

National Standard Guide for Community Interpreting Services



Healthcare **Interpretation** Network



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Designed by: Sara C Designs, creative.sarac@gmail.com

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1. Scope of the Standard Guide

This National Standard Guide specifies the requirements for the provision of quality community interpreting services to ensure reliability in the provision of such services nationwide.

Community interpreting (also known as institutional interpreting) is usually done in the consecutive mode in a dialogue-like interaction. It enables communication between LEP/LFP speakers and providers of public services such as: healthcare, government agencies, community centres, legal settings, educational institutions, and social services.

Interpreters working in this type of setting usually work into and out of two of their working languages.

This Standard Guide applies to Community Interpreting only.

2. Introduction

To date, no national body in Canada has provided clear and consistent definitions of the characteristics and competencies of a qualified community interpreter, leaving interpreters, hiring organizations and the general public with no clear idea about the role of the interpreter or what is expected from interpreters. As a result, the quality of interpreting across Canada has been inconsistent leading to potentially incomplete, inaccurate and dangerous communication.

This first National Standard Guide for Community Interpreting will promote the highest quality of interpreting when adopted for assessment, training, hiring, performance monitoring and possible future professional recognition. It will also serve as an educational tool for the general public. It is understood that it will take some time before all community interpreters meet this standard, such that, it can be relied upon in all language combinations at all times and in all settings.

This Standard Guide provides a common base of understanding concerning community interpreting services. Adopting this Standard Guide at the national level is crucial to achieving professionalization in the field.

The document encompasses definitions of interpreting terminology, human resources requirements, responsibilities of interpreting parties – clients, interpreting service providers and interpreters, professional standards of practice, core ethical principles and other practical aspects.

3. Acknowledgements

The development of the National Standard Guide for Community Interpreting is an initiative of the Healthcare Interpretation Network Policy Committee and has been made possible thanks to the efforts and dedication of individuals and organizations representing a wide variety of sectors across Canada.

The following organizations have worked towards the creation of the National Standard Guide for Community Interpreting Services.

Healthcare Interpretation Network – HIN

www.healthcareinterpretationnetwork.ca

Founded in 1990 and incorporated in 2004, HIN is a network of individuals and organizations dedicated to improving access to high-quality healthcare for patients with limited English proficiency. HIN is a not-for-profit organization that provides a forum for:

- The development of strategies to promote awareness of the language barriers that inhibit the quality of healthcare provided to patient populations with Limited English Proficiency (LEP) in Ontario.
- The recognition of the need for the development of standards to guide the training of language interpreters in the healthcare sector.
- The exchange of information regarding healthcare interpretation.

The goals of HIN are to:

- Enable and enhance access to healthcare by providing education on the need for language interpretation and translation services in the delivery of healthcare in Ontario.
- Conduct research, disseminate information and provide education with respect to language interpretation and translation services in the healthcare sector.
- Raise funds and provide resources for the education and training of qualified language interpreters.
- Promote common education and professional standards in the provision of language interpretation and translation services.

Association de l'industrie de la langue/Language Industry Association – AILIA

www.ailia.ca www.illi.ca

AILIA represents organizations delivering language services (translation, language training, and language technologies). AILIA has been working to raise the standards for the language industry in Canada. It has now taken an active role in supporting Community Interpreting through its Translation Committee.

The mission of AILIA is to promote and increase the competitiveness of the Canadian language industry nationally and internationally through advocacy, accreditation and information sharing.

The goals of AILIA are to:

- Promote the interests of the language industry.
- Act as a common base for action for all participants in the industry.
- Become a forum for industry members.
- Raise the visibility of the industry.
- Put together initiatives to face industry challenges.
- Develop common human resources strategies.
- Promote innovation and R&D.
- Facilitate networking between the industry and other public and private sector partners.
- Become the essential industry representative for the public sector.
- Stimulate the efforts of industry stakeholders both on the national and international levels.
- Support the emergence of alliances and projects to expand the industry.

Critical Link Canada

www.criticallink.org

Critical Link Canada is a non-profit organization committed to the advancement of the field of community interpreting in the social, legal and healthcare sectors. While its primary focus is spoken language interpreting, it works closely with those who work in the area of sign language interpreting. Critical Link Canada fulfills its mandate by:

- Promoting the establishment of standards, which guide the practice of community interpreters.
- Encouraging and sharing research in the field of community interpretation.
- Adding to the discussion about the educational and training requirements for community interpreters.
- Advocating for the provision of professional community interpreting services by social, legal and healthcare institutions.
- Raising awareness about community interpreting as a profession.

Association of Canadian Corporations in Translation and Interpretation – ACCTI

www.accti.org

ACCTI is a non-profit association committed to representing the interests of Canadian corporations in the business of translation and interpretation and represents public interest through quality-oriented membership and designations. ACCTI has been an active participant in the developments occurring in the community Interpreting field.

An Ad Hoc Advisory Committee was set-up to create the National Standard Guide for Community Interpreting. The Committee was composed of representatives from the four above-mentioned organizations as well as from other parties working within the Community Interpreting field.

Guide prepared by:

The Healthcare Interpretation Network – HIN
Policy Committee

Lola Bendana

Multi-Languages Corporation

Healthcare Interpretation Network – HIN
Board of Directors

Association de l'industrie de la langue

Language Industry Association AILIA
Board of Directors

Association of Canadian Corporations in Translation
and Interpretation – ACCTI

Elba de Leon

St. Joseph Health Centre
Manager Interpreter Services

Healthcare Interpretation Network – HIN
Board of Directors

Lisete Figueiredo

Healthcare Interpretation Network – HIN
Board of Directors

Critical Link Canada
Board of Directors

Axelle Janczur

Access Alliance Multicultural Health and Community
Services
Executive Director

Healthcare Interpretation Network – HIN
Board of Directors

Critical Link Canada
Member

Ad Hoc Advisory Committee

Diana Abraham

Ontario Ministry of Citizenship and Immigration
Former Senior Program Consultant

Critical Link Canada
Founding Member

Healthcare Interpretation Network – HIN
Board of Directors

Wilma Alvarado-Little

Center for the Elimination of Minority Health
Disparities

University at Albany, SUNY New York

Jake Atteslander

Seneca College

Suzanne Barclay

The Provincial Language Service

Critical Link Canada
Board of Directors

Silvana Carr

Vancouver Community College

Critical Link Canada
Board of Directors

Nelida Chan

Ontario Government

York University

Chair of Sub-Committee 1 of the Canadian Advisory
Committee CAC to ISO Technical Committee TC37
and International Convener of ISO/TC37/SC2/WG6
(Translation and Interpreting/Interpretation Processes)

Anne-Marie De Vos

Ordre des traducteurs, terminologues et interprètes agréés du Québec (OTTIAQ)
Board of Directors

Casey Fallon

Court Services Division
Ontario Ministry of the Attorney General

María Constanza Guzmán

Glendon College
York University

Paola Ludovici

Lexi-tech International

Julio Montero

Able Translations Ltd.

Suzanne Mondoux

Ordre des traducteurs, terminologues et interprètes agréés du Québec (OTTIAQ)
Board of Directors

ATIO Board of Directors
(Stakeholder Consultation only)

Association of Translators and Interpreters of Ontario
– ATIO

Alain Otis

University of Moncton
Canadian Translators, Terminologists and Interpreters
Council CTTIC
Board of Directors

Paul Penzo

All Languages Ltd.

Association of Canadian Corporations in Translation
and Interpretation – ACCTI
Board of Directors

Gonzalo Peralta

Association de l'industrie de la langue Language
Industry Association – AILIA
President

Jeannine Roy

Winnipeg Regional Health Authority

Debra Russell

University of Alberta

Critical Link Canada
Board of Directors

Wilson Teixeira

Able Translations Ltd.

Association de l'industrie de la langue
Language Industry Association – AILIA
Board of Directors

Association of Canadian Corporations in Translation
and Interpretation – ACCTI
Board of Directors

Cheryl Girard Wrixon

CON*NECT Strategic Alliances

4. Definitions

For the purposes of this Guide the following terms are defined as follows:

Accreditation

The recognition of educational institutions or training programs as meeting and maintaining standards that then qualify its graduates for professional practice.

Accredited Interpreter

An interpreter who has passed the screening criteria of a particular organization and has been awarded a certain recognition or accreditation. An accredited interpreter is NOT necessarily a Certified Interpreter a Certified Court Interpreter or a Certified Conference Interpreter.

Ad Hoc Interpreter

An untrained individual who asserts proficiency in the relevant language pair, who is called upon or volunteers to interpret. Also called a chance interpreter or lay interpreter.

Bidirectional Interpreting

Interpretation between two languages where each one functions as both a source and target language.

Bilingual Person

An individual who has some degree of proficiency in two languages. A high level of bilingualism is the minimum qualification for a competent interpreter but by itself does not ensure the ability to interpret.

Certificate

A document that attests to the attainment of specific learning objectives. A person who holds a certificate related to interpreter training is NOT necessarily a Certified Interpreter, a Certified Court Interpreter or a Certified Conference Interpreter.

Certification

A process by which a professional organization attests to or certifies that an individual is qualified to provide a particular service. Certification calls for formal assessment, using an instrument that has been tested for validity and reliability¹, so that the certifying body can be confident that the individuals it certifies have the qualifications needed to provide interpreting services. A training certificate does NOT constitute certification.

Certified Interpreter

A professional interpreter who is certified as competent by a professional organization through rigorous testing based on appropriate and consistent criteria. Interpreters who have had limited training or have taken a screening test administered by an employing legal, health, interpreter or referral agency are NOT considered certified.

Certifying Body

A professional association that certifies interpreters.

Client

Individual or organization that purchases or requests interpreting services.

Community Interpreting

Bidirectional interpreting that takes place in the course of communication among speakers of different languages. The context is the provision of public services such as healthcare or community services and in settings such as government agencies, community centres, legal settings, educational institutions, and social services.

Other terms have been used to describe community interpreting such as “public service interpreting”, “cultural interpreting”, “dialogue interpreting”, “institutional interpreting”, “liaison interpreting” and “ad hoc interpreting”. However, community interpreting remains the most widely accepted term in Canada.

Consecutive Interpreting

Consecutive is one of the two modes of interpreting.

There are two forms of consecutive interpreting:

1. Long or classic consecutive is usually used in conference interpreting settings, where the interpreter listens to the totality of the speaker’s comments or a significant passage and then reconstitutes the speech with the help of notes taken while listening.
2. Sequential or short consecutive interpreting is used in court interpreting as well as most forms of community interpreting and operates at the sentence level instead of working with paragraphs or entire speeches.

In this form of interpreting, the interpreter may interrupt the speaker and ask him/her to repeat, clarify or rephrase so as to ensure accuracy and completeness in the delivery of the message.

Conference Call Interpreting

A form of remote interpreting which takes place over the phone between three or more people. This is also called telephone interpreting.

¹ National Council on Interpreters in Healthcare (NCIHC). *National Standards of Practice for Interpreters in Healthcare*. September 2005

Conference Interpreting

A form of interpreting that takes place in a conference type setting, often interpreting speeches or presentations. It may be either consecutive or simultaneous in mode, but involves the interpreter working in “one direction” of language transfer only, usually from one language into their first or preferred language.

Court Interpreting

Interpreting that takes place in a court setting, in which the interpreter is asked to interpret either consecutively or simultaneously for a LEP/LFP individual who takes part in a legal proceeding.

Domain

Subject matter, field, sector or industry.²

Escort Interpreting

Interpreting that takes place when an interpreter accompanies a LEP/LFP for a prearranged time and facilitates communication in different settings and contexts. Escort interpreting is also known as elbow interpreting.

First-person Interpreting

Interpreting that takes place using the first person demonstrated by “I” statements, also known as direct speech interpreting.

Healthcare Interpreting

Interpreting that takes place in a healthcare setting, in which the interpreter is asked to interpret either consecutively or simultaneously for an individual who does not share the language in which the healthcare service takes place.

Interpreting

The act of facilitating spoken language communication between two or more parties who do not share a common language by delivering, as faithfully as possible, the original message from source into target language.

Interpreting Service Provider (ISP)

Individual or organization that provides interpreting services.

Note: Service Provider is widely used to designate the organization’s staff working with a client.

For the purpose of this National Standard Guide, the term references those that provide interpreting services.

Interpreter

A person who facilitates spoken language communication between two or more parties who do not share a common language by delivering, as faithfully as possible, the original message from source into target language.

Interpreting Mode

Format and manner of interaction within the interpreting encounter. The modes include: consecutive interpreting and simultaneous interpreting. Each mode fits particular needs and circumstances.

Language Pair

The two languages that serve as source and target languages for an individual interpreter in a particular assignment.

LEP/LFP

Limited English/French Proficiency/Proficient.

LLD

Languages of Lesser Diffusion (less common languages).

Message Relay

Interpreting where an interpreter receives a message from one party and subsequently transmits it to another party in the target language.

Note-taking

Note-taking, an essential element of consecutive interpreting, consists of noting on paper, names, addresses, dates and specific terms that might be difficult to remember for the short period before the interpreter intervenes to interpret.

On-site Interpreting

Interpreting done by an interpreter who is directly in the presence of the interpreting parties. Also called face-to-face interpreting.

Professional Interpreter

A fluently bilingual individual with appropriate training and experience who is able to interpret with consistency and accuracy and who adheres to the Standards of Practice and Ethical Principles.³

² American Society of Testing Materials (ASTM)

³ LITC Standards of Practice and Ethical Principles

Register

A stylistic and/or social level of language used by a speaker. A speaker's choice of register is generally defined by the particular topic, the parties spoken to, and the perceived formality of the situation. The register is also related to the type of activity, level of education, etc. (e.g. colloquial, legal, medical, scientific, religious).⁴

Relay Interpreting

An interpreting process in which two individuals attempting a conversation communicate through two interpreters, each of whom speaks only one of the two languages required as well as a common third language. This type of interpreting is also called double relay. While sometimes it is necessary for some of the LLD, it should be avoided whenever possible because it increases the risk of inaccuracies in interpreting.

Remote Interpreting

Interpreting provided by an interpreter who is not in the presence of the speakers, e.g., interpreting via telephone or videoconferencing.⁵

Sight Translation

Conversion from written material in one language to a spoken version in another language. It also occurs when an instant oral version is required of a written text.

Signed Language

Visual-spatial languages used by Deaf people. Signed Languages are natural languages with their own grammatical structures and lexicon.

In Canada there are two official signed languages: American Sign Language (ASL), used by English-speaking Deaf community members, and Langue des signes québécoise (LSQ) used by French-speaking Deaf community members.

Simultaneous Interpreting

The nearly instantaneous delivery of the speaker's message from the source language into the target language.

Source Language

Language from which translation or interpretation is carried out.

Target Language

Language into which translation or interpretation is carried out.

Translation

The process of transposing the meaning of a written text from one language (source) to the other (target) by producing an equivalent target text that retains the elements of meaning, form and tone.

Translator

Person who renders the meaning of a written text in a source language to a target language by producing an equivalent written target text that retains the elements of meaning, form and tone.

Transparency/Transparent Interpreting

The principle that during the encounter the interpreter informs all parties of any action he or she takes, including speaking for him- or herself, outside of direct interpreting.⁶

Utterance

A complete unit of speech in spoken language. It is generally but not always bounded by silence.

Video Conference Interpreting

Remote interpreting that makes use of a video camera when one or more of the interpreting parties are not present at the same location. It enables the parties to see and hear each other via a television monitor.

Whispered Simultaneous Interpreting

Interpreting that takes place whereby the interpreter is seated next to one or more LEP/LFP persons and whispers in the target language the content of the speech. Also called "chuchotage".

Working Languages

See Annex II

⁴ National Council on Interpreters in Healthcare (NCIHC). *National Standards of Practice for Interpreters in Healthcare*. September 2005

⁵ American Society of Testing Materials (ASTM)

⁶ National Council on Interpreters in Healthcare (NCIHC). *National Standards of Practice for Interpreters in Healthcare*. September 2005

5. Interpreter's Qualifications

Skills and Competencies

Community Interpreters shall have the following competencies:

Interpreting Competence

Interpreting competence comprises the ability to interpret a message from one language to the other in the applicable mode. It includes the ability to assess and comprehend the original message and render it in the target language without omissions, additions or distortions. It also includes the knowledge/awareness of the interpreter's own role in the interpreting encounter.

Interpreting skills

The interpreter shall:

- Have active listening skills and strive to improve them through self-training.
- Have good memory retention skills.
- Be able to take notes during the interpretation assignment to ensure accuracy of the information given.
- Be able to mentally transpose and verbalize into the target language

Linguistic Competence

Linguistic competence includes the ability to comprehend the source language and apply this knowledge to render the message as accurately as possible in the target language.

Language skills

The interpreter shall:

- Have an in depth knowledge and understanding of his/her working languages and the required range of language registers.
- Have knowledge of subject areas and relevant terminology.

Research and Technical Competence

Research competence includes the ability to efficiently acquire the additional linguistic and specialized knowledge necessary to interpret in specialized cases. Research competence also requires experience in the use of research tools and the ability to develop suitable strategies for the efficient use of the information sources available.⁷

Interpersonal skills

The Interpreter shall:

- Have strong communication skills.
- Be polite, respectful and tactful.
- Be able to relate well to people.
- Have good judgment.

The skills and competencies described above shall be demonstrated through the following:

- a. Post secondary education, preferably a recognized degree of at least three years duration in translation or interpretation or a related field.
- b. Interpreting training/education by a recognized academic institution.
- c. Successful completion of a Language proficiency test (such as CILISAT or ILSAT in Ontario)
- d. Documented experience in the field.

In the event that the above cannot be met, the provider is to:

- Use professionally skilled, competent interpreters who are otherwise qualified by education, training and experience to carry out the assignment successfully.
- Use "on dossier" processes to select the best professional interpreters on file.
- Assign the most qualified interpreter possible based upon the nature of the assignment and the language in question.
- Properly monitor, assess and modify on an ongoing basis the interpreter's status based upon performance.

6. Responsibilities of Clients

The Client shall:

1. Always inform the Interpreting Service Provider (agency or interpreter) of any known risks and provide any advice, protection and safety measures generally available to participants in the interpreted event. The interpreter shall never be forced to enter a situation that poses a risk to his/her health and well being.⁸
2. Respect the Standards of Practice and Ethical Principles⁹ at all times.
3. Provide as much information as possible about the requested assignment such as background and parallel texts and speaker's notes. The information will assist the interpreter in researching the subject and familiarizing him/herself with the subject. Any related documentation, previously translated files or glossaries related to the case are essential to the successful completion of the assignment.

When working with interpreters, the Client should:

1. Book additional time beyond that required in a non-interpreted encounter.
2. Avoid long, complex sentences, the use of slang, idiomatic expressions, highly technical vocabulary or jargon.
3. Speak clearly and at a moderate pace.
4. Talk directly to the LEP/LFP party, not to the interpreter.
5. Never ask the interpreter for his/her opinion.
6. For long assignments, provide breaks at appropriate intervals since accuracy declines with time.
7. Pause frequently to allow the interpreter to render all the information.
8. Be aware of non-verbal communication.
9. Encourage the interpreter to request clarification as required.
10. Provide an adequate working environment.
11. Always attempt to ensure the proper mode of interpreting is used (consecutive or simultaneous).

⁸ American Society of Testing Materials (ASTM)

⁹ LITC Standards of Practice and Ethical Principles

7. Responsibilities of Interpreting Service Providers – ISP

Organizations that contract community interpreters should have documented procedures in place for selecting people in accordance with the National Standard Guide for Community Interpreting Services. Organizations must ensure that the competencies required are maintained and updated.

Interpreting Service Providers coordinate the provision of interpretation services with clients and interpreters.

Responsibilities to the Client

The Interpreting Service Provider shall:

1. Ensure all interpreters hired or contracted are qualified professionals capable of performing the specified task.
2. Disclose the interpreter's qualifications to the client especially if the interpreter available does not meet the requirements for the specific setting.
3. Brief the client on how to work effectively with interpreters.
4. Inform the client promptly if an interpreter is not available in the requested language.
5. Provide the client with a detailed Client-ISP agreement specifying pricing, terms, policies and procedures for interpreting assignments.

Responsibilities to the Interpreter

The Interpreting Service Provider shall:

1. Provide the interpreter with detailed information about the assignment. This includes:
 - a. Requesting context/materials/documentation from the client, as applicable.
 - b. Providing any glossaries or resources available.
 - c. Providing administrative details such as complete address, contact information, etc.
2. Ensure proper working conditions for the interpreter. This includes:
 - a. Promoting an adequate working environment.
 - b. Briefing the client about the interpreter's needs.
 - c. Providing the required number of interpreters or team of interpreters if applicable.
3. Pay within a reasonable timeframe and/or according to established agreement between the parties.
4. Clearly establish and document terms and conditions of the working relationship with interpreters.

8. Role and Responsibilities of Interpreters

The role of the interpreter is to facilitate verbal communication by conveying as faithfully as possible a message between two parties who do not share a common language.

For the purpose of this Guide, “faithfully” is defined as interpretation that preserves the meaning of the message, without omissions, additions or alterations.

The Interpreter shall:

1. Follow the LITP Standards of Practice and Ethical Principles at all times.
2. Accept only those interpreting assignments that he/she is able to perform at the highest professional level.
3. Participate in professional development activities whenever possible.
4. Acquire the proper terminology and enhance his/her knowledge by creating and updating terminology files.
5. Maintain and improve his/her linguistic competencies.
6. The interpreter must be able to understand and convey cultural nuances without assuming the role of advocate or cultural broker.

Responsibilities to the Interpreting Service Provider

The Interpreter shall:

1. Ask for information in advance regarding the nature of his/her assignment in order to be able to research and adequately prepare for it.
2. Properly introduce himself or herself to all parties and explain the role of the interpreter.
3. Strictly comply with scheduled / booked time.
4. Maintain professional appearance and behaviour.
5. Follow the protocols, terms and procedures established / agreed upon with the Interpreting Service Provider.

9. Settings¹⁰

Community interpreters work in a wide variety of settings or domains including:

- Business and industry
- Public agencies and institutions
- Healthcare
- Legal
- Education
- Social services

Type of Event

The type of event refers to the situation in which communication takes place. The event is defined by factors such as the physical location, number of participants and type of discourse. These include:

- Medical appointments
- Legal proceedings
- Press conferences
- Classroom instruction
- Interviews
- Live broadcasts
- Negotiations
- Meetings and assemblies
- Presentations
- Consultations
- Community forums

¹⁰ ASTM F2089

While the LITP Standards of Practice integrates the work of several previously published standards of practice, they differ (significantly) in the expectations for interpreter role boundaries (and the interpreter's responsibility to intervene as needed to remove barriers to communication). Unlike the CHIA, NCIHC, and IMIA standards, the LITP Standards of Practice do not endorse cultural brokering and advocacy. Like the ASTM Standards, the LITP Standards of Practice differs in purpose as it is intended to be a broad guide for interpreting in several settings, and not exclusive to the health care setting.

LITP¹¹ Standards of Practice & Ethical Principles¹²

Foreword

In Ontario, the role of the oral language interpreter has evolved and become more refined over time. Historically interpreters were identified as “cultural interpreters” with a role to bridge “cultural misunderstandings” between service providers and non/limited English speakers. Determining how and when an interpreter should intervene created conflicts for all parties for a variety of reasons. Although cultural differences can exist between individuals who do not share a common language, cultural differences can also exist between individuals who do share a common language. Given the complexity of factors that impact and influence an individual's culture, acting as a “cultural broker/bridge” goes beyond the scope of an interpreter's duty, from the perspective of the LITP Curriculum Development Team. Expecting an interpreter to perform that function, in and of itself, contravenes the ethical principle and standard of practice to remain impartial, and furthermore begs the question of the demonstrated competence of the interpreter to perform that function. Therefore, it should be noted that the LITP Curriculum Development Team recommends that the role of the interpreter focus on the delivery of messages between individuals who do not share a common language rather than “cultural differences/nuance” of the speakers.

Introduction

Standards of practice define the framework from which an oral language interpreter's performance is conducted and measured. Standards of practice guide how a language interpreter will perform his/her role, duties and responsibilities.

Ethical principles focus on the “shoulds” of an interpreter's performance when ethical and other considerations impact an interpreter's ability to adhere to the standards of practice.

Standards of practice and ethical principles are complementary guideposts to equip an interpreter with clear parameters for delivery of quality interpretation service.

The development of and adherence to standards of practice and ethical principles reinforces and supports consistent practice for all interpreters. Standards of practice serve in all areas where criteria for professional performance are needed in making decisions and may be used in making determinations regarding professional misconduct, incompetence or incapacity. Standards of Practice enable service providers, employers and non/limited English speakers requiring the services of an interpreter to recognize what standards of performance can be expected by a competent interpreter. They also assist educators in developing curriculum and in providing appropriate instruction.

In the event that the Standards of Practice set a standard that is higher than an employer's or service provider's policy or procedure, the interpreter should comply with the standard set by the Standards of Practice.

The recommended standards of practice and ethical principles for the LITP integrates the work of Across Languages Translation and Interpretation Service, a London, Ontario based community interpreter service and the American National Council on Interpreting in Healthcare.

There are forty-seven standards of practice interconnected with eight ethical principles:

1. Accuracy and Fidelity
2. Confidentiality
3. Impartiality
4. Respect for Persons
5. Maintaining Role Boundaries
6. Accountability
7. Professionalism
8. Continued Competence

¹¹ Language Interpreting Training Program

¹² These Standards of Practice are reproduced with permission from the Language Interpreter Training Certificate Program of the Ontario Colleges © CON*NECT Strategic Alliances Inc., 180 Dundas St. W., Suite 504, Toronto, ON M5G 1Z8. * The development of the LITC Curriculum was funded by the Ontario Ministry of Citizenship and Immigration.

Standard of Practice

Accuracy and Fidelity

Objective: Preservation of the meaning of the message.

1. The interpreter renders all utterances and written communication faithfully using the same grammatical person as the speaker or writer. The rendition should sound natural in the target language and there should be no distortion of the original message through additions, omissions, or explanation. The idiom, register, style and tone of the speaker is preserved.
2. The interpreter advises all parties that everything said in the encounter will be interpreted. If any party requests that the interpreter refrain from interpreting all utterances, the interpreter is obliged to inform all other parties of the request and seek direction.
3. The interpreter retains English words mixed into the other language, as well as culturally bound terms which have no direct equivalent in English, or which may have more than one meaning. Whenever possible, the interpreter will attempt a translation of that word to provide the listener with an idea of what the word means.

4. The interpreter asks for repetition, rephrasing, or explanation, if anything is unclear. Upon recognizing that the interpreter has misunderstood the communication, he/she identifies the misunderstanding and requests direction from the parties involved.
5. The interpreter ensures that the meaning of gestures, body language, and tone of voice is not lost, by replicating what has been seen or heard by the interpreter.
6. The interpreter uses a mode of interpreting appropriate for the setting. In most interview situations, spoken-language interpreting is done in consecutive mode.
7. The interpreter performs summary interpretation (i.e. some of the elements of the communication are not interpreted) only with the knowledge and consent of all parties.

Ethical Principle

Interpreters strive to render all messages in their entirety accurately, as faithfully as possible and to the best of their ability without addition, distortion, omission or embellishment of the meaning.

添儀容增自信計劃



Look Good Feel Better



Standard of Practice

Confidentiality

Objective: Protection of the privacy of all parties and the confidentiality of information.

8. The interpreter advises all parties that she or he will respect the confidentiality of the encounter. All parties in an interpreted encounter have a right to expect that the interpreter will hold information about them in confidence.
9. The interpreter does not disclose information spoken, seen or written outside of the interpreting situation without the expressed permission of all parties or unless required by law. If disclosing the time and/or place of an encounter may identify the purpose, persons or content, the interpreter shall not disclose such information.
10. The interpreter may, where collaborative work with other professionals is required, be briefed, or participate in, relevant discussions with other interpreters, members of the team involved with the other party, authorized representatives of the interpreting agency and/or the service-providing institution. Anyone receiving information in order to provide interpretation service is ethically bound by the duty of confidentiality.

Ethical Principle

Interpreters will not disclose and will treat as confidential all information learned, either uttered or written in the performance of their professional duties, while adhering to relevant requirements regarding disclosure.

Standard of Practice

Impartiality

Objective: Full communication not impeded by any bias or preference of the interpreter. Avoidance of the perception that the interpreter has a preference or bias towards any party involved in the interpreted encounter.

11. The interpreter remains impartial at all times and informs all parties of the duty to remain impartial.
12. The interpreter declines to interpret when she or he has a personal or any vested interest in the outcome of the encounter.
13. The interpreter declines to interpret when his or her personal or other relationship with any party may affect, or be perceived by any party to affect, impartiality.
14. The interpreter declines to interpret when any situation, factor, or belief exists that represents a real or potential conflict of interest for the interpreter.
15. The interpreter discloses to all parties in the encounter any personal or other relationship that may affect, or be perceived by any party to affect, the interpreter's impartiality.
16. The interpreter informs the interpreter service agency/organization when he or she has a personal or other vested interest in the outcome of the assignment or when any situation, factor, or belief exists that represents a real or potential conflict of interest which will impact an interpreter's ability to interpret everything faithfully and impartially.

Ethical Principle

Interpreters strive to maintain impartiality by showing no preference or bias to any party involved in the interpreted encounter.

Standard of Practice

Respect for Persons

Objective: Respect of parties to the interpreted encounter. Demonstration of an acknowledgement of the inherent dignity of all parties in the interpreted encounter.

17. The interpreter demonstrates respect for all parties.
18. The interpreter promotes direct communication among all parties in the interpreted encounter.
19. The interpreter engages in behaviour that promotes autonomy and personal choice of the individuals involved in the interpreted encounter.

Ethical Principle

Interpreters demonstrate respect towards all parties involved in the interpreted encounter.

Standard of Practice

Maintenance of Role Boundaries

Objective: Protection of professional integrity. Reduction of exposure to liability. Maintenance of emotional well-being and physical safety of interpreter.

20. The interpreter's role is to enable communication between parties, who speak on their own behalf and make their own decisions.
21. The interpreter does not advocate on behalf of any party.
22. The interpreter does not enter into the discussion, give advice or express personal opinions about the matter of the encounter, or show reactions to any of the parties.
23. The interpreter does not filter communication, mediate, or speak on behalf of any party.
24. The interpreter avoids unnecessary contact with the parties. Prior to the encounter, the interpreter may initiate contact to ensure understanding of the language, to confirm details of an appointment, and to convey any information about the encounter needed by the non-English speaker.
25. The interpreter does not perform services other than interpretation services for any party.
26. The interpreter utilizes the least obtrusive mode of interpretation.
27. The interpreter protects her or his own privacy, well-being and safety.

Ethical Principle

Interpreters strive to perform their professional duties within their prescribed role and refrain from personal involvement.

Standard of Practice

Accountability

Objective: Responsibility for the quality of the interpreter's work. Accountability for maintaining role boundaries and standards. Adherence to laws and standards.

28. The interpreter identifies and corrects interpretation errors as soon as possible.
29. The interpreter declines assignments that require knowledge or skills beyond his or her competence.
30. The interpreter informs the parties immediately and requests direction in the course of an encounter, if it becomes apparent to the interpreter that expertise beyond her or his competence is required.
31. The interpreter maintains his or her role, limits and obligations and takes steps to ascertain that all parties understand them.
32. The interpreter conducts her or himself in compliance with legislative requirements and generally accepted standards of the profession.
33. The interpreter maintains transparency. When clarification is necessary, the interpreter says to all parties, "I, the interpreter, need clarification on..."
34. The interpreter brings to the attention of an appropriate person any circumstance or condition that impedes full compliance with any standard in this document, including but not limited to conflict of interest, interpreter fatigue, inability to hear or inadequate knowledge of specialized terminology, and declines to continue any assignment under conditions that make such compliance patently impossible

Ethical Principle

Interpreters are responsible for the quality of interpretation provided and accountable to all parties and the organizations engaging the interpreter's service.

Standard of Practice

Professionalism

Objective: Maintenance of professional conduct and comportment.

35. The interpreter behaves in a manner consistent with the highest professional standards and the protocols and procedures of the interpreter service agency.
36. The interpreter performs her or his duties as unobtrusively as possible.
37. The interpreter completes the assignments she or he has accepted.
38. The interpreter arrives on time at the appointed location of the encounter.
39. The interpreter remains at the appointed location until the encounter ends or until dismissed.
40. The interpreter dresses in appropriate business attire for face-to-face encounters.
41. The interpreter does not conduct personal or other business while on an interpreting assignment.
42. The interpreter creates a working environment conducive to performing interpretation over the telephone.

Ethical Principle

Interpreters at all times act in a professional and ethical manner.

Standard of Practice

Continued Competence

Objective: Achievement of the highest level of competence. Demonstration of certifications, accreditations, training and experience. Maintenance and improvement of skills.

43. The interpreter takes available courses and examinations to obtain accreditation and/or certification.
44. The interpreter maintains and expands skills and knowledge through self-teaching, formal and informal continuing education.
45. The interpreter seeks evaluative feedback and practices self-evaluation concerning performance.
46. The interpreter is prepared to demonstrate her or his certifications, accreditations, training and pertinent experience.
47. The interpreter maintains membership in appropriate professional associations of interpreters and complies with the code of ethics of such associations.

Ethical Principle

Interpreters commit themselves to life long learning in recognition that languages, individuals, and services evolve and change over time and a competent interpreter strives to maintain the delivery of quality interpretation.

Some useful
telephone numbers

Algunos números de
teléfono útiles



Working Languages

<p>Active Languages</p>	<p>Language A: Language in which the interpreter has native proficiency in speaking and listening. Perfect command of the language. Source and target language(s)</p> <p>Language B: A language other than native in which the interpreter has full functional proficiency in speaking and listening. Perfect command of the language.</p>	<p>Source and target language(s)</p>
<p>Passive Language</p>	<p>Language C: A language other than native, in which the interpreter has full functional proficiency in listening. Source language(s)</p>	<p>Source language(s)</p>

Professional Associations

Translators, Terminologists, Conference Interpreters and Court Interpreters.

In Canada, the Canadian Translators, Terminologists and Interpreters Council (CTTIC) is recognized as the national body representing professional translators, interpreters and terminologists.

The titles of Certified Translator, Certified Conference Interpreter, Certified Court Interpreter and Certified Terminologist are now protected by law in four Canadian provinces:

- British Columbia – Society of Translators and Interpreters of British Columbia (STIBC)
- New Brunswick – Corporation of Translators, Terminologists and Interpreters of New Brunswick (CTINB)
- Ontario – Association of Translators and Interpreters of Ontario (ATIO)
- Quebec – Ordre des traducteurs, terminologues et interprètes agréés du Québec (OTTIAQ)¹⁴

CTTIC prepares, administers and marks a nationally standardized exam (with the exception of Quebec, where the OTTIAQ has a different certification process) to ensure consistency; however, the certification of professions is within provincial jurisdiction. Certification is granted by a recognized provincial association, whether or not protected by law.¹⁵

CTTIC has no individual memberships. Since professional organization is a matter of provincial and territorial jurisdiction, CTTIC admits only provincial and territorial bodies, variously called an association, order, society or corporation. Its total membership consists of the ten¹⁶ member bodies which, in turn, represent their own members.¹⁷

CTTIC Member Organizations

Association of Translators and Interpreters of Alberta (ATIA)

Society of Translators and Interpreters of British Columbia (STIBC)

Association of Translators, terminologists and Interpreters of Manitoba (ATIM)

Corporation of Translators, Terminologists and Interpreters of New Brunswick (CTINB)

Association of Translators and Interpreters of Nova Scotia (ATINS)

Nunavut Interpreter / Translator Society Nunattinni Katujjiqatigiit Tusaajinut (NKT)

Association of Translators and Interpreters of Ontario (ATIO)

Ordre des traducteurs, terminologues et interprètes agréés du Québec (OTTIAQ)

Association of Translators and Interpreters of Saskatchewan (ATIS)

Signed Language Interpreters

In Canada, the Association of Visual Language Interpreters of Canada (AVLIC) is recognized as the national body representing professional signed language interpreters.

The nature of this document is to primarily address spoken language interpreting that is performed in a community context. Many of the issues in this document are issues of common interest to AVLIC, and are shared problems among spoken and signed language interpreters. While the languages may differ, there is a common desire for increased standards and practices based on evidence and effective strategies. By working together, spoken and signed language interpreters can achieve the progress they both desire.

Signed Language Interpreters in Canada are represented at the national level by AVLIC. AVLIC was founded in the late 1970's and has played an active role in shaping the profession of interpreting. AVLIC has its own Code of Ethics and Guidelines for Professional Conduct and a Canadian Evaluation System that certifies ASL/English interpreters.

There are more than 100 natural signed languages used throughout the world.

Interpreters working between a spoken language and a signed language may use simultaneous or consecutive interpreting as dictated by the interaction and the discourse.

For specifics about AVLIC, see www.avlic.ca

¹⁴ In Quebec the only designation for conference and court interpreters is « Certified Interpreter ».

¹⁵ OTTIAQ does not take part in the CTTIC standardized exam. The certification is on dossier.

¹⁶ Nine active

¹⁷ www.cttic.org

Healthcare Interpreting

Healthcare interpreting is a specialized area of the interpretation practice. The healthcare interpreter's role is to facilitate clear and accurate communication between patients and healthcare providers in a multilingual healthcare environment.

Healthcare interpreting is a very demanding intellectual and emotional exercise whose practitioners require training, knowledge of medical terminology and a good understanding of clinical practices and procedures as well as practical knowledge of the healthcare system.

Healthcare interpreters work at hospitals, clinics, community healthcare centres, emergency rooms, mental health facilities, long term care facilities and other healthcare settings. They interpret in a wide variety of situations; these range from in-patient care, to psychiatric evaluations, to organ transplants.

There is a need for common standards for healthcare interpreters across Canada to ensure that the public receives interpretation services of a consistent quality in the healthcare system.

Poor communication as the result of language barriers can leave providers and organizations open to legal challenges. While interpretation services cost money, a lack of appropriate interpretation can lead to inefficient use of resources and increased cost to the healthcare system. Among other things, this translates into unnecessary medical tests, repeat appointments, poor compliance with treatment and no-shows. It may also result in failure to protect patient confidentiality, to obtain informed consent, or to properly comprehend the nature of the ailment. Adverse events can also occur as a result of a language barrier.

Research indicates that language barriers affect health outcomes for patients because of:

- Misdiagnosis
- Wrong referrals
- Wrong treatment
- Longer hospital stays

The lack of qualified interpreters in healthcare settings is a barrier in providing equal access to healthcare services.

The use of untrained interpreters poses risks for both the patient and the healthcare provider. The error rate of untrained interpreters (including family and friends) is sufficiently high as to make their use more dangerous in some circumstances than having no interpreter at all¹⁸. This is because it lends a false sense of security to both the healthcare provider and client that accurate communication is actually taking place. Family and friends also try to minimize the patient's pain and discomfort, and as a result they try to supply answers instead of letting the patient speak. The use of a child or minor as an interpreter is absolutely inappropriate and should never happen.

The healthcare provider should ensure that the services of a professional interpreter are available, if he/she is unable to communicate with the LEP/LFP patient.

Consecutive is the form most commonly utilized in the day to day healthcare encounters. Simultaneous is used in cases where it may be inappropriate to interrupt the session such as mental health encounters or emotionally charged situations. The simultaneous mode is also used in the whispering mode for group meetings and educational sessions.

Healthcare interpreters are at times asked to perform sight translations. Sight translation implies a very similar mental process to the one used during simultaneous

¹⁸ Flores, Glenn. Et al. Errors in Medical Interpretation and Their Potential Clinical Consequences in Pediatric Encounters. Research has demonstrated the average medical encounter yielded 31 interpretation errors. The most common error type was omission (52%), followed by false fluency (16%), substitution (13%), editorialization (10%), and addition (8%). Sixty-three percent of all errors had potential clinical consequences, with a mean of 19 per encounter. Errors committed by ad hoc interpreters were significantly more likely to be errors of potential clinical consequence than those committed by hospital interpreters (77% vs 53%). Errors of clinical consequence included: 1) omitting questions about drug allergies; 2) omitting instructions on the dose, frequency, and duration of antibiotics and rehydration fluids; 3) adding that hydrocortisone cream must be applied to the entire body, instead of only to facial rash; 4) instructing a mother not to answer personal questions; 5) omitting that a child was already swabbed for a stool culture; and 6) instructing a mother to put amoxicillin in both ears for treatment of otitis media.

interpreting; however, the source material is in written instead of oral form. For a more accurate and efficient sight translation, the health care provider should allow the interpreter to read the entire document before beginning the oral translation.

Sight translation should only be performed for simple documents. The translation of specialized healthcare documents requires a certain set of skills from a competent translator that the interpreter may not necessarily possess. This type of texts usually requires a lengthy research process and specialized translation tools.

Interpreters should familiarize themselves with the most common forms used in healthcare settings such as: consent forms, healthcare records, patient instructions and follow-up procedures.

The healthcare organization is responsible for ensuring that any bilingual healthcare professional requested to do interpretation, has the linguistic competence and meets all the expectations set for a professional interpreter.

As an integral member of the healthcare team, the healthcare interpreter should be treated and respected in the same professional manner as any other healthcare service provider. As such, the interpreter may be found liable for errors, faults, negligence or omissions committed while interpreting.

The healthcare organization should ensure that the interpreter, as with any other healthcare provider, has access to and is provided with the information and necessary protective gear when dealing with infectious diseases.

The healthcare provider is responsible for obtaining informed consent. The interpreter cannot be asked to obtain informed consent and should not be asked to serve as witness to the actual signed document. When consent is obtained with the assistance of an interpreter, the participation of the interpreter should be documented.¹⁹



¹⁹ Ibid

Legal Interpreting

Legal interpreting is a specialized area of the interpretation practice. Court interpreters perform a fundamental role in Canada's courts by facilitating access to justice for all persons, regardless of language barriers.

Even though Court Interpreting dates back to the Spanish Colonization of the Americas in the early 1500s and the Charter of the International Military Tribunal included a clause related to language access as an assurance to a Fair Trial during the Nuremberg Trials in 1945–1946; it was only in the late 1970s that, for the first time, the profession started to regulate the quality of interpreting.²⁰

A court interpreter is a “language conduit” whose participation allows an individual who does not speak or understand English or French to participate meaningfully in a judicial proceeding. The interpreter has a two-fold duty:

1. To ensure that the proceedings in English/French reflect precisely what was said to and by a Limited English/French Proficiency speaking person LEP/LFP.
2. To place the Limited English/French Proficiency speaking person LEP/LFP on an equal footing with those who speak and understand English/French.

In Canada, Court Interpreters interpret for people who come before the courts who cannot communicate effectively in English or French. These include defendants and witnesses in criminal courts as well as litigants and witnesses in family and civil courts. Interpreters also work in out-of-court settings such public and private proceedings as attorney-client meetings, depositions, examinations, witness preparation sessions, and interviews with court support personnel (e.g., probation), administrative proceedings (immigration and refugee cases, workers' compensation hearings, parole boards, etc.).

Despite the widely international recognized right to an interpreter in criminal cases²¹, some institutions do not

always specify the competencies necessary to work as a Court Interpreter, nor have the capacity to identify qualified interpreters.

Court interpretation is a demanding intellectual exercise, whose practitioners require extensive training and a finely-honed ethical sense in addition to a thorough knowledge of languages. The legal interpreter requires a native-like mastery of both the language of the court and a second language; a wide general knowledge and extensive vocabulary ranging from formal legal language to colloquialisms and slang; mental and verbal agility; the ability to deal with lawyers, court personnel, the public, etc.; specialized training and experience.

Court Interpreters shall abide at all times with the Code of Ethics²², conduct themselves in a manner consistent with the dignity of the court and be as unobtrusive as possible.

The Court Interpreter requires a deep understanding of the terminology and procedures used in court. Interpreters may be knowledgeable about the civil-law (Roman law) tradition and may experience a challenge understanding common-law procedures.²³ Canada has a very unique situation where Quebec has a hybrid legal system. In Quebec, private law follows the civil-law tradition while matters of public law follow common law tradition making matters even more complicated for the Court Interpreter. Understanding the various stages of the proceedings is crucial for an accurate interpretation.

In contrast to interpreters working in other fields, the Court Interpreter, is not there to make sure the LEP/LFP person understands, but to give him/her the same chance as any other person who speaks the language of the Court. Therefore, changing the register, or simplifying technical matter for the benefit of the defendant or witness may distort and hamper the legal process.

The courts use different modes of interpreting: consecutive, whispered (chuchotage) and simultaneous. Before

²⁰ Sweden was among the first European Countries to regulate the profession by introducing an interpretation exam in 1976. The US Federal Court introduced the Federal Court Interpreters Act in 1978 to regulate Spanish interpreters. In Canada the Society of Translators and Interpreters of British Columbia – STIBC developed the Certification exam in the early 1980's that was later adopted by the Canadian Translators, Terminologists and Interpreters Council – CTTIC.

²¹ United Nations International Covenant on Civil and Political Rights. 1966. Article 14. #3. American Convention on Human Rights. 1969. Article 8, paragraph 2. Canadian Charter of Rights and Freedoms. 1982, Legal Rights, #14.

²² The Committee for Legal Translators and Court Interpreters of the International Federation of Translators (FIT) adopted the “Best Practices in Court Interpreting” and the “Code of Conduct for Court Interpreters” at the FIT World Congress in 1999. Professional Associations have their own Code of Ethics for their members.

²³ Civil-law is referred here not to denote the litigation of private rights as opposed to criminal law but as the legal framework/tradition.

starting the session, the interpreter needs to be informed of the mode of interpreting expected and any special logistics for the case.

“In the consecutive mode, a skilled court interpreter cannot be expected to retain more than 100 words (one or two sentences) before intervening to interpret. The ability to coordinate speaker turn-taking is therefore an essential skill that Court Interpreters must master”.²⁴

“Following the practice of conference interpreting, lengthy proceedings should be interpreted by pairs of interpreters who spell each other at appropriate intervals. Even skilled simultaneous interpreters make errors if they work under inadequate conditions. The interpreter needs to be able to see and hear the speaker clearly and the speaker’s rate of speech must be reasonable”.²⁵

Legal interpreters are frequently asked to perform sight translation. Sight translation implies a very similar mental process to the one used during simultaneous interpretation but the source material is written instead of oral. For a more accurate and efficient sight translation, the interpreter should be allowed to read the entire document before beginning the oral translation.

Sight translation should only be performed for simple documents. The translation of specialized legal

documents requires certain set of skills from a competent translator that the interpreter may not necessarily possess. This type of text usually requires a lengthy research process and specialized translation tools.

Legal interpreters are placed under oath for all sworn proceedings and thus are subject to the penalties of perjury. The words spoken by a witness are sworn to be the exact words spoken by that witness; therefore it is testimony. The words spoken by judges, lawyers, district attorneys, officers of the court, peace officers to a witness are all governed by laws and rules of procedure.

As with other areas of interpreting, the consequence of errors can lead to serious ramifications including a mistrial or improperly influenced verdict. Cases can be appealed and verdicts overturned because of faulty interpretation.

In certain Canadian provinces there is a legally-protected title of Certified Court Interpreter. The Canadian Translators, Terminologists and Interpreters Council – CTTIC through its provincial/territorial organizations is the only professional association in Canada empowered by law to confer this title. (See Annex III)

²⁴ Mikkelson, Holly. Introduction to Court Interpreting. T.J. International Limited. Great Britain 2000

²⁵ Mikkelson, Holly. Introduction to Court Interpreting. T.J. International Limited. Great Britain 2000

Publications

Angelelli, Claudia. Healthcare Interpreting Education: Are We Putting the Cart Before the Horse? *The ATA Chronicle* November / December 2005

Association of American Medical Colleges AAMC. *Guidelines for Use of Medical Interpreter Services* Washington DC

American Society for Testing and Materials ASTM F2089-01 *Standard Guide for Language Interpretation Services* 2007

American Society for Testing and Materials ASTM F 2575-06 *Standard Guide for Quality Assurance in Translation* 2006

AUSIT. *Code of Ethics for Interpreters and Translators*. Sydney: Australian Institute of Interpreters and Translators. 1996

Austrian Standards Institute. ONORM D 1202. *Translation and interpretation services – Interpretation Services – Requirements for the service and the provision of the service*. Austria 2002 (German)

Austrian Standards Institute. ONORM D 1203 *Translation and interpretation services – Interpretation Services – Interpretation contracts*. Austria 2002 (German)

Bowen, S. and Kaufert, M. *Measuring the 'Costs': Using Case Studies in Evaluation of Health Interpreter Services* Massachusetts Medical Interpreters Association News, 3. Fall 2000

California Healthcare Interpreting Association – CHIA California Standards for Healthcare Interpreters. *Ethical Principles, Protocols, and Guidance on Roles & Intervention* Sacramento, California. 2002

Clark, C. *The translator's dilemma: Communicating medical terminology*. *ATA Chronicle* 2000; March:14-17.

Comité européen de normalisation CEN. EN 15038 *European Standard. Translation Services – Service requirements*

Gentile, Adolfo. *Working with Professional Interpreters*. In *Cross-Cultural Communication in Medical Encounters*. Ed. A. Pauwels. Melbourne, Centre for Community Languages in the Professions, Monash University. 1991

Flores G, Abreu M, Schwartz I, Hill M. *The importance of language and culture in paediatric care: Case studies from the Latino community*. *Journal Paediatrics* 2000; 137: 842-848.

Flores, G. *The Impact of Medical Interpreter Services on the Quality of Healthcare: A Systematic Review*, *Medical Care Research and Review*, 62 (3), 255-299. 2005

Flores, Glenn MD*, M. Barton Laws, PhD||, Sandra J. Mayo, EdM||, Barry Zuckerman, MD, Milagros Abreu, MD*, Leonardo Medina, MD and Eric J. Hardt, MD *Errors in Medical Interpretation and Their Potential Clinical Consequences in Paediatric Encounters*

Gile, Daniel. *Basic Concepts and Models for Interpreter and Translator Training*. John Benjamin's Publishing Company, Philadelphia. 1995

Hayes RP, Baker DW. *Methodological problems in comparing English-speaking and Spanish-speaking patients' satisfaction with interpersonal aspects of care*. *Med Care* 1998; 36(2):230-236.

Healthcare Interpretation Network. *Quality Healthcare for Linguistically Diverse Populations*. Conference proceedings. March 22, 2004

Healthcare Interpretation Network. *A Handbook for Trainers: Language Interpreting in the Healthcare Sector*. Edited by: Abraham, Diana; Cabral, Nelson; Tancredi, Anita. HIN October 2004

Kurz, Ingrid. *Conference Interpretation: Expectations of Different User Groups*. In *The Interpreting Studies Reader*. Eds. Franz Pöchhacker and Miriam Shlesinger. London & New York: Routledge, pp.312-324. 2002

Kurz, Ingrid. Conference Interpreting: Job Satisfaction, Occupational Prestige and Desirability. In Translation, a Creative Profession. Proceedings of the XIIIth World Congress of FIT, Belgrade 1990. Ed. Mladen Jovanovic. Belgrade: Prevodilac, pp.363-376. 1991

Language Interpreter Training Certificate Program of the Ontario Colleges © CON*NECT Strategic Alliances Inc.

Massachusetts Medical Interpreters Association. 1995 and Education Development Centre, Inc. 1995. Medical Interpreting Standards of Practice.

Mikkelson, Holly. Introduction to Court Interpreting. T.J. International Limited. Great Britain 2000

Mikkelson, Holly. Interpreter Ethics: A Review of the Traditional and Electronic Literature. *Interpreting* 5:1, pp.49-56. 2000

Mikkelson, Holly. The Professionalization of Community Interpreters. *Global Vision: Proceedings of the 37th Annual Conference of the American Translators Association*, 1996. Ed. M. Jérôme-O'Keeffe. Alexandria, Virginia: American Translators Association, pp.77-89.

Mikkelson, Holly. The Court Interpreter as Guarantor of Defendant Rights Acebo, California, USA. www.acebo.com

Multi-Languages Corporation. Interpretation and Translation Management System. 1997 revised June 2007. www.multi-languages.com

National Accreditation Authority for Translators and Interpreters NAATI. Ethics of Interpreting and Translation – A Guide to Professional Conduct in Australia.

National Association of Judiciary Interpreters and Translators. NAJIT. Code of Ethics and Professional Responsibilities

NAATI: Role and Functions. [NAATI: National Accreditation Authority for Translators and Interpreters, Australia]. In *Translation and Interpreting: Bridging East and West. Selected Conference Papers. Vol. 8.* Ed. Richard K. Seymour and C.C. Liu. Hawaii: University of Hawaii Press, pp.23-32.

National Council on Interpreters in Healthcare (NCIHC). National Standards of Practice for Interpreters in Healthcare. September 2005.

NRCTI (National Resource Center for Translation and Interpretation) Outreach Paper. Washington, D.C.: Georgetown University

Nolan, James. *Interpretation Techniques*. Multilingual Matters Ltd. Great Britain 2005

Pöchhacker, Franz *Introducing Interpreting Studies* Routledge. London 2004

Pöchhacker, Franz Miriam Shlesinger (Edited by). *The Interpreting Studies Reader* Routledge. London 2002

Roat CE. Healthcare interpreting – an emerging discipline. *ATA Chronicle* 2000 March:18-21.

Roat CE. Certifying medical interpreters: Some lessons from Washington state. *ATA Chronicle* 1999 May: 23-26.

Strengthening Access to Primary Healthcare (SAPHC). Literature Review: Examining language barriers and interpreter services in Canada's healthcare sector

Wadensjo, Cecilia. *Interpreting As Interaction* Longman. England 2005

Websites

Asociación Profesional Española de Traductores e Intérpretes
www.apeti.org.es/html/ic_info.htm

Association de l'industrie de la langue/Language Industry Association – AILIA
www.ailia.ca

Asociación española de normalización y certificación – AENOR
www.aenor.es/desarrollo/inicio/home/home.asp?cambioidioma=s&pag=0

Association of Translators and Interpreters of Ontario – ATIO
www.atio.on.ca

Association Internationale des Interprètes de Conférence – AIIC
www.aiic.net

Australian Institute of Interpreters and Translators – AUSIT
www.ausit.org/ethics

Bow Valley College
www.bowvalleycollege.ca/courses_programs/continuing_ed/interpreting.htm

California Healthcare Interpreting Association – CHIA
cms.chiaonline.org

CHOATE, Denise Look. Labour Issues and Interpreters in the California Trial Courts: An Exchange. *Proteus* 8:3&4. 1999
www.najit.org/proteus/v8n3-4/exchange_v8n3-4.htm

Colegio mexicano de intérpretes de conferencia CMIC
www.interpretacion.org/index.php?option=com_content&task=view&id=29&Itemid=73

Cross Cultural Communications
www.culturecrossroads.net/resources.htm#code

Cross Cultural Healthcare Program. Bridging the Gap: A Basic Training for Medical Interpreters. Seattle, Washington. 1996.
www.xculture.org/interpreter/overview/ethics.html

Diversity Rx.
www.diversityrx.org/html/MOIP.htm

Healthcare Interpretation Network – HIN
www.healthcareinterpretationnetwork.ca

International Association of Conference Interpreters – AIIC
www.aiic.net/ViewPage.cfm/article24.htm

International Association for Translation and Intercultural Studies – IATIS
www.iatis.org/index.php

Institute of Linguists. Code of Conduct of the National Register of Public Service Interpreters. United Kingdom. 1995.
www.nrpsi.co.uk

International Medical Interpreters Association
www.imiaweb.org

Mirta Vidal Orrantia Interpreting and Translating Institute
www.orgsites.com/ny/mvoiti/

Michigan University Interpreter Services
www.mgh.harvard.edu/interpreters/afr.asp

National Association of Judiciary Interpreters and Translators – NAJIT
www.najit.org/ethics.html

National Accreditation Authority for Translators and Interpreters – NAATI
www.naati.com.au/

National Council on Interpreting in Healthcare – NCIHC
www.ncihc.org/

Registry for Interpreters for the Deaf. Code of Ethics
www.rid.org/coe03.pdf

The Critical Link
www.criticallink.org/English/index2.htm

Utah Code of Ethics
www.aslterps.utah.gov/policy_code.jsp

Vancouver Community College
www.continuinged.vcc.ca/interpreting/index.htm

