

KENT STATE UNIVERSITY CERTIFICATION OF CURRICULUM PROPOSAL

Preparation Date **6-Oct-19** Curriculum Bulletin _____

Effective Date **Fall 2020** Approved by EPC _____

Department **Lifespan Development and Educational Sciences**
 College **EH - Education, Health and Human Services**
 Degree **MS - Master of Science**
 Program Name **Healthcare Interpreting** Program Banner Code **tbd**
 Concentration(s) _____ Concentration(s) Banner Code(s) _____
 Proposal **Establish program**

Description of proposal:

The purpose of this proposal is to submit a Program Development Plan for a new M.S. Healthcare Interpreting major administrated by the ASL/English Interpreting program area.

Does proposed revision change program's total credit hours? Yes No

Current total credit hours: **30** Proposed total credit hours **30**

Describe impact on other programs, policies or procedures (e.g., duplication issues; enrollment and staffing considerations; need; audience; prerequisites; teacher education licensure):

There is a need for advanced training for healthcare (medical and mental health) sign language interpreters. Enrollment will need to be considered as this program is cohorted. Staffing will need to be considered as enrollment grows and will be addressed in the full proposal. This program does not lead to licensure. There are no duplication issues.

Units consulted (other departments, programs or campuses affected by this proposal):

The College of Nursing

REQUIRED ENDORSEMENTS

H. Bellman-Jenkins 11 / 19 / 19
 Department Chair / School Director

S. _ / _ / _
 Campus Dean (for Regional Campuses proposals)

S. Mitchell 12 / 10 / 19
 College Dean (or designee)

Cynthia Stelling 1 / 10 / 20
 Dean of Graduate Studies (for graduate proposals)

 Provost (or designee) _ / _ / _

Healthcare Interpreting – Master of Science Program Development Plan

1. Designation of the new degree program, rationale for that designation, definition of the focus of the program and a brief description of its disciplinary purpose and significance.

The Master of Science in Healthcare Interpreting will prepare students as medically knowledgeable practitioners capable of working in collaboration with a variety of healthcare professionals as part of a treatment team. Graduates will be able to provide ASL/English interpreting expertise in clinical settings, function as coordinators of interpreting services for healthcare systems, and provide assessments of interpreting candidates for healthcare settings. Students will be prepared to make immediate and ethical decisions based on best practice standards and professional tenets. During the program, students will collaborate with medical professionals, language experts who are Deaf and use American Sign Language, and nationally certified interpreters with expertise in healthcare interpreting.

Traditional interpreter training programs grant a generalist degree, which allows interpreters to work in a variety of settings, but graduates of generalist programs lack the specialized training often required and expected in high stakes settings. Medical professionals, second language users, and interpreters all recognize the precariousness of limited schema and knowledge when precise and complex language transactions are taking place. Both medical and legal professionals are seeking avenues to address the known inequities for second language speakers in these stress-filled settings. For example, the Ohio Supreme Court has begun a program to specially train interpreters for legal settings. However, for interpreters who primarily work or have a desire to specialize in medical interpreting, there is currently only one program in the country offering advanced training.

This master's program will be a combined effort by medical and interpreting professionals to teach medical content and interpreting processes. As this will be an online program, students will be required to initiate and foster a collaborative relationship with local medical facilities. Students will be expected to become familiar with their local facilities' practice capabilities, medical technologies, and policies. The purpose of developing these collaborations is to provide students with hands-on opportunities to visit their local facilities, interview local practitioners, and develop opportunities for sharing information and/or advocacy.

The faculty envision this master's program being offered initially to English/ASL interpreters. However, it is the intention of the ASEI faculty and the collaborating medical system to eventually add other languages. This presents minimal logistic issues as the medical information and ethical standards are the same irrespective of language, so these aspects of the program can be offered jointly. Each language group could then have their own instructors for the interpreting practice sections. Medical system administrators find this aspect particularly appealing as their interpreting service provision dilemmas are similar across languages.

2. Description of the proposed curriculum including identification of any specializations intended to appear on the student transcript (see Section IV).

This is a 15-month accelerated online master's program. The healthcare interpreting masters will enlist healthcare professionals to fully examine designated body systems, relevant disorders/diseases, treatments and medications commonly used, and the technologies applicable to specific diagnoses and treatments. This information will help students prepare for the national Certificate of Healthcare Interpreting (CHI). Deaf experts will model the use of ASL linguistic features and syntax needed to translate medical information that is linguistically and culturally accessible to deaf patients. Students will

investigate ethical and legal constraints, the impact of knowledge gaps of medical information for patients who are deaf, and current research. Nationally certified interpreters with significant medical interpreting experience will guide students in selecting and producing dynamically equivalent interpretations of the medical information.

Students will also engage in discussions with medical professionals regarding language and cultural disparities frequently encountered in medical appointments. Together they will consider ethical values and decision-making processes from diverse perspectives and discuss what situational factors impinge upon these processes. Current research recommendations for practice encourage medical professionals to view interpreters as active members of the treatment team. Students will examine various practice approaches from a neutral facilitator of communication to team participation from a social justice perspective.

In the final two semesters, the capstone project will have three parts.

- 1. The section has two options for students:

 - a. An in-depth research of a selected and approved diagnosis which will include a literature review, interviews, and visual aids to assist in their presentation*
 - b. An original research project**
- 2. A spontaneous interpretation of a medical interview*
- 3. Complete a diagnostic assessment of an interpretation performed by an undergraduate student in the ASEI Medical Interpreting class.*

PROGRAM REQUIREMENTS (30 credits)			
Course		Title	Credits
ASEI	6XXX1	Body Systems 1	3
ASEI	6XXX2	Interpreting: Body Systems 1	3
ASEI	6XXX3	Interfacing with Healthcare Systems	3
ASEI	6XXX4	Body Systems 2	3
ASEI	6XXX5	Interpreting: Body Systems 2	3
EVAL	65501	Statistics	3
ASEI	6XXX6	Mental Health Interpreting	3
ASEI	6XXX7	Ethical Decision-Making & Reflective Practice	3
ASEI	6XXX8	Capstone Experience I	3
ASEI	6XXX9	Capstone experience II	3
TOTAL			30

3. Description of a required culminating, or integrated learning, experience.

Examples of suitable culminating experiences include, but are not limited to the following: preparation of a thesis, dissertation or other creative written work; capstone or exit projects, which may be applied in nature and not necessarily involve research; comprehensive examinations; supervised field experiences, or any other integrated learning experience. With proper planning, the culminating experience may be integrated within coursework required for the degree.

The capstone project will consist of three parts take two semesters to complete. Students will have two options. In the first, they can select a diagnosis and conduct an extensive literature review, collaborate with their local medical facilities to interviews with medical professionals. Students gather videos and visual aids to assist other members of the cohort to have visual access to diagnostic and treatment technologies. This visual aspect is critical for interpreters to have in order to accurately interpret the

information. Students will prepare a paper and a final presentation in ASL to be shared with the entire cohort. The second option is to conduct original research and present their findings in a paper and to the cohort in ASL.

The second part of the final presentation will be a live interpretation produced by each student on a medical or mental health diagnosis and interview different than the one they researched.

A third section of this capstone will be for the master's candidates to complete an assessment of an interpreted piece performed by an ASL/English undergraduate student in the Medical Interpreting course.

This capstone will incorporate all the potential career roles for the graduates: specialized interpreter; coordinator of services, interacting with administration, doctors, and patients; and assessor to qualify interpreters for work in healthcare settings.

4. Administrative arrangements for the proposed program: department and school or college involved.

The proposed M.S. degree in Healthcare Interpreting will be administered by the same department, school, and college as the undergraduate bachelor's degree in ASL/English Interpreting (School of Lifespan Development and Educational Sciences in the College of Education, Health and Human Services. Dr. Jamie L. McCartney, the coordinator of the ASL/English Interpreting Program, will temporarily oversee both programs, but only teach in the Healthcare Interpreting program. As the master's program grows, Dr. McCartney's role will completely switch to the master's program and a new coordinator of the ASL/English Interpreting program will be hired. In the meantime, the ASL/English Interpreting program has a number of highly qualified interpreters to maintain the instructional needs as adjuncts.

5. Evidence of need for the new degree program, including opportunities for employment of graduates. This section should also address other similar programs in the state addressing this need and potential duplication of programs in the state and region.

There is no other program in the state offering an advanced degree in medical interpreting. In fact, we know of only one other program in the country offering an advanced medical interpreting degree. Cleveland Clinic administrators approached Dr. McCartney because they were having an extremely difficult time finding qualified ASL/English interpreters. They expressed similar dilemmas with other languages. The issue is not that there are not interpreters available, but that interpreters do not possess the requisite skills or knowledge. The Cleveland Clinic, like many other hospitals across the state, have been sued by deaf patients regarding inadequate and at times nonexistent communication access. Our knowledge that the field of interpreting is moving in the direction of specialization and the growing demand for highly qualified medical interpreters encouraged the development of this degree.

Medical professionals are coming to realize that a skilled interpreter is a crucial ally to both the healthcare professional and the patient in establishing rapport, inspiring trust, and promoting the resolution of healthcare needs. Research has shown that "limited proficiency in the dominant language translates into fewer healthcare visits, longer wait times, less timely referrals, inequitable treatment, higher levels of adverse events, and poorer health outcomes" (Messias, McDowell, & Estrada, 2009, p. 129). The National Council on Disability (2009) found that deaf adults had lower health literacy than their hearing counterparts (Swabey & Malcolm, 2012). Therefore, a medical appointment with a deaf patient without a professional interpreter often results in miscommunication, misinformation, misdiagnosis, and mistrust (Izzeoni, O'Day, Killeen, & Harker, 2004; Napier & Kidd, 2013; Swabey & Malcom, 2012).

6. Prospective enrollment.

This program would be open to interpreters with preferably a bachelor's degree in interpreting. The best pool would be those graduates who have graduated from Kent State University with an ASL/English Interpreting degree. However, because there are still some associate degree interpreting programs running, it is possible that the interpreter would have an associate's degree in interpreting; the candidate would need to have a bachelor's degree in interpreting or another related field. There would also be a preference for interpreters who already have national certification, but in lieu of this, they must have at least 3 years of interpreting experience.

Since this is an online program, students from all over the country could be accepted. In the 2012 interpreter survey conducted by the National Consortium of Interpreter Education Center, nearly 40% of the interpreters nationwide agreed that additional training was needed for healthcare interpreting.

7. Special efforts to enroll and retain underrepresented groups in the given discipline.

We will advertise the program in venues that specifically market to select groups. We will post in NAOBI's publication (National Association of Black Deaf Interpreters), Mano a Mano (trilingual interpreters), and advertise on social media, so that everyone has a chance to view the marketing materials announcing the program.

8. Availability and adequacy of the faculty and facilities available for the new degree program.

The medical system collaborating in this program will supply instructors for 3 classes. This combined with one ASEI FT faculty, along with ASEI adjuncts, and the College of Nursing faculty will be sufficient to meet the instructional requirements.

9. Need for additional facilities and staff and the plans to meet this need.

The greater need will be for the best technology to manage the online classes conducted in ASL. There will also be a need to utilize language experts who are deaf to engage students in best practices for service provision including ethical decision-making. These deaf experts would also serve as participants in the medical interpreting scenarios throughout the course and for the final real-time interpreting exam.

We are currently seeking grants and other funding options to cover the employment of the deaf experts.

10. Projected additional costs associated with the program and evidence of institutional commitment and capacity to meet these costs.

There are no projected additional costs expected. It is anticipated that revenue generated from tuition and fees will cover all costs associated with this program.