

DEAF INTERPRETER-HEARING INTERPRETER TEAMS

Instructor Guide Student Activity: Medical Settings

The purpose of this activity sheet is to provide students with the opportunity to assess and justify the use of DI-HI teams. This Instructor Guide includes reading materials that provide a foundation for discussions, considerations, and responses to the Student Activity Guide.

Directions: When answering the following questions, be sure to consider various factors and provide justification for each of your answers.

Scenario:

Marnie, a freelance interpreter, has been contacted by the office of Dr. Ann Johnson to interpret for a routine medical procedure. Dr. Johnson's front desk receptionist explains that they have a Deaf patient, Miss Shannon McDonald coming in for an appointment next week and she is trying to secure an interpreter. Shannon is 25 years old and is coming in for a follow-up to her first OBGYN appointment that took place a month ago. There was no interpreter present for the original appointment and she did not seem to understand the purpose of a pap smear on the day that it was taken. The results came back abnormal and Shannon will need to undergo a colposcopy next week. Dr. Johnson tried to explain the procedure over the phone, but Shannon said that she did not understand the VRS interpreter and would just come to the appointment. She requested an interpreter be provided since she does not know what to expect during the procedure.

Marnie has never interpreted for Shannon, but does interpret medical appointments fairly often. She graduated from an Interpreter Education Program last year and has been interpreting professionally for six months. She is pre-certified and took her certification test last month.

Assessing the need for a DI-HI team

1. Would you recommend a DI-HI team for this appointment? If yes, continue answering questions 2 – 6; if no, jump to question 7:

Copyright © 2013-16 by the National Consortium of Interpreter Education Centers (NCIEC).

This NCIEC product was developed by the National Interpreter Education Center (NIEC) at Northeastern University. Permission is granted to copy and disseminate these materials, in whole or in part, for educational, non-commercial purposes, provided that NCIEC is credited as the source and referenced appropriately on any such copies.

2. What about the consumer and his language use in this scenario would warrant the use of a DI-HI team?

ANSWER: The consumer is a young, Deaf female with little experience and knowledge in this health-care setting. Regardless of Marnie's recent medical interpreting experience, a DI team could enhance her interpreting effectiveness. Because Shannon also mentioned an inability to understand the VRS interpreter, language use may be an issue and a DI would be able to present information in a more visually-centric manner. Because DIs have had lifelong experiences and exposure to Deaf people with different language backgrounds they have been afforded opportunities to be exposed to and interact with individuals using countless variations and dialects of ASL. From this foundation of language variation and exposure, a DI would be able to recognize any linguistic factors and communication needs that may likely influence the interpretation.

3. What about the interpreters' language competency present in this scenario would warrant the use of a DI-HI team?

ANSWER: Marnie is still a new interpreter with limited professional experience. Because ASL is not her native language, she could greatly benefit from being part of a team where both interpreters bring their essential skills and experiences to the work to verify meaning, gather clarifying information, manage information flow within the team, and affect a mutual monitoring process in the co-construction of complete and accurate interpretation for all consumers involved.

4. What setting considerations are present in this scenario that would warrant the use of a DI-HI team?

ANSWER:

The appointment is a follow-up to a previous appointment where no interpreter was present Also, the doctor is expecting to perform a medical procedure the day of the appointment (assuming that the patient provides consent for the procedure to be done). Because the patient has a limited understanding of this medical setting and no understanding of the procedure to take place, it is important that full access to medical information be provided. A DI-HI team would ensure greater interpretation accuracy.

5. Using the CPC for justification, please explain your decision to secure a DI-HI team.

ANSWER: The RID Code of Professional Conduct requires interpreters to assess whether or not they possess the necessary skills required for the specific interpreting situation before accepting the work. The CPC also requires interpreters to request the support of a DI when necessary to fully convey an equivalent interpreted message. While the interpreter may be a qualified ASL/English interpreter, because they do not independently have the necessary skills for this setting they would be making an ethically sound decision to secure a DI.

Copyright © 2013-16 by the National Consortium of Interpreter Education Centers (NCIEC).

This NCIEC product was developed by the National Interpreter Education Center (NIEC) at Northeastern University. Permission is granted to copy and disseminate these materials, in whole or in part, for educational, non-commercial purposes, provided that NCIEC is credited as the source and referenced appropriately on any such copies.

6. Upon completion of your assessment and your determination of needing a DI-HI team, what information would you include to make your case to the requestor that a DI-HI team is necessary?

ANSWER:

Communication will be accurate and clear resulting in optimal understanding
There is greater efficiency of language access resulting in a more cost effective exchange.
The interaction will be monitored to determine whether interpreting is effective and when it might be appropriate to stop the proceedings and offer appropriate alternative resources ensuring clarity of communication. (NCIEC Deaf Interpreter Work Team (2010). Toward Effective Practice: Competencies of the Deaf Interpreter. National Consortium of Interpreter Education Centers, page 6)

Appropriate clarification of culturally based information will occur and will result in a reduced number of cultural misunderstandings that occur.

Due to the serious nature of this setting and the potential for life-altering outcomes, interpreters working in medical environments must be confident that their work and conduct is effective, accurate and ethically sound. For this reason, it is best to collaborate with DIs in medical settings when appropriate.

DI-HI Team will not be utilized

7. What about the consumers and their anticipated language use in this scenario led you to your decision not to recommend a DI-HI team?

ANSWER: N/A

8. What about the interpreters' language competency present in this scenario led you to your decision not to recommend a DI-HI team?

ANSWER: N/A

9. What setting considerations are present in this scenario led you to your decision not to recommend a DI-HI team?

ANSWER: N/A

10. Using the CPC for justification, please explain your decision to not secure a DI-HI team.

ANSWER: N/A

Copyright © 2013-16 by the National Consortium of Interpreter Education Centers (NCIEC).

This NCIEC product was developed by the National Interpreter Education Center (NIEC) at Northeastern University. Permission is granted to copy and disseminate these materials, in whole or in part, for educational, non-commercial purposes, provided that NCIEC is credited as the source and referenced appropriately on any such copies.