

Independent real world evaluation of Pocketalk pilot at Salisbury NHS Foundation Trust Maternity and Neonatal Services

Evaluation summary report
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Executive Summary



Background

Pocketalk, a portable translation device, enables communication with non-English speakers in a clinical setting. Ten devices were implemented into Salisbury NHS Foundation Trust Maternity and Neonatal Services. This evaluation, conducted between November 2025 and January 2026, explored how staff and service users experienced use of the device in **everyday non-clinical conversations**, and aspects of its performance:

- **How accuracy in translation was perceived by users**
- **How it enabled communication between staff and service users.**



Evaluation approach

Our evaluation approach involved staff interviews, feedback forms following immediate use of Pocketalk and language translation test cases to understand accuracy. We collected:

- 18 staff and 6 service user feedback forms
- 6 staff interviews and
- 3 language translation test cases.

Although anticipated data collection was smaller than planned, we were able to gather valuable insights.



Key findings

Pocketalk was described by staff as:

- **Convenient and easy to use** and offered staff an immediate way to communicate with service users
- **Able to improve their ability to communicate** with women in their language
- **Able to increase confidence** for many staff as they felt understood
- **Mostly accurate** for simple and “everyday” interactions, although some words were occasionally mistranslated and a few dialects were not supported
- **A practical tool** that improved the flow of communication in everyday care.



Staff were enthusiastic to extend the use the device from non-clinical conversations to clinical conversations, particularly where these are complex in nature. They felt communication was **strengthened with non-English speakers which improved equity of care and so led to enhancing the overall quality of care provided.**





"I think it's amazing. I really like it. I .. really, really like using it"

P08 interview

"I think it gave me more confidence that she understood what I was asking and I was getting proper consent..."

P07 interview

"It is transformative on the ward when you just want to say small things...This device allowed me to build a relationship in a way more similar to that which I would [have] with all English-speaking women..."

S2 feedback form





Background

What is Pocketalk?

Pocketalk is a handheld portable device that translates English into over 90 languages in real time, offering two-way interpretation and communication. Salisbury NHS Foundation Trust (SFT) Maternity and Neonatal Services bought ten devices to be used across six sites. Its delivery into the service was supported by SCALE Innovation¹ and the Innovation and Adoption Team at Health Innovation Wessex.

Why was Pocketalk used in Maternity services?

Pocketalk aims to support quick, everyday non-clinical² communications with women and their families receiving maternity care who do not speak English or whose English is limited. The service identified a communication gap within maternity care, where the use of [LanguageLine](#) for frequent, non-clinical conversations was often impractical, delayed or not available at the time needed, or was unnecessary for everyday interactions. The Trust also wanted to prevent reliance on family members or non-medically trained interpreters. Traditional interpretation services ([LanguageLine](#)) remain valuable and are still used for more complex, clinical communication.

Why was it evaluated?

SFT won the Health Innovation Wessex Real World Evaluation Competition 2025, securing support to carry out a real world evaluation of Pocketalk within maternity services. This evaluation aimed to explore how this translation device was experienced by staff and service users, and how well it performed in day-to-day use and so its accuracy and impact on communication impact. SFT Maternity and Neonatal Services planned to use Pocketalk alongside interpreters or translation services. The aim was to understand whether Pocketalk enhanced maternity care, particularly in non-complex situations, for general conversation and non-clinical use. It is not intended to replace [LanguageLine](#).

A small pilot evaluation was undertaken across six sites within maternity services including inpatient and outpatient services.

Please note, Pocketalk is not a registered UK medical device and is not a diagnostic or independent decision-support tool. However, is GDPR-compliant and is used to support routine conversations and multiple industries.

¹SCALE Innovation is a UK-based consultancy that helps healthtech and digital health innovators navigate the NHS, develop commercial strategy, and scale their products and services.

²Non-clinical, non-complex conversations that do not require the translation of technical language, it is for the everyday conversations (e.g. small talk, gathering basic information, explaining administrative or practical information etc).



Evaluation questions

The evaluation questions agreed with the client were:

1. Do staff and service users feel that Pocketalk provides accurate and reliable translation for everyday (non-clinical) communication?
2. Is Pocketalk easy to use into everyday maternity care?
3. Do staff and service users feel more supported when Pocketalk is used?
4. Does using Pocketalk make it easier to have simple conversations without needing help from family members or untrained interpreters?
5. How is Pocketalk being used in practice, and what factors influence its use??

These questions address Pocketalk's accuracy, impact on communication, and usability; and gathers staff and service user experiences of Pocketalk.





Response to data collection

The data collection period was for three months between November 2025 and January 2026.



We set out to conduct five short staff interviews and completed six in total. Interviewees included a maternity support worker, a ward sister, two midwives, a workforce lead in maternity services and the implementation lead.



We aimed to collect 25+ staff feedback forms; we received 18.

We aimed to collect 25+ service user feedback forms; we received six.



We aimed to do five language translation test cases; we completed three.



A risks and issues log (of the implementation) monitored by SFT implementation lead.

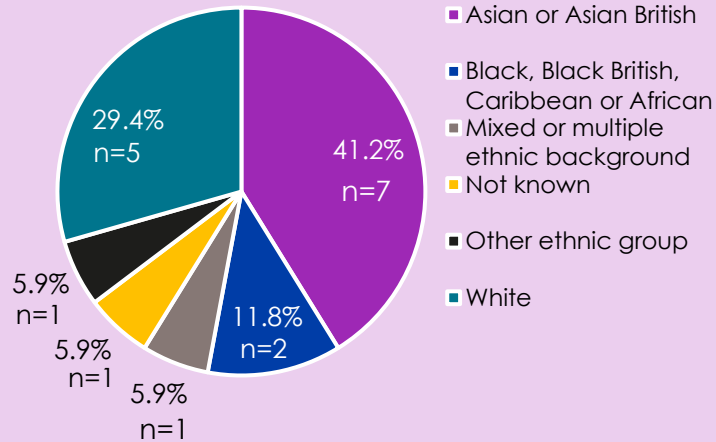
Scenario	Language tested
1	Finnish
2	Romanian
3	Arabic
No. of staff feedback forms	Language used
5	Bengali
5	Romanian
3	Arabic
1	French
1	Malayalam
1	Tamil
2	Not known/unsure



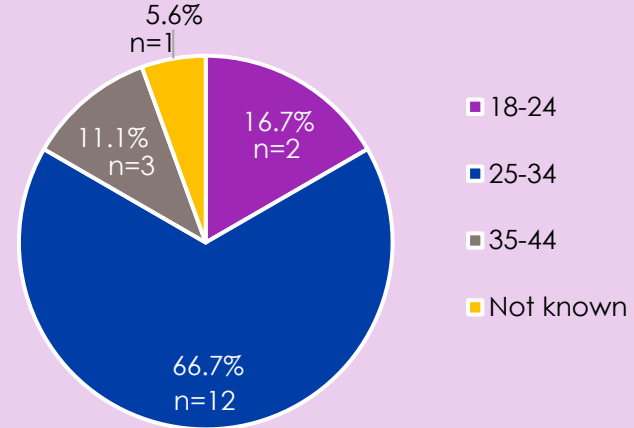


Who is using Pocketalk? (survey data)

Survey: Service user ethnicity



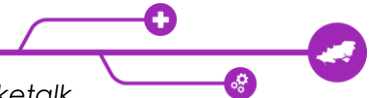
Survey: Service user age group



The maternity department employs approximately 240 staff. 18 staff members completed the survey. It is estimated* that fewer than one third of maternity staff accessed the Pocketalk device during the pilot, meaning the survey responses likely represent a proportion of those who used the device. Among service users where demographic information was available, the majority identified as Asian or Asian British (n = 7, 41%), followed by White (n = 5, 29%). Most were aged 25–34 years (n = 12, 67%).

**this estimate was provided by the client and should be interpreted as approximate.*

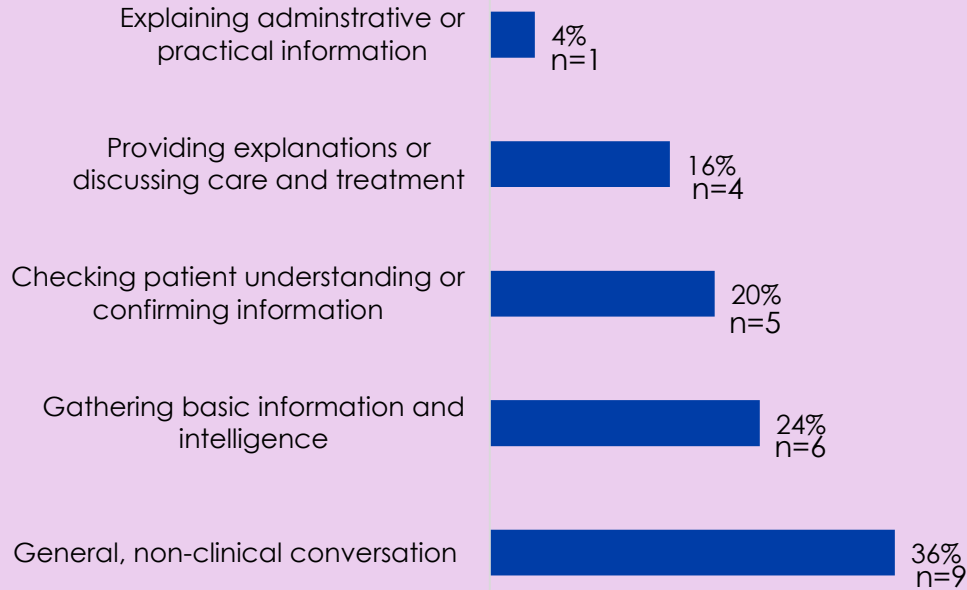
Please note: small survey sample, so may not be representative of all staff and service users who might use Pocketalk.





Use of Pocketalk (survey data)

Survey: Reason for use



Please note: some responses selected multiple answers

Most frequent users of Pocketalk were:

- Labour ward (n = 8, 44%)
- Beatrice maternity ward (n = 4, 22%)
- Antenatal clinic (n = 4, 22%).

➤ Primary use of Pocketalk was for:

- General, non-clinical conversations (n = 9, 36%),
- Gathering basic information (n = 6, 24%).

➤ Typical duration of use was:




- 2–6 minutes (n = 7, 41%)
- Intermittent use throughout the day or night involving multiple interactions (n = 4, 24%).





Usefulness of Pocketalk

Pocketalk was consistently described as **simple**, **intuitive**, and **easy to use** within clinical workflows.

Theme identified	Example quotes
<p>Simple and intuitive</p> 	<p>"Yeah, so I found it easy to find the language and being able to sort of change it to when she was speaking and when I was speaking [...] for the translation side..." P01 interview</p> <p>"I have to say I was very sceptical when it was brought in because it's just more tech to deal with. It's going to be complicated. You know, I'm from the era when everything was not technology....And actually I was really surprised at how straightforward it was literally pressing the dial..." P07 interview</p>
<p>Great size: Small and portable</p> 	<p>"...very portable, very useful, user-friendly." P06 interview</p> <p>"..the size of it is just amazing because it is a proper thing that you can just tuck in your pocket. ... not having to take a huge, great big thing to the bedside." P07 interview</p>
<p>Naturally adapt communication speed</p> 	<p>"I think I definitely spoke slower." P07 interview</p> <p>"Yeah, we naturally spoke a bit slower with the device" P05 interview</p>



Impact on communication




Pocketalk overall improved the **frequency** and **immediacy** of communication with non-English speakers.

Theme identified	Example quotes
<p>Stronger rapport with service users from direct communication</p> 	<p><i>"So personally, I found it to be an excellent tool to ensure I felt confident that the lady was having all the options and advice that I wanted her to be aware of regarding her care, in various small interactions across the day"</i> S2 feedback form</p> <p><i>"Actually, they, we might pick it up in conversation because they're upset, and it's the moments around the informal, frequent conversations that are also important, and that's where the Pocketalk would be."</i> P05 interview</p>
<p>Greater privacy and safety</p> 	<p><i>"And it's just a little bit less invasive because it's a bit more discrete and private because it's a machine rather than another person (translator)..."</i> P05 interview</p> <p><i>"I think from a safety aspect, that feels much more robust with these service users that are not missing anything because it's in real time..., they can come back to you straight away."</i> P07 interview</p>
<p>Equitable care</p> 	<p><i>"This device allowed me to build a relationship in a way more similar to that which I would with all the English-speaking women"</i> S2 feedback form</p> <p><i>"It definitely creates that sort of ability to communicate with them so much more easily because you are able to just still be there and give that care to them... So, it's, you know, a smooth thing."</i> P01 interview</p> <p><i>"It kind of doesn't take that intimacy of that conversation where you can feel like I can open up to you because you're going to open up to someone else to then open up to me."</i> P05 interview</p>



Perceived accuracy




Pocketalk was described as **accurate enough for most real-world interactions**, but **dialect** coverage and **certain terms** remain limitations.

Theme identified	Example quotes
Everyday translation reliable 	<p>"I think it's very thorough. I can't think of a time where we struggled to get it across or it was wrong. It's the best language system I've ever used." P05 interview</p> <p>"I certainly felt that she understood what I was asking her all the way through that shift" P07 interview</p>
Some dialects not available 	<p>"I used Pocketalk twice, first time was received well by the patient. The second time the patient spoke a specific dialect that couldn't be found on the device so couldn't use it that time." S19 feedback form</p> <p>"Only one at the beginning [referring to issues with translation] but I was using not the most common type of Arabic, so after I switched and spoke the most common Arabic, it was fine." Arabic scenario 3</p> <p>Examples given were: Sudanese Arabic, Sylheti Bengali</p>
Some terms and words misinterpreted 	<p>"Yes, the only thing that didn't translate right at all is when [person] asked about the discharged, it was not correct at all. It picked up "disc" instead of discharge, so the patient could have thought they were asking about back problems" Finnish scenario 1</p> <p>"It does put the plural into the baby, so when it tries to say something about feeding a child, it picks up feeding children. A lot of the things are about the singular and the plural. That's the only issue." Romanian scenario 2</p>



Overall impressions of Pockettalk from staff

Pockettalk is an **easy** tool to use and made staff feel more **confident** and **empowered**.

Theme identified	Example quotes
<p>Empowers staff</p> 	<p><i>"...we provide emergency health care and getting language line for consent for very intimate procedures as well that we might need to do straight away... A woman could come in bleeding or things like that where you have 15 minutes to get that baby out safely. That's 15 minutes to get LanguageLine on the phone. But the pocket talk is a little bit more empowering because I'm talking directly at them."</i> P05 interview</p>
<p>Convenient tool</p> 	<p><i>"I found it to be excellent. Convenient, quick and discrete"</i> S1 feedback form</p> <p><i>"And it was really easy...always readily available when needed."</i> P08 interview</p> <p><i>"I found this really good. It was accurate and much easier to use than an interpreter."</i> S10 feedback form</p>
<p>Builds staff confidence</p> 	<p><i>"I think it gave me more confidence that she understood what I was asking and I was getting proper consent. When you're trying to do something like that with very limited English, you're not entirely 100% that they're understanding you and what you're saying. So I had much more confidence that I was not missing anything"</i> P07 interview</p>





Service user experiences



Five out of six service users felt Pocketalk supported them to communicate well.



All service users said they would use Pocketalk again.



Four out of six reported being satisfied or highly satisfied with the device.

However, because the sample is limited, these findings should be viewed as early indicative feedback rather than definitive evidence of overall service user findings. Larger scale data collection would confirm whether these positive perceptions are consistent across a broader population.





What staff would like to see improved or developed?

Functionality



- Ability to correct individual words rather than re-entering/saying the full sentence on the device,
“It would be helpful to correct a word that has been interpreted incorrectly rather than re-entering the sentence again.” (S9)
- Expand use into more clinical explanations and conversations,
“There are things that aren't that complex that it could probably deal with... like explaining your baby is on oxygen.” (P06)
“It would be good if it was signed off to use for clinical conversations.” (P05)

Device setup and accessibility



- A designated stand so the device is always visible, safe, and charged,
“It would be quite good if there was a really designated stand thing.” (P07)
- A laminated page to show patients what Pocketalk is and how it works.
“I wonder if there could be some laminated instructions or instructions on the device in the language you choose for the patient when you commence” (S2)





Conclusions and implications for practice

Conclusions

✓ **Easy to use and integrate**

Staff found Pocketalk straightforward and practical within existing workflows.

✓ **Improves inclusion and confidence**

Use of Pocketalk reduces communication barriers and helps both staff and service users feel more supported.

✓ **Reduces reliance on informal interpreters**

Enables immediate, simple conversations without depending on family members or untrained interpreters.

✓ **Interest to wider usage**

Currently used for non-clinical conversations with non-English users. Staff indicated interest to use for more complex and clinical conversations.

Implications for Pocketalk at SFT

- Consider what would be required to support safe expansion into more complex and/or clinical conversations.
- Provide simple implementation supports (e.g., device stand, laminated patient information etc.)
- Continue to monitor language demand and review what is working well and where improvements are needed.





Evaluation limitations

Participant sample

The evaluation engaged only a small number of staff and even smaller number of service users. Hearing from a wider range of service users would have provided richer insight into how the device affects their care. More time gathering additional staff perspectives, through surveys or interviews, would have helped move the data closer to saturation therefore providing a more complete picture of staff and service user views within the maternity unit.

Timing of the evaluation

Within the available timeline for this evaluation, the data collection period was limited to three months (this included November, December and January - traditionally very busy months in hospitals). This limited window reduces the ability to assess impact or understand longer-term changes.

Evaluation methodology

Due to time constraints, we were unable to complete five or more accuracy testing scenarios to assess actual (rather than perceived) accuracy. We also could not obtain device-level data from Pocketalk or complete the necessary information governance (IG) processes within the timeframe, which restricted our ability to evaluate accuracy in more depth.

Costings

We were unable to explore long-term cost implications, including comparisons with LanguageLine. This would be an important area for future work to fully understand the opportunity costs of using Pocketalk for departments and trusts.



The evaluation team



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Disclaimer

This slide deck summarises the findings from the independent real world evaluation of Pocketalk at SFT Maternity and Neonatal Services. The conclusions in this evaluation are those of the authors and may not represent the views of other stakeholders.

Declaration of interest statement

Our policy is to retain anonymised and pseudo-anonymised data for six years after the publication of the final report. We retain identifiable data for 12 months, in accordance with the Data Protection Act and General Data Protection Regulation, after the publication of the final report. Following these retention periods, the client will be given notice of imminent destruction and the opportunity to discuss any issues arising. Data will be destroyed on the agreed date and a certificate of destruction will be provided.

On occasion, we evaluate innovations that we have also supported. Whilst these evaluations are independent, for transparency, we disclose our dual role where applicable. In this case, the implementation of Pocketalk was supported by the Innovation Adoption Team (IAT) at Health Innovation. The evaluation was undertaken by the Health Innovation Wessex (HIW) Insight team.





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