



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters

December 2008 eNews

*To gain a crown by fighting is great,
to reject it divine.*

Johann Friedrich Von Schiller

Message from the President

For over 10 years the IMIA has been at the forefront of the development of a comprehensive, nationally recognized and well thought out Medical Interpreter Certification Process that measures and validates the required knowledge and skills to perform the work of medical interpreting in a way that ensures equitable language access and safe communication between providers and linguistically diverse patients. It has had the support of great organizations such as CHIA and NCIHC, for which we are very thankful. Before registering interpreters for certification, the IMIA is now seeking further feedback to understand the interpreters' point of view.

To that effect, an international survey will soon be launched to gauge interest and opinions about the IMIA Certification Process. We will find out if the difficult decisions made by the Certification Committee have the support of the members, and interpreters at large across the country and internationally. When you see it, I urge you to pass it on to your interpreter colleagues, members or not, for the IMIA to get a representative number of respondents. While others can certainly fill out the survey, we are most interested in the 'practicing medical interpreters' perspective. These data will help validate our efforts and alert us to the pitfalls and other concerns regarding the instrument design and prerequisites.

As I reflect on the year it is amazing all that was accomplished by many great organizations in the field. The many conferences, events, reports, and new initiatives have reached a record high in 2008. Unfortunately, this year was also a year marked by much political infighting, which, although perhaps a necessary path to enduring maturity and unity in the field, was certainly draining to some of us and seemed to detract from what we all really desire, which is medical interpreter certification. My hope for next year is that each organization decides to spend all that energy

collaborating and coalescing efforts towards a common purpose, to have greater results collectively for the field than any one organization could have independently.

While the IMIA understands that other organizations desire to start to develop and/or produce their own comprehensive certification projects, and would rather the IMIA put ours on hold, the fact remains that the IMIA is the first medical interpreter association to have undergone a DACUM job analysis and developed a certification instrument that has been piloted twice and that is organizing to launch the IMIA Written Certification Exams in 2009 globally.

The fact also remains that the IMIA has the support of the stakeholders that have the most right to own this process, and these are practicing professional medical interpreters. They are the ones who will actually be undertaking this process. We do not want other professionals who are not interpreters trying to define, control, or certify our own profession, and that is why the IMIA, the only trade association of national and international status, is the perfect home to be the certifying body for medical interpreters worldwide. I urge you to promote with the IMIA that we continue to work for unity in the field, and that the time for certification has come. I offer a hand of friendship to all organizations and an unwavering commitment to collaboration.

2009 promises to be a very exciting year. We are thrilled to be just a few months away from launching the IMIA Certification Written Exams on a global scale. We continue to hope for collaboration and that other organizations recognize our work to this point and work with us rather than try to obtain funding to reinvent the wheel, delay the process and/or create a competitive environment that creates two or more certification processes nationwide which does not help the cause to promote the profession of medical interpreters or much less the patients we serve.

Sincerely,

Izabel Arocha, IMIA President

The Language Access Ratio

By Nataly Kelly and Donald A. DePalma

In their recent sizing exercise for the worldwide interpreting market, Common Sense Advisory surveyed 17 U.S. hospitals to obtain information regarding annual spending on both outsourced and in-house interpreting services. Based on their research and experience with language and business-related measurements, they

developed a new tool -the language access ratio (LAR) – to enable hospitals to see how their spending compares to that of their peers. In this Quick Take, they describe the method for calculating the ratio and reveal some results of our initial survey. For more information please go to:

www.common senseadvisory.com

Elections

Elections are under way and if you have not heard, the voting period will close on December 17th. As per our Bylaws, we have sent email ballots to all active members and these members have 30 days to vote. You will receive an email with the names of the new board members for the 2009-2011 term as soon as the voting period ends. If you are an active member, we urge you to vote at <http://www.imiaweb.org/members/elections2008.asp>

Consent Forms

We receive many questions from interpreters about the sight translation of consent forms, a task commonly requested by providers in hospital settings. The best practice for most health care translations is for them to be bilingual in format, either in two columns or line by line, so that all parties know what the translation states and the source and target languages are both visible. Obtaining patient consent is a process and the consent form is just one component of that process, which should include a conversation with the opportunity from the patient to ask questions to the provider, and that is why even with the translation of the consent, the interpreter's presence is required.

Interpreters should not accept to be requested to sight translate the consent form without the provider present so that the patient has the ability to ask questions and get them answered by the provider. If that happens, simply explain that you will sight translate paragraph by paragraph and will need the provider present should the patient have any questions. Also, the interpreter should not sign as witness but as the interpreter on that consent form (According to the ASTM Standards for Interpretation, 2001). If the provider insists you sign a consent form, and there is only a witness line, simply cross it off and sign it as witness. If the provider insists you sign but you haven't been allowed to sight translate the entire text, please sign and put your signature 'interpreted the provider's summary of this form', for your own legal protection. If you have any questions about this please email IMIAweb@gmail.com.

The Role of Trade Associations Continued

In an article published in 1996, entitled *The Professionalization of Community Interpreting*, Holly Mikkleson delves into this issue and is as relevant today as it was 12 years ago. It starts with a good description of where medical interpreting was in 1996, merely a year after the first Standards of Practice was developed and there were only a handful of interpreter associations in the country.

“Community interpreting, which includes court and medical interpreting, is following the typical pattern of a profession in its infancy. In the beginning it is characterized by a lack of standards for training and practice, disorganization and disunity among practitioners, a lack of recognition of the profession among clients and the public, and poor working conditions. These circumstances improve as practitioners unite and form professional associations to impose discipline and standardization and to achieve recognition through education, legislation and public relations.”

The preceding text does describe where medical interpreting was in 1996 when there were very few interpreter associations and only one published standard, ours. Much has changed since then. In this article, there is also a particular section where it describes the theory of control in the development of a profession, and it states:

“According to this view, the more control practitioners of an occupation are able to exert over the substance of their work and the market in which they operate, the more professionalized the occupation. Tseng notes that the theory of control views professions in terms of the amount of power they wield, and that professionalization is a collective effort rather than an individual one: “Powerful professions are characterized by powerful associations”.

“An occupational group can exert both internal control (over the body of knowledge and training required for entry into the field and the behavior or ethics of the practitioners) and external control (working conditions and relations with clients). The legal profession, for example, defines not only the curriculum of law schools and the content of bar exams, but also the standards for training and testing in related occupations (paralegals, court reporters, court clerks). As a result, these related occupations have comparatively little autonomy and are less likely to attain the degree of professionalization that lawyers and judges enjoy.”

Let us work towards gaining control of our profession so that others such as policy writers, administrators, and providers or multidisciplinary groups composed of stakeholders with different interests don't define the standards for medical interpreters as paraprofessionals. There are a few current practices in the market that are not

congruent with the understanding of medical interpreting being a professional activity. The practices of training bilingual paraprofessionals to interpret or giving interpreters clerical jobs, are real threats to the profession. Our hope is that certification will curtail some of these practices. For the full article on professionalization, please go to <http://www.acebo.com/papers/PROFSLZN.HTM>.

Podcast on Telemedicine in Rural America

In North Dakota, a trip to the doctor can involve "a lot of windshield time," says Mary Wakefield, Ph.D., R.N., director of the Center for Rural Health at the University of North Dakota and a member of The Commonwealth Fund Commission on a High Performance Health System. In the latest episode of New Directions in Health Care: The Commonwealth Fund Podcast, producer Sandy Hausman looks at how telemedicine--where health care is delivered by computer--is making it easier for people in rural areas to get the care and medication that they need.

<http://www.commonwealthfund.org/podcasts/>

IMIA presents at ATA Conference, Orlando, FL

The IMIA presented at the ATA Conference in Orlando Florida on November 4-6. The ATA is planning to develop a generalist certification program for interpreters similar to its generalist certification program for translators. They are also one of the members of the National Certification Coalition, where we are trying to gain consensus regarding national certification. We applaud their efforts and see the ATA as a great example of a trade association that is advocating for translators and interpreters around the world. The IMIA presentation focused on our certification process and we received valuable feedback about its program.

IMIA presents in Canada (Ottawa and Toronto)

Canada has a community interpreter model that sees the interpreter as a generalist that then specializes in medical, legal, and other specializations. The Canadian model is one of collaboration between public private organization and also between interpreter specializations. The IMIA applauds the holistic Canadian efforts and is working to collaborate with other Canadian organizations. The IMIA presented at the AILIA Conference in Ottawa on November 17th and then in another Medical Conference in Toronto on November 28th. The IMIA was pleased with the positive reception to its Medical Interpreter Certification Program Presentations and was able to get the message of international collaboration across to many organizations in Canada.

IMIA Conference Keynotes on Video

We had a wonderful 2009 conference with unprecedented attendance, and an unbelievable energy for change and advocacy for medical interpreters. We were able to videotape for the first time the keynote speakers of the inaugural event on Friday October 10th, and if you didn't get a chance to come to the conference please take the time to listen to the keynote speakers and see their speeches at <http://www.imiaweb.org/conferences/2008keynotes.asp>. If you are interested in seeing the presentation slides, go to <http://www.imiaweb.org/conferences/2008presentations.asp>

Trainers Update-Code of Ethics

Many of you might be aware that in the summer of 2008 the IMIA started a Trainer's Code of Ethics Process that has included several meetings with trainers across the country and surveys in order to revise the initial draft of a new set of code of ethics. At this moment, the next step is for the code of ethics for trainers to be ratified by the membership as we seek feedback from the other interpreter organizations across the country. This is an exciting project for the IMIA which again has the opportunity to pioneer this need to set a code for the trainers of medical interpreters.

Webinar on Leveraging Data to improve the quality & Availability of Language Services

If you missed this Webinar, presentations and audio file have been uploaded: As our patient population grows more diverse, hospitals are increasingly challenged to provide high quality language services to patients with limited English proficiency (LEP). Learn how the systematic capture and utilization of patient data allows hospitals to effectively target improvement strategies for language service delivery. For more information, please go to : <http://www.pgsl.com/Products/Resources/Webinars/Webinar4.aspx>

The 2008 IMIA Salary Survey Results Link

In order to better understand the interpreting profession, the IMIA has been collecting aggregate data regarding the current wages of medical interpreters and administrators of medical interpreting services on an annual basis since 2006. We thank all those who have responded as each year we have a greater number of respondents from across the country. The salary surveys are important for the field. To see the raw results of the 2008 Salary Survey, go to http://www.surveymonkey.com/sr.aspx?sm=1aOw3oM8t515vDvHV8kLBM4TtKCfZbNkflxrNqzhPoU_3d

The Voice on the Other End of the Phone

There's more than one way a professional telephone interpreter can save a life. This article was just published; Click here to view this great article in its entirety at: <http://content.healthaffairs.org/cgi/content/full/27/6/1701>

USA News

Rite-Aid to provide language assistance

NEW YORK (Dow Jones): CVS Caremark Corp. and Rite Aid Corp have agreed to provide customers in New York with prescription instructions in their primary languages, N.Y. Attorney General Andrew Cuomo said Thursday. Pharmacies will discuss prescription information with customers in their own language and provide written translations in Spanish, Chinese, Italian, Russian, French, and Polish. "Understanding prescription information is a matter of life and death," Cuomo said. For more information about this news, please visit: www.djnewsplus.com/al?rnd=1bP0hrf3cEF8XItNaEuUZQ%3D%3D.

Connecticut: Budget cuts to hit interpreter services

Connecticut, USA (Independent): Luis Perez is one of 22,000 Medicaid recipients in the state with limited English proficiency affected by a recent mid-year budget cut by Gov. M. Jodi Rell. Because of a sudden \$300 million budget shortfall triggered by the Wall Street meltdown, Rell issues a series of cuts including eliminating \$1.175 million in previously approved money for Medicaid medical interpreter's services this year. For more: www.newhavenindependent.org/archives/2008/11/state_cuts_fund.php

U.S. patients forgo care because of cost

New York, USA (Commonwealth Fund) A new [Commonwealth Fund survey](#) of chronically ill patients in eight industrialized nations—Australia, Canada, France, Germany, the Netherlands, New Zealand, the U.K., and the U.S.—finds those in the U.S. are by far the most likely to forgo care because of cost, as well as the most likely to experience medical errors, care coordination problems, and high out-of-pocket costs. For more information, visit: http://www.commonwealthfund.org/publications/publications_show.htm?doc_id=726492

Clinical Solutions Partners improve patient care

Colorado, USA (Business Wire): Clinical Solutions announced today a partnership agreement with Health Language Inc. (R) (HLI), the world's leading supplier of language engine technology for medical vocabulary. The alliance marks Clinical Solutions' and HLI's commitment to

developing technology to improve patient care and efficiency by standardizing clinical record coding worldwide. For more information:

www.marketwatch.com/news/story/Clinical-Solutions-Partners-Health-Language/story.aspx?guid={15D4427C-5E09-413C-802C-CA3C9519BF65}

Texas to Establish Qualifications for Interpreters

On November 14, 2008, Texas State Representative Eddie Rodriguez filed House Bill 233, related to the creation of an advisory committee to establish and recommend qualifications for health care translators and interpreters.

To read a copy of the bill or track its progress, visit: <http://tinyurl.com/TXHB233>.

Language Line Services Launches BiMedical.net Service, Online Access to Bilingual Medical Forms

California, USA (Center Times): Language Line Services, in partnership with BiMedical.Net LLC, announced today the availability of Language Line(R) BiMedical.net, an online application that generates bilingual medical forms and questionnaires in multiple languages to allow for immediate communication with limited English proficient (LEP) patients.

For more information, please visit: <http://www.centredaily.com/business/technology/story/953051.html>

Hawaii: Budget cuts for ASL interpretation

Honolulu, USA (KITV): A group representing the deaf and hearing impaired held a protest rally Monday. The protestors were trying to bring attention to proposed state budget cuts that might affect programs that help them to communicate. Speaking through an interpreter, one of the protestors talked about how important interpreters are to them. For more information, please visit: <http://www.kitv.com/news/17885308/detail.html>

Virginia: Interpretation Budgets Cuts Discriminatory

Virginia, USA (News Leader): The Virginia Association of the Deaf is aghast to learn that the Department of Mental Health, Mental Retardation and Substance Abuse Services' Central Office budget reduction plan has eliminated funding for interpreters, cut the state coordinator of services to the deaf and hard-of-hearing position funds in half and eliminated funds for interpreters and CART services for meetings of its advisory council. This is blatant discrimination. For more information, please visit: www.newsleader.com/apps/pbcs.dll/article?AID=/20081103/OPINION03/811030307

Texas: Language barrier rising for local hospitals

Texas, USA (Business Press): North Texas has an incredibly diverse population, driven by affordable living, job opportunities, local cultural heritages and an international

business presence. While the employees of local hospitals are diverse, it is still common for patients to seek medical help at a hospital and run into language barriers. For more: www.fwbusinesspress.com/display.php?id=8808

Whitehouse.gov will never be the same (Richard Koman)
One aspect of the YouTube presidency will be extra attention paid to global communications. Rosenberg said the White House would not only release Web videos in English but would translate them into Mandarin, Spanish, Farsi and Arabic. He can redefine how a president speaks: go to <http://government.zdnet.com/?p=4168>

International News

Japan Interpreters' Association closes down Tokyo, Japan (Japan Times): The Japan Interpreters' Association, a private company that teaches and certifies conference interpreters, has shut down and canceled several examinations nationwide because it was unable to get financial backing. For more information: search.japantimes.co.jp/rss/nn20081109a1.html

Note: Japan Interpreters' Association is NOT a trade association, as the name suggests. It is a private company so the IMIA wants to ensure that readers are aware of this. IMIA has several members in Japan and we have Kazumi Takesako, officially representing our organization in Japan.

Translation Companies Can Deal With Financial Crisis

Beijing, China (Live PR): It seems that every day now brings a new round of bad news on the economic front. The lingering global financial crisis has been constantly worsening, creating worries around the world. The translation and localization industry, a field that highly depends on the flourishing of international business, is especially concerned on what the possible impact will be and how to deal with it. A voluntary survey has been conducted among translators and translation companies on how business has been affected. For more: [//www.live-pr.com/en/how-translation-companies-can-deal-with-r1048218033.htm](http://www.live-pr.com/en/how-translation-companies-can-deal-with-r1048218033.htm)

Canada: Saving lives won't get lost in translation

Ottawa, Canada (AILIA): AILIA, Canada's Language Industry Association, is proud to announce that they have signed a Memorandum of Understanding with Canadian Blood Services & OneMatch, to combine their efforts to promote awareness of the need for donors, as well as to expand their reach to Canada's many ethnic and cultural communities. For more information, visit: www.blood.ca/CentreApps/Internet/UW_V502_MainEngine.nsf/web/BEC8024007DD1A8852574F6006F570A?OpenDocument

UK: New Opportunities for Language Lovers

London, UK (Shelter Offshore): If you're fluent in a second and preferably third language then you have a very good chance of working overseas as a translator, or better still, an interpreter. Interpreters earn well, translators don't earn quite so well – but both roles are highly flexible and both careers very transferable too. If you're good at languages this type of career option could be very appealing to you as it will allow you to focus on something you're naturally gifted at, whilst allowing you to travel and make practical use of your skills and get paid for it. For more information: www.shelteroffshore.com/index.php/living/more/want-to-work-abroad-6-portable-careers-10122/

Book of the Month

Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine by Albert R. Jonsen, William J. Winslade, Mark Siegler

Face the ethical issues that arise in clinical practice with this proven, practical approach. *Clinical Ethics* brings you: The Four Topics Method: An easy approach used to identify, analyze, and resolve ethical problems in clinical medicine -Abundant, concise, illustrative clinical case examples, -Current opinion on today's most controversial issues, such as physician-assisted death, genetic testing and screening, and stem-cell transplantation, -Ethical considerations in research trials, palliative care, and other growing medical areas, -Practical coverage of legal issues -One of the leading guides to ethical health care. The book is intended not only for clinicians, but other healthcare professionals, including hospital administrators, hospital attorneys, members of institutional ethics committees, quality assurance reviewers and administrators
<http://search.barnesandnoble.com/Clinical-Ethics/Albert-R-Jonsen/e/9780071441995/?itm=1>

About the IMIA eNews

The IMIA eNews is our monthly news brief. The purpose and intent of this publication is to advance the medical interpreting profession by providing our members with the latest local, state and international news and reports, as well as provide monthly updates on useful websites, toolkits, and available trainings/resources. We know our members do not have time to read everything that comes across their desks or emails, so we actually take the time to select, from a myriad of sources, and condense it into a summary of the most updated, relevant, useful and interesting news about the field on a monthly basis. Please send suggestions and comments about the eNews to Izabel Arocha at iarocha@imiaweb.org