But you soon get a feel when speaking to an interpreter on the phone. Don't be daunted by the fact that you do not speak the language; the interpreter is expected to speak good English, and you are the customer.

An example:

Below is an exchange of correspondence between an "Enquirer" and a sales manager of a company that won in 2009 a large government contract for the delivery of language services to the Gloucestershire NHS, including in 24/7 life and death situations. When it came to the delivery, the company did not have a single Slovak interpreter to show. But this is what they said when another company enquired (actual names are not shown):

--- On **Mon, 10/8/09**, **Axxxxx Mxxxxx** <axxxx@xxxxxnetwork.com> wrote:

From: **Axxxxx Mxxxxx** <axxxx@xxxxxnetwork.com>

Subject: RE: Re: QUOTE PN/AM/07/08/2009_interpreting hourly and instructions - clarification.

To: "An Enquirer" <an_enquirer@yahoo.com>

Date: Monday, 10 August, 2009, 9:17 AM

Dear "Enquirer",

Good morning, I trust that you had a nice weekend? Please find some details in response to your questions below. – see also the body of the email below with the direct answers to each of your questions. I marked them in a different colour to make it easier for you.

I would like to take this opportunity to stress that we are one of the largest organisations delivering language services in the UK. We have satisfied many extremely stringent government procurement criteria and delivery to government organisations such as the DWP, Jobcentre Plus, Home Office, Police Forces, NHS organisations and charitable organisations. We work with over 5000 linguists in the UK, all of whom are CRB checked and comply with all current legislation in relation to working with vulnerable people. We provide interpreters for extremely complex requirements and I am confident that we will be able to provide a suitable interpreter for you. We provide 100-200 interpreters on daily basis and our customer satisfaction rates are above 95%.

Of course we will be able to arrange a telephone conversation prior to your meeting once you have placed a booking and we have allocated an interpreter to you. Please let me know if you have any further questions at this stage. I look forward to receiving a booking form. (Red emphasis added.)

Axxxx

Axxxxx Mxxxxx

Jobcentre Plus Account Manager

Dear Axxxxx,

Thank you for your e-mail with booking form. However, we cannot make a binding booking without having a clue of what we may be buying. We expect to receive a quote indicating the qualifications, experience, and possibly name of the interpreter who may attend. Also, when speaking on the telephone, you had indicated that you have many Slovak interpreters local to Gloucestershire, but the form envisages more than 3 hours travelling time, capped to three hours. And, there is no capping on expenses. This means that theoretically at least, your person could be arriving from Aberdeen by a taxi.

We are prepared to pay a fair price, but we need to know what you can supply. Please urgently quote: (NB :The company's "replies" are inserted in green.)

1. Qualifications of interpreter. We work with over 5000 language specialists in the UK. Our interpreters have a degree or equivalent qualifications and appropriate experience for the assignments they are sent to. We work with over 1100 clients and always provide interpreters as per specification.

2. Qualifications/experience in relation to medical terminology, Yes, interpreters used to translate for our clients within the medical sector will have all required qualifications. We work with many NHS Trusts. In your area we work with Gloucestershire PCT. Interpreters sent to interpret in hospitals have appropriate qualifications such as DPSI, health option.

3. How long resident in the UK, and an indication of age category – we work with over 5000 language specialists and can provide interpreters from all age groups. Their individual period of residency will vary and many of them are UK citizens.

4. Location – I am not sure what I mean by this question. Due to very high number of interpreters (approx 300 in your area it is impossible for me to give you all of their exact locations)

5. Anticipated travelling time and expenses – Once you have placed the booking with us, we will then allocate the nearest, suitable interpreter. The travel time will not exceed 3 hours.

6. Ideally References from health service related environment – Would you like to receive our references?

7. CRB from country of origin if less than 10 years resident in the UK – all of our interpreters have appropriate CRB checks. It is a requirement for persons dealing with vulnerable persons.

As I said during our telephone conversation, the venue at which we require interpretation will be a conference with talks and case studies between Gloucestershire holistic and orthodox therapists, and visitors, including medical specialists, from Slovakia. It will include in-depth case studies of real people. It is now almost certain that the date will be 21st August, but there could be some flexibility. Quality interpretation is very important, and a condition is that we will initially briefly speak to the interpreter on the telephone. Please advise whether this is possible, by return of e-mail. If yes, we would ideally welcome the telephone number on which the interpreter can be spoken to. We are happy to phone at a time that you may specify.

We look forward to briefly speaking with your interpreter, and receiving his or her details along the above 7 points. We look forward to our collaboration, and we trust that your representative will enjoy taking part in our Anglo-Slovak talks.

Yours sincerely,

Enquirer

How this ended:

Because the company has not given an actual answer to a single one of the seven questions asked regarding their interpreter, the company did not get a deal from the two

volunteer pensioners organising the event over a weekend. But that same language company won a major NHS contract based on presumably the same or similar marketing drive and outright lies, while unable to show a single individual as specified. Several NHS executives were paid their executive salaries for a period of up to two years to specify that they want this and to buy this - effectively non-existing Slovak service.

At the same time nurses' salaries were cut and the closure of hospital beds had been threatened for an alleged lack of money. Of course, these organisers could not accept that the contract had failed, and they sacked and persecuted the person who exposed the result of that Slovak contract. The consequences to the patients who lost their service with the new contract were of no concern to those responsible.

Formal accreditations:

That company cited BS5750 or ISO9002 for Slovak interpreters it did not have - that much for the worth of British Standards in relation to foreign languages.



The worth of BM Trada accreditations is in that they can be bought and it appears, they cannot be easily recalled. So far the company did not have recalled its BM Trada accreditation even though they failed to deliver the Slovak contract. (Left, some of that company's accreditations.)

When informed that the company won a major NHS contract for non-existing Slovak interpreters which put up to 200 lives at risk, the Association of Translation Companies seems to have initially suspended their membership. But the language company had the membership soon restored, even though it became official that it won the Slovak contract without having delivered any Slovak interpreters fitting the qualifications cited. After all, it is the language companies who pay the membership fees, and they cannot be all suspended.



Even though the company had no Slovak interpreters to cover the Slovak contract entered into, almost certainly some of the directors had nice holiday villas in exotic countries in addition to one of them having advertised his karate black belt on the company's web.

The language trade had become nearly a monopoly in the hands of agents who built their relationships with public bodies. Professional service based on personal responsibility is pushed out. The trade had come to rely on networking and references to accreditations, financial guarantees, and all kinds of certifications and memberships. The customer is barraged with impressive and even aggressive marketing while he or she cannot check what they are likely to be getting.



Because in relation to Slovak, demand appears to exceed availability, much of the provision is done on the telephone. The providers of telephone language services appear to practice a no minimum rate of pay for people working from home as "telephone interpreters". Such casual workers have no employment rights, and it may be sweat shops of the worst possible kind, including right here, in the UK:

Based on the details given to me by a telephone language provider, whose customers are/were several government bodies, including the police, people working as telephone interpreters agree to a wage that is an insult to anyone expected to have completed university education. The alleged wage is likely to be £12 - £14.50 per hour. But the interpreters are not paid even that, because they are not paid by the hour required to be available - they are paid for the time actually connected on the phone, while a minimum time they would be connected is not guaranteed. So, theoretically it could be 10 minutes (for which they would be paid in the region of £2). But they are required to be for a minimum of 8 hours a day near a phone with the headphones on, and ready to take calls. As they have the "great advantage" of doing this from the comfort of their own home, and hence they need not travel, they are not paid a penny for the time they may be waiting and unable to do anything else. And presumably, this is "legal".

Having read this, you will not be too surprised to learn that during an instance of a telephone interpretation at a GP a patient at GL1 was not given a Slovak interpreter, and the Czech speaker on the other line asked the patient what is "thrombosis". The seriously ill patient could see that the telephone "interpreter" was leaving gaps and could not translate adequately what the patient was saying. But the distressed patient had no means to alert the doctor to the inadequacies, and hence the doctor who knew nothing of what was going on between the patient and the "interpreter", was presumably, "satisfied" with the service. How can people who do not understand a single word of the other language assess the quality of the services they witness? A complaint of 24.09.09 was registered with the GP, but has not received a response from the NHS administration who secured that provision.