

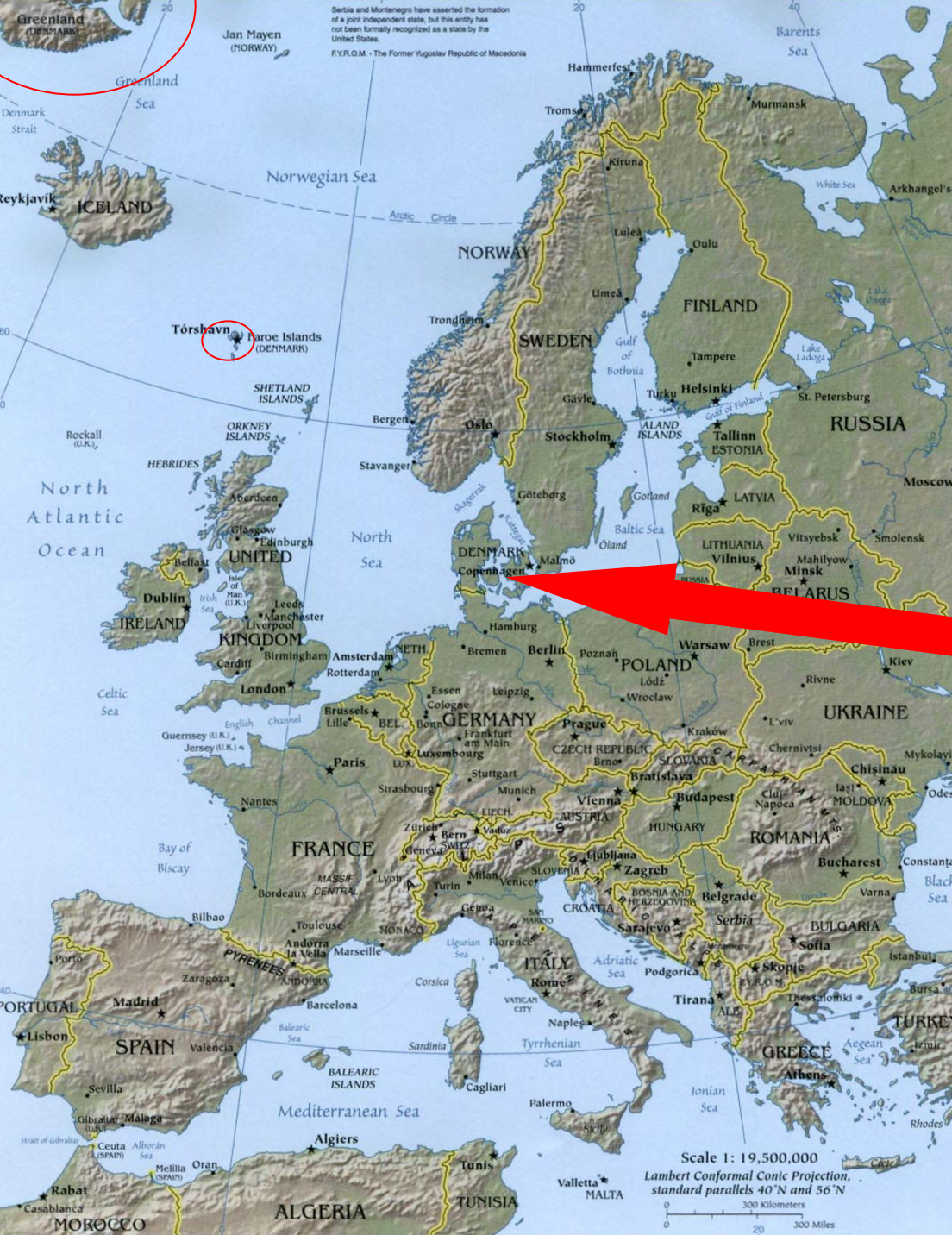
# How to manage the translation of a terminology

Palle Gerry Petersen

· the National Board of Health, Denmark

14<sup>th</sup> of October 2011





43,098.31 km<sup>2</sup>  
population 5,5 mill

# International ↔ National

## International:

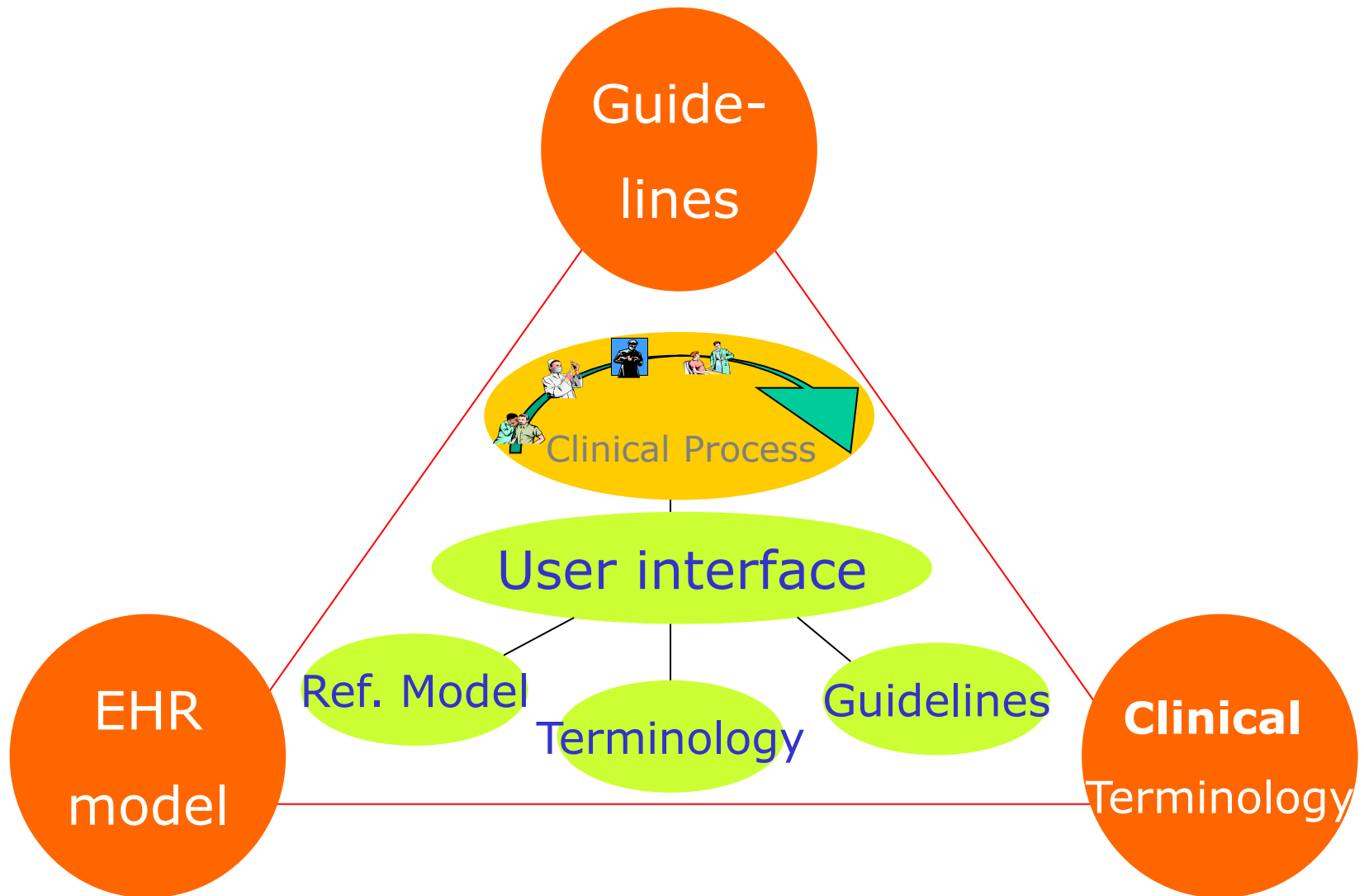
- Share experiences
- Share knowledge
- Share resources
  - People
  - Technology
- Collaboration
- Translation

## National:

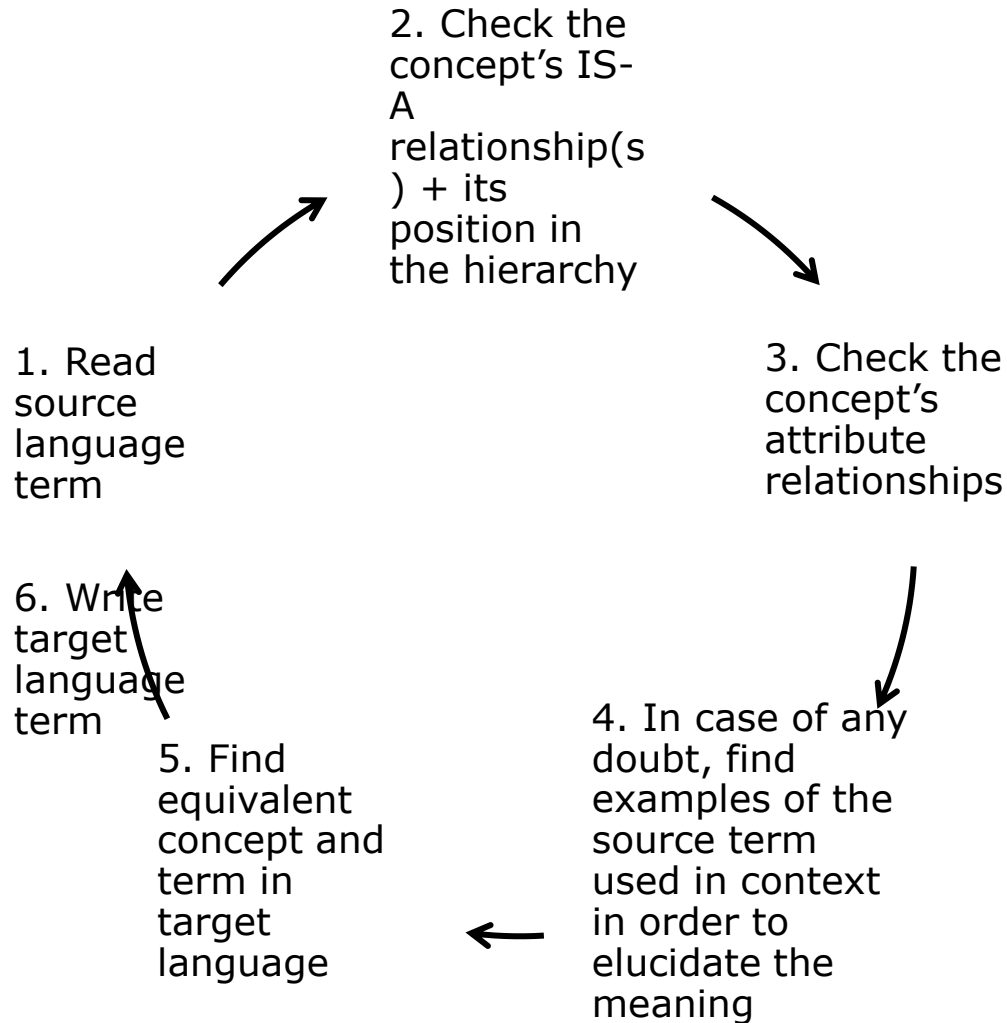
- Meet your own needs
- No need to discuss with other countries
- Maintenance process
- Clinical leads have more direct influence on content

# Goal and Objective for the Danish Translation

- Goal
  - To provide a national resource of terminology and classifications to the health care sector
    - By a systematic quality assured translation of the major part of SNOMED CT
- Objective
  - To have a terminology for use in a structured EHR solution



# Concept based translation



# Preparing a Translation Project

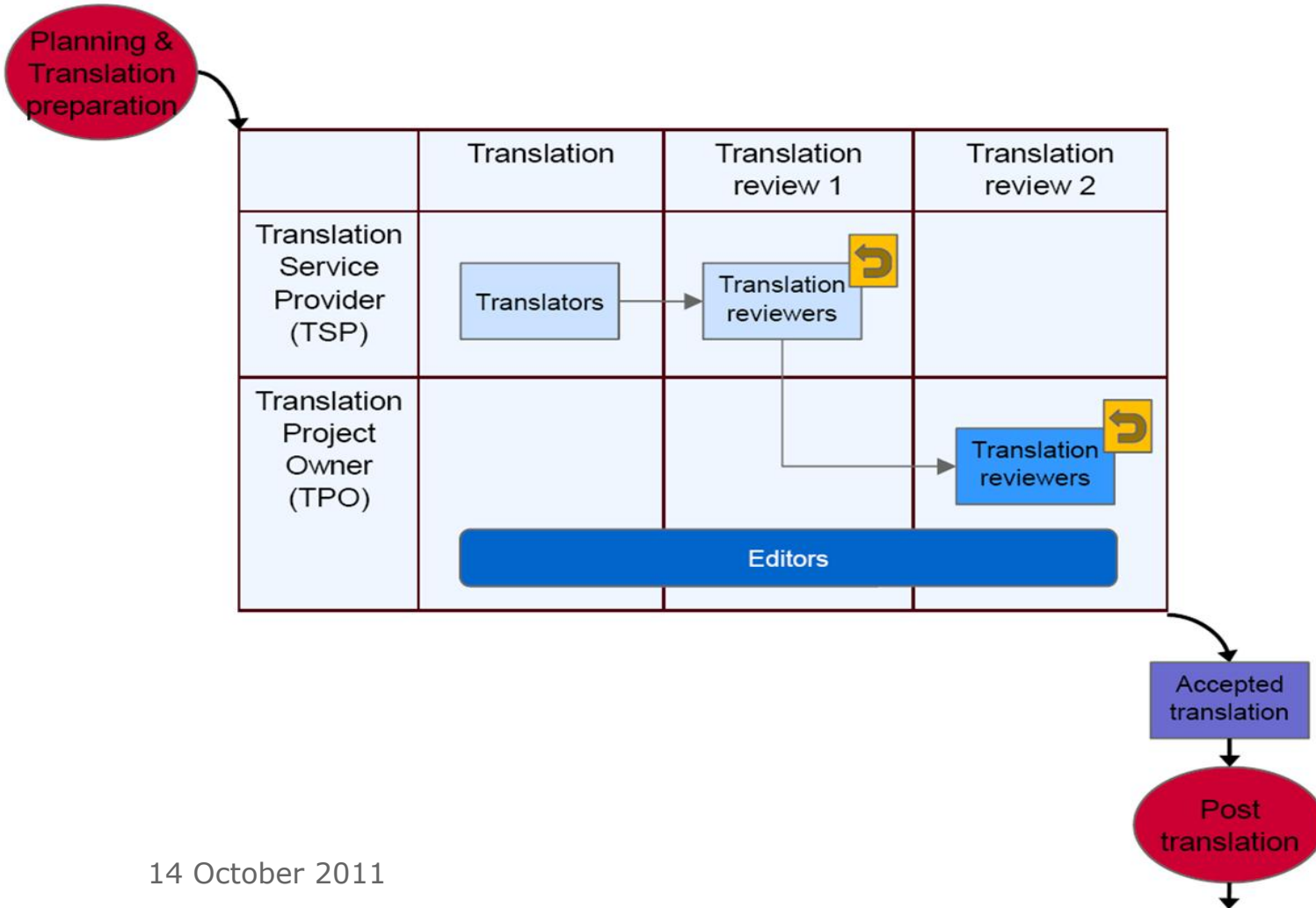


# Preparing a Translation Project

- Workflow design
- Organisation
  - Tender and contract:
    - Translation Service Provider
    - It development and support
  - Education and maintaining competences
- Necessary translation support
- It support
- Education
- Resources



# Workflow



# Organisation

## **A team of specialists**

- Medically skilled translators
- Health and social care professionals
- Terminologists

## **With different roles**

- Translation (bilingual)
- Translation review (monolingual)
- Editing (bilingual )

# Necessary Translation Support

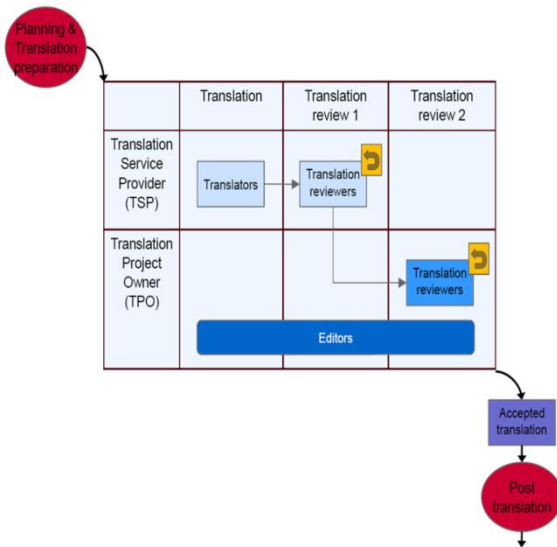
- National Translation Guideline
  - National and cultural variations
    - *Social context, Regime/therapy, Environment or geographical location, Substance and Pharmaceutical/biological product*
  - General and specific guidance
- Decision of Principle
  - *Build up and maintained along with the progress in the translation work*
- Medical books
  - The ones used in teaching Medicine in the country
- Concordance - transparency

# Essentials

- **Scalability**
  - Number of concepts
  - Translation capacity
  - Review and editorial capacity
- **Transparency**
  - Sharing and adding knowledge during translation
  - Planning and follow-up

# IT Support

- Browser presenting both specific concept information and a overview
- Support of the translation workflow
  - Subset and breakdown in smaller parts
  - Listings and detailed forms
  - Translation support
    - Translation Guideline
    - Decision of Principles
    - Medical Books
    - Concordance and status
- **Change translated terms after 'post translation'**
- Manage people and roles
  - Workflow management - change functionality
  - Statistics



# Education and Training



- Terminology, classification and health informatics
- Structure and content of SNOMED CT®
- Concept based translation
- Translation process

# Resources

## Internal

- 1 project manager
- 1/2 project coordination
- 1 terminologist
- 1/2 editorial
- Review:
  - 30 hours per 1000 concepts

## External

- Translation company
  - Fixed price per term
- It solution
  - Pay per hour
  - Fixed price



# Running the Translation Project





# Running the Translation Project

- Pick the best subsets
- Translation process control
- Editorial processes
- Risk management
- Quality parameters

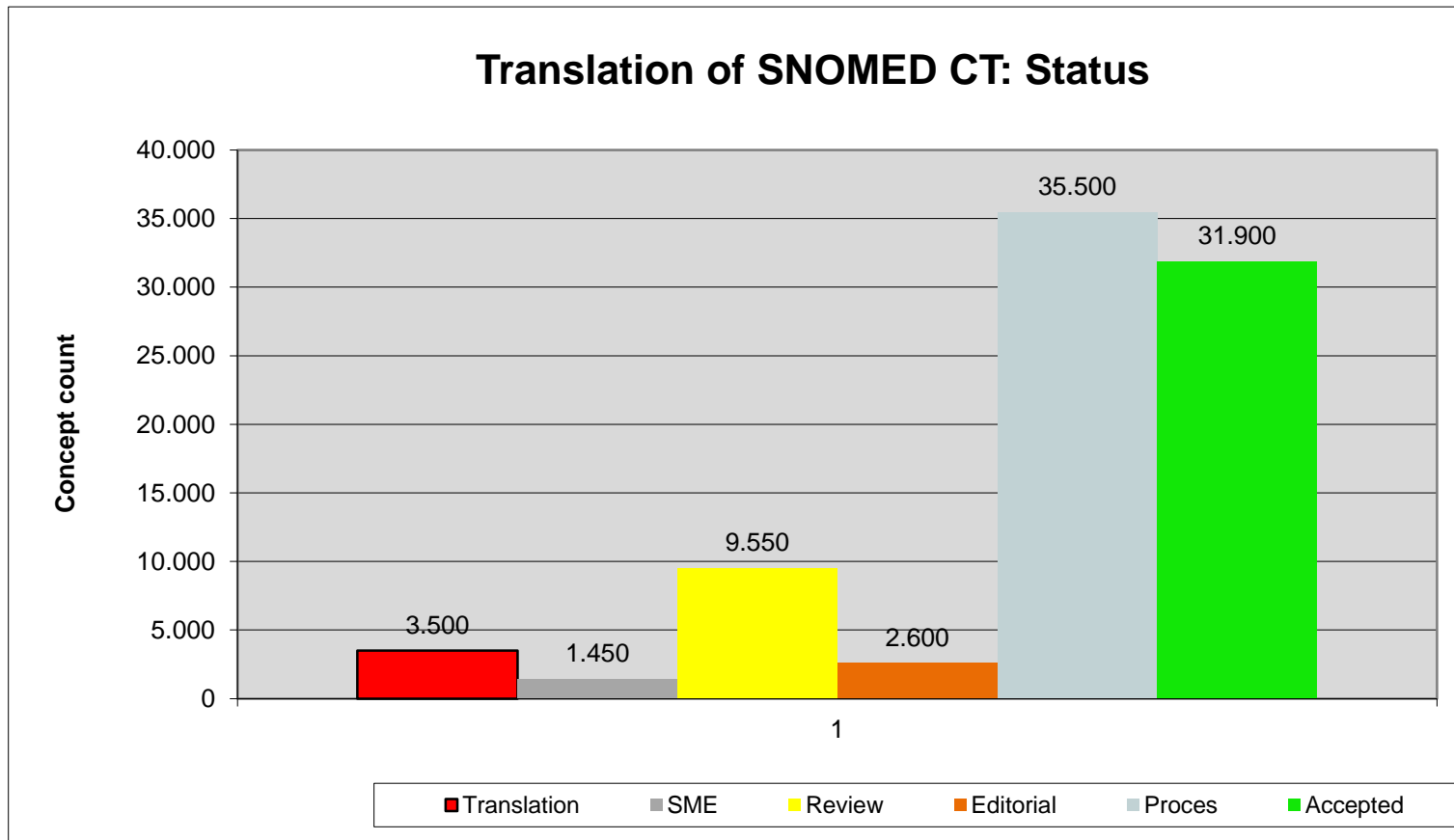
# Strategy for Translating SNOMED CT®

- Resolve areas not in scope
- Hierarchy by Hierarchy / Sub Hierarchy
  - Clinical Finding
  - Procedures
  - Body Structure
- Domain specific - Oncology
  - Tumor findings (clinical finding)
  - Malignant neoplastic disease (clinical finding)
  - Screening for cancer (procedure)
  - Antineoplastic chemotherapy regimen (procedure)
  - Immunotherapy for cancer (procedure)
  - Radiation oncology AND/OR radiotherapy (procedure)



# Translation Process Control

- Statistics per translation batch
  - Number of concepts in different translation states

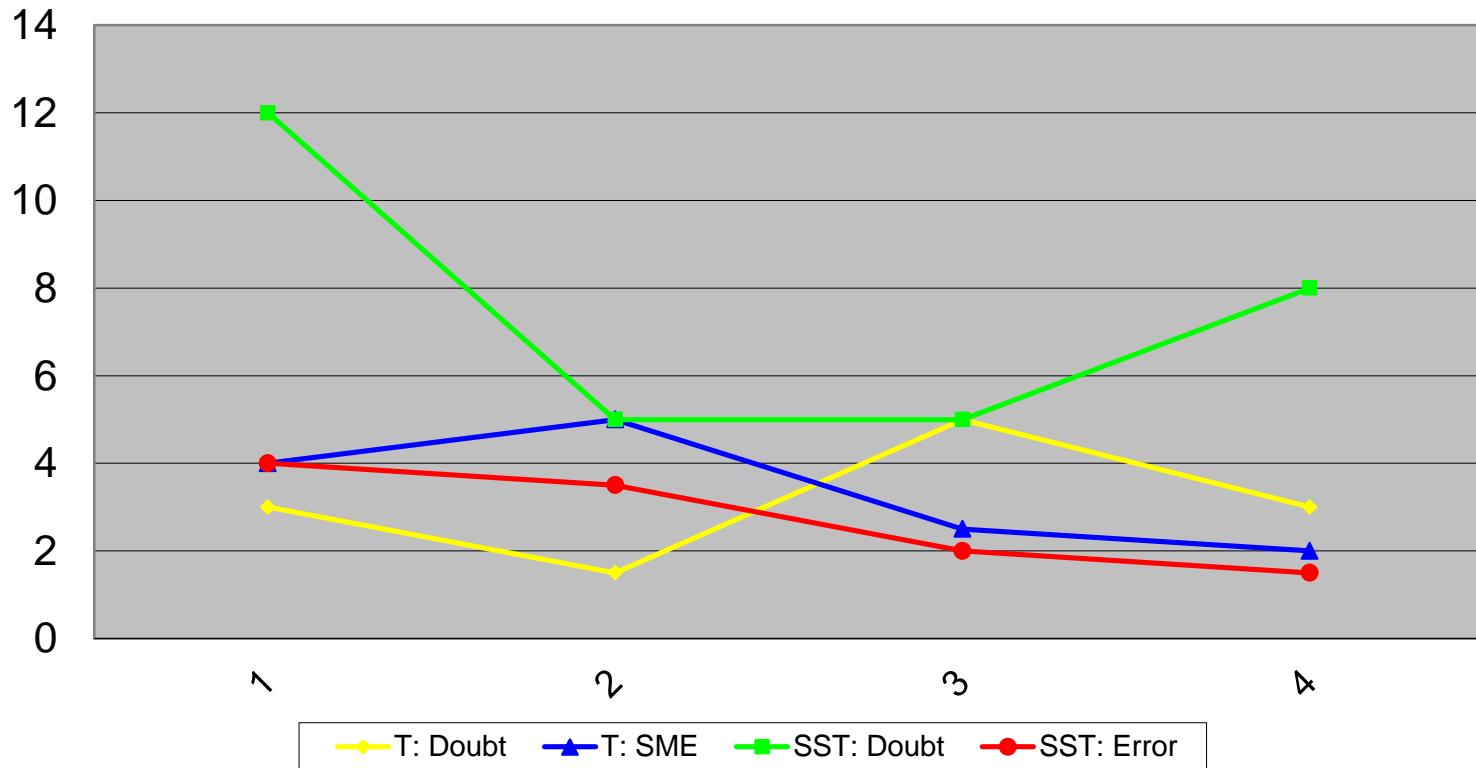


14 October 2011  
September 13, 2010

# Translation Process Control

- Statistics per translation batch
  - Number off concepts in specific translation states

Quality Parameters in %



# Editorial Processes

- Manage doubtts
  - Without involving the Editorial Board
  - Editorial Board tasks
    - Essential issues
    - Update Decisions of Principles
- Change post translated concepts
- Communication with IHTSDO
  - Request for change
  - Questions

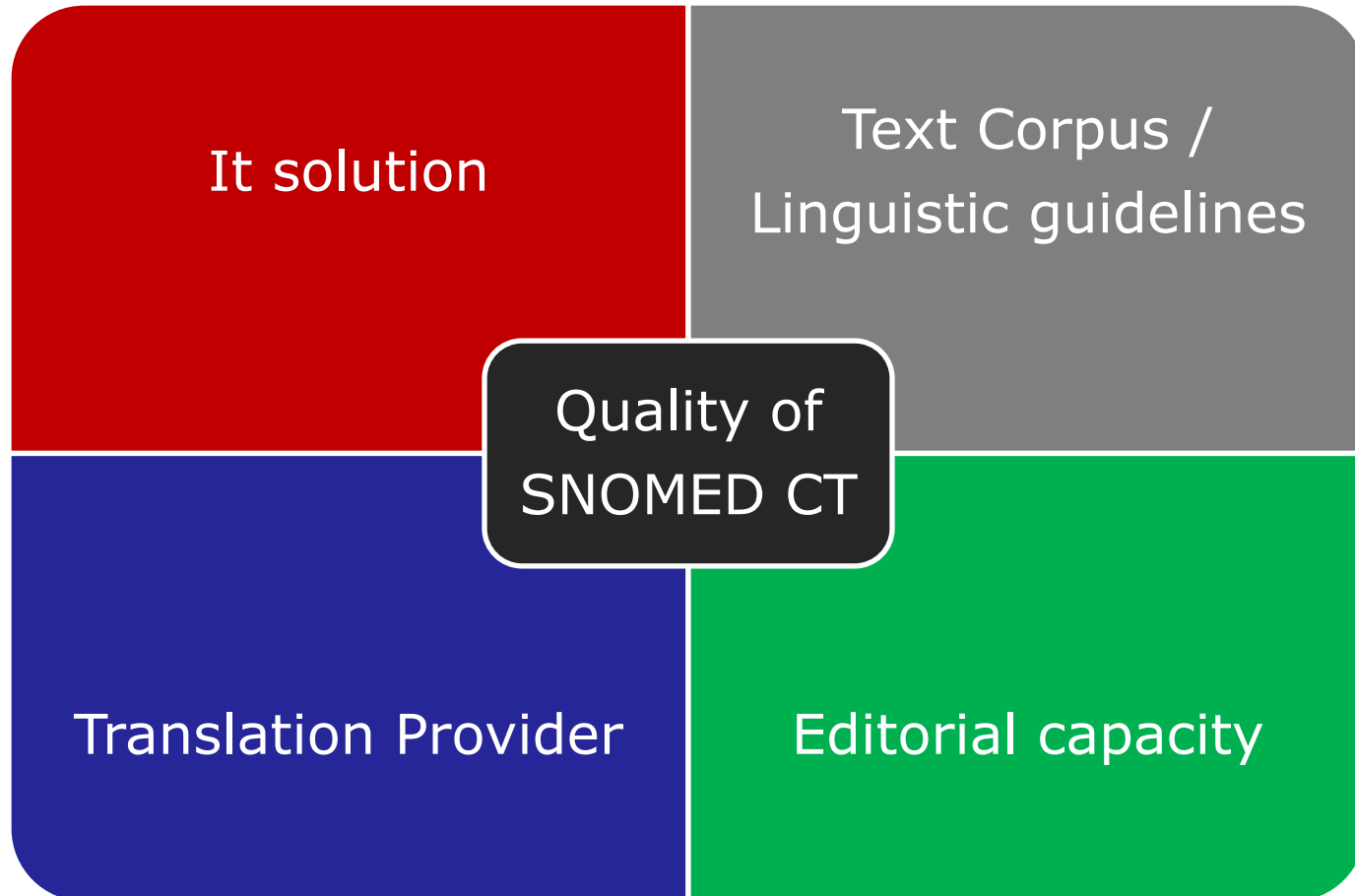


***BASICS***

# Risk management

- Insufficient funding
- Deficient contracts
- Insufficient IT tools
- Insufficient project management
- Insufficient professional and clinical knowledge available
- Insufficient training
  - Concept based translation
  - It tools
- Insufficient translation
- Ambiguities and defects in the source language
- Source language terms with only relevance for certain countries
- Deficient quality assurance

# Quality Parameters



# Essentials – Wrap Up

- **Scalability** – number of concepts to be translated
  - Translation capacity
  - Review and editorial capacity
- **Transparency**
  - Sharing and Adding knowledge during translation
  - Translation status of the concept
- **Quality**
  - Consistent translation
  - Planning in advance
  - User interface



# Questions

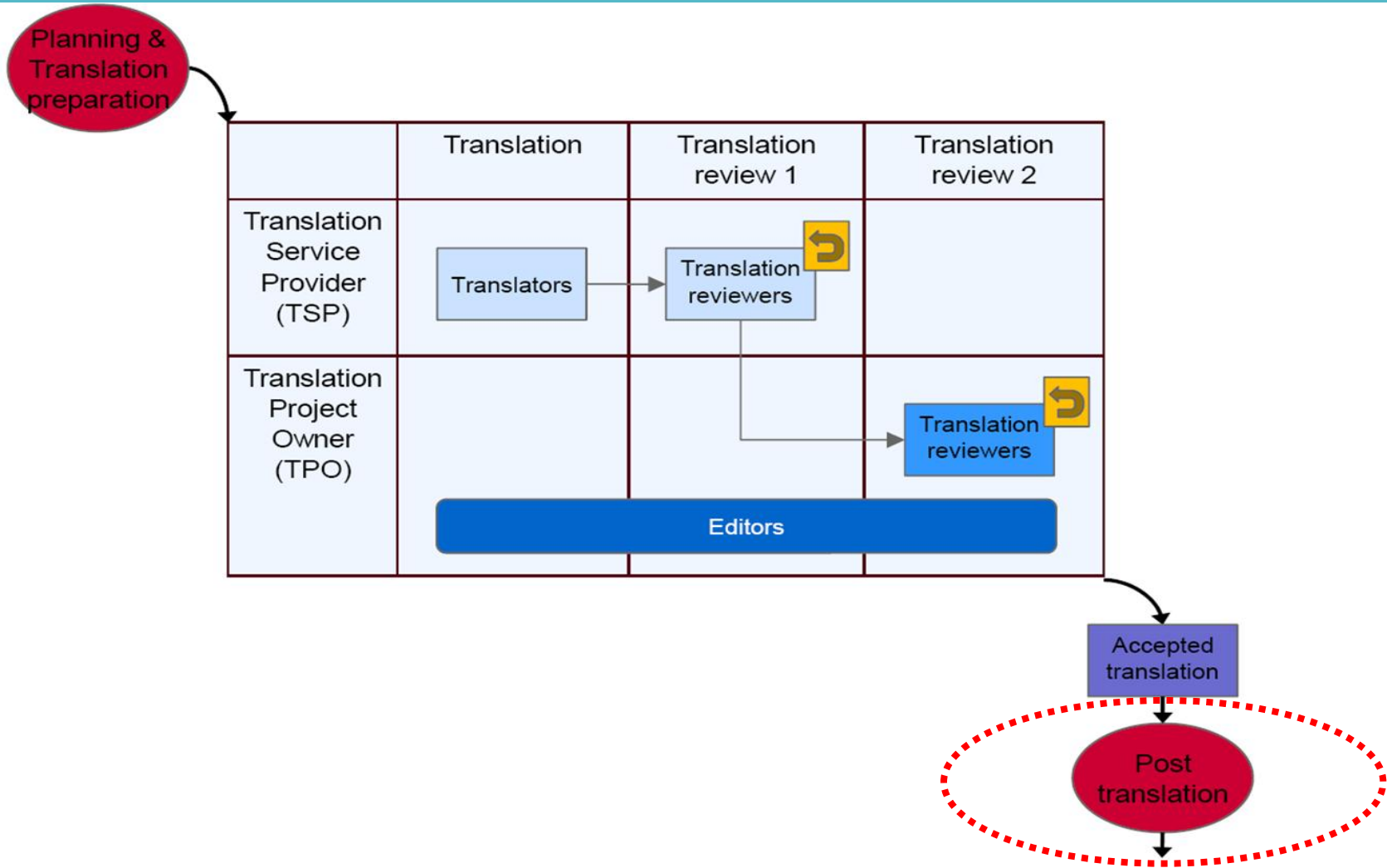


# Value for Clinicians



14 October 2011

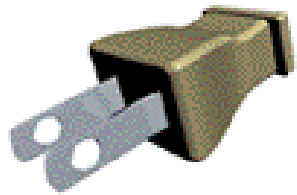
# Workflow



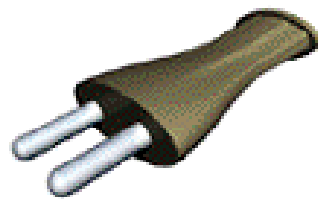
# Value for Clinicians

- After the translation, it is important that the terminology is validated by health and care providers to ensure that the translation is useful in clinical and social care settings
  - Acceptance and usability
  - Quality and reliability
  - Clinical validation
  - Adding of synonyms

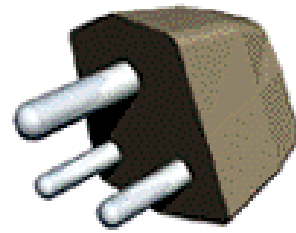
# Interoperability?



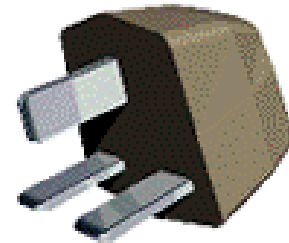
Type A



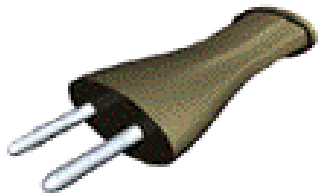
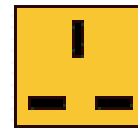
Type B



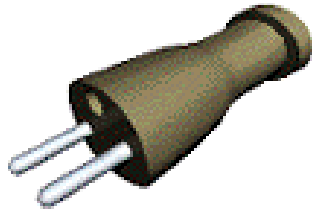
Type B3



Type BF



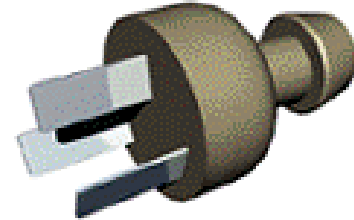
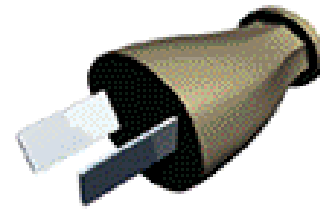
Type C



Type SE



Type O  
(without ground  
prong)



Type O  
(with ground  
prong)



# Reliability

- You rely on a terminology and translation when it can express the concepts and meaning you need
- Clinicians need to be reassured that the terminology and translation cover their need

## Results of 'Clinical Validation' may be

1. A concept is considered useful in the clinical context and the preferred term is considered adequate
2. Synonyms are proposed
3. A change to the preferred term is proposed
4. A new concept is proposed
5. A concept is not used in practice or should not be used

# Challenges

- Funding
- Access to clinicians
- Insufficient training





# Questions



# Links

- [Guidelines for Translation of SNOMED CT®](#)
- [Guidelines for Management of Translation of SNOMED CT®](#)
- [Experience of the Danish, Swedish and Canadian Release Centres Translating SNOMED CT - Approach, Challenges and Lessons Learned \(April, 2009\)](#)



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