

REEDLEY COLLEGE
HEALTH 16 (4 UNITS)
HEALTH CARE INTERPRETATION – FIELD WORK
COURSE SYLLABUS

Fall 2012

Schedule No. 55691

Thursday: 6-7:50, Room Soc. 32

Field work arranged 6 hours per week with proper documentation.

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COURSE DESCRIPTION: This course is taken concurrently with Health 15 and provides practicing skills in the field or work site. A requirement of 6 hours per week is needed to fulfill the requirements of this course. This may mean at least 30-35 encounters or 50 hours of lab time must be documented. Students must submit necessary paper work to document time spent practicing their interpreting skills, and must be handed in on a weekly basis.

COURSE OBJECTIVES: At the completion of this course students will be able to:

- Discuss and demonstrate competence in elements of workplace, culture, and professionalism (i.e. management, reporting and accountability, maintaining personal and professional boundaries).
- Apply conflict management skills in the work setting
- Perform field assignments of interpreter competencies in a field work setting (i.e. observe and conduct pre/post sessions, describe roles and scope of practice of health team members, utilize appropriate communication skills).
- Develop and demonstrate good public speaking skills by giving presentations in class.
- Conduct significant interpreting encounters in health care settings.

COURSE MATERIALS: Those used in Health 14 and 15, plus CHIA Standards of Practice.

METHODOLOGY: Students will be expected to turn in proper documentation for field experience and do any assigned homework for Wednesday lecture classes. Case presentation is a KEY factor in Health 16.

ATTENDANCE: Same rules apply as with syllabus for Health 15.

EVALUATION:

In class:

- **Case Presentation** –50%
Satisfactory rating on the Case Presentation – role play/simulation
- **Quizzes, Homework,** – 10% (note: 50% deduction if late)
- **Completion of Self-Evaluation** – 5%
Based on standard of practice documentation
- **Internship/Field Work** - 35%
 1. Documentation of internship interpretation encounters (15%)
(Preparation checklist, Agreement, Time sheet)
 2. Satisfactory rating from internship site supervisor (15%)
 3. Student self-evaluation of internship (5%)

GRADING POLICY:

Grade Distribution	
A= Excellent	90-100%
B= Above Average	80-89%
C= Average	70-79%
D= Below Average	60-69%
F= Failure	below 60%

CASE PRESENTATION – Select a cast of characters using your classmates (doctor, client, and yourself as the interpreter. A script will be given to the doctor and client to read. You as the interpreter (without the script) will interpret what they are saying. This scenario must be at least

5-10 minutes in length. You must sign up on a specific day for your presentations. A list of dates will be provided by the instructor.

JOURNAL AND DOCUMENTATION – The student will keep a journal and document all health care related interpretations encounters as proof of internship. **Methodology** will be discussed in class.

OVERALL INTERNSHIP OBJECTIVES

- **SKILL DEVELOPMENT** – Apply what you have learned in the classroom. Learn to work as part of a company team. Learn and improve specific skills (interpretation, writing, verbal, and computers).
- **BROADER KNOWLEDGE** – Gain self-confidence and interpersonal relationships not offered in regular classroom situations. Develop a better understanding of the flow of medical care and work as an interpreter.
- **PERSONAL DEVELOPMENT** – Develop values, ethics, assertiveness and decision-making abilities. **Know when not to take an assignment.**

INTERNSHIP REQUIREMENTS: The student is required to provide 30-35 or more significant interpretation encounters within one semester in his/her assigned agency. In addition he/she is required to complete classroom activities/consultation with the instructor or coach. Significant interpretation encounters involve providing medical related interpretations in person and a minimum of 10-15 minutes per encounter.

EVALUATE THE SUCCESS OF THE INTERNSHIP:

- Evaluation of student by site supervisor. The site supervisor determines if the students met the objective and also the quality of an intern's work. Some assessment of work attitude is important along with suggestions for improvement.
- Self-evaluation of student. It is important for students to reflect on the learning experience in a structured way and be able to identify areas of strengths and opportunities for improvements.
- Final Evaluation of student by the INSTRUCTOR. The final evaluation and awarding of credit to the student will be based on the contacts the instructor has had during internship and on the final evaluation by the supervisor and the student. The student will keep a journal and document all health care related interpretation encounters as proof of internship.

GUIDELINES: At the end of the internship, each student's file needs signatures for each evaluation form from the:

1. Site supervisor

- 2. Student
- 3. Instructor

INTERNSHIP LEARNING OBJECTIVES: Achieve a rating of “3” or higher on skills outlined in the Medical Interpreting Standards of Practice Manual. Final performance evaluation will be based on experiences gained at internship site, as well as in-class simulations and exams.

Students will demonstrate the following competencies.

Duty A: Interpretation

- A-1 Introduce self and explain role.
- A-2 Manage the spatial configuration of patient-provider interpreter to maximize ease and directness of communication
- A-3 Maintain the linguistic register and style of the speaker
- A-4 Address the “comfort needs” of the patient in relation to the interpreter with regard to factors such as age, gender, and other potential areas of discomfort.
- A-5 Select appropriate mode of interpretations (consecutive, simultaneous; first or third person).
- A-6 Accurately transmit information between patient and provider.
- A-7 Encourages direct communication between patient and provider.
- A-8 Ensures that the listener understands the message.
- A-9 Ensures that the interpreter understands the message to be transmitted.
- A-10 Manages the flow of communication in order to preserve accuracy and completeness, and to build rapport between provider and patient.
- A-11 Manage the dynamics of the triad
- A-12 Manage personal internal conflict
- A-13 Manage conflict between provider and patient
- A-14 Do a self-check on accuracy of interpretation and corrects own mistakes.
- A-15 Assist the provider with interview closure activities.
- A-16 Ensures that concerns raised during or after an interview are addressed and referred to the appropriate resources.
- A-17 Completes appropriate documentation of the interpreter’s work.

A-18 Follows up (outside the triadic encounter) as necessary.

Duty B: Cultural Interface

B-1 Uses culturally appropriate behavior.

B-2 Recognizes and addresses instances that require intercultural inquiry to ensure accurate and complete understanding.

Duty C: Ethical Behavior

C-1 Maintains confidentiality

C-2 Interprets accurately and completely

C-3 Maintains impartiality

C-4 Respects patient's privacy

C-5 Maintains professional distance

C-6 Maintains professional integrity

C-7 Deals with discrimination

The above mentioned are Medical Interpreting Standards of Practice, MMIA, & EDC, Inc. 10/95 pgs. 9-36.

Student's Signature

Print Name

Date

Site Supervisor's Signature

Print Name

Date