



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters

CMIE Standards and Required Evidence Documentation

Candidate's Checklist for Accreditation Application

Organization:

Name of Program:

Number of Hours:

Contact Person:

Email Address:

Address:

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INSTRUCTIONS:

1. Evidence can be online or in print and will need to be presented in English. If online, be prepared to submit screenshots of required documentation.
2. Core Requirements are in red letters.
3. Recommendations are in italics, these are NOT requirements.
4. "IF APPLICABLE" means it is a requirement if the program engages in the activity of the standard (i.e. practicum, language coaches, etc.)

List of Core Requirements (Must be posted online at candidate's website)

1A-D: Published Admission Requirements (Main & Other Language(s), Age & Education)

4A: Published Instructor Qualifications

5A: Published Curriculum Outline

5B: Published Duration: Minimum of 40 Hours

5C: Student Assessment

5G: Interpreting Modes in Curriculum

5H: IMIA Standards of Practice in Curriculum

5I: Interpreting Roles According to Published Standards in Curriculum

5J: IMIA Codes of Ethics (at a minimum) in Curriculum

5K: Medical Terminology (minimum of 8 hours)

7B: Exit Exam (written and oral exams with a minimum score of 70%)

STANDARD 1: ADMISSION (Core Standard)

STANDARD 1A: Oral Proficiency in the main language of the country.

The required oral proficiency for admission shall be established and made public by any **ONE** of the following:

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|---|----------------|------------------------------------|------------------|
| Over 5 years of verified professional experience in the main language of the country. | | CV and verifiable work experience. | |
| Bachelor, Masters, PhD, or any other degree from an accredited institution of higher education where the main language is spoken. | | Diploma or Certificate | |
| Graduation from a high school where main language of the country is the medium of instruction | | Diploma or Certificate | |
| ACTFL Oral Exams (Minimum score, Advanced Mid-Level) | | Certificate | |
| Validated Third-Party Language Exams (See Appendix 1 for recommended tests) | | Test results | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

*Note: Other countries may have exams which will be reviewed on a case-by-case basis.

Minority languages might not be easily tested. They will be reviewed on a case-by-case basis

STANDARD 1B: Oral Proficiency in the other language/s.

The required oral proficiency shall be established and made public by **ONE** of the following:

| The following criteria meets the standard: | Meets Standard | Evidence | Exceeds Standard |
|--|----------------|------------------------------------|------------------|
| Over five years of verifiable professional experience in the other language/s. | | CV and verifiable work experience. | |
| Bachelor, Masters, PhD, or any other degree from an institution of higher education where the language is spoken | | Diploma or Certificate | |
| Graduation from a high school where the | | Diploma or Certificate | |

| | | | |
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| other language is the medium of instruction | | | |
| ACTFL Oral Exams (Minimum score, Advanced Mid-Level). | | Test results | |
| Validated Third-Party Language Exams (See Appendix 1 for recommended tests) | | Test results | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

Notes:

- Minority languages might not be easily tested. They will be reviewed on a case-by-case basis
- Different countries will have different validated proficiency exams for foreign languages.

STANDARD 1C: Minimum educational requirements – Bachelor's Degree recommended

| | | | |
|--|--|---|--|
| Minimum educational requirements | | A high school diploma or certificate or a higher degree | |
| The following criteria exceeds the standard: | | | |
| <i>Bachelor's degree</i> | | <i>Diploma</i> | |
| Missing requirements: | | | |

STANDARD 1D: Minimum age requirements - 21 years recommended

| | | | |
|---|--|--|--|
| Minimum age requirements 18 years | | Any document that establishes age of applicant. | |
| The following criteria exceeds the standard: | | | |
| <i>Minimum age requirements 21 years old.</i> | | <i>Any document that establishes age of applicant.</i> | |

Missing requirements:

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STANDARD 2: ADMINISTRATION

STANDARD 2A: Administration of the Program

| | | | |
|---|--|-------------------|--|
| The educational program shall demonstrate that resources and information are in place to manage student administrative needs outside the classroom. | | Program Policies. | |
| The program shall have been in place for at least one year (when the first cohort of students started). | | Student records. | |
| The Program will advise students on whom to go to for issues related to the program. | | Program Policies | |
| The following criteria exceeds the standard: | | | |
| <i>The instructor/student ratio shall be measured. Recommended.</i> | | Program Policies | |
| <i>Notes: Specify ratio.</i> | | | |
| Missing requirements: | | | |

STANDARD 2B: Accreditation by International, National or State Agency - Recommendation

| | | | |
|---|--|---------------------------|--|
| The training institution may be accredited by an internationally or nationally-recognized, or state agency or agencies. (Occupational or postsecondary, onsite or online accreditation) | | Accreditation Certificate | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 2C: Referral to Remedial Resources

| | | | |
|---|--|---|--|
| Referral process to remediate deficiencies (Language, vocabulary reinforcement, accent reduction, etc.) | | Referral process description or list of resources | |
| The following criteria exceeds the | | | |

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| standard: | | | |
| Missing requirements: | | | |

STANDARD 2D: The Program shall have a Medical Advisor - Recommended

| | | | |
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| The following criteria exceeds the standard: | | | |
| A medical advisor is an individual with a degree in medicine or clinical equivalent and who has clinical exposure to diverse populations for at least five years. Includes MD, DO, PA, and ARNP. | | <i>Diploma or certificate or licensure.</i> | |
| | | | |
| Missing requirements: | | | |

STANDARD 3: NOTICES

STANDARD 3A: Operational Policies

| | | | |
|---|--|---|--|
| The Program description, publications, announcements, and advertising shall accurately reflect the program offered and its learning objectives. | | Policies, publications, announcements accurately reflect program offered. | |
| All published materials must have been edited for standard grammatical form and spelling. | | Online announcements, policies, course descriptions, and internal documents reviewed. | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 3B: Admission and Recruitment Notice

| | | | |
|---|--|----------------------------------|--|
| Student and instructor recruitment, student admission and graduation, and instructor employment practices shall comply with the institution's published policies, employment practices. | | Recruitment and Admission Notice | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 3C: Suspension, Withdrawal, Refund Notice

| | | | |
|---|--|---|--|
| Policies and processes for student suspension, withdrawal or refunds of tuition and fees shall be published and made known to all applicants. | | Suspension, withdrawal, and refund notices. | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

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STANDARD 3D: Student Grievance Notice

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|---|--|------------------------------|--|
| The program or sponsoring institution shall have a defined and published policy and procedure for addressing student and instructor grievances. | | Grievance notice and process | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 3E: Confidentiality of Student Information

| | | | |
|--|--|------------------------|--|
| Provision shall be made for the confidentiality of consumers, students, and instructors associated with educational activities in keeping with national, regional and/or local legal requirements. | | Confidentiality policy | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 3F: Certificate of Completion Awards

| | | | |
|--|--|------------------------|--|
| Certificate of Completion shall be given to student after successful completion and passing of requirements. If student does not pass the requirements, a statement (not certificate) of attendance may be provided via a letter, accompanied by a statement that the student did not pass the criteria for successful completion. | | Diploma or Certificate | |
| Note: A copy of the certificate issued must be available and submitted to site auditor. | | | |
| The following criteria exceeds the standard: | | | |

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| Missing requirements: | | | |
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STANDARD 3G: Student Records

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|--|--|---|--|
| Satisfactory records shall be maintained regarding student admission, enrollment, and completion of requirements. Records shall be maintained for five years.* | | Student admission, enrollment, and completion of requirements within one year of the audit. | |
| Note: Auditor will review and verify two random student records from the previous year. | | | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

*Note: Records from the previous year will be reviewed on initial accreditation.

STANDARD 4: INSTRUCTOR Qualifications (Core Standard)

STANDARD 4A: Qualification of Program's Instructors shall be made public.

The program shall employ interpreter instructors who possess the necessary qualifications to teach basic interpreting skills coursework.

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|---|----------------|--|------------------|
| Minimum 3 years experience as medical interpreter. | | CV and other evidence to document experience | |
| Bachelor's Degree or equivalent. | | Diploma | |
| Medical Interpreting Training of 40 hours. | | Certificate | |
| National certification of new hires as of January 1, 2014. (For languages for which oral exams do not exist, written exams would suffice. This requirement can be fulfilled within 18 months of hire.) | | Certificate or written policy, or promise of certification, within 18 months of hire. | |
| Instructor adheres to the IMIA Instructor Code of Ethics (Appendix III). | | Ethics document signed by instructor. | |
| Cultural competency training and exposure to diverse populations. Instructors shall complete 8 hours of cultural competency course within the first year. (See Appendix II for links of Cultural Competency Resources & Classes). | | Certificate | |
| Instructors for language-specific programs shall meet the standards requirements 1A and 1B for language proficiency, in addition to the qualifications for instructors. | | CV, diploma or language proficiency testing results. Refer to admission language proficiency requirements. | |
| Note: Specify languages that instructor is qualified to teach. | | | |
| Note: This is a Core Standard. | | | |
| The following criteria exceeds the standard: | | | |
| <i>Training of Trainers course – Recommended</i> | | Certificate | |
| <i>Courses in adult education - Recommended</i> | | Transcript or | |

| | | | |
|--|--|--|--|
| | | certificate | |
| <i>Written plan for continuing professional development. Recommended</i> | | Written plan for continuing education in teaching, research and service activities for the next three years. | |
| Missing requirements: | | | |

STANDARD 4B: Program Director is knowledgeable of medical interpreter standards of practice and the accreditation process.

The program shall employ a qualified program director to manage the program, and who has a demonstrated knowledge and understanding of the IMIA Standards, practices, and accreditation process.

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|---|----------------|---------------------------|------------------|
| Experience in administration. | | CV or additional evidence | |
| Knowledge of medical interpreter standards of practice. | | CV or additional evidence | |
| Knowledge of the accreditation process. | | CV or additional evidence | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 4C: Subject-Matter Experts (SMEs) are qualified (where applicable).

The program shall employ qualified subject-matter experts.

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|--|----------------|------------------------------------|------------------|
| Program shall hire subject matter experts with at least a bachelor's degree and 5 years of experience in the subject matter. | | CV and verifiable work experience. | |
| Note: Refer to the appendix for definition of SME. | | | |

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| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 4D: Preceptors are qualified (where applicable).

The program shall employ qualified preceptors (minimum 3 years of experience and medical interpreter training).

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|--|----------------|-------------------------------------|------------------|
| Proof of training as a medical interpreter. | | Certificate | |
| Minimum 3 years of experience as medical interpreter. | | Verifiable CV or employment record. | |
| Note: Refer to the appendix for definition of preceptor. | | | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 4E: Language Coaches are qualified (where applicable)

The program shall employ qualified language coaches for language-specific instruction (*if applicable*)

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|--|----------------|---|------------------|
| Three years of experience as a medical interpreter. | | CV and verifiable work experience | |
| Proof of language proficiency in both languages that meet Standards 1A and 1B. | | Test results or certificate | |
| Medical Interpreter Training | | Diploma or Certificate | |
| Program shall train individuals to work as language coaches. | | Training Certificate or Orientation Outline | |
| Note: Refer to the appendix for definition of language coach. | | | |

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| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

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STANDARD 5. CURRICULUM

STANDARD 5A: The curriculum design shall be made public and provide the basis for instruction.

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|--|----------------|--|------------------|
| The program curriculum design shall be published and will include all learning components, learning objectives, and the competencies to be mastered. | | Program curriculum (not course outlines, but program outline). | |
| Note: Program shall provide the Site Auditor with a copy of the curriculum. | | Copy of program curriculum. | |
| Note: This is a Core Standard. | | | |
| The following exceeds the standard: | | | |
| | | | |
| Missing requirements: | | | |

STANDARD 5B: Duration of program shall be published.

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|--|----------------|---|------------------|
| An educational program that specializes in medical interpreting shall consist of a minimum of 40 classroom hours.* | | Outline of time of instruction. | |
| Note: Program will need to meet the requirement of 60 hours of instruction documented in their annual report in 2016. | | Administration policies or program description. | |
| Online Programs shall document average number of hours that students spent on the learning activities on the program. | | Learning Management System documentation or similar online tracking system. | |
| A community interpreter program which has a medical interpreter component shall devote at least 40 hours of instruction to medical interpreting.** | | Administration policies or program description. | |
| Note: This is a Core Standard. | | | |
| Note: Program will need to meet the requirement of 60 hours of instruction documented in their annual report in 2016. (By January 1, 2020, 80 hours required.) | | Administration policies or program description. | |

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| The following criteria exceeds the standard: | | | |
| <i>An educational program of over 60 classroom hours devoted to medical interpreting.</i> | | | |
| Missing requirements: | | | |

**NOTE 1: By Jan 1, 2016, 60 hours will be required. By January 1, 2020, 80 hours required.*

***NOTE 2: The medical interpreting component of a community interpreter program will be reviewed separately and must meet all of the standards for a 40-hour medical interpreting program.*

STANDARD 5C: Assessment of Students

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|---|----------------|---|------------------|
| The program will document evaluation of students to assess their acquisition of knowledge, problem-solving skills, and interpretation competencies. | | Copies of tests, oral and/or written evaluations of students' knowledge and skills. | |
| Note: This is a Core Standard. | | | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 5D: Copyright Compliance

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|---|----------------|--|------------------|
| Curriculum will be in compliance with copyright laws for instructional materials utilized in the course content. | | Appropriate copyright or authorship or credits listed in curriculum materials. | |
| If using a third party curriculum, program must present the third-party license and specific curriculum to be taught, along with the license expiration date. The license must be current and maintained throughout the accreditation period. | | License Authorized curriculum Expiration date | |

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| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

STANDARD 5E – 5Q: Curriculum Content Requirements and Recommendations

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|--|----------------|--|------------------|
| 5E Medical Interpreting as a specialization <ul style="list-style-type: none"> The program shall seek to establish the view of medical interpreting as a specialization of the field of Translation/Interpreting. | | Course syllabus. Samples of learning activities, exercises and testing related to the content area. | |
| 5F Cultural competency: <ul style="list-style-type: none"> Cultural competency shall be taught reflecting the position of Office of Minority Health, which is: “health care services that are respectful of and responsive to the health beliefs, practices and cultural and linguistic needs of diverse patients that can help bring about positive health outcomes.” | | Course syllabus. Samples of learning activities, exercises and testing related to the content area. | |
| 5G Interpreting Modes <ul style="list-style-type: none"> Skills to accurately interpret consecutively in the medical context. Skills to accurately sight translate in the medical context Distinguish and select between the different modes of interpreting (i.e., simultaneous, consecutive, and sight translation). | | Course syllabus. Samples of testing and evaluation of practical skills and interpreter competencies. | |
| Note: This is a Core Standard. | | | |
| 5H Medical Interpreter Standards of Practice <ul style="list-style-type: none"> The medical interpreter standards shall be taught based on current IMIA and other internationally or nationally-published Standards of Practice. | | Course syllabus. Samples of learning activities, exercises and testing related to the content area. | |

| | | | |
|---|--|---|--|
| Note: This is a Core Standard. | | | |
| Specify which standard is taught. (IMIA, CHIA, etc.) | | | |
| 5I Interpreting Roles <ul style="list-style-type: none"> Roles of the interpreter shall be taught based on current IMIA and other internationally or nationally-published Standards of Practice. | | Course syllabus. Samples of learning activities, exercises and testing related to the content area. | |
| Note: This is a Core Standard. | | | |
| Specify which standard is taught. (IMIA, CHIA, etc.) | | | |
| 5J Interpreter Code of Ethics <ul style="list-style-type: none"> IMIA Code of Ethics IMIA Guide on Ethical Conduct And other internationally or nationally-published medical interpreter code of ethics Areas where medical ethics and interpreter ethics converge and conflict (NOTE: US-Only: RID Code of Ethics if program is offered to ASL interpreters) Note: This is a Core Standard. | | Program Description. Course Syllabus Samples of learning activities, exercises and testing related to the content area. | |
| Note: This is a Core Standard. | | | |
| Specify which standard is taught. (IMIA, CHIA, etc.) | | | |
| 5K Medical Terminology minimum of 8 hours <ul style="list-style-type: none"> Explanation of prefixes, roots, and suffixes Body Systems, Anatomy and Physiology Symptoms, Diseases and Disorders Diagnostic Tests Specialty Terminology Abbreviations in healthcare with discussion of the dangers of using abbreviations 8 hours of medical terminology shall be taught | | Program Description Course Syllabus Samples of learning activities, exercises and testing related to the content area. | |
| Note: This is a Core Standard. | | | |
| Specify how many hours of medical terminology are taught. | | | |
| The following criteria exceeds the standard: | | | |

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|--|--|---|--|
| 20 hours of Medical Terminology – Recommended | | See 5K above. | |
| 5L Note taking – Recommended <ul style="list-style-type: none"> Ability to accomplish note-taking within medical encounters | | Course Syllabus. Samples of learning activities, exercises and testing related to the content area. Course description with specific note taking knowledge and skills taught to aid accuracy. | |
| 5M Healthcare Industry <ul style="list-style-type: none"> General knowledge of the healthcare industry in the country of practice (types of clinics/hospitals, primary healthcare professions, patient safety standards) General knowledge of health literacy and health disparities issues General knowledge of medical ethics (Do no harm, patient confidentiality, decision-making, healthcare team, etc.) Healthcare techniques and logistics, such as the ability to manage the physical setting | | Course Syllabus Samples of learning activities, exercises and testing related to the content area. | |
| The following criteria exceeds the standard: | | | |
| 5N Simultaneous Interpretation - Recommended <ul style="list-style-type: none"> Ability to interpret accurately simultaneously in the medical context | | Course syllabus Samples of learning activities, exercises and testing related to the content area. | |
| The following criteria exceeds the standard: | | | |
| 5O Practicum – Recommended <ul style="list-style-type: none"> A supervised practicum of at least 60 hours shall be an integral part of the educational program. The experience shall provide the interpreting intern with the | | Practicum Guidelines or Policy which includes responsibilities of practicum supervisor, preceptor and | |

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| opportunity for carrying out professional responsibilities under appropriate supervision. (NOTE: Language neutral practicums will be accepted.) | | interpreting intern. Completed reports and evaluation forms. | |
| Note: Refer to the appendix for definition of preceptor. | | | |
| If practicum is offered, practicum policy will be reviewed regardless of the number of hours of practicum. | | | |
| Practicum guidelines, completed reports and practicum evaluation forms shall be made available to the auditor. | | | |
| The following criteria exceeds the standard: | | | |
| 5P Interpreting Research – Recommended for academic programs. <ul style="list-style-type: none"> • Necessity for, and value of interpretation research. • Essential components of a research protocol. • Analysis of studies related to interpretation. • Application of research results to interpretation practice. • Evaluating research studies for validity and credibility. • Fact-checking and ability to locate, evaluate and use online sources of information effectively. • | | Course Syllabus. Samples of learning activities, exercises and testing related to the content area. | |
| 5Q Language Specific Programs - Language-specific program shall teach and evaluate knowledge and skills in the language-pair. | | Course Syllabus. Samples of learning activities, exercises and testing related to the content area. | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

6. METHODOLOGY

STANDARD 6A – 6F: Methodology utilized by medical interpreting programs

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|---|----------------|--|------------------|
| 6A Learning Styles <ul style="list-style-type: none"> Instructional methods shall accommodate different learning styles and based on adult learning principles. 6B Presentation Methods <ul style="list-style-type: none"> Effective presentation methods are utilized for content development and mastery 6C Case Studies <ul style="list-style-type: none"> Case studies are utilized as an instructional method 6D Collaborative Learning <ul style="list-style-type: none"> Group collaborative learning is encouraged through group discussion, peer critiques, 6E Independent Learning <ul style="list-style-type: none"> Independent learning is encouraged through individual additional work Individual skill building exercises are utilized for skills development and mastery Ability to distinguish credible sources of online medical information shall be taught. 6F Self-Evaluation <ul style="list-style-type: none"> Self-evaluation is encouraged throughout the program | | Course Syllabus. Samples of learning activities, exercises and testing related to the content area. | |
| 6G Observation and reflection <ul style="list-style-type: none"> Supervised observation in the clinical setting with report and reflection on experience. Interpreting students must not be allowed to interpret in the clinical setting. | | | |
| Note: Observation is not practicum. Refer to the Appendix for definition of practicum. | | | |
| The following criteria exceeds the | | | |

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|-----------------------|--|--|--|
| standard: | | | |
| Missing requirements: | | | |

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7. EVALUATION

STANDARD 7A – 7F: Evaluation requirements and recommendations

| STANDARD | MEETS STANDARD | EVIDENCE | EXCEEDS STANDARD |
|--|-------------------|--|---------------------|
| 7A Program Evaluation Plan <ul style="list-style-type: none"> The interpreter educational program shall have a system in place for reviewing its effectiveness and assessing program components and quality Annual Report shall be submitted to maintain accreditation | | Program Mission and Goals. Internal Quality Control Processes Copy of Annual Report included in the administration manual and/or policies. | |
| *7B Final Assessment of Students (Core Standard) <ul style="list-style-type: none"> The learned knowledge and skill levels of students shall be assessed via final written and oral exams. Final exams shall be graded and shall be an important component of assessment for successful completion. A program passing score of at least 70% shall be maintained. | | Copy of written and oral final exams and grading criteria for written and practical exams/demonstrations. Sample of completed exams and grading (didactic and actual demonstrations of skills). Student records should be available for review. | |
| Note: This is a Core Standard. | | | |
| Note: Auditor will review at least two random student assessment results. | | | |
| 7C Utilization of Result of Evaluation - Recommended <ul style="list-style-type: none"> The program shall systematically use the information obtained in its IMIA evaluations to foster student achievement. | | Written policy or plan for utilizing results of evaluations. | |
| 7D Final Student Evaluation of Program <ul style="list-style-type: none"> The program shall perform a final, anonymous evaluation to assess the program's instructors' effectiveness, the physical/online setting, and the student's overall satisfaction with the program. | | Program Evaluation Forms | |

| | | | |
|---|--|--|--|
| 7E Final Evaluation of Practicum (Where applicable) <ul style="list-style-type: none"> The student's practicum shall be formally evaluated and documented by the preceptor in accordance with program guidelines. This evaluation shall be shared with the student. | | Final Practicum Evaluation Form | |
| If program has practicum, it will be reviewed regardless of the number of practicum hours. | | | |
| 7F Additional Sources of Data Recommended: An evaluation of the Program by the IMIA may also shall consider: <ul style="list-style-type: none"> Surveys of graduates and employers. Interviews with program graduates Internal and external curriculum validation in consultation with employers, instructors, mentors, students, and graduates. Review of admissions policies and procedures. Data on the evaluation of student performance on state and/or national certification examinations | | Surveys, interviews, certificates and other documentation. | |
| The following criteria exceeds the standard: | | | |
| Missing requirements: | | | |

APPENDIX I

Language Proficiency Exams

Validated Language Exams

- ACTFL Oral Exams (American Council on the Teaching of Foreign Languages): Advanced Mid-Level
- BEST Plus computer-adaptive assessment: High Intermediate or above.
- CAE (Certificate in Advanced English, Level 4): B
- COPI (Computerized Oral Proficiency Instrument) based on ACTFL rating (Advanced Mid-Level)
- CPE (Certificate of Proficiency in English, Level 5): B
- ECPE (Examination for the Certificate of Proficiency in English): PASS
- ELPT (English Language Proficiency Test): 950+
- FCE (First Certificate in English, Level 3): A
- IELTS (International English Language Testing System) 7.0+
- MELAB (Michigan English Language Assessment Battery) 80+
- TOEFL (Test of English as a Foreign Language): 570+ on paper; 230+ computer version; 90+ on iBT.
- Validated language exam equivalent to ILR2 or higher.

APPENDIX II

IMIA Code of Ethics for Interpreter Educators

(Copy must be signed by instructor.)

<http://www.imiaweb.org/uploads/pages/492.pdf>

1. Competence and Qualifications

Interpreter educators shall only seek, accept, or offer to provide, those educational assignments they are qualified to perform.

2. Transparency

Interpreter educators shall disclose all information in a transparent way, not withholding information from students.

3. Professional Development

Interpreter educators shall participate and engage in educational and professional development activities to ensure competence and keep abreast of the evolving field and the latest standards.

4. Intellectual Property

Interpreter educators shall respect intellectual property & authorship of others, and copyright laws, seeking proper authorization and crediting materials as required by law.

5. Confidentiality

Interpreter educators shall assure that confidentiality of health information and student performance is maintained where appropriate.

6. Impartiality

Interpreter educators shall treat students fairly, in an unprejudiced manner, and avoid any actions that could be, or imply appearance of, favoritism or preference for particular students.

7. Professional Boundaries

Interpreter educators shall maintain a professional distance from students, and shall not utilize their position to gain favors from students.

8. Conflicts of Interest

Interpreter educators shall disclose to their students their affiliations with organizations they promote, and related conflicts of interest.

9. Professionalism

Interpreter educators shall uphold the public's trust in the interpreting education field.

10. Accuracy

Interpreter educators shall give accurate information to students, based on the published research, recognized standards of practice and code of ethics for medical interpreters, rather than personal opinion based solely on individual experience.

11. Cultural Competence

Interpreter educators shall respect the cultural differences of students and be committed to creating a culturally competent learning environment.

12. Inclusiveness

Interpreter educators shall educate interpreters about all standards and codes for the profession, and promote instructional programs for all language groups, modes and modalities of interpretation to accurately reflect the scope of the profession.

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APPENDIX III

Cultural Competency Resources & Classes

- Free courses from Office of Minority Health
<https://www.thinkculturalhealth.hhs.gov/Content/ContinuingEd.asp>
- Physician's Guide: 9 Hours
<https://cccm.thinkculturalhealth.hhs.gov/default.asp>
- Nursing Care: 9 Hours
https://ccnm.thinkculturalhealth.hhs.gov/GUIs/GUI_CEU_info.asp#
- Disaster Preparedness: 9 Hours
<https://cccdpcr.thinkculturalhealth.hhs.gov/>

According to HHS: During registration, users may select “Statement of Participation” as their certificate and submit it to their licensing body for consideration of credit.

Appendix IV

Definitions

Academic education: An educational program offered by a Board of Education-accredited college or university.

Bachelor's degree: A 4-year degree from an accredited academic institution. An equivalent 4-year degree may be substituted if awarded by a non-US academic institution.

Certificate Program: Non degree-granting program that offers a medical interpreting curriculum and certificate of completion, but not affiliated with an academic institution.

CMIE-Accredited Program: An educational program that has successfully passed the IMIA CMIE Accreditation Audit and not only meets 100% of the Core Standards, but also 70% of the non-core standards.

College-based Program: Educational program offered in a college or university setting for credit or non-credit hours and/or certificate of completion is issued by a college or university. College-based programs are considered Academic Programs for purposes of accreditation.

Continuing Education: Educational activities and courses or workshops which enhance a professional's knowledge or skills to practice in that field. Completion of a medical interpreter training program is a prerequisite for attending the continuing education activity.

Distinguished Status: An educational program that has successfully passed the IMIA Accreditation Audit. The educational program not only meets 100% of the Core Standards, and 70% of the non-core standards, but also 70% of the recommended standards.

Hospital-based Program or Healthcare-based Program: An educational program that is offered by a hospital or healthcare facility that may be strictly offered to employees or may be open to the public.

Language Coach: A qualified interpreter who has been trained to work with an instructor in a classroom with a language-specific content. Language coaches shall be trained medical interpreters, have at least 3 years of medical interpreting experience, and have the necessary materials and glossaries to act in such capacity. A student who speaks the same language pair and serves as a peer-reviewer or practice partner is not a Language Coach.

Language-neutral Program: Learning content is provided and interpreting exercises are guided by a qualified instructor who does not speak the same language pair as the course participants. Peer review, a language coach, or back translation, or other methods may be utilized to assess the participant's demonstration of the knowledge and skills in the other language. Feedback on interpretations rendered is provided by the instructor in only one of the participant's working languages.

Language-specific Program: Learning content and interpreting exercises are conducted in both working languages and the curriculum is delivered by a qualified bilingual instructor or bilingual SME who speaks the same language pair as course participants. Assignments and exercises and testing are completed by participants in both the source and target languages. Feedback from the bilingual instructor or bilingual SME is provided in both working languages.

Licensed Medical Interpreter Program: An educational program developed and copyrighted by a third-party organization that allows the content and curriculum to be taught by an interpreter instructor or other organizations based on specific guidelines.

Medical Advisor: An individual with a degree in medicine or clinical equivalent and who has clinical exposure to diverse populations for at least five years and is available for consulting on the medical aspects of the interpreter program. A degree in medicine or equivalent includes MD, DO, PA, and ARNP.

Medical Interpreter Educational Program: A program of study for interpreters with a minimum of 40-hour classroom content, that prepares students with the knowledge of anatomy and medical terminology, medical interpreting protocols and standards, and tests students on their ability to convey the full and accurate meaning of speech from the source language into the target language reflecting real-world medical tasks and content, and provides a certificate of successful completion.

Medical Interpreter Instructor: A qualified individual who teaches interpreting knowledge and skills, tests, evaluates, and coaches students based on specific learning objectives, and meets the Interpreting Instructor Requirements under Standard 4A.

Medical Interpreting Intern: An individual who has successfully completed a medical interpreter certificate program who undergoes a certain number of hours of supervised interpreting practicum in the healthcare setting.

Non-academic Program: The program is considered non-academic education if the certificate of completion is issued by an organization other than a college or university.

Practicum: A supervised learning experience in a healthcare setting. A practicum shall include a shadowing, a practice, and an evaluation component. In order for interpreting interns to participate in practicum, they shall have passed the oral interpreting skills test and have successfully completed a medical interpreting program.

Practicum Supervisor: A qualified administrator in the training organization and/or host organization who coordinates and supervises interpreting interns and preceptors.

Preceptor: A qualified medical interpreter with a certificate in medical interpreting and at least 3 years of experience in the healthcare setting who is shadowed by, supervises, evaluates, and mentors the interpreting intern. The student's practicum shall be formally evaluated and documented by the practicum supervisor and/or preceptor in accordance with program guidelines. This evaluation shall be shared with the student.

Program Director: A qualified individual who manages the interpreter educational program and all other aspects of the educational program.

Subject-Matter Expert (SME): A qualified individual who teaches a specific topic in a medical interpreting program where the interpreting instructor may not have the expertise. SMEs must possess a minimum of a baccalaureate degree or higher in their field of expertise as well as five years of experience in their specialty. (Examples: medical terminology, anatomy, mental health interpreting, cultural competency, simultaneous interpreting, etc.)