



THE CALIFORNIA ENDOWMENT

Health Care Interpreter Training in the State of California

Including an Analysis of Trends and a
Compendium of Training Programs

by
Cynthia E. Roat, M.P.H.
for
The California Endowment

Health Care Interpreter Training in the State of California



Dear Colleague:

February 2003

As you may know, The California Endowment's mission is to expand access to affordable, quality health care for underserved individuals, and to promote fundamental improvements in the health status of all Californians. To help support this mission, we have developed a Language Access initiative, and as part of this, a survey and this report, "Health Care Interpreter Training in the State of California," were commissioned so that we and others may learn more about health care interpreter training programs.

Each of the one in five Californians with limited-English proficiency are among the most vulnerable of our state's residents. Without the ability to communicate with their providers, these health consumers are at risk for decreased access, delayed care and poorer health outcomes. Without the ability to communicate with their patients, providers are at risk of misdiagnosis, decreased satisfaction and increased medical errors among their limited-English proficient patients. We have supported multiple strategies for bridging this gap: encouraging the use of bilingual providers, increasing the numbers and quality of trained interpreters, exploring the optimal use of technology and technical assistance, among others.

One important solution to these language barriers is the availability of trained, competent health care interpreters. Our grant-making program in Language Access has supported the development of health care interpreter training programs in numerous venues across the state. Its purpose is both to serve as a resource for those seeking training, and to provide an analysis of recent trends in interpreter training.

We hope that the information contained in this report will be useful for interpreters, educators and health care policymakers alike.

We hope you find this report of value, and we thank you, as always, for being an important partner for healthier communities.

Sincerely,

Robert K. Ross, M.D.
President and Chief Executive Officer
The California Endowment

Acknowledgements: I would like to thank The California Endowment staff members Alice Hm Chen, M.D., M.P.H., Health Policy Scholar in Residence, and Jai Lee Wong, Senior Program Officer, for their guidance and leadership on this project.

Acknowledgements

The author would like to thank the many people who shared their expertise with her and connected her with key resources in the course of researching this paper. In particular, she would like to thank Niels Agger-Gupta of CHIA, José Ramón Fernández Peña of the San Francisco Bay Area RHORC, Speranza Avram of the North Sierra Rural Health Network, Margaret Kerr of the Shasta Community Health Center, and all the dedicated teachers and trainers who filled out surveys.

The author would also like to thank Linda Okahara of Asian Health Services, as the survey instrument used here is adapted from one that she helped to develop in 1997.

Executive Summary

This is a survey of 21 health care interpreter training programs in California, all of which prepare interpreters to work exclusively or partially in health care settings. The dual purpose of the survey is to analyze current trends in interpreter training and to produce a compendium of programs as a resource for those seeking training.

Through the survey, three general types of programs are identified, which often coexist in the same geographical area but target different populations:

1. Relatively short, informal trainings that primarily target bilingual health care staff who are also being asked to interpret in the workplace. These programs are most likely to accommodate speakers of multiple languages.
2. Longer, more formal programs through community colleges that target individuals who are already working as, or are interested in becoming, dedicated health care interpreters.
3. Formal translation and interpretation programs, often offered through universities, that target individuals interested in becoming professional interpreters or translators in multiple venues. All of these programs are limited to Spanish speakers.

The survey also identified two networks of training programs in the state: one based among community service agencies and the other based in the community college system. These networks, through which a single training curriculum is developed and shared, are unique and may prove to be a useful way to disseminate training in other states.

The programs were compared and analyzed on a number of parameters, including prerequisites, screening, course content and materials, the use of a practicum, competency testing, typical class size, criteria for trainers, source of funding, recognition of graduates, number of graduates, and percent of graduates now working as interpreters.

Introduction

In 1997, a survey of medical interpreter training programs in the United States and Canada found only three programs in California that prepared interpreters for health care settings.¹ Since then, significant work has occurred in the state around interpreter training. Spurred by federal Civil Rights Guidelines and new CLAS (culturally and linguistically appropriate services) standards specifying that a “qualified” interpreter requires some degree of training, hospitals and clinics have shown increased interest in interpreter training. The establishment and growth of the California Healthcare Interpreter Association (CHIA), the painstaking efforts of a group of dedicated individuals concerned about the quality of interpreting, and the funding made available for language access issues through The California Endowment have all lent impetus to the expansion of interpreter training programs around the state.

In Spring 2002, The California Endowment commissioned this study of the current training landscape in California. Given the growing interest in interpreter training, it also seemed useful to develop a list of resources for those interested in pursuing preparation as interpreters.

This study, then, has two purposes:

1. To analyze trends in interpreter training in the state over the past five years.
2. To produce a resource compendium of programs as a support for those seeking training.

With that in mind, this study seeks to serve both the development of the field in general, and the development of individual interpreters in particular.

¹ Roat, Cynthia E. and Okahara, Linda. *Survey of Twenty-Three Medical Interpreter Training Programs in the United States and Canada*. Cross Cultural Health Care Program (Seattle, WA) and Asian Health Services (Oakland, CA). 30 pgs. 1998.

Methodology

This study was conducted through a written survey, which was adapted from the survey instrument piloted and used in the 1997 study. The survey was designed to collect information on course administration, course contacts and specific program characteristics, including:

- overall goal of the program,
- targeted population,
- interpreting venues addressed,
- accommodation of multiple language groups,
- prerequisites for registration in the program,
- initial screening (testing) of candidates,
- hours of instruction,
- content,
- materials,
- practicum,
- competency testing of interpreting skills,
- typical class size,
- criteria for trainers,
- funding sources,
- recognition given to graduates,
- number of times offered,
- number of graduates,
- percent of graduates working as interpreters,
- unique aspects of the program,
- other trainings known to the respondent, and
- materials available for distribution.

Several criteria were applied in selecting programs to survey. First, the programs had to be offered in the state of California. Second, since one purpose of this study was to compile a list of programs that could serve as resources for individuals or institutions seeking training for interpreters, only programs that were accessible to the public were contacted; trainings conducted internally for the staff of a particular hospital or clinic were excluded. Third, programs had to be, or have plans to be, on-going. Lastly, programs had to be more than 20 hours in length, on the premise that programs less than 20 hours long are more appropriately considered orientation than training.

This study was designed to include all training programs in the state that meet the criteria described above. Many of California's training programs were known to the author before beginning the study. In order to widen the search, calls were made to colleagues at the California Healthcare Interpreters Association. Administrators of known training programs were asked for referrals to other programs. The statewide system of Regional Health Occupations Resource Centers provided access to activities at the community college level. Respondents to the survey were asked if they were familiar with other interpreter training programs in the state. Finally, for geographic regions where programs seemed scarce, the author contacted hospitals, clinics, social

service agencies, and community advocacy groups to find out who was providing interpreter services and where these interpreters were being trained.

Twenty-four training programs were identified that met the above criteria. Twenty-one programs completed surveys. One requested that only its contact information be listed, one was identified too late to have survey results included, and one chose not to participate in the study at all. Three additional programs were in the final planning stages as the survey was being administered. While these three did not complete surveys, they have been included in the compendium as potential resources to those seeking training.

One program was included that did not strictly meet the criteria, as it is not based in California. The Cross Cultural Health Care Program's Bridging the Gap was included for two reasons. First, although the organization is based in Seattle, the course is offered in its intensive form twice a year in Santa Rosa, California. Second, since the program is mobile, it can serve as a resource to institutions in California seeking to train interpreters, and, in fact, is already being used as an internal training program for interpreters at numerous health care institutions around the state. The programs included in this study fall into several categories. Four are based at universities or state colleges, four at community colleges, and three at private colleges or institutes. Two are sponsored by clinics, one by a managed care plan and two by county health departments. Five are sponsored by small private nonprofit organizations. In summary, 11 are based at educational institutions, five within health systems and five at community-based organizations.

Survey Results

Overall goal of the program

Every program in the study lists its overall goal as preparing interpreters to work in health care (and sometimes other) settings, with the exception of two programs, whose stated goal is to prepare candidates for state certification. Some of the goal statements list particular skill sets that the training seeks to develop. Others focus on meeting the needs of particular groups such as Latinos and other ethnic communities, bilingual staff working in dual roles, and health providers. At least two programs list increasing access to health care as an overall goal of the program, and three recognize the need for more medical interpreters in the workplace.

Target population

There is an interesting array of targeted groups for recruitment into these programs. Only 10 of the 21 surveys specifically mention seeking bilingual individuals, although any interpreter must begin by being bilingual. Three programs specifically aim to train health care workers (providers, mid-level and front line staff), four target students, and one recruits community members from refugee or immigrant groups. Nine programs are aimed only at Spanish speakers, while one targets speakers of Spanish, Hmong, Lao and Cambodian. Five mention recruiting those who are already working as interpreters or who have a specific interest in working as an interpreter.

Targeted venues

All 21 programs claim to prepare interpreters to work in health care settings. Eleven programs focus solely on health care, while the rest prepare interpreters for a variety of contexts. Nine train interpreters for social service settings, nine for legal settings, seven for commercial business settings and six for conference settings. Other venues mentioned include: state agencies, the film industry, mental health settings, private industry and settings requiring the understanding of cultural differences.

Accommodation of different language groups

Traditionally, interpreters are taught in classes that focus on only one language pair. This allows for optimum practice and vocabulary development. Almost half the programs follow the traditional emphasis on one language pair. Spanish-language interpretation is the sole focus of nine programs, with classes taught bilingually in Spanish and English.

However, while Spanish is clearly the most common language among limited-English proficient (LEP) speakers in California, the state has an urgent need for interpreters in many other languages. How do the other training programs accommodate multiple-language groups in the classroom?

Two programs are taught exclusively in English, with no actual practice done in the non-English language pairs. Eight programs incorporate language-specific work in small groups, so that students can practice interpreting with others who speak their same language pair. Three programs include language labs, taught by language coaches, which allow students to practice under the supervision of a linguistic expert.

Prerequisites

Prerequisites are broad requirements necessary for a candidate to enroll in a program, for example, language proficiency, a level of formal education or work experience.

Not surprisingly, 16 of the 21 programs surveyed require bilingual language proficiency as a stated prerequisite for entering the program. There is less agreement on other prerequisites.

Two programs require a high school diploma, one at least two years of college-level work (or interpreter certification), one a bachelor's degree and three specified academic coursework (usually in language or medical terminology). Two require the candidate to have had some experience as an interpreter, and four require a passing grade on an entrance exam. Three require prior experience. Two require the candidate to live or work within a specific geographic area. One requires only an orientation, and one has no prerequisites at all.

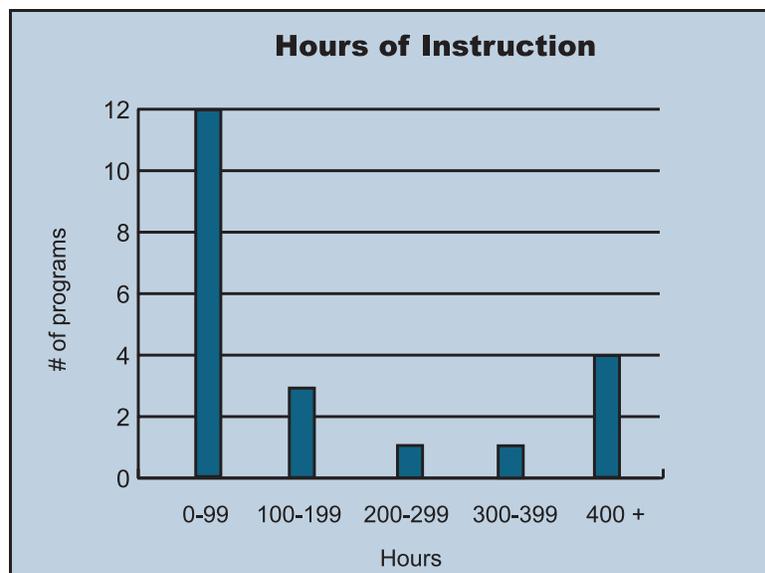
Screening

Screening, as opposed to prerequisites, usually refers to some skill or quality that is being measured before a student enters a course. For example, for two programs that both have language proficiency as a prerequisite, one may actually test language proficiency, while the other simply asks that candidates be fluent; the first program screens for the skill, while the second does not.

Of the 16 programs that require bilingual language proficiency as a stated prerequisite, 13 test for English-language fluency, and 11 test for proficiency in the non-English language. Two programs require academic course work in the working languages in lieu of a screening test. One program tests for fluency only in the "non-native" language. Three programs have no screening process (although they do have prerequisites).

Hours of instruction

The most common program length is 40 hours (eight programs), but programs range from 30 hours to 632 hours. There are 12 programs under 100 hours, two at 120 hours, one at 160, one at 288-300, one at 300 hours and four over 400 hours.



Content

The varying length of the programs surveyed makes it difficult to analyze content effectively. The shorter programs were able to provide great detail about the content of their courses, while the longer programs were not. Still, some general comments can be made.

The shorter courses tend to cover much of the same material:

- role and ethics,
- basic interpreting techniques (use of the first person, positioning, pre-sessions, modes, consecutive interpreting and sight translation),
- controlling the flow of the session,
- health care practice medical terminology,
- professional development, and
- impact of culture.

It was not possible to analyze exactly what additional material the longer courses cover, but overall, these programs seem to include more technical analysis of the language conversion process and significantly more practice interpreting.

Materials

All the programs provide or require the students to purchase written materials for the course. Fourteen programs supply a textbook such as a manual or workbook-and-resource-guide. Eleven require a bilingual glossary or dictionary, and seven distribute a significant number of handouts (such as a Code of Ethics and Web site links). Only three programs use practice tapes. Other materials, required by one program each, include: study guides, lab assignments, a syllabus for coaching session and internship, a sample test, a guide to medications, and information on culture-specific health beliefs and practices.

Hours of practicum

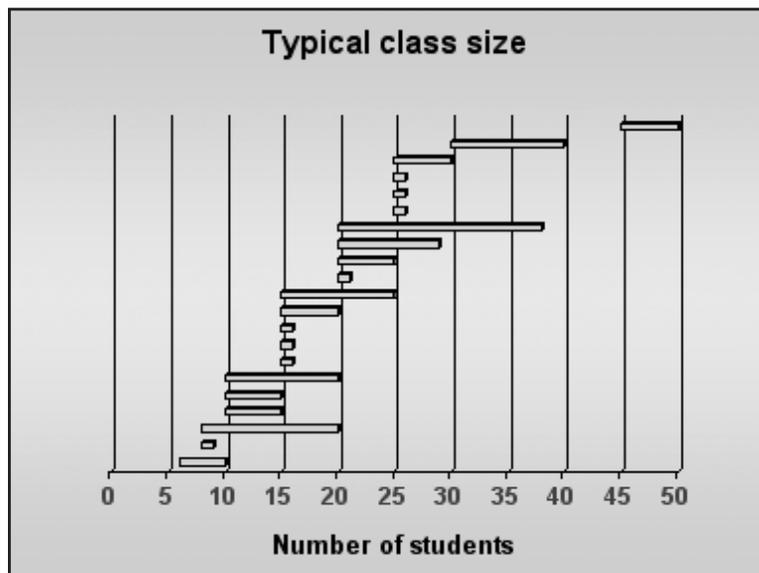
Participants were asked whether their program requires a practicum in addition to formal instruction. A practicum was defined in the questionnaire as “time when a novice interpreter observes and is observed on the job by an experienced interpreter.” Nearly two-thirds of the programs (13) require no practicum. One requires a 10-15 hour practicum, one a 20 hour practicum, two require 40 hours, one 54 hours and one an 80 -120 hour practicum. Two require practica but do not specify the length.

Competency testing

Competency testing refers to testing that evaluates the candidate’s mastery of the material taught in the course. All but three programs perform some type of competency testing, for a variety of purposes. Fifteen administer tests prior to training in order to establish a baseline, and 17 test trainees after the course has been completed. One program includes a midterm and another tests at the end of each section. In six cases, the survey specifically mentions that the final exam is both written and oral; in two cases the final exam is stated to be exclusively oral. Six programs mention using role-plays to evaluate skill development.

Class size

Class size is quite variable, from a low of six to a high of 50. Twelve have class sizes of 20 or less. The academic programs tend to report a larger class size.



Instructors

In choosing instructors, the most important qualities to these programs are bilingualism (named by 14 programs) and skill in interpreting. Twelve programs seek experience, certification or a degree in interpretation in their instructors. The next most commonly sought quality is teaching experience, which is a requirement for eight programs. Four require their instructors to have taken a particular “Training of Trainers” course, and one requires trainers with expertise in the experiential learning model. Three programs seek individuals with experience in health care, and three require their instructors to have taken the course they are being asked to teach. Finally, one program seeks specific personal qualities in its trainers: interpersonal skills, organizational skills, innovative thinking and flexibility.

Funding

Grants seem to be the mainstay of funding for health care interpreter training in California at this time. Twelve programs are supported by grants, five exclusively by grant monies. Student fees support 12 programs, and represent the sole source of financial support for five programs. Hospitals and clinics provide partial support for five programs. Four are funded from the operating expenses of their supporting organizations, while two mentioned state funding approved through the University of California Chancellor’s Apportionment for Community Colleges. One program reports support from “rehabilitation funding” and the Veteran’s Administration. The majority of programs (14) are dependent on a single funding source; only seven of the 20 programs have multiple forms of financial support.

Recognition of students upon completion

Upon completion of interpreter training, a certificate of successful completion is the most common form of recognition. Eighteen programs award a certificate (or letter) of successful completion; six award a certificate of attendance to candidates who do not pass the final test. Seven programs also award academic credit. One program, which has no pre- or post-training competency testing, awards only a certificate of attendance to its students; another awards a Bachelor of Arts degree, and two award a certificate of attendance or successful completion AND academic credit.

Percentage of graduates working as interpreters

There is a growing interest in the health care interpreting field in whether investments in training actually make a difference. One measure of impact is to assess whether health care interpreter students go on to use their new skills.

Almost half of the programs (nine) do not track their students after training, and so have no way of knowing how many of their graduates are working as interpreters. Five programs intend to track, but have not yet graduated their first cadre of students. Of the seven programs that currently track graduates, the proportion of students now working as interpreters varies from a low of 20 percent (one program) to 90 percent (two programs). In between, the rates are 30 percent, 33 percent, 80 percent and 85 percent.

Other aspects

There are many unique aspects to each training program. Following are some of the more interesting characteristics of the surveyed programs.

- Two programs also train trainers for their courses, allowing their impact to spread; in one case the trainers prepared through this process present an abridged version of the original course, while in the other, graduates of the training of trainers are prepared to teach the entire original course.
- In one course, participants without language partners are linked by telephone to experienced interpreters in other parts of the country who help with language-specific role-play practice and vocabulary development.
- One program takes a systems approach to language access, “recruiting” the supervisors of bilingual staff who attend the course along with the bilingual staff. While the supervisors do not attend the training, their support makes it possible for the returning interpreter to function more effectively.
- One program requires students to take anatomy, physiology, medical terminology and vocational ESL before starting to learn about interpreting.
- Among the survey respondents is the first B. A. program in Translation and Interpretation in the country.
- One program is the first in the U. S. to train health care interpreters using the Internet.
- One program provides for remedial language work as part of the course when necessary.
- One program has incorporated the CHIA draft standards into its training.
- One program partners with refugee/immigrant families to give its students a better appreciation of their work: “On the first day of training we introduce a refugee/immigrant family that will be followed daily throughout the training. We ask the trainees to think about a traditional family who has recently arrived in California and speaks only their non-English language. We have developed simulated practice activities and case studies that promote reflection about this family’s experience. The case study format also provides structure for small group discussions about the practical application of the day’s learning objectives.”

- A few programs have incorporated extensive field trips into their trainings.
- Some programs use skilled professionals in related fields as adjunct faculty.
- Several programs use videotaping to allow participants to see themselves interpreting.
- In one program, the course is being used as a focal point to build community collaboration between community-based organizations, medical providers, county agencies and private interpreter agencies.
- One program emphasizes experience-based learning as a means both to teach information and to develop a positive attitude among the students toward the new skills they are learning.
- One is a mobile program, in which certified trainers present the course at any organization that contracts with the program. This allows organizations anywhere in the U.S. to start the process of training their own interpreters.

Trends in Health Care Interpreter Training in California

Training networks

Over the past few years, networks of particular trainings have begun to spread across the state. Previously, many pioneering organizations had worked independently to develop trainings to serve their local constituencies. Programs such as those at Vista Community Clinic and Catholic Charities in San Diego, The National Hispanic University in San José, Merced College in Merced, and the Fresno County Health Department are older programs that have been functioning for many years. Each program is quite unique and represents the hard work of a local team.

Developing programs locally, however, involves a great deal of duplicative effort. As demand for training grew, many organizations sought a reputable program that was pre-designed, thereby eliminating the need to develop an entire new curriculum. This was the vision of the Cross Cultural Health Care Program's (CCHCP) Bridging the Gap, which is being used internally at many health care institutions in California. However, the cost of this program, as well as the requirements that the course be taught "as is" with limited adaptations, and by trainers prepared by CCHCP, made it unsuitable for some organizations concerned about their budgets and the unique needs of their interpreter candidates.

As a result, The California Endowment funded two statewide efforts to develop training models that could be distributed throughout existing networks and that would be tailored to meet the network's needs. The "Connecting Worlds" curriculum is the result of a statewide collaborative. It was designed and implemented by a group of community-based organizations, with the goal of training interpreters to work with multiple language groups exclusively in health care settings. Each organization is located in a different geographic region: Las Clínicas del Pueblo in the Imperial Valley, PALS for Health in Los Angeles, Asian Health Services in Oakland, Healthy House in the Central Valley, and Vista Community Clinics in San Diego. Two of these groups (Asian Health Services and Vista) had previously developed their own training programs, but subsequently opted to use the jointly designed program instead.

The second curriculum to follow this course was that of City College of San Francisco. Originally based on Bridging the Gap, this program was expanded significantly to include much more health care-related information and language-specific practice for the students, turning it into a solid college-level certificate program. Through the RHORC (Regional Health Occupations Resource Centers) network throughout the state, this curriculum is now being implemented at Mt. San Antonio College and Reedley College, and will be implemented soon at San Jose City College and Santa Rosa Junior College. Since California has a well-developed community college system, it is hoped that the course will continue to expand to other sites.

This network approach to training is significant and relatively unique in the country. In a state as large as California, it represents a model for spreading training relatively quickly throughout a large geographical area. Other states, particularly those with similar networks of community colleges or community service agencies, might consider adopting this model.

Program sponsors

There seem to be three types of sponsors for interpreter training programs: health-related organizations (community service organizations and health departments), community colleges and universities. The programs run by these three groups are significantly different.

University-based programs tend to run a year or more in length and are designed to produce professional interpreters who can function in a variety of settings. They tend to target individuals with more formal education and a principal interest in interpreting.

Programs sponsored by health-related organizations tend to be shorter and to target individuals already functioning as clinical interpreters, often in addition to their primary job responsibilities. Their primary purpose appears to be to expand language access in health care, rather than to provide students with a career path.

The programs offered by community colleges tend to be longer, focusing on training dedicated interpreters² for clinical settings. Due to their length, they seem to target individuals who intend to interpret full time.

In some regions of California (e.g. San Diego, Los Angeles and San Francisco) multiple training programs have emerged in the same area, resulting in a mix of university programs, community college programs, and programs run by health-related organizations. Some of these focus on Spanish speakers, while others serve a variety of language groups. The diversity of offerings is a positive sign, allowing a wider group of candidates to find programs that meet their needs.

² A dedicated interpreter is one whose sole function in a situation is to interpret. This term can be compared to a bilingual staff member asked to interpret, who often has more than one role in the clinical setting.

Training goals

Wherever these programs are housed, it is noteworthy that almost all have as their overall goal the preparation of participants to work as interpreters. These are not courses that teach participants about interpreting; they teach participants to interpret. Skills development is the focus; the expectation is that graduates will become interpreters and use their skills, or, if they are already working, that they will become better interpreters. Some of the goals also express a clear understanding of the systemic reality underlying the need for training: the lack of trained health care interpreters in the workplace and the barrier that language differences pose in accessing quality health care.

As mentioned above, the longer, more academic programs focus more on training professionals for a career, while the shorter programs are more oriented to producing a language resource for the health care sector so that it can better serve its diverse population.

Target participants

Having noted the training goals, it is interesting that fewer than half of the programs specifically mention targeting bilingual individuals for their trainings. It may be that respondents assume that the targeted audience is bilingual, since this is an obvious pre-requisite of becoming an interpreter. Aside from this, the programs are fairly clear about the particular group each wishes to attract: health care workers, community members, Spanish-speakers, current interpreters and students, etc. The fact that the programs target different groups explains why multiple training programs can coexist in the same geographical area and actually represents a sound strategy for maximizing the number and type of interpreters.

Accommodation of different language groups

Considering the diversity of language groups present in California, it is worrisome to see the relatively limited training opportunities for interpreters of languages other than Spanish. The university-based programs are available only for Spanish speakers.

Of the 12 programs that are not taught exclusively in Spanish, only eight include any practice, and only three include practice with language labs or mentors who are linguistically expert. Clearly, there needs to be improvement in both the quantity and the quality of the training available to interpreters of the myriad other languages needed in California's health care sector.

Prerequisites and prescreening

Since the programs surveyed target different participant groups, it may be reasonable that they have such widely divergent prerequisites. It is understandable that university-based courses should require a higher level of formal education from candidates, or even require specific coursework. In the same vein, it is reasonable for programs targeting working interpreters to require that candidates have experience in interpreting.

It is interesting to note, however, that only 16 of the 21 programs surveyed require bilingual language proficiency as a stated prerequisite for entering the program, that only 13 of these test English proficiency, and that only 11 test proficiency in the non-English language. Considering

that fluency in two languages is widely accepted as a requirement to be an interpreter, one might expect this to be a tested prerequisite in all the programs.

To some extent, the differences in screening techniques may reflect the different political realities of each program. In some cases, it may be better for interagency relationships to permit any interested individual to take the course and discover his or her limitations for him or herself during the practice sessions. A limited number of candidates in certain language groups may create the necessity of training a candidate who might otherwise be considered to have inadequate language skills to be an interpreter. In other cases, a rigorous screen prior to training allows candidates with little hope of succeeding to save time and money, and assures that the class will not have to slow down for limited speakers of English.

Length of program

Over half the programs surveyed (12 out of 21) were under 100 hours and could be classified as “shorter” programs. Forty hours was the most common length. Popular wisdom holds that shorter programs are needed for health care interpreters because of the lack of widespread recognition of the profession and the relatively low pay that health care interpreters receive, making students unwilling to invest time in longer trainings.

However, there are nine longer programs. These programs were all offered at colleges, universities or institutes and may be targeting a different type of student than the shorter programs. Five of the longer programs cover a broader scope, such as court interpreting or written translation. Four, located at community colleges or institutes, are focused exclusively on health care interpreting. It may be that in some parts of the state the field of medical interpreting has grown sufficiently to support longer trainings. Three of these four programs, however, are relatively new, so their long-term sustainability has not yet been determined.

Content

In reviewing the content of these trainings, an interesting pattern emerges. There is a high degree of similarity of content in the shorter courses, suggesting that the profession may be arriving at some consensus regarding interpreter protocols and what should be included in a clinical interpreter training program. Longer programs clearly add more practice and depth, much more emphasis on interpreting techniques and vocabulary, and quite often, content related to interpreting in other venues besides health care.

One area that seems to be covered in more depth in the community-based programs is the impact of culture on interpreting and communication in health care. Anecdotal evidence suggests that these courses focus more on the relationship-related issues that come up in clinical settings: issues of role conflict, ethical difficulties, and conflicting expectations from community, providers, and the health care interpreter profession. However, content was reported in more detail on the surveys from community-based programs than on the surveys from the academic institutions, so it may be that these aspects are also included in the more academic programs but were simply not reported.

Practicum

Almost two-thirds of the programs surveyed do not include a practicum. Of greater interest are the eight programs that do require a practicum, since this is not standard practice in health care interpreter training programs around the country. Rather than being used to augment the class hours of shorter programs, practica are all part of longer, university and college-based programs. It appears that the practicum is another example of the increased opportunities for supervised practice found in these longer programs.

Class size

Class size varied significantly, from six to as high as 50. Over half the programs had class sizes 20 or less, and the most common class size was between 15-20. The higher class sizes were found in the introductory courses at the university programs.

Funding

The profile of financial support for the programs raises inevitable questions about sustainability. Two-thirds (14) of the programs are dependent on a single source of financial support: grant funding, student fees or a supporting agency's operating budget. Grant funding, which partially or entirely supports 12 programs, will eventually end. Depending on student fees alone to cover costs may price programs out of the reach of working interpreters. A next step for many incipient programs, then, is to plan for multiple sources of support. Hospitals and clinics, primary beneficiaries of having trained medical interpreters, may be willing to help finance these programs, as might county and city health departments and ethnic community organizations.

Tracking graduates

There is a growing interest in measuring the impact that training programs have on delivering improved communication in health care settings. Some programs are tracking whether their students go on to work as interpreters. Those programs that target already-working interpreters will, of course, have the highest rates. That issue aside, it is unclear why the rates vary so greatly (from 20 percent - 90 percent) among the six programs that currently track their students. As more programs follow their graduates into the workplace, this question should be addressed in more detail.

Distribution of programs

Despite the wonderful news that there are 24 training programs available to students of health care interpreting in California, there are some areas of the state that have no programs at all. This study was unable to locate any programs currently training interpreters east of the Sierra Nevada or north of San Francisco and Sacramento. Santa Rosa and Red Bluff are developing programs, but farther north there are no programs at all. While the prevailing attitude among many "downstaters" interviewed for this study was that the population in the north was homogeneously white and that interpreters were probably not necessary, interviews with hospital and clinic administrators in northern counties revealed a significant and growing LEP population. Those interviewed reported their facilities were using largely untrained staff or community volunteers to interpret. Certainly there is a need for interpreter training in Northern California.

Conclusion

There is also a unique opportunity in the north. Because of the rural nature of much of this region, videoconferencing capacity has been developed at 26 regional hospitals. The initial purpose of this network was for telemedicine and training of health care personnel, but it could easily be used to train interpreters as well.

In the past several years, health care interpreter training has expanded rapidly in California. The use of statewide networks to disseminate curricula and the emergence of programs targeting different participant populations bode well for the continued development and expansion of training for health care interpreters across the state. Hopefully, more attention will be paid to providing assistance to the northern quarter of the state to develop similar programs. The current network of training opportunities, many based on similar views of the role of and protocols for the health care interpreter, also lays the groundwork for developing a viable statewide certification program for health care interpreters. Through the hard work and support of many different organizations and individuals, California has become a leader in health care interpreter training that will no doubt be emulated throughout the United States.

Compendium of Health Care Interpreter Training Programs in the State of California

About the programs in this compendium

The following compendium represents an attempt by the author to develop a comprehensive listing of interpreter training programs available to those interested in working in health care settings in the state of California. The listing is limited to trainings that are being offered in an on-going fashion, that are open to the public or could be contracted by an institution or agency, and that are more than 20 hours long. As a result, training programs offered only to employees of particular health care institutions were not included here, since they would be available only to a limited group of people. It is hoped that this compendium will serve as a resource to both individuals and institutions seeking training for those who are providing or will provide interpretation services in California's health care settings.

There has been a flurry of activity around developing health care interpreter training in California over the past few years, largely due to an influx of funding by The California Endowment. As a result, there are established programs, programs that are scheduled to start in fall 2002, and programs that are still in the development stage. Surveys were sent only to programs that are currently being offered or are in the final stages of preparation. However, in an effort to include all potential resources for those seeking training, I have also included a listing of programs that are still in the development stage; interested students should contact those programs to find out when classes will be offered.

The survey

Representatives from each training program in this compendium completed a standardized survey form, for which the author would like to thank those involved. (A copy of the survey form can be found in Appendix A.) Responses to that survey have been reproduced here faithfully; where questions were skipped, the section has been removed from the profile. Neither the author nor The California Endowment guarantees the accuracy of the information. Readers should note that programs evolve and change with time. Potential students should therefore contact each program directly for up-to-date information.

Compendium of Training Programs by Region

Region 1: Southern and Inland

(San Diego, Imperial, Riverside, San Bernardino, Orange, Mariposa, Inyo, Mono and Tuolumne counties)

Las Clínicas del Pueblo	16
Vista Community Clinic	19
Catholic Charities, Diocese of San Diego	22
Southwestern Community College	23

Region 2: Los Angeles Plus

(Los Angeles, Ventura, San Luis Obispo and Santa Barbara counties)

Southern California School of Interpretation	24
PALS for Health	26
L.A. Care	29

Mount San Antonio College	32
UCLA Extension	36
University of California Riverside Extension	38
California State University, Long Beach	41
California State University, Los Angeles	43

Region 3: Bay Area

(Alameda, Contra Costa, Marin, Santa Clara, San Francisco, San Mateo, Monterey, Santa Cruz and San Benito counties)

City College of San Francisco	46
Asian Health Services	49
The Monterey Institute	52
National Hispanic University	54

Region 4: Central Valley

(Fresno, Kings, Kern, Madera, Merced, San Joaquin, Stanislaus and Tulare counties)

Healthy House	57
Merced College	60
Fresno County Department of Health and Human Services	62
Reedley College	64

Region 5: Sacramento and North Coast

(Alpine, Amador, Calaveras, El Dorado, Placer, Sacramento, Solano, Sutter, Yolo and Yuba counties)

Hmong Women’s Heritage Association	67
Sacramento County Department of Health and Human Services	70

Region 6: Northern California

(Del Norte, Humboldt, Lake, Mendocino, Napa, Sonoma and Trinity counties)

No currently running interpreter training programs were found in these counties.

Region 7: Far North

(Butte, Colusa, Glenn, Lassen, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou and Tehama counties)

No currently running interpreter training programs were found in these counties.

Programs that will come to you

The Cross Cultural Health Care Program’s Bridging the Gap	73
---	----

Programs that are in the process of being developed

Region 3: San Jose City College	76
Region 6: Santa Rosa Junior College	76
Region 7: St. Elizabeth’s Community Hospital	76

Connecting Worlds Health Care Interpreter Training as offered by Las Clínicas de Salud del Pueblo

Contact Information

Malcolm Leal, Program Coordinator
Las Clínicas de Salud del Pueblo
900 Main St.
Brawley, CA 92227
Tel: (760) 344-6471
Fax: (760) 344-6471
E-mail: MalcolmL@clnicasdesalud. com

Program Description

Goals of the program: The goal of this program is to provide bilingual participants with: an introduction to the theory, concepts and skills related to the consecutive mode of health care interpreting; an appreciation for the complexities of the roles and responsibilities of interpreters in the health care setting; the skills required to carry out those functions; introduction to ethical principles considerations and strategies to assist participants in determining how to handle the challenges that arise within the interpreting context; and limited opportunities to apply concepts and theory through simulated interpreting sessions and case studies.

What group does this training target? Physicians, Nurse Practitioners, all Nursing and Clinical Staff, Medical Assistants, Receptionists and Allied Health Care Personnel.

For which venues does this course prepare interpreters? This course prepares interpreters specifically to work in health care venues.

Content of the course

Opening of Training: Learning Objectives

- Understand purpose of training and learning objectives
- Learn names and primary languages of participants
- Share expectations and develop group agreements

45 minutes

Session 2: Guiding the Interpreting Process

- Body positioning
- First person voice in health care interpreting
- Pre-session with patient and provider
- Identify techniques of turn-taking behavior
- Identify the consecutive mode of interpreting

75 minutes

Session 3: Practice Session

Identify the stages in the interpreting process
Conduct a pre-session
Demonstrate the consecutive mode of interpreting
75 minutes

Session 4: Sight Translation

Define sight translation
Identify key guidelines for sight translation
30 minutes

Session 5: Health Care Interpreting as a Profession

Identify CHIA as a professional organization for health care interpreters
Identify other resources in the field
30 minutes

Session 6: Case Study and Medical Terminology

Understand the purpose and application of an on-going case study format
Identify application of health care interpreter standards
Begin to develop medical vocabulary
60 minutes

Closing

Review key training concepts and begin to formalized reflection process
Understand homework assignment and complete daily evaluation
30 minutes

Hours of instruction: 40 hours

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) No practicum required.

Materials given to students: “Connecting Worlds” Curriculum and Medical Glossary English-Spanish, Spanish-English

Competency testing: A pretest is given before the course and a posttest after the course, in order to show how much participants learned as a result of the training.

How does the course accommodate different language groups? The course is taught only in English.

Unique aspects of the training program: We play a video of two role models one is an unprofessional interpreter interpreting between the patient and the provider and the other is a professional interpreter interpreting between the patient and the provider.

Course Administration

Prerequisites for entry into the course: Students must have English proficiency and be bilingual.

Prescreening: Students are prescreened for English proficiency.

Class size: 10-15

The course has been offered five times already, and we plan to offer it every month.

How is the course funded? Grant funding .

Recognition of students upon completion: Certificate of successful completion.

Number of students having completed the course: 30

Tracking of graduates: Students are not tracked to see whether they go on to work as interpreters.

Materials available for distribution: The “Connecting Worlds” Curriculum can be obtained through The California Endowment at (800) 449-4149.

Interpreter Training Program as offered by Vista Community Clinic

Contact Information

Linda L. Medal, Program Manager
Vista Community Clinic
Health Promotion Center
1000 Vale Terrace
Vista, CA 92084
Tel: (760) 631-5000, ext. 1345
Fax: (760) 724-9596
E-mail: Linda@vistacommunityclinic.org

Program Description

Goals of the program: Along with four different partners our goal is to develop and pilot an interpreter training and testing program for persons providing interpretive services to Latino clients.

What group does this training target? Latinos.

For which venues does this course prepare interpreters? This course prepares students to interpret specifically in health care venues.

Content of the course:

We have not started conducting the 40-hour training yet, but once we start, ideally the training will be given within five consecutive days. Each day will be eight hours long.

Day 1

- Opening of training (8-8:45 a.m.)
- Training pretest (8:45-9:15 a.m.)
- Introduction to health care interpreting (9:15-10:45 a.m.)
- Guiding the interpreting process (10:45 a.m.-12 p.m.)
- Practice session (1-2:15 p.m.)
- Sight translation (2:15-3 p.m.)
- Health care interpreting as a profession (3-3:30 p.m.)
- Case study and medical terminology (3:30-4:30 p.m.)
- Closing (4:30-5 p.m.)

Day 2

- Opening of training, review and application of previous sessions (8-9:30 a.m.)
- STEP process and roles of the health care interpreter (9:30-10:45 a.m.)
- Role of the message converter (10:45 a.m.-12 p.m.)

Role of the message clarifier (1-2:30 p.m.)
Practice session, case study and medical terminology (2:30-4:30 p.m.)
Closing (4:30-5 p.m.)

Day 3

Opening of training, review and application of previous sessions (8-9:30 a.m.)
Health beliefs and practices (9:30-11 a.m.)
Partnering with health care providers (11 a.m.-12 p.m.)
Role of the cultural clarifier (1-2:45 p.m.)
Practice session, case study and medical terminology (2:45-4:30 p.m.)
Closing (4:30-5 p.m.)

Day 4

Opening of training, review and application of previous sessions (8-9:30 a.m.)
Health care climate (9:30-10:30 a.m.)
Legal issues and reporting requirements (10:30 a.m.-12 p.m.)
Role of the advocate (1-2:30 p.m.)
Practice session, case study and medical terminology (2:30-4:30 p.m.)
Closing (4:30-5 p.m.)

Day 5

Opening of training, review and application of previous sessions (8:00-9:30)
Professional conduct (9:30-10:00)
Self-development and staying healthy (10:00-10:45)
Best practices (10:45-12:00)
Practice session: Final skills application (1:00-2:30)
Case study (2:30-3:15)
Summary of training (3:15-3:45)
Training posttest (3:45-4:30)
Closing (4:30-5:00)

Hours of instruction: 40 hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* No practicum is required.

Materials given to students:

- Participant workbook and resource guide.
- Train-the-trainer manual for only those participants that are going to deliver the training (abridged version of four to eight hours long)

Competency testing: A pretest is given before the course and a posttest after the course. The test is about 85 questions long. The purpose of the test is to test the knowledge of learners and not to reinforce the curriculum or learning.

How does the course accommodate different language groups? The course is taught only in English.

Unique aspects of the training program: In addition to completing the 40-hour training, participants will complete a training session on how to present an abridged version of the curriculum between four to eight hours long. They will have to train a minimum of 300 health and social service support staff from their respective organizations. The participants that get trained by the newly trained interpreters will have to demonstrate 75 percent knowledge and skill competency on the four- to eight-hour curriculum. In other words, it is a train-the-trainer model.

Course Administration

Prerequisites for entry into the course: We are in the process of developing a language proficiency test. This test will be administered prior to taking the training to see who is competent and proficient enough to participate in the 40-hour training. We will focus on the Latino population. So Spanish fluency will be a must.

Prescreening: When we actually start our first training, individuals will be screened for oral and written proficiency in English and Spanish.

Class size: 10-20

The course has not been offered yet, but we plan to offer it in the near future maybe five to six times a year. Depends on demand.

Criteria for teachers/trainers? They have to have a vast experience in the health care field, specifically in the field of medical interpretation. They will also have to be fully bilingual in English and Spanish. Certification as an interpreter would be ideal.

How is the course funded? Grant funding.

Recognition of students upon completion:

Certificate of attendance

Certificate of successful completion.

Number of students having completed the course: 0

Materials available for distribution: We are in the process of pilot testing the 40-hour curriculum. Once the final draft with all the changes and modifications is completed, The California Endowment will have the curriculum for distribution purposes.

**Health Care Interpreter Training
as offered by Catholic Charities, Diocese of San Diego**

Contact Information

Terry Clark, Program Manager
Catholic Charities
4575-A Mission Gorge Place
San Diego, CA 92120
Tel: (619) 287-9454, ext. 132
Fax: (619) 287-6328
E-mail: Tclark@ccdsd.org, mjabbar@ccdsd.org

While this program was not able to complete a survey, interested students should see the write-up on “Bridging the Gap” as offered by the Cross Cultural Health Care Program, and then contact Terry Clark for information specific to the course in San Diego.

Certificate in Legal Interpretation/Translation Southwestern Community College

Contact Information

Alva Sands, M.A., Faculty
School of Business and Information Systems
Office Information Systems Department
Southwestern Community College
900 Otay Lakes Road
Chula Vista, CA 91910
Tel: (619) 421-6700, ext. 5534
E-mail: asands@swc.cc.ca.us

Unfortunately, this program was identified too late in the study to include survey results. However, the contact information is listed with a short description so that interested parties can contact the school directly.

This 57-hour certificate program requires class work in interpretation and translation for legal, medical, general business and immigration venues. The program targets Spanish speakers only. There is a Spanish language fluency requirement for enrollment. This program may be expanded in order to grant an associate's degree in the near future.

Southern California School of Interpretation, Inc.

Contact Information

Paul Calderón, Office Supervisor
Angelica Huizar, Kathy Varden, Assistants
11506 E. Telegraph Road, #212
Santa Fe Springs, CA 90262
Tel: (502) 863-0026
Fax: (562) 863-7029
E-mail: SCSINTER@ix.netcom.com

Program Description

Goals of the program: The goal of this training program is to prepare students for state certification in court, administrative hearings, medical and federal interpreting.

What group does this training target? Bilingual English-Spanish speakers.

For which venues does this course prepare interpreters? This course prepares interpreters specifically for health care and legal venues.

Content of the course:

Medical program (six-month program with an oral exam)

1. Medical Interpreting I (11-week course)
2. Medical Interpreting II (11-week course)

Classes meet once a week for a 3.5-hour lecture. Students are required to complete a minimum of 55 to 60 hours of language lab practice per quarter.

Court / Administrative Hearing (12-month program with an oral exam)

1. Criminal proceedings I (11-week course)
2. Criminal proceedings II (11-week course)
3. Sight translations (11 week course)
4. Municipal and Superior Court (8-week course)

Classes meet once a week for a 3.5-hour lecture.

Preparation for the written State Exam (8-week program)

1. Spanish Grammar I (4-week course)
2. Spanish Grammar II (4-week course)
3. English Grammar I (4-week course)
4. English Grammar II (4-week course)

Classes meet once a week for a 3.5-hour lecture.

Hours of instruction: For the medical training, 77 hours; for the court training, 143 hours.

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) No practicum is required.

Materials given to students: Workbook, practice tapes and access to the language lab

Competency testing: Competency testing is done both before and after the course. The entrance exam is a written test only, while the final examination is both written and oral.

How does the course accommodate different language groups? The course is taught bilingually only to English/Spanish speakers.

Course Administration

Prerequisites for entry into the course: High school diploma, fully bilingual in English and Spanish, pass the entrance examination.

Prescreening: Pre-screening is done for fluency in both English and Spanish.

Class size: 45 to 50 students
The course has been offered since 1993, and will continue to be offered quarterly.

Criteria for teachers/trainers? All instructors are certified interpreters.

How is the course funded? Student fees.

Recognition of students upon completion: Certificate of successful completion, academic credit.

Number of students having completed the course: There is an 85 percent pass rate.

Tracking of graduates: Students are tracked to see if they go on to work as interpreters; about 85% are currently working as interpreters.

Materials available for distribution: None.

“Connecting Worlds” Health Care Interpreter Training as offered by Pacific Asian Language Services (PALS for Health)

Contact Information

Susan Choi, Program Manager
PALS for Health
605 W. Olympic Blvd., Suite #600
Los Angeles, CA 90015
Tel: (213) 553-1827
Fax: (213) 553-1822
E-mail: palshealth@earthlink.net

Program Description

Goals of the program: To prepare bilingual individuals with the skills and knowledge to provide accurate and complete health care interpreting services.

What group does this training target? Individuals interested in becoming health care interpreters are welcome into the training. Currently, PALS is training in-house interpreters. Individuals must pass PALS’ bilingual proficiency test (2.5 hours) as a requirement to enter the training.

For which venues does this course prepare interpreters? This training prepares interpreters specifically for health care venues.

Content of the course:

Day 1

- Opening and pretest
- Overview of Health Care Interpretation
- Standards for Health Care Interpreters
- Guiding the Process
- Practice Session
- Sight Translation
- Health Care Interpreting as a Profession
- Case Study and Medical Terminology

Day 2

- Review and Application
- STEP Process: Roles of the Health Care Interpreter
- Health Care Interpreter Role 1: Message Converter
- Health Care Interpreter Role 2: Message Clarifier
- Practice Session
- Case Study and Medical Terminology

Day 3

Review and Application
Health Beliefs and Practices
Partnering with Health Care Providers
Health Care Interpreter Role 3: Cultural Clarifier
Practice Session
Case Study and Medical Terminology

Day 4

Review and Application
Health Care Climate
Legal Issues and Reporting Requirements
Health Care Interpreter Role 4: Advocate
Practice Session
Case Study and Medical Terminology

Day 5

Review and Application
Professional Conduct
Self-development and Staying Healthy
Practice Session
Case Study
Summary of Training

Hours of instruction: 40 hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* No practicum is required.

Materials given to students: Participants receive the participant's workbook, resource guide and a medical terminology guide. The participants' workbook includes materials, activities, homework and role-plays from the training.

Competency testing: PALS has a pretest, a midterm and a posttest to assess interpreting knowledge and skills through both written and oral formats. Furthermore, the participants will be evaluated by their peers during role-play activities.

How does the course accommodate different language groups? The course is taught in English with some non-English small group work.

Unique aspects of the training program

1. PALS had developed an in-house 40-hour training curriculum, "Putting the Pieces Together" that will now serve as a supplemental guide to the "Connecting Worlds" curriculum.
2. The "Connecting Worlds" curriculum closely parallels China's interpreter standards and ethics.

3. In order to receive a Certificate of Completion, training participants must pass the post-test with a 70 percent or higher in both the written portion and the oral portion. Otherwise, they will receive only a Certificate of Attendance.

Course Administration

Prerequisites for entry into the course: Prerequisites for entry into the training include passing a bilingual proficiency exam with a 70 percent or higher in both the written portion and the oral portion. It is strongly encouraged that the participants have a language partner. Therefore, they can practice role plays and discuss terminologies in both English and in their non-English language.

Prescreening: English proficiency is tested. If the participant would like to work as a PALS interpreter, he or she would need to go through an application and interview process.

Class size: approximately 15 participants

The course has been offered two times already in the 40-hour format, and we plan to offer it two to three times a year.

Criteria for teachers/trainers? PALS trainers need to have completed a 40-hour interpreter training course and a training of trainers course. An alternative to the training of trainers course is a mentoring process with senior seasoned trainers.

How is the course funded? Student fees.

Grant funding: Paid for by hospitals or clinics.

Recognition of students upon completion:

Certificate of attendance

Certificate of successful completion.

Number of students having completed the course: 27

Tracking of graduates: Currently PALS has offered the training only to PALS interpreters, making it easy to track students. Approximately 90% are currently working as interpreters. In the near future we plan to extend the training to CBO's and health care providers.

Materials available for distribution: The "Connecting Worlds" Health Care Interpreter Curriculum" and the training of trainers curriculum will be available through The California Endowment once it is completed and ready for distribution.

Health Care Interpreter Pilot Program (HCIPP) **As offered by the L.A. Care Health Plan**

Contact Information

Jennifer Cho
Culture and Linguistic Specialist
L.A. Care
555 West Fifth St., 29th Floor
Los Angeles, CA 90013
Tel: (213) 694-1250, ext. 4327
Fax: (213) 623-8097

Program Description

Goals of the program: Train bilingual/bicultural staff, who are functioning in dual roles as medical personnel and interpreters, in a professional course which covers key skills necessary to function effectively as interpreters in the health care setting.

What group does this training target? Midlevel and front-line staff at the clinic setting as well as health educators and customer service staff.

For which venues does this course prepare interpreters? Health care only.

Content of the course

Session I: Introduction to Health Care Interpreting

The roles of the interpreter

Interpreter ethics

Basic concepts in interpretation

Modes of interpreting

Elements of message-passing: accuracy and completeness

Elements of clarifying: register, lack of linguistic equivalency, symbolic speech

What is clarifying?

Session II: Interpreting Skills

Purpose and role

Use of first person

Lack of linguistic equivalence

Symbolic meaning

High register

Intervening

Memory aids

Sight translation

Pre-sessions

Building word pictures

Being transparent

Session III: Health Care: Systems, Concepts and Vocabulary

The U. S. health care system
The culture of U. S. health care
Medical terminology
Anatomy and physiology
Symptoms and diagnosis
Procedures
A typical medical interview

Session IV: Culture & Advocacy

General concepts of culture
Building awareness of cultural bumps
Health and healing across cultures
Self-awareness: dealing with differences in race, class, ethnicity, urban vs. rural, and acculturation
Techniques for culture brokering
Advocacy: How far is too far?
Next steps in professional growth

Hours of instruction: 48 hours

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) No practicum is required.

Materials given to students: Handouts from the training, Code of Conduct from California Health Interpreter's Association, National Council on Health Care on Interpretation's Medical Terminology manual. Ordering forms for additional resources are included.

Competency testing: Competency testing is done both prior to and after the training. The test is developed for each session by the trainer based on the curriculum covered during the course. The test is administered, assessed by trainer and retained in the master training database and is a determinant of whether participants will receive a certificate of success completion or participation.

How does the course accommodate different language groups? The course is taught in English with some non-English small group work.

Unique aspects of the training program: The program is available free of cost to participants. Often, recruiting the participants is also recruiting their supervisors to support their paid time off to attend this course. Participants earn CME units. Since the course is not limited to one language, participant languages have included, in addition to Spanish, Cantonese, Vietnamese, Cambodian, Armenian, Kanjobal (Mayan dialect) and Korean. These participants are joined with a seasoned medical interpreter either in person or by phone during the practice sessions and gain experience as well as feedback. The language coaches provide in depth feedback to the trainer, and the feedback is shared with the director and specialist in the C&L Services Department. The feedback is then used to tailor and fine-tune the approach to make the training more effective.

Course Administration

Prerequisites for entry into the course: Must be fluent in English and another language. Must currently be serving in the capacity of an interpreter in their job responsibilities. Must be within L.A. Care's provider network. Must be willing to complete the entire course and successfully complete the pre/post test.

Prescreening: Experience working as an interpreter, any training received, how participant learned English and target language, education received and confidence level in their ability to interpret for patients.

Class size: 20 to 38

The course is currently being offered for the first time. So far, four sessions have been offered: Introduction to the course (once), Session I (twice) Session II (once). Session III will be offered in June, 2002 and Session IV will be offered in August.

Criteria for teachers/trainers? A trainer must be highly experienced in the field and known as a reputable trainer for interpretation. Additionally, this person must have a high degree of interpersonal, classroom and organizational skills. Must also be an innovative thinker who is constantly seeking more effective and creative ways to teach and reach participants and is flexible in an often changing environment.

How is the course funded? Funding for this course comes from the budget of the Cultural and Language Department of L.A. Care.

Recognition of students upon completion: Certificate of attendance, certificate of successful completion, academic credit.

Number of students having completed the course: 38 are currently enrolled.

Tracking of graduates: We plan to keep in touch with students. All are interpreting as part of their jobs.

Materials available for distribution: None.

Additional Comments: The National Health Law Program (NHELP) is releasing a report funded by the Commonwealth Fund on various best practice efforts underway in the interpretation area. This report will outline and assess L.A. Care's efforts but will also highlight other organization efforts in the area. This report may be useful to look at to get an overall sense of efforts in the field toward qualified, health care interpretation.

Health Care Interpreting as offered by Mt. San Antonio College

Contact Information

Dr. Bonnie Adams, Director, Regional Health Occupations Resource Center
c/o Mt. San Antonio College
1100 N. Grand Ave., Build #35
Walnut, CA 91789
Tel: (909) 594-5611, ext. 6104
Fax: (909) 468-4093
E-mail: rhorc@aol.com

Program Description

Goals of the program: To produce health care interpreters to meet health care providers' needs in Los Angeles County.

What group does this training target? Bilingual students.

For which venues does this course prepare interpreters? Health care only.

Content of the course:

Fall: Prerequisites:

ESL - Vocational English as a Second Language (may be waived) (54 hours)
Medical Terminology (54 hours)
Anatomy and Physiology (54 hours)

Spring: Theory and Supervised Language Coaching
VOC Health 13 (108 hours)

Module 1: Introduction to Health Care Interpreting

Roles of the Interpreter
The Interpreter Code of Ethics
Health Care in the United States
Standards of Care
Culture & Interpreting

Module 2: Basic Interpreting Skills

Roles of the Interpreter
Modes of Interpreting
Pre-sessions
Being a Conduit
Being a Clarifier
Intervening

Managing the Flow of the Session
Memory Development
Sight Translation

Module 3: Body Systems and their Problems

Respiratory System
Nervous System
Digestive System
Ductless Gland System
Circulatory System
Bones and Muscles
Skin System
Urinary System
Reproductive System

Module 4: Nutrition

Nutrition: Maintaining a Balance
Public Health
VOC Health 14 (108 hours)

Module 5: Culture and its Impact on Interpreting

An Introduction to Culture
Spotting Cultural Bumps
Recognizing Diversity
Traditional Health Care in Specific Communities
Application to the Culture Broker Role
The Role of the Advocate
Effective Communication
Appropriate Advocacy

Module 6: Interpreting for Examinations and Procedures

Physical Exam
Neuro Exam
Mental Status
Role-plays for Interpreting for Exams
Interpreting consents
Translation of consents
Assessment of Level of Understanding of Consents

Module 7: Mental Health / Death and Dying

Substance Abuse
Mental Health
Domestic Violence
Self-Care
Death and Dying

Module 8: Professional Development

Critical Incidents
Office of Civil Rights
Confidentiality
Ethics
Preparing for Internship
Writing a Resume
Professional Conduct
Resources for Professionals

VOC Health 15 (72 hours)

Fall/Spring

VOC Health 05: Health Science Skills Lab (108 hours)

(Lab by arrangement: three hours/week)

Summer: Internship

VOC Health 15 (54 hours)

Module 9:

Role Playing
Video Testing
Internship Preparation
Internship Seminar (220 hours)

Hours of instruction: 632 hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* A 54-hour practicum is required.

Materials given to students: Modules that are self-contained with study guides, lab assignments, syllabus for coaching session, syllabus for internship.

Competency testing: Competency testing is done both before and after the training. An ESL test evaluates English skills before entering the course; the posttest evaluates performance.

How does the course accommodate different language groups? The course is taught in English with labs taught by language coaches. The program targets principally speakers of Spanish and Mandarin Chinese.

Unique aspects of the training program: One unique aspect of this course is that participants are required to take anatomy, physiology and medical terminology, as well as VESL for non-native speakers of English, as pre-requisites to the course. Also unique is our use of the Health Skills lab and three hours of independent study per week.

Course Administration

Prerequisites for entry into the course: Anatomy and Physiology, Medical terminology, VESL (includes ESL) for ESL students.

Prescreening: Students are prescreened by ESL. Written assignment and English verbal interview.

Class size: 25

The course is currently being offered for the first time and will be offered once a year in the future.

Criteria for teachers/trainers? Two bilingual R.N.s (B.A. in nursing); one bilingual English/Spanish, one bilingual Mandarin/English. Both completed a 54-hour Instructor Training with Gayle Tang, as well as completing “Bridging the Gap” and the Cross Cultural Health Care Program’s 32-hour training of trainers. The coach supervisor is an M.D. Five language coaches, funded by The California Endowment, have medical backgrounds.

How is the course funded? The course is funded through the use of ADA Apportionment Community Colleges.

Recognition of students upon completion:

Certificate of successful completion

Academic credit

Graduation ceremony and pins

Number of students having completed the course: none; the first course finished June 30, 2002.

Tracking of graduates: We intend to track our students to see how many go on to work as interpreters.

Materials available for distribution: All materials will be distributed to any community college in California.

Additional Comments:

The Health Care Interpreter program is designed to train bilingual and bicultural students to develop the awareness, knowledge and skills necessary for effective language interpretation in health care settings. Through academic preparation, practical skills training and service in community-based health care settings and educational organizations, candidates learn:

1. Roles and responsibilities of a health care interpreter;
2. Basic knowledge of common medical conditions, treatments and procedures;
3. Insight into linguistic and cultural nuances for specific communities, and
4. Application of interpreting skills in English and language of service.

The program may be completed part-time in one year. Courses are arranged for the working student. Classes are held Thursday and Friday evenings and Saturday mornings.

**Certificate Program in Translation and Interpretation,
English/Spanish
as offered by UCLA University Extension**

Contact Information

Alexander Rainof, Ph.D., Lecturer, Program Founder
2835 Colorado Ave.
Santa Monica, CA 90404
Tel: (310) 828-4950
Fax: (310) 828-4911
E-mail: arrainof@ucla.edu

Program Description

Goals of the program: To train students in translation and interpretation in the legal, medical and private sectors.

What group does this training target? Mostly students with a B.A. or advanced degrees

For which venues does this course prepare interpreters? Health Care, Legal, Conference, Social Service, Business, State Agencies

Content of the course:

This is a one-year certificate program, including eight courses over four quarters.

Fall 460A: Sight and written translation, Spanish to English, covering legal, medical, business and technical

Fall 460B: Sight and written translation, English to Spanish, covering legal, medical, business and technical

Winter 461A: Consecutive interpretation, court

Winter 461B: Consecutive interpretation, medical, state agencies, business

Spring 462A: Uses a variety of tapes (legal, medical, economic, etc.) both prepared and surprise tapes, in a cutting-edge lab. Preparation for simultaneous techniques, Spanish-English

Spring 462B: Uses a variety of tapes (legal, medical, economic, etc.) both prepared and surprise tapes, in a cutting-edge lab. Preparation for simultaneous techniques, English-Spanish

Summer 1) Legal class with the Public Defender on the role of the interpreter in the U. S. judicial system.
2) Class/Internship in the courts at L.A. Superior Court.
Each class during the first three quarters meets three hours per week for ten weeks.

Hours of instruction: 120 hours, over one year

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) A practicum is required.

Materials given to students: In all, some 14 books in terminology and methodology and nearly 50 tapes

Competency testing: There is no competency testing either before or after the course.

Course Administration

Prerequisites for entry into the course: Generally, a B.A. degree is required in Spanish or a related field. Law and medical degrees are also accepted. University training can, in part, be replaced by experience.

Pre-screening: Candidates must provide a tape in their non-native language and samples of formal writing.

Class size: 15 to 20

The program has been offered over the past 20 years; each of the eight courses in the program is offered once a year.

How is the course funded? Student fees.

Recognition of students upon completion: Certificate of successful completion, academic credit

Number of students having completed the course: more than 300.

Tracking of graduates: We do track students to see what they do. About 20 percent are working in the L.A. court system. While there is no specific data for medical interpreters, at least several students are working in that area.

Materials available for distribution: Materials are available for purchase through A-Lexis Publications. For information, please contact Dr. Alexander Rainof.

Certificate in Professional Interpretation and Translation as offered by University of California Riverside Extension

Contact Information

Olivia Johnston, Primary Instructor (for information on course content)
Jan Crompt, Registrar (for registration)
UCR Extension
1200 University Ave., Rm. 333
Riverside, CA 92507-4596
Tel: Olivia Johnston: (909) 779-0007
Jan Crompt: (909) 787-4111, ext. 1616
E-mail: Olivia Johnston, ojinterp@pe.net

Program Description

Goals of the program:

This program was designed in response to the increasing demand for certified interpreters in the fields of law, medicine, business, education, immigration and conference interpreting.

The program will provide training in sight translation and interpretation techniques through three four-unit courses and will emphasize professional protocol, ethics and the American legal system in two two-unit courses. The acquisition of specialized glossaries and vocabulary will be stressed throughout the program. The program provides preparation for:

- Examinations required for court interpretation by federal, state and county agencies, as well as professional organizations;
- A career as an interpreter in the private sector; and
- A career as a freelance interpreter.

What group does this training target? Individuals fluent in Spanish and English who are interested in a career in interpretation.

For which venues does this course prepare interpreters? Health care, social service, legal, business, private sector, civil, education, immigration and conference interpreting.

Content of the course:

Sight translation: English/Spanish and Spanish/English (4 units) - This course emphasizes the acquisition of appropriate English/Spanish and Spanish/English vocabulary and sight translation skills used in criminal and civil court matters.

The U. S. Court System: An Overview for Legal Interpreters (2 units) - A general survey of criminal and civil courts and the various jurisdictions in which they operate and the roles of their personnel. Explores basic legal concepts such as constitutional rights and search and seizure.

Consecutive Interpretation (4 units) - Emphasizes consecutive interpretation as practiced in courts and adjudicatory hearings.

Simultaneous Interpretation (4 units) - Emphasizes simultaneous interpretation, a technique used in the majority of interpreted proceedings. Shadowing, decalage and other memory retention techniques will be covered to help the student acquire the flow, register, target language grammar and vocabulary necessary for a professional level of interpreting.

Professional Interpreting: Protocol and Ethics (2 units) - Focuses on ethical principles and standards in the interpreting profession.

Hours of instruction: 160 hours

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) A 10 to 15 hour practicum is required.

Materials given to students: Students receive seven to 15 texts as well as handouts.

Competency testing: Competency testing is done both before the course and after the course, using a mock situation that requires the use of the three modes of interpreting in specific situations.

How does the course accommodate different language groups? The course is taught in English to speakers only of Spanish and English.

Unique aspects of the training program:

The program designer believes that the course on Protocol and Ethics is unique to this program.

Course Administration

Prerequisites for entry into the program: Candidates must have completed at least two years of college-level work or be a certified interpreter. Candidates must pass a qualifying examination to determine their level of fluency in both languages.

Prescreening: A qualifying exam evaluates level of fluency in Spanish and English.

Class size: 20 to 29 students

The course has been offered for the past nine years, and we plan to continue to offer it annually.

Criteria for teachers/trainers? An attorney teaches the material on the U. S. court system and the rest of the course is taught by Olivia Johnston.

How is the course funded? Student fees.

Recognition of students upon completion: Certificate of successful completion academic credit.

Number of students having completed the course: No response.

Tracking of graduates: The program does track graduates; about 30 percent are currently working as interpreters.

B. A. in Translation and Interpretation Studies, English/Spanish as offered by California State University, Long Beach

Contact Information

Alexander Rainof, Ph.D., Professor in the Department of Romance,
German, Russian Languages and Literature
California State University, Long Beach
1250 Bellflower Blvd.
Long Beach, CA 90840-2406
Tel: (562) 985-1599
E-mail: arainof@csulb.edu

Program Description

Goals of the program: The B.A. in Translation and Interpretation Studies provides students proficient in both English and Spanish with an opportunity to develop and perfect their linguistic skills and cultural knowledge to pursue a career in the field of interpretation and translation.

What group does this training target? Undergraduates.

For which venues does this course prepare interpreters? Health care, legal, conference, social service, business, state agencies, film industry.

Content of the program:

461: Introduction to Translation and Interpretation
462: Written and Sight Translation I: English-Spanish
463: Written and Sight Translation II: Spanish-English
464: Consecutive Interpreting I
465: Consecutive Interpreting II
466: Simultaneous Interpretation: English-Spanish
467: Simultaneous Interpretation: Spanish-English

AND a choice of three from among the following

310: Intro to Literary Analysis
423: Intro to Spanish Linguistics
427: Contrastive Analysis - Spanish and English
445: Latin American Civilization

Hours of instruction: 450 hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is*

observed on the job by an experienced interpreter.) Two one-half day visits to the courts and to hospitals are required.

Materials given to students: Books, audio and videotapes.

Competency testing: There are prerequisites before the course, but no competency testing after.

Unique aspects of the training program: This is the first B.A. program in Translation and Interpretation in the United States.

Course Administration

Prerequisites for entry into the program: SPAN 312/313 with a “B” or better, or instructor’s consent.

Class size: Varies from eight to 20 in most classes, and from 50 to 60 in the introductory classes. The introductory courses are offered every fall, and other classes are offered once per year.

How is the course funded? Student fees, grant funding.

Recognition of students upon completion: Bachelor of Arts in Translation and Interpretation.

Number of students having completed the course: None, this is the first year of the program.

Tracking of graduates: Graduates will be tracked to see how many end up working as interpreters/translators.

Materials available for distribution: Materials are available for purchase through Alexander Rainof.

**Legal and Medical Interpretation and Translation -
English/Spanish-Spanish/English
as offered by California State University, Los Angeles**

Contact Information

Iris Fiorito, Coordinator
490 Smoketree Drive
La Verne, CA 91750
Tel: (909) 596-5246
Fax: (323) 343-49547
E-mail: i.fiorito@cslanet.calstatela.edu or jalloe@aol.com

Program Description

Goals of the program: This program, sponsored by the Division of Extended Education, trains for interpretation and translation in many areas of employment in today's bilingual and bicultural world.

What group does this training target? Bilingual, bicultural English/Spanish.

For which venues does this course prepare interpreters? Health care, legal, conference, social service, business.

Content of the program:

ML790A Translation: Contrastive Analysis of English-Spanish Grammatical Structures (40 hours of instruction)
ML790B Translation and Interpretation: Elements, Foundation and Style (40 hours of instruction)
ML791A Translation and Interpretation for Criminal/Penal Proceedings (40 hours of instruction)
ML791B Translating and Interpreting for Criminal/Penal Proceedings (40 hours of instruction)
ML792A Translating and Interpreting for Civil Proceedings and Administrative Hearings (40 hours of instruction)
ML792B Translating and Interpreting for Civil Proceedings and Administrative Hearings (40 hours of instruction)
ML793 Legal Interpretation and Translation Laboratory Practicum (40 hours of instruction)
ML 898/50 Introduction to Medical Interpretation and Translation (30 hours of instruction)
ML 898/50 Fundamentals of Medical Interpretation (30 hours of instruction)
ML700A Beginning Grammar for interpreters and translators (30 hours of instruction)

Hours of instruction: 430 hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* A 20 hour practicum is required.

Materials given to students: Textbooks, glossaries, sample tests, information about employment, workshops and other matters of interest regarding the profession.

Competency testing: Competency testing is done both before and after the course. The testing consists of a 100-item multiple-choice test in Spanish and English, a mock trial, and a mock medical interview.

How does the course accommodate different language groups? The course is taught bilingually only to speakers of Spanish.

Unique aspects of the training program: We provide for remedial language courses in our own program.

Course Administration

Prerequisites for entry into the program: Completion of a minimum of 54 quarter units (36 semester units) of post-secondary education or equivalent knowledge and experience to demonstrate the ability to perform upper-division course work; successful completion of a bilingual placement test in the following areas reading comprehension, grammar, syntax, spelling, listening and writing.

Prescreening: Prescreening is done to evaluate candidates' level of bilingualism and bi-literacy.

Class size: 15

Criteria for trainers/teachers: They have to work in the area they teach. They have to have a degree, and/or be state certified. This program has been running for 11 years, with classes offered each quarter.

How is the course funded? Student fees, grant funding, paid for by hospitals and clinics, rehabilitation, Veterans Administration

Recognition of students upon completion: Certificate of successful completion, academic credit

Number of students having completed the course: more than 500

Tracking of graduates: Graduates are tracked, and 90 percent are currently working as interpreters.

Materials available for distribution: Textbooks for the course can be ordered at the CSULA bookstore.

Additional comments

CERTIFICATE REQUIREMENTS:

The program consists of seven required courses in translation and interpretation. None of the courses may be taken concurrently. Students may not take more than one quarter off consecutively without being dropped from the program. In order to be readmitted, they must re-take the placement test or repeat their last course. Courses have been approved by the Judicial Council of California for Court Interpreters Minimum Continuing Education credit (CIMCE). Before being admitted to the program, students must take a bilingual placement test. The results of the test determine whether they may enter the program directly or whether they must first take one or more of the preparatory courses.

This Program has been approved for VA funding.

Students who refer a new student to the program will receive \$100 discount for each referral who enrolls in the program.

Health Care Interpreter Certificate Training Program as offered by City College of San Francisco

Contact Information

Program Coordinator
City College of San Francisco
50 Phelan Ave.
San Francisco, CA 94112
Tel: (415) 452-5158
Fax: (415) 452-5162

Program Description

Goals of the program: To develop a cadre of qualified, linguistically and culturally competent health care interpreters.

What group does this training target? Anyone interested in bridging linguistic and cultural gaps in health care settings

For which venues does this course prepare interpreters? Health care.

Content of the course:

Health 80: Interpreting Health Care I: Six hours weekly

General Class Introduction
Interpreter Roles and Responsibilities
Modes of Interpretation
Cultural Interpretation
Understanding the Diagnostic Process
Overview of Health Care Systems

Health 81: Interpreting in Health Care II: Six hours weekly

General Class Introduction
Managing the Flow of the Interpreting Session
Development of the Technical Aspects of Interpretation
Health Issues in Ethnic Communities
Cross-cultural Communication
Overview of Community Health Care Systems
In-depth Review of Health Care Terminology in Language of Service
Interpreting in Different Health Care Services Areas
Psychosocial/Mental Health Issues
Development of a Portfolio
Exploration of Careers in Interpreting

Health 82: Field Work in Health Care Interpreting: Eight work experience hours and two consultation hours per week

General Class Introduction

Field Placement

Directed Practice with Assigned Agency

Elements of Workplace, Culture and Professionalism

Evaluation of Interpretation Activities

Hours of instruction: 300+ hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* An 80 to 120 hour practicum is required.

Materials given to students:

Textbooks: “Bridging the Gap: A Basic Training for Health Care Interpreters,” from the Cross Cultural Health Care Program
“Trilingual Reference Manual”
“Medical Interpreting Standards of Practice”

Other instructional materials: Videotapes, chart diagrams, overhead transparencies, slides.

Competency testing: Competency testing is done upon completion of the course only; the test is applied in a language lab.

How does the course accommodate different language groups? The course is taught in English with labs taught by language coaches.

Course Administration

Prerequisites for entry into the program: Each course requires successful completion of the previous course.

Prescreening: There is no prescreening, but each candidate must attend a mandatory orientation.

Class size: 30 to 40

The course has been offered five times already, and we plan to continue offering it yearly.

Criteria for teachers/trainers?

1. Master’s degree in health science or health education from an accredited institution;
2. Post-secondary teaching experience in health science courses
3. Bilingual, biliterate and bicultural (Cantonese, Mandarin, Russian, Spanish and/or Vietnamese);
4. Documented experience as a health care interpreter and/or patient advocate;

5. Demonstrated experience in working with persons of diverse academic, gender, gender identity, socioeconomic, cultural, linguistic, sexual orientation and disability backgrounds;
6. Demonstrated experience in training and/or curriculum development for front-line health care workers;
7. Training and/or experience in community health worker, HIV/STD prevention education, and drug and alcohol programs;
8. Training experience and current (or in process of obtaining) instructor certificates in CPR/First Aid and Safety courses;
9. Knowledge of medical terminology and health practices;
10. Experience with public agencies and community-based organizations in linguistically, culturally diverse, and low-income communities;
11. Knowledge of health care delivery system; and
12. Demonstrated skills to operate a desktop computer.

How is the course funded? Student fees.

Recognition of students upon completion: Certificate of successful completion, academic credit.

Number of students having completed the course: More than 150.

Tracking of graduates: We do not track graduates to see if they go on to work as interpreters.

Materials available for distribution: None.

“Connecting Worlds”: Training for Health Care Interpreters as offered by Asian Health Services

Contact Information

Mark Won
Asian Health Services
818 Webster St.
Oakland, CA 94607
Tel: (510) 986-6830
Fax: (510) 986-6866
E-mail: mwon@ahschc.org

Program Description

Goals of the program: The “Connecting Worlds” curriculum strives to provide a theoretical framework, opportunities for skills-development and forum for participants to share and learn from each other’s experience, knowledge and skills. Our approach is to involve participants as active learners and teachers by involving them in interactive learning modalities including group discussions, case study analysis and role-plays. To the extent possible, a conscious effort was made to provide students with opportunities to apply the theory, concepts, techniques and strategies presented during the training.

What group does this training target? Bilingual community members from groups with limited access to health care due to language barriers.

For which venues does this course prepare interpreters? Health care.

Content of the course:

“Connecting Worlds” is a 40-hour training curriculum, and covers the following topics to some degree on each day of the training:

- An introduction to the theory, concepts and skills related to the consecutive mode of health care interpreting,
- An appreciation for the complexities of the roles and responsibilities of interpreters in the health care setting and the skills required to carry out those functions, and
- An introduction to ethical principles, considerations, and strategies as presented in the California Healthcare Interpreters Association (CHIA) standards of practice, to assist participants in determining how to handle the challenges that arise within the interpreting

Hours of instruction: 40 hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* No practicum is required.

Materials given to students: Participant Workbook and Resource Guide.

Competency testing: The program will begin to conduct knowledge-based pretesting as part of the statewide training collaborative, however this process has not been instituted yet. Post-training oral testing for medical terminology and interpreting skills is conducted.

How does the course accommodate different language groups? The course is taught in English with significant non-English small group practice sessions with language-specific trained, experienced health care interpreters.

Unique aspects of the training program: The “Connecting Worlds” Training Collaborative made the significant decision to incorporate the California Healthcare Interpreter Association’s (CHIA) draft standards into the curriculum. Despite the draft nature of the standards, we felt it was an important step to align this statewide training curriculum with the statewide performance standards (which were developed by the interpreting community throughout California.) To the extent possible, we have referenced Draft 12 of the CHIA Standards when they relate to specific training topics or sections and we have attempted to be consistent with the labels used to describe the roles of the interpreter. However, two cautions are necessary: a) the Draft Standards are a work-in-progress and b) this relatively short curriculum is not able to address all aspects of the CHIA draft standards. We cannot claim that this training will fully prepare participants to meet the draft standards. As the CHIA standards are finalized and revisions of this curriculum are developed, we envision an even closer alignment between the two.

Course Administration

Prerequisites for entry into the course: Bilingual proficiency .

Prescreening: Language proficiency is tested.

Class size: 15 to 25

This new curriculum has been offered only once so far, however we have offered our previous interpreter training program 15 to 20 times. We intend to offer the new curriculum two to three times a year.

Criteria for teachers/trainers?

- Participated in “Connecting Worlds” (or previous AHS “Across Language and Culture”) training as a student;
- Field experience in health care interpreting; and
- Training experience or TA in previous trainings.

How is the course funded? Student fees, grant funding, paid for by hospitals or clinics contracted by an organization.

Recognition of students upon completion: Letter of successful completion.

Number of students having completed the course: 14 have completed the new course; over 300 completed our previous course.

Tracking of graduates: We do not track graduates, but we often hire successful graduates to interpret for AHS.

Materials available for distribution: Additional copies of the “Connecting Worlds” curriculum will be available through The California Endowment: (800) 449-4149.

Introduction to Medical Interpreting as offered by the Monterey Institute of International Studies

Contact Information

Holly Mikkelson
Director, International Interpretation Resource Center
460 Pierce St.
Monterey, CA 93940
Tel: (831) 647-3553
Fax: (831) 647-3560
E-mail: Hmikkelson@miis.edu

Program Description

Goals of the program: To provide Spanish and English bilinguals with basic training in the concepts and techniques of medical interpreting.

What group does this training target? Adults who are fluent in Spanish & English both orally and in writing, some college preferred.

For which venues does this course prepare interpreters? Health care.

Content of the course:

This course is taught online for nine weeks, followed by a one-week intensive interpreting workshop. Students are expected to spend approximately six to 10 hours a week during the online period, which they do at home at their computer. The actual time spent depends on the student's commitment and background knowledge. All times listed below are therefore approximate.

- Role of the interpreter (includes code of ethics, intercultural issues, triadic communication) - 12 hours
- Spanish-English medical terminology (anatomy, diseases, symptoms, diagnostic testing, therapy, surgery, medication, medical instruments and devices, diabetes, AIDS, TB, labor & delivery) - 42 hours
- Folk medicine - three hours
- Consecutive interpreting techniques - 15 hours
- Sight translation techniques - 10 hours

Hours of instruction: 120 hours, including quizzes.

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) No practicum is required.

Materials given to students:

- Textbook = “The Interpreter’s Rx”;
- Bilingual medical dictionary is highly recommended;
- Links to many different web sites for background reading and terminology research; and
- Additional handouts for interpreting practice in class.

Competency testing: Competency testing is done at the end of the course, through essay questions on the role of the interpreter and cultural issues, consecutive interpreting and sight translation in both directions.

How does the course accommodate different language groups? The course is taught bilingually only for Spanish speakers.

Course Administration

Prerequisites for entry into the course: Demonstrated oral and written fluency in Spanish and English, some college work preferred.

Prescreening: Students fill out a questionnaire about their background and make an audiotape according to instructions, in which they speak in both languages and do a sight translation in both.

Class size: Eight students per section

The course has been offered only once as an online course, but was offered several times as a 60-hour on-site course. This online class was offered on a pilot basis, and unfortunately it won’t be offered again soon through the Monterey Institute, as the instructor will be going on leave.

Criteria for teachers/trainers? Experience both interpreting and teaching interpreting, M.A. preferred.

How is the course funded? Student fees.

Recognition of students upon completion: Certificate of successful completion.

Number of students having completed the course: 15 have completed the online course.

Tracking of graduates: We do not track graduates.

Materials available for distribution: “The Interpreter’s Rx,” through Acebo (www.acebo.com)

Translation and Interpretation Certificate Program as offered by the National Hispanic University

Contact Information

Dr. George Guim, Program Coordinator
The National Hispanic University
14271 Story Road
San Jose, CA 95127
Tel: (408) 273-2765
Fax: (408) 254-1369
E-mail: gguim@nhu.edu

Program Description

Goals of the program: The program's goal is to prepare translators and interpreters to work in formal and informal situations in court, medical, business and community translation.

What group does this training target? Mainly for people interested in court, medical, educational or business interpretation; main target group is individuals who already have a background in Spanish language and are native speakers of Spanish.

For which venues does this course prepare interpreters? Health care, legal, social service, business.

Content of the course:

T&I 301: Socio-cultural foundations of language in translation (3 units)

An examination of the link between linguistic and cultural factors, and its importance to the interpretation and translation task. Course will cover (a) cultural issues in translation (compromise and compensation); (b) formal properties of texts: phonic/graphic and prosodic; grammatical and lexical; sentential, inter-sentential and intertextual; (c) literal versus connotative meaning; and (d) social versus tonal registers. Prerequisites: Pass language proficiency tests in English and Spanish authorized by the T&I Coordinator.

T&I 302: Theory and techniques in translation and interpretation (3 units)

An exploration of translation and interpretation theories and basic techniques available to the translator and interpreter. Course will cover principles of fidelity, models of comprehension in interpretation and translation, a sequential model of translation, knowledge acquisition, efforts model, techniques to cope with simultaneous interpretation, and conference interpreting

T&I 314: Technical Translation / Terminology: Banking, Commerce and Finance (3 units)

Develops skills in two-language translation in vocabulary used in banking, commerce and finance. Emphasis given to Spanish to English and English to Spanish with specialized terminology. Prerequisites: 6 units of T&I foundation courses or consent of instructor or T&I coordinator.

T&I 315: Technical Translation/Terminology: Political, Government and International Relations (3 units)

Technical Translation/Terminology: Political, Government and International Relations

Study of text materials used by international organizations and governmental agencies. Translation and interpretation exercises increase bilingual terminology in political debates, conference meetings, memoranda, contract forms, minutes, press releases and records. Prerequisites: 6 units of T&I foundation courses or consent of instructor or T&I coordinator.

T&I 316: Spanish Medical Terminology: Anatomy and Physiology (3 units)

This course covers Spanish medical terminology for the human body, its nature and system. The student will gain skills in translating/interpreting medical documents used in general medical practice, such as medical office correspondence, informational brochures, office and hospital intake questionnaires, and other documents. Translation and interpretation skills will be reinforced through class activities. Prerequisites: 6 units of T&I foundation courses or consent of instructor or T&I coordinator.

T&I 318: Spanish Medical Terminology: Diseases and Treatment (3 units)

This course will cover Spanish medical terminology for general diseases, first aid in emergencies and common injuries. The student will also learn how to interpret laboratory tests, medical history questionnaires, medical disability reports and other documents. Translation and interpretation skills will be reinforced through class activities. Prerequisites: 6 units of T&I foundation courses or consent of instructor or T&I coordinator.

T&I 410: Computers and Technology in Translation (3 units)

Designed for pre-professional and professional translators who perceive technology as translation strategy. Examination of current issues in computer technology and other high-tech resources to assist translators. Translation of technical texts and manuals will be analyzed. Prerequisites: Computer skills and consent of instructor.

T&I 413: Legal Translation: 3 units

Emphasizes written translation of legal text, sight translation exercises (English and Spanish), analysis of legal translation samples for terminology acquisition. Methodologies for adding to personal terminology bank. Prerequisites: 6 units of T&I foundation courses or consent of instructor or T&I coordinator.

T&I 414: Legal Interpretation (3 units)

Emphasizes legal terminology and interpretation skills used in law offices, administrative hearings, court proceedings, work compensations, immigration, government and public offices. Exercises to improve sight translation; consecutive and simultaneous interpretation modes are enhanced. Prerequisites: 6 units of T&I foundation courses or consent of instructor or T&I coordinator.

Hours of instruction: 480 hours

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) A 40-hour practicum is required.

Competency testing: Informal verbal evaluation has been done at the start of the program. A formal Spanish placement test will be in place this fall. There is no competency testing at the end.

How does the course accommodate different language groups? The program is taught bilingually only to Spanish speakers.

Course Administration

Prerequisites for entry into the course:

- High school diploma; and
- Sufficient knowledge of grammar and vocabulary(English and Spanish).

Prescreening: No prescreening is done.

Class size: Six to ten students

The course has been running, with interruptions, since 1996, and a new cohort starts every four months.

Criteria for teachers/trainers? Must have a combination of one or more of the following:

- Degree or strong background in language, linguistics, or translation (master's preferred);
- Is a practitioner in the field;
- Has experience teaching translation (besides language itself); and
- Is fluent in both Spanish and English.

How is the course funded? Student fees, grant funding.

Recognition of students upon completion: Certificate of successful completion, academic credit.

Number of students having completed the course: 40

Tracking of graduates: We do not track graduates.

Materials available for distribution: None.

“Connecting Worlds” Healthcare Interpreter Training As offered by Healthy House (California Health Collaborative)

Contact Information

Marilyn Mochel R.N.,C.D.E., Project Manager
Healthy House
1729 Canal St.
Merced, CA 95340
Tel: (209) 724-0102
Fax: (209) 724-0153
E-mail: mmochel@mercednet.com

Program Description

Goals of the program: Introduce participants to the field of health care interpreting; California Healthcare Interpreter Association’s Standards of Practice, roles and responsibilities of interpreters, and interpreting skills.

What group does this training target? Bilingual individuals.

For which venues does this course prepare interpreters? Health care.

Content of the course:

Different icebreaker activities that apply to the day’s agenda	20 min. daily
Pre-assessment Day 1	30 min.
Introduction to Health Care Interpreting	60 min.
Guiding the Interpreting Process First Person, Positioning, Modes of Interpreting	90 min.
Sight Translation with Practice	45 min. daily
Simulated Practice Activity	60 min. daily
Skill Intro (Basic Memory and Communication Skills)	45 min. daily
Health Care Interpreting as a Profession	45 min.
Introduction of CHIA Standards, Ethical Principles and Ethical Problem Solving Process	60 min.
Introduction to the roles of interpreting	60 min.
Introduction to the STEP Process	45 min.
Role of the Message Converter with Practice	75 min.
Role of the Message Clarifier with Practice	75 min.
Introduction to Culture and Cultural Clarifier	90 min.
Community Health Beliefs and Practices	90 min.
Partnering with Health Care Providers	60 min.
Common Questions that Physician	30 min.
Health Care Climate	45 min.
Interpreting Practice	
Legal Issues and Reporting Requirements	45 min.

Role of the Advocate	90 min.
Training Review Activity	
Special Considerations (Difficult situations)	60 min.
Professional Conduct	60 min.
Discussion about Ethical Dilemmas	45 min.
Professional Self Development	45 min.
Final Practice Activity	

Hours of Instruction: 40 hours

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) No practicum is required.

Materials given to students: Handouts that reinforce the daily curriculum. List of resources including medical dictionaries and glossaries that are available for purchase from different agencies or bookstores.

Competency testing: No competency testing is done, either before or after the course.

How does the course accommodate different language groups? The course is taught in English with some non-English small group work. The course has been taught to speakers of Spanish, Hmong and Lao.

Unique aspects of the training program: On the first day of training we introduce a refugee/immigrant family that will be followed daily throughout the training. We ask the trainees to think about a traditional family who has recently arrived in California and speaks only their non-English language. We have developed simulated practice activities and case studies that promote reflection about this family's experience. The case study format also provides structure for small group discussions about the practical application of the day's learning objectives.

Course Administration

Prerequisites for entry into the course:

- We conduct an informal phone interview in the target language (Hmong/Spanish/Lao/Punjabi) to assess level of bilingual ability.
- We request that participants do not miss the first day of training. We limit registration to only the participants who agree to complete the 40 hours of training.

Prescreening: Telephone interview is done in some of the non-English languages (Spanish, Hmong, Lao, Punjabi).

Class size: 25

The course has been offered once. Prior to this pilot, we trained the “Bridging the Gap” training more than 20 times. We intend to continue training “Connecting Worlds” in the Central Valley eight to nine times a year.

Criteria for teachers/trainers? Trainers and co-trainers are bilingual or have extensive experience working with interpreters in health care settings. We have provided on-the-job training and mentoring but prefer that trainers attend Training of Trainers and have some prior experience in public speaking. We also recommend that bilingual trainers have provided interpreting services in health care settings.

How is the course funded? Grant funding.

Recognition of students upon completion: Certificate of attendance.

Number of students having completed the course: 14 attended the pilot; 198 completed training in the past two years.

Tracking of graduates: We do not track graduates, but 80 percent are currently interpreting.

Materials available for distribution: Materials are not available at this time (05/02). However our materials will be available in about three months. It is uncertain how we will coordinate distribution. It may be through The California Endowment.

Additional comments:

The “Connecting Worlds” curriculum is currently being refined after the first set of pilot classes were conducted by four organizations. This is based on our pilot program.

Medical Interpreting Theory and Practice Terminology as offered by Merced College

Contact Information

Mary Margaret R. de Rodriguez, Faculty Adjunct
Merced College
595 E. Vasser Ave.
Merced, CA 95340
Tel: (209) 723-0886
Fax: (209) 383-3530
E-mail: latino@elite.net

Program Description

Goals of the program: Target all areas in the Spanish interpreting arenas, e.g. office consultancies, over-the-phone assessments, hospital triage, etc.

What group does this training target? Spanish speakers.

For which venues does this course prepare interpreters? Health care, legal, conference, social service.

Content of the course:

Introduction: Theory, history, ethics, Judicial Council, medicine and the interpreter: an overview of the role; introduction to volunteer programs

Section one: What to do and what not to do when working in a medical setting: Greetings and introductions, everyday terms and phrases in the medical arena.

Section two: Patient questionnaire and medical history: doctor's office, clinic and triage patient information, mock interview

Section three: Introduction to common roots, prefixes and suffixes in medical terminology; medical tapes

Section four: Folk concepts about disease and certain special conditions, mock office visit

Section five: Forensic pathology vocabulary – collection of forensic pathology vocabulary, scheduled trip to Merced County Coroner's Office

Section six: Anatomical, muscular, organ and skeletal terms and phrases

Section seven: Medical examination/treatment procedures, mock medical assignments

Section eight: Medical vocabulary, development of cassette tapes based on compilation of medical glossaries

Section nine: Workers compensation, personal injury, civil litigation terminology.

Hours of instruction: 176 hours in class, 440 total

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* A 40-hour practicum is required.

Materials given to students: College issue manual; all other materials are available for purchase, e.g. “Springhouse Medical terms,” “Interpreters Rx,” etc.

Competency testing: Competency testing is done both before and after the course for terminology and role plays.

How does the course accommodate different language groups? The program is taught bilingually to Spanish speakers only.

Unique aspects of the training program: We take many field trips, e.g. coroner’s office, hospital settings, clinics, etc.

Course Administration

Prerequisites for entry into the course: Bilingual skills in reading, translation skills, manipulation of colloquialisms, desire to become a medical interpreter.

Class size: 20

The program has been offered since 1989, and will continue to be offered twice a year if funded.

Criteria for teachers/trainers? Teaching credential, even emergency credential, major medical LVN, RN, PA and EMT.

How is the course funded? Since this is a noncredit course, there is no tuition, only a \$2 fee for class books. Funding for the course depends on ADA funds available.

Recognition of students upon completion: Certificate of attendance, certificate of successful completion.

Number of students having completed the course: about 300

Tracking of graduates: We do track graduates; about 80 percent are currently working as interpreters.

Additional comments:

Quite sadly, this facility does not recognize the potential and worth of this program, although it has received strong support from the Coordinator of Extended Education. I guess this is considered a homespun course. I have had the pleasure of acquiring a feather in my cap from students who have passed the State of California Medical Exam and are certified. There are students who now have their own agencies or work for government agencies.

**Interpreter Skills, Ethics and Best Practice
as offered by the Fresno County Health and Human Services
Administration**

Contact Information

Javier Aguirre, Senior Staff Analyst
Fresno County HSS Administration
2600 Ventura, 2nd Floor
Fresno, CA 93750
Tel: (559) 253-9156
Fax: (559) 453-6100
E-mail: Jxaguirre@fresno.ca.gov

Program Description

Goals of the program: To provide prospective interpreters with a well-rounded understanding of the requirements of being a professional interpreter: skills, ethics, practices, techniques, knowledge of field.

What group does this training target? Hmong/Spanish/Cambodian/Lao speakers with high register vocabulary skills

For which venues does this course prepare interpreters? Health, legal, conference, commercial, social service, evaluation, diagnostic, psychological, psychiatric, human services, social work.

Content of the course:

Ethics: Eight hours, including ethics and standards from the medical and court interpreting fields, county program requirements and policies, behavior and best practices

County Department Orientation: Five hours in mental health, community health, social services, CalWorks, substance abuse, environmental health, children and family services

Terminology and vocabulary: Six hours in language immersion through role-play, sight translation, written translation.

Interpreter roles, modes of interpreting: Eight hours in consecutive, sight translation, simultaneous interpreting, language manipulation, motion analysis, working with untranslatables.

Legal risks and liabilities: Three hours in Office for Civil Rights requirements, confidentiality, informed consent, general liability insurance

Hours of instruction: 30 hours

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) No practicum is required.

Materials given to students: County forms, standards of court and medical interpreting, Fresno county policies and procedures manual.

Competency testing: Competency testing is done both before and after the course, using instruments developed internally from county-specific standards.

How does the course accommodate different language groups? The course is taught in English with labs taught by language coaches in Hmong, Cambodian, Lao, Spanish.

Unique aspects of the training program: Screening of language proficiency for entry into training program; oral language proficiency assessment in front of a panel after successful graduation from training program; test scoring process includes testing in target language as well as in English; extensive quizzing after each instructional component.

Course Administration

Prerequisites for entry into the course: Language proficiency.

Prescreening: Prescreening for language proficiency prior to entry into training program, looking specifically at register of language.

Class size: 15

The course has been offered seven times over the past year and a half, and we plan to offer it three to four times a year in the future.

Criteria for teachers/trainers? Gone through training, passed proficiency assessment.

How is the course funded? County support.

Recognition of students upon completion: Certificate of attendance, certificate of successful completion.

Number of students having completed the course: 117

Tracking of graduates: We do track graduates; about 33 percent are working as interpreters.

Materials available for distribution: None.

Additional comments:

Available for training, specifically in the areas of meeting civil rights compliance language (for federally financed programs); skills and ethics of interpreters; and roles and modes of interpreting.

Healthcare Interpreters Certification Program as offered by Reedley College

Contact Information

Trish Johnson, RN, PHN, M. Ed, Coordinator
Reedley College
995 N. Reed Ave.
Reedley, CA 93654
Tel: (559) 638-3641, ext. 3875
Fax: (559) 638-0305
E-mail: djfarms@worldnet.attnet

Program Description

Goals of the program: The Healthcare Interpreter Certification Program is dedicated to promoting excellence and professionalism in interpretive services to enhance the provision of health care to ethnic populations.

What group does this training target? Hospital, clinic and dental office personnel as well as generic bilingual students in the community college system.

For which venues does this course prepare interpreters? Health care.

Content of the course:

Health 14: Interpreting in Health Care I (5 credits)

- Overview of the U. S. health care system
- Interpreter roles and responsibilities
- Modes of interpretation
- Cultural interpretation: culture and health issues
- Understanding the diagnostic process: anatomy integration, abnormalities and disease processes
- Bioterrorism
- Office for Civil Rights and interpretation

Health 15: Interpreting in Health Care II (5 credits)

- Managing the flow of the interpreting session
- Development of the technical aspects of interpretation: memory skills, public speaking skills, note taking
- Working with the Standards of Practice for Interpreters
- Health issues in ethnic communities
- Interpreting in different health care service areas: genetics, women's health, mental health, pharmacology

Health 16: Field Experience in Health Care Interpreting (5 credits)

Field placement: placement in community-based organizations

Elements of workplace, culture and professionalism: time management, reporting and accountability maintaining personal and professional boundaries, informed consent and confidentiality, code of ethics

Need at least 20 encounters at least 15 minutes in length and necessary documentation

Hours of instruction: 288-300 hours

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) A practicum is required; the length of the practicum varies.

Materials given to students: Students are required to purchase a language of service medical dictionary, anatomy and physiology text by Springhouse Corp., and they receive a myriad of handouts.

Competency testing: Competency testing is done both before and after the course. An interview prior to admission is done with a three-person panel. Reading skills are assessed. A final exam is given after each course and students must complete a videotaped role play.

How does the course accommodate different language groups? The course is taught in English with significant non-English small group work. Students must also attend a lab taught by language coaches. The course focuses on Spanish speakers.

Unique aspects of the training program: Our program utilizes skilled professors in related fields as guest speakers, as well as health industry leaders in certain fields (manager of the asthma program in the hospital). The use of video camera to film students role playing to observe their behavior, eye contact and communication and public speaking skills.

Course Administration

Prerequisites for entry into the course: None, but basic medical terminology is helpful, but that, along with human anatomy and physiology, will be integrated into the three courses.

Pre-screening: We screen for reading skills in English and language of service, fluency in language of service by asking a series of questions verbally in the language of service.

Class size: 25-30

The course started in January 2002 and will be offered twice a year.

Criteria for teachers/trainers? Any instructor in the community college system must have a master's degree or its equivalent in Spanish or related subject matter. Language coaches must have at least a B.A. or B.S. degree or its equivalent.

How is the course funded? Student fees, grant funding, paid for by hospitals or clinics.

Recognition of students upon completion: Certificate of successful completion.

Number of students having completed the course: First class to graduate in December 2002.

Tracking of graduates: We will track our graduates when the course is completed.

Materials available for distribution: None.

Additional comments:

The future of this program seems fairly secure since there are about 125 students on a waiting list. I have a contract with Community Medical Centers in Fresno to do continued teaching so they can eventually develop an Office of Interpreter Services. Many students already attending Reedley College have expressed interest in taking these 15 credits for transfer to the California State University system. Plans are for this program to grant an Associate of Arts degree within the next three years and also provide Community College Chancellor Program Certification (in progress). This would be a two-tiered program: certification and/or A.A. degree.

“Connecting Worlds” Healthcare Interpreter Training as offered by the Hmong Women’s Heritage Association

Contact Information

Youa Lo, Assistant Trainer
The Hmong Women’s Heritage Association
2251 Florin Road, Ste. 104
Sacramento, CA 95822
Tel: (916) 394-1405
Fax: (916) 392-9326
E-mail: youalo@hmongwomenheritage.org

Program Description

Goals of the program:

- To increase the number of qualified health care interpreters in Sacramento County;
- To establish a supportive infrastructure with continuing education and linkages for interpreters; and
- To increase access to health care system via transportation, language and culture.

What group does this training target? Interested bilingual individuals in Sacramento County.

For which venues does this course prepare interpreters?

Health care, business, legal, social service, understanding cultural differences.

Content of the course:

Day One

8 a.m.: Opening of Training
8:45 a.m.: Training Pretest
9:15 a.m.: Session I - Overview of the Field of Health Care Interpretation
10:45 a.m.: Session II - Guiding the Process
1 p.m.: Session III - Practice Session
2:15 p.m.: Session IV - Sight Translation
3 p.m.: Session V - Health care Interpretation as a Profession
3:30 p.m.: Session VI - Case Study
4:30 p.m.: Closing

Day Two

8 a.m.: Opening
8:30 a.m.: Review and Application of Previous Sessions
9:30 a.m.: Session I - Step Model: Roles of the Health care Interpreter
10:45 a.m.: Session II - Step 1: The Message Converter Role

1 p.m.: Session III - Step 2: The Message Clarifier Role
2:30 p.m.: Session IV - Practice Session
3:30 p.m.: Session V - Case Study
4:30 p.m.: Closing

Day Three

8 a.m.: Opening
8:30 a.m.: Review and Application of Previous Sessions
9:30 a.m.: Session I - Health Beliefs and Practices
11 a.m.: Session II - Partnering with Health Care Providers
1 p.m.: Session III - Step 3: The Cultural Clarifier Role
2:45 p.m.: Section IV - Practice Session
3:30 p.m.: Section V - Case Study
4:30 p.m.: Closing

Day Four

8 a.m.: Opening
8:30 a.m.: Review and Application of Previous Sessions
9:30 a.m.: Session I - Health Care Climate
10:30 a.m.: Session II - Legal Issues and Reporting Requirements
1 p.m.: Session III - Step 4: The Advocate Role
2:30 p.m.: Session IV - Practice Session
3:30 p.m.: Session V - Case Study
4:30 p.m.: Closing

Day Five

8:30 a.m.: Review and Application of Previous Sessions
9:30 a.m.: Session I - Professional Conduct
10 a.m.: Session II - Self Development & Staying Healthy
10:45 a.m.: Session III - Best Practices
1 p.m.: Session IV - Case Study
2 p.m.: Session V - Practice Session
3:15 p.m.: Session VI - Summary of Training
3:45 p.m.: Closing
4:30 p.m.: End

Hours of instruction: 40 hours

Hours of practicum: (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*) No practicum is required.

Materials given to students: Students receive a binder with the day's agenda, handouts, homework, reference materials, etc.

Competency testing: Competency testing is done both before and after the course. The pretest assesses information on language capabilities and interpreter experiences. The post-test assesses materials presented to see how much participants gained from training.

How does the course accommodate different language groups? The course is taught in English with some non-English small group work.

Course Administration

Prerequisites for entry into the course: Candidates must be bilingual and have done some interpreting.

Prescreening: Because of the demand and the goal of our training, we try to give preference to people who are in the field at the current time.

Class size: 10 to 15

The course has been offered three times already, and we plan to offer it bimonthly starting in June 2002.

Criteria for teachers/trainers? Trainers should have some experience in training, public speaking, and complete a train-the-trainer program either through one of our partners or through trainers who have gone through the train-the-trainer program.

How is the course funded? Grant funding.

Recognition of students upon completion: Certificate of successful completion.

Number of students having completed the course: 35

Tracking of graduates: We do not track our graduates.

Materials available for distribution: None.

“Bridging the Gap”
as offered by the Refugee Health Program, Sacramento County
Department of Health & Human Services

Contact Information

Carolyn Lynch, Clinic Manager
Refugee Health Assessment Program
Sacramento County DHHS
4603A Broadway
Sacramento, CA 95820
Tel: (916) 874-9808
Fax: (916) 874-9740
E-mail: LynchC@SacCounty.net

Program Description

Goals of the program: To increase and improve health care access for refugees residing in Sacramento County.

What group does this training target? Any individual currently working in medical interpreting in Sacramento County, who speaks English and one other language which is spoken in a region from which the U.S. receives refugees (Russian, Vietnamese, Punjabi, Hindi, Urdu, Hmong, Mien, Lao, Pashtun, Farsi, Spanish, French, etc.)

For which venues does this course prepare interpreters? Health care and social service.

Content of the course:

Basic Interpreting Skills (16 hours)

- Interpreter Roles
- Ethics
- Modes of Interpreting
- Intervention
- Memory Development
- Sight Translation

Health Care (8 hours)

- Overview of U.S. Health Care System
- Biomedicine
- Anatomy and Physiology
- Medical Procedures
- Medical Terminology

Culture and its Impact on Interpreting (8 hours)

Professional Development (8 hours)

Communication Skills
Appropriate Advocacy
Professional Conduct
Self-care
Professional Development

Hours of instruction: 40 hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* No practicum is required.

Materials given to students: “Bridging the Gap” Interpreters Handbook.

Competency testing: Competency testing is done both before and after the course.

How does the course accommodate different language groups? The course is taught in English with significant non-English small group work.

Unique aspects of the training program: We are using this training program to explore and enhance community collaboration in Sacramento County by reaching out to community-based organizations serving refugees, local medical providers (U.C. Davis Medical Center, Sutter Health, Alta Regional, etc.), other government organizations (Sacramento County Departments of Mental Health and Human Assistance, etc.), and private interpreter companies which serve Sacramento.

Course Administration

Prerequisites for entry into the course:

- 1) Basic command of English and medical terminology;
- 2) Fluency in another language spoken by any refugee community served by the U.S.;
- 3) Currently working in Sacramento County for an organization that provides services to refugees.

Prescreening: Screening is done for the three prerequisites listed above.

Class size: 20-25

The course has been offered once already, and we plan to offer it two to three times a year.

Criteria for teachers/trainers? Cross Cultural Health Care Program sets the qualifications for our instructors.

How is the course funded? Grant funding.

Recognition of students upon completion: Certificate of attendance, certificate of successful completion.

Number of students having completed the course: 24

Tracking of graduates: We do not track our graduates.

Materials available for distribution: Many of the course materials can be purchased from the Cross Cultural Health Care Program through their web site at www.xculture.org.

Additional comments:

Sacramento County DHHS is currently exploring with the Refugee Skills Program of the Grant Adult Education Center the possibility of implementing a year-long training in medical interpreting, in collaboration with several other organizations in Sacramento County. Tim Keenan, Public Health Nurse/Anthropologist at Sacramento County DHHS Refugee Health Program (916-874-9757, KeenanT@SacCounty.net) and Srirat McLennan, Program Coordinator at the Refugee Skills Program (916-286-7560, sriratmclennan@grant.k12.ca.us) are organizing this collaboration.

**“Bridging the Gap”
as offered by the Cross Cultural Health Care Program**

Contact Information

Julie Burns, Interpreter Training Program Manager
P.O. Box 2073
Santa Rosa, CA 95473
Tel: (707) 541-0358
Fax: (707) 541-0437
E-mail: julieburns7@earthlink.net

Program Description

Goals of the program: To help participants develop a theoretical framework to understand the work and role of medical interpreters; within that framework, a professional criteria to help the interpreter choose how to deal with any situation; concrete skills dealing with interpretation, culture and advocacy that will allow the interpreter to respond effectively in each situation.

What group does this training target? Bilingual individuals fluent in English and one other language who are interested in interpreting in health care settings.

For which venues does this course prepare interpreters? Health care.

Content of the course:

Basic Interpreting Skills (16 hours)

- Interpreter Roles
- Ethics
- Modes of Interpreting
- Intervention
- Memory Development
- Sight Translation

Health Care (8 hours)

- Overview of U.S. Health Care System
- Biomedicine
- Anatomy and Physiology
- Medical Procedures
- Medical Terminology

Culture and its Impact on Interpreting (Eight hours)

Professional Development (Eight hours)

- Communication Skills
- Appropriate advocacy
- Professional Conduct
- Self-care
- Professional development

Hours of instruction: 40 hours

Hours of practicum: *(A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.)* No practicum is required.

Materials given to students: “Bridging the Gap” Handbook, bilingual glossary of medical terms (available in 10 languages), “An Interpreter’s Guide to Medications,” Community profiles (available for 18 cultural communities).

Competency testing: Competency testing is done both before and after the course. The pretest is a 25 question multiple choice test, the posttest is a longer version of the pretest with additional questions concerning medical material covered in class, as well as anatomy diagrams.

How does the course accommodate different language groups? The course is taught in English with some non-English small group work.

Unique aspects of the training program:

This course is unique in three ways. First of all, it is based on the experiential learning model and as such is very participatory. The activities are designed to achieve a high level of participation and interaction on the part of the students. This approach leads the students to discover learning for themselves, which makes it more likely that they will internalize and put into practice the skills and guidelines that are taught.

This course is also unique in that it is the only mobile interpreter training program in the U.S., enabling organizations around the country to have access to the training.

Finally, it is unique in that a subsequent course – the Training of Trainers – enables institutions to build their own capacity to provide interpreter training by licensing them to teach “Bridging the Gap,” using their own trainers who have been prepared and authorized by CCHCP staff.

This course is being taught internally to many health care institutions in the state of California and across the country. For a listing of licensed agencies offering this course, please contact Julie Burns at the Cross Cultural Health Care Program.

Course Administration

Prerequisites for entry into the course: Fluency in English and one other language.

Prescreening: We request the hosting organization to prescreen their candidates for bilingual fluency.

Class size: 25

The course has been offered several hundred times in most of the states in the U. S. We offer the course in Seattle three times a year for independent interpreters there; we offer an intensive institute twice a year in Santa Rosa, CA, and we are contracted to teach the course on average two to four times a month in different parts of the country.

Criteria for teachers/trainers? Excellent training skills and interpreting skills. Our instructors need to be very proficient in the experiential learning approach.

How is the course funded? Student fees, grant funding, paid for by hospitals or clinics contracted by an organization.

Recognition of students upon completion: Certificate of attendance, certificate of successful completion

Number of students having completed the course: 5,000 - 6,000

Tracking of graduates: We do not track graduates.

Materials available for distribution:

“Bridging the Gap” Interpreter Handbook, community profiles (Cambodian, Chinese, Filipino, Hmong, Japanese, Lao, Vietnamese), medical glossaries (Spanish, Cambodian, Korean, Lao, Chinese, Russian, Amharic, Tigrignia, Somali, Vietnamese), “Interpreter’s Guide to Medications” and a variety of articles dealing with issues of cross cultural health care.

Video: “Communicating Effectively through an Interpreter” and “Can You Hear Me,” a series videos of community forums.

To order, call Ruth Dillon at (206) 860-0331 or visit our web site at www.xculture.org.

Programs that are in the Process of Being Developed

Region 3

San Jose Community College is hoping to start offering a health care interpreters program similar to that of City College of San Francisco.

For more information, contact:

Jennifer Witte, Coordinator of EMT program

Tel: (408) 298-2181, ext. 3975

Region 6

Santa Rosa Junior College is hoping to start offering prerequisite courses to a health care interpreting program similar to that of City College of San Francisco.

For more information, contact:

Laura Goldman, Coordinator

Tel: (707) 874-2862 or (707) 527-4999, ext. 9678

E-mail: lg@monitor.net

Region 7

St. Elizabeth's Community Hospital is planning to begin offering "Bridging the Gap" in Red Bluff, CA.

For more information, contact:

Sister Pat Manoli or Mary Gonzalez

Tel: (530) 529-8015 (Sister Pat) or (530) 529-8265 (Mary)

E-mail: pjmanoli@chw.edu

NOTE:

In the course of doing this research, the author heard reports of other health care interpreter training programs that she was not able to substantiate. They are listed here in case readers wish to pursue the inquiry.

- UC Santa Fe
- UC Stanislaus
- UC Turlock
- UC Fresno
- Fresno State
- Grant Adult Education Center in Sacramento

Appendix A
Health Care Interpreter Training Program Survey

**Sample Survey of Health Care Interpreter Training
Programs in the State of California**

Contact Information

Name of training program

Sponsoring organization

Contact person for prospective students

Name

Position

Address

Telephone

Fax

E-mail

Program Description

Please state the overall goal of this training program.

What group does this training target?

For which venues does this course prepare interpreters?

health care

social service

if other, please specify...

legal

business

conference

other

Please list the content areas covered by the class and the hours spent on each. If your training program includes multiple courses, please list each course separately.

--

How many hours of instruction does the course include overall?

Is a practicum required? (*A practicum is defined as a time when a novice interpreter observes and is observed on the job by an experienced interpreter.*)

Yes No. If yes, how many hours?

What materials do the students receive?

Do you conduct competency testing before the course? (a pretest)

Yes No

Do you conduct competency testing after the course? (a posttest)

Yes No

If yes for either one, please describe the test.

How does the course accommodate different language groups?

- The course is taught only in English.
- The course is taught only in English with some non-English small group work.
- The course is taught only in English with significant non-English small group work.
- The course is taught only in English with labs taught by language coaches.
- The course is taught bilingually only to speakers of a certain language.

Which languages?

Are there any unique aspects of your training program that have not been described here? Please describe them below.

Course Administration

What prerequisites do you have for entry into the course?

Do you pre-screen potential participants?

Yes No.

If yes, for what do you screen them?

What is a typical class size?

What criteria do you have for your teacher/trainers?

How is the course funded? (Please check all that apply.)

Student fees Contracted by an organization

Grant funding Paid for by hospitals or clinics

Other
(Please specify.)

What sort of recognition do interpreters receive who complete the course?

Nothing Academic credit

Certificate of attendance Other

Certificate of successful completion

How many times has the course been offered?

How often is the course offered?

How many students have completed the course?

Do you track whether students go on to work as interpreters?

Yes No

If yes, what percentage is currently working in interpreting?

Do you know of other trainings for health care interpreters in your area?

Yes No

If yes, what are they?

Are any of your course materials available for distribution?

Yes No

If yes, what are they and how can they be ordered?

Additional comments:

Thank you for your time and valuable participation.

Please send this completed survey to Cindy Roat at:

Address: 10548 Evanston Ave. N
Seattle, WA 98133
E-mail: cindy.roat@alumni.williams.edu
Fax: (253) 540-3905

www.calendow.org

**Health Care Interpreter Training
in the State of California**

is a publication of
The California Endowment. No part of this publication
may be reproduced without attribution to The California
Endowment. To obtain additional copies or request that
this piece be sent electronically, or that a copy be sent to
a colleague or associate, please email us at

info_publications@calendow.org.

You may also call us at
800-449-4149, ext. 3513, or write to us at:

The California Endowment

Attn: Database Manager
21650 Oxnard St., Suite 1200,
Woodland Hills, CA 91367

Established by Blue Cross of California