



The National Consortium of Interpreter Education Centers

Creating Opportunities for Interpreters and Interpreter Educators

www.nciec.org

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Healthcare Interpreting

The work of the healthcare team began with separate investigations into the effective practices of interpreters working in mental health and medical health settings. The team reviewed standards of practice in spoken language medical interpreting programs, as well as curricula and literature on spoken and signed language interpreting. After this initial review of the literature and available resources, the next step was to convene meetings of experts, both in mental health and medical interpreting. Each team created a domains and competencies document – one for medical interpreting and one for healthcare interpreting. In order to maximize stakeholder input, specific protocols were developed and multiple focus groups were conducted across the United States. This information, in combination with the literature reviews and evaluation of current interpreting course offerings, provided a framework for identifying effective practices and building curriculum for educating medical and mental health interpreters.

Articles on the process were written for the RID VIEWS and the CIT newsletters. Conference presentations were also given at national (RID, CIT, IMIA, ATA) and regional conferences (RID Region 1, III, IV) and practitioners were invited to review and comment on the draft domains and competencies, as well as to provide input on aspects of educating medical and mental health interpreters.

After collecting evidence on needed competencies for healthcare interpreting and investigating options for online and face-to-face delivery, a consultant was retained to develop a concept map for the requisite courses needed by interpreters to develop competencies in interpreting in healthcare settings. An on-line course was developed for the first education module from this concept map and was beta tested in the spring of 2009. Following the beta testing, changes were made in the technology used and a cadre format was added. The module (Decision-Making Strategies for Interpreters in Medical and Mental Health Settings) was offered again in the fall of 2009. The course was evaluated and recommendations made for future offerings based on the data collected.

The work of the healthcare interpreting team is being put into a final form and will be available on healthcareinterpreting.org by mid-summer 2010. There you will also find the proposed domains and competencies, annotated bibliographies, and survey results.

Check out all of this information and more on the NCIEC Healthcare Initiative at www.healthcareinterpreting.org.