



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters

Commission for Medical Interpreter Education

A Division of IMIA

Accreditation Standards for Medical Interpreter Education

1. ADMISSION

1A Oral Proficiency in the main language of the country

The required oral proficiency for admission shall be posted online. It shall be determined by any ONE of the following:

Over 5 years of verified professional experience in the main language of the country

A Bachelor, Masters, PhD, or any other degree from any accredited institution of higher education where the main language is spoken

Graduation from a high school where the main language is the medium of instruction

ACTFL Oral Exam administered by a third party (Minimum score: Advanced Mid Level or equivalent to ILR 2).

Validated Third-Party Language Exams (For English, see Appendix I)

Equivalent to ACTFL Advanced Mid-level or ILR 2

Other countries may have exams which will be reviewed on a case-by-case basis

1B Oral Proficiency in the other language

The required oral proficiency for admission shall be posted online. It shall be determined by any ONE of the following:

Over five years of verified professional experience in the other language

Bachelor, Masters, PhD, or any other degree from an institution of higher education where that language is spoken

Graduation from a high school where the language is the medium of instruction

ACTFL Oral Exams administered by a third party (Minimum score: Advanced Mid Level or equivalent to ILR 2.

Validated Third-Party Language Exams

Equivalent to ACTFL Advanced Mid-level or ILR 2.

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

1C Minimum educational requirement

A high school diploma or certificate of equivalency

Bachelor degree recommended

1D Minimum age requirement

18 years of age

21 years of age recommended

2. ADMINISTRATION

2A Administration of the Program

The educational program shall demonstrate that resources are in place to manage student administrative needs outside the classroom.

The program shall maintain a website containing all required public information about the program.

The program shall be listed in the IMIA Training Directory if it is offered to the public.

The program shall have been in place for at least one year.

The instructor/student ratio shall be noted and recorded. (Recommended.)

2B Accreditation by International, National, or State Agency

The training institution may be accredited by an internationally or nationally-recognized, or state agency or agencies (Occupational or postsecondary, onsite or online accreditation).

2C Referral to Remedial Resources

A process to refer students to remedial resources (e.g. language or vocabulary reinforcement, accent reduction) shall be in place for students when problems that interfere with the successful completion of the program are identified.

2D The Program Shall Have a Medical Advisor (Recommended)

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, ARNP.

3. NOTICES

3A Operational Policies

The program description, publications, announcements, and advertising shall accurately reflect the program offered and its learning objectives.

All published materials must have been edited for standard grammatical form and spelling.

3B Published Admission & Recruitment Notice

Student and instructor recruitment, student admission and graduation, and instructor employment practices shall comply with the institution's policies and shall be posted online.

3C Suspension, Withdrawal, Refund Notice

Policies and processes for student suspension, withdrawal or refunds of tuition and fees shall be posted online.

3D Student Grievance Notice

The program or sponsoring institution shall have a defined and made available online policy and procedure for student and instructor grievances.

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.

3F Certificate of Completion Awards

Criteria for successful completion of the educational program shall be given in advance to each student. Certificate of Completion shall be given to student after successful completion and passing of requirements. IMPORTANT: If student does not meet the requirements, a record of attendance (not a certificate) may be provided via a letter, accompanied by a statement that the student did not pass the criteria for successful completion.

3G Student Records

Satisfactory records shall be maintained regarding student admission, enrollment, and achievement. Records shall be maintained for at least five years.

4. INSTRUCTORS

4A Qualifications of Interpreting Instructors

The program shall employ instructors who possess the necessary qualifications to teach interpreting coursework. Instructor qualifications must be posted online, and shall include:

Minimum 3 years of experience as a medical interpreter

Bachelor's Degree or equivalent.

Medical Interpreting Training of 40 hours.

Adherence to the IMIA Instructor Code of Ethics (Appendix III).

Interpreting instructors with less than 3 years of experience as interpreter instructor shall be nationally certified as medical interpreters within 18 months of the site audit.

Cultural competency training and exposure to diverse populations. Instructors shall complete 8 hours of cultural competency coursework within the first year. (Appendix II)

Instructors for language-specific programs shall meet the qualifications for instructors which qualifies them to teach in English and their second language.

Train-the-Trainer Certificate (Recommended.)

Each instructor shall have a written plan for continuing professional development (Recommended.)

***By January 1, 2016, Interpreting instructors with less than 3 years of experience as interpreter trainer shall have be nationally-certified interpreters.**

4B Qualifications of Program Director

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

4C Qualifications of Subject-Matter Experts (SMEs) (where applicable)

The program shall employ qualified subject-matter experts with minimum of 5 years' experience in their specialty and an academic degree in their field of expertise. (See Appendix for definition.)

4D Qualifications of Preceptors (where applicable)

The program shall employ qualified preceptors (with a minimum of 3 years experience and medical interpreter training). (See Appendix for definition.)

4E Qualifications of Language Coaches (where applicable)

The program shall employ qualified language coaches for language-specific instruction. (With a minimum of 3 years experience and medical interpreter training). (See Appendix for definition.)

5. CURRICULUM

5A The curriculum outline shall be posted online and provide the basis for instruction

The program curriculum design will include all learning components, learning objectives, and the competencies to be mastered.

5B Duration of program

An educational program that specializes in medical interpreting shall consist of a minimum of 40 classroom hours.

A community interpreter program which has a medical interpreter component shall devote at least 40 hours of instruction to medical interpreting.

By Jan 1, 2016: 60 hours required. By January 1, 2020: 80 hours required.

5C Assessment of Students

The program will require documented evaluation of students to assess their acquisition of knowledge, problem-solving skills, and interpretation competencies.

5D Copyright Compliance

The curriculum shall be in compliance with copyright laws for instructional materials utilized in the courses.

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.

5E Medical Interpreting as a Specialization

The program shall seek to establish the view of medical interpreting as a specialization within the field of translation and interpreting.

5F Cultural Competency

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.”

5G Interpreting Modes

Programs must teach:

Skills to accurately interpret consecutively in the medical context.

Skills to accurately sight translate in the medical context.

Skills to distinguish and select among the different modes of interpreting (i.e., simultaneous, consecutive, and sight translation) based on the encounter.

5H Medical Interpreter Standards of Practice

The medical interpreter standards shall be taught based on IMIA and internationally or nationally-published Standards of Practice for medical interpreters.

5I Interpreter Roles

The roles of the interpreter shall be taught based on current IMIA and other internationally or nationally-published Standards of Practice.

5J Interpreter Code of Ethics

IMIA Code of Ethics

IMIA Guide on Ethical Conduct

And any other internationally-published medical interpreter code of ethics

US-Only: RID Code of Ethics (if program is offered to ASL interpreters), NCIHC Code of Ethics

Areas where medical ethics and interpreter ethics converge and conflict

5K Medical Terminology (8 hours required, 20 hours recommended)

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

5O Practicum - Recommended

A supervised practicum of at least 60 hours shall be an integral part of the educational program.

The experience shall provide the student with the opportunity for carrying out professional responsibilities under appropriate supervision.

(NOTE: Language neutral practicums will be accepted.)

5P Interpreting Research - Recommended

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.

5Q Language-Specific Program - Recommended

Language-specific program shall teach and evaluate knowledge and skills in the language-pair.

6. METHODOLOGY

6A Learning Styles

Instructional methods shall accommodate different learning styles and based on adult learning principles.

6B Presentation Methods

Effective presentation methods shall be utilized for content development and mastery of learning objectives. The presentation methods may include case studies, collaborative learning, independent learning, self-evaluation, observation and reflection.

6C Case Studies

Case studies shall be utilized as an instructional method.

6D Collaborative Learning

Group collaborative learning shall be encouraged through group discussion and peer critique.

6E Independent Learning

Independent learning shall be encouraged

6F Self-Evaluation

Self-evaluation shall be encouraged throughout the program.

6G Observation and Reflection

If supervised observation in the medical setting is offered, it shall include a written report and reflection on the learning experience.

7. EVALUATION

7A Program Evaluation Plan

The interpreter educational program shall have a system in place for reviewing its effectiveness and assessing program components and quality.

An Annual Report shall be submitted to maintain accreditation.

7B Final Assessment of Students

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.

7C Utilization of Evaluation Results (Recommended)

The program shall systematically use the information obtained in its IMIA evaluations to foster student achievement

7D Final Student Evaluation of Program

The program shall perform a final, anonymous evaluation to assess the instructor's effectiveness, the physical/online setting, and the student's overall satisfaction with the program.

7E Final Evaluation of Practicum (Where Applicable.)

Any student practicum shall be formally evaluated and documented by the practicum supervisor in accordance with program guidelines. This evaluation shall be shared with the student.

DEFINITIONS

Academic education: *Academic programs are programs offered by an academic institution. **Non-Academic programs are programs offered by a non-academic institution.

Certificate Program: Non degree-granting occupational program that offers a medical interpreting curriculum but not affiliated with a college or university.

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. 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 pre-requisite 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, 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.

Practicum: A supervised learning experience in a healthcare setting. A practicum shall include a shadowing, a practice, and 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 expert 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.)