

STANDARDS FOR MEDICAL INTERPRETERS

-from the viewpoint of both interpreters and
organizations to dispatch medical interpreters-

Committee to Review Standards for Medical Interpreters

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■ What is the committee to review standards for medical interpreters?

Purpose: We review and formulate standards for medical interpreters to help organizations nationwide to facilitate medical interpreter dispatch system.

Foundation: May 2010

Affiliated body: NPO Center for Multicultural Society Kyoto
NPO Multilingual Society Resource Kanagawa (MIC Kanagawa)

Chairman of the board: Akio NISHIMURA Program adviser, MIC Kanagawa

Head office: NPO Center for Multicultural Society Kyoto

STANDARDS FOR MEDICAL INTERPRETERS

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Shared Vision of Standards for Medical Interpreters

Medical interpreters primarily involve in the realm of lives and well-being of non-Japanese-speaking patients and moreover they not only bridge a linguistic gap between patients and patients' families (hereinafter referred to as "patients etc.") and health professionals but also help patients etc. to build secure feeling and confidence with their health professionals. Furthermore, medical interpreters have mission to help patients etc. to get the best medical treatment which health professionals would be able to provide. Therefore medical interpreters need to enhance their skills and performance in accordance with the standards discussed in section 5.

At the same time, health care facilities which accept non-Japanese-speaking patients should provide

qualified medical interpreters that meet standards of medical interpreters and also organizations/associations to dispatch medical interpreters need improving the groundwork of the standards.

1 Purpose in Development of the Standards

Individuals concerning the medical interpreting or organizations/associations (hereinafter referred to “dispatch organizations/associations”) to operate medical interpreter dispatch system shall provide a common “criteria” when selecting the contents of study or training, setting the point of achievement, screening candidates for interpreter and etc.

2 Viewpoint of the Standards

- ① to contribute to the realization of cross-cultural society
- ② to ensure users’ sense of security and mutually promote confidence
- ③ to recognize medical interpreters as a professional
- ④ to be selected items relevant to significance of professionalism and to be systemized into the training menu
- ⑤ to enhance interpreters’ understanding of standards in the course of training for medical interpreters
- ⑥ not to exclude other standards and flexibly respond to change standards based on the situation in each region(geography, interpreter resource, finance, culture and etc.)

3 Term Definition

Terms stated in the standards are defined below.

- ① “Health professionals” refer to physicians, nurses, midwives, pharmacists, laboratory technicians, physical therapists, medical social workers, medical administration staff and etc.
- ② “Users” refer to both non-Japanese-speaking patients etc. and health professionals who need medical interpreter service.
- ③ “Medical practical styles” refers to conducts of medical practice, care practice, attitude toward patients etc. health professionals prefer to perform.

4 Procedure in Reviewing the Standards

- ① Review by the members of Committee in order to review standards for medical interpreters (refer to section 6)
- ② Discussion on themes aimed at medical interpreter at either academic conferences or workshops
- ③ Discussion among the members of dispatch organizations at the 3rd national conference for medical interpreters

5 Details on Categorically-grouped Standards

Top tier	Middle tier	Bottom tier	Explanation
Knowledge	Knowledge or understanding related to the patients’ backgrounds and their cultures	Patients’ etc. background	• Knowledge or understanding related to residence status, living standards and medical treatment for the patients’ etc. who don’t totally understand Japanese
		Nationality and regional culture of patients etc.	• Knowledge or understanding related to patients’ etc. nationality, religion, customs, different concept of value
		Nationality and regional medical care of patients etc.	• Knowledge or understanding related to nationality, regional medical system, difference between the medical practical style of patients etc.and that of Japanese.
		Knowledge related to assistance organizations/ associations	• Information about any assistance organizations/associations to support patients etc.
	Knowledge related to medical care	Human tissues and their functions	• Knowledge related to human organ

		Basic medical terms	<ul style="list-style-type: none"> Knowledge related to commonly used terms which are required on questionnaires.
		Basic knowledge related to laboratory tests or treatment measures	<ul style="list-style-type: none"> Basic knowledge related to measures of tests, treatments, medications and doses.
		Basic knowledge related to health hygiene	<ul style="list-style-type: none"> Basic knowledge related to measures of protection of infection, vaccinations, and etc.
		Clinical flow at medical organizations	<ul style="list-style-type: none"> Basic knowledge related to clinical flow such as reception, consultation, laboratory test, treatment, cashier, and prescription.
		Patient's mentality	<ul style="list-style-type: none"> Sick person's mental status(anger, anxiety and etc.)
		Role and Medical practical styles of health professionals	<ul style="list-style-type: none"> Knowledge related to the role and direction of health professionals such as doctors, nurses, medical social worker and etc. Awareness of "Medical practical styles in Japan" conducted by health professionals
		Medical insurance/health welfare system	<ul style="list-style-type: none"> Knowledge related to systems of health insurances, lump sum allowance for childbirth and nurturing, public subsidies, overseas travelers' personal accident insurance and etc.
	Knowledge or understanding related to organizations/associations and medical interpreters overall (In case of the member of dispatch organizations/associations)	Knowledge or understanding related to organizations/associations mission	<ul style="list-style-type: none"> Organizations/ associations mission and knowledge related to structure or contents of projects
		Knowledge or understanding related to dispatch system, project	<ul style="list-style-type: none"> Knowledge related to medical interpreter dispatch system: contents, rule and guarantee of interpreters
		The present state and the future issue of medical interpreters	<ul style="list-style-type: none"> Outline of present state and the future issue of medical interpreters projects nationwide

Skill	Language skill	Level of ability required to comprehend both Japanese and target languages	<ul style="list-style-type: none"> Interpreters are competent to translate both mother and target languages when simulating conversations at medical situations.
	Interpreting skill (※1)	Listening to speakers	<ul style="list-style-type: none"> Concentration and listening skills (auditory comprehension)
		Comprehending	<ul style="list-style-type: none"> Ability to comprehend the contents accurately
		Memorizing	<ul style="list-style-type: none"> Ability of retention in the short term and taking note to enhance the maximum retention
		Conveying	<ul style="list-style-type: none"> Sufficient level of words, expression, syntax and grammar Adequate pronunciation and quality of voice and conveying in appropriate manners
Practical skill	Interruption of performance and assurance of message	<ul style="list-style-type: none"> To interrupt of performance and reassure the message when the interpreter is not fully understand what users have said 	

			<ul style="list-style-type: none"> • To use dictionaries when needed
		Appreciation of the situation	<ul style="list-style-type: none"> • To handle any unexpected occurrence calmly, make use of interpreting experiences and skill and act flexibly
	Communication skill	Basic skills of interpersonal services (※ 2)	<ul style="list-style-type: none"> • To respond to parties affably and calmly (auditory comprehension) • To take into consideration of affectionate eyes and gesticulation(nonverbal communication) • To secure the comfortable place to sit or stand

※ 1 As for the interpreting skill, the order of items described in “Bottom tier” follows that of interpreting process: listening to speakers, comprehending the message , storing it in short-term memory and conveying it in target or mother language.

※ 2 The word, ”Interpersonal services” is a kind of a technical term at conceptual level in the field of social welfare.

Ethics	Respect for basic human rights	<ul style="list-style-type: none"> • To treat everyone with respectfully and impartially, regardless of his/her race, tribe, religion, beliefs, age, sex or sexual preference, social status, economic situation, life-style, cultural background, physical or mental status, and kind of health problem.
	Confidentiality	<ul style="list-style-type: none"> • Not disclose any patient's information which he/she may have learned in the course of duties.
	Respect for privacy	<ul style="list-style-type: none"> • Not to step into the privacy of patients etc. in defiance of their will
	Neutrality and objectivity	<ul style="list-style-type: none"> • To interpret in the scope of service and not to give any personal opinions and advise to user • To convey original message and not to add interpreter’s sense of value, and subjective aspect
	Accuracy	<ul style="list-style-type: none"> • To refer to each item of knowledge and skill described above as much as possible • To interpret truly and precisely, taking into consideration of patients etc. backgrounds and cultures • To be aware of the responsibility as a professional and be sure to notify to users in the case of unmanageable task
	Maintenance and improvement of expertise	<ul style="list-style-type: none"> • To try hard to maintain and improve interpreting skill • To keep his/her motivation high to learn some new useful administrative rule or system for interpreters
	Building a good relationship	<ul style="list-style-type: none"> • To respect users and make favorable impressions on them • To try to be thoughtful to others
	Avoidance of establishing personal relationship to users	<ul style="list-style-type: none"> • Not to establish personal relationship to users • Not to accept any assignment in the event that the interpreter judge the effect of personal relations and emotional involvement may disturb the impartial service • Not to anticipate any favors taking advantage of the interpreter.
Collaboration and cooperation with health professionals, support association and professionals	<ul style="list-style-type: none"> • To value collaboration and cooperation relationship with health professionals and concerned parties • Not to respond to a consultation by patient etc. in the interpreter’s hand. 	

	Maintenance and improvement of health	<ul style="list-style-type: none"> · To draw a line between interpreting assignment and personal life to maintain and improve interpreter's both physical and mental health
	Maintenance of good behavior	<ul style="list-style-type: none"> · To learn to behave with civility and decency: punctuality, cleanliness and neat and tidy. (Properly dress is recommended and perfume is prohibited on duty.)

Organizations/associations' obligation to their interpreters membership	Training for interpreters	<ul style="list-style-type: none"> · To provide opportunities for developing their skill as interpreters
	Protection of interpreters	<ul style="list-style-type: none"> · Not to place excessive burdens on interpreters · To take proper measures on protection of infection in order to avoid excessive burden on interpreters both physically and mentally
	Responsibility for society	<ul style="list-style-type: none"> · To disseminate information about the service of medical interpreters to health care facilities, keeping the society informed about the importance of medical interpreters

6 Reviewing Members of the Committee (Honorifics omitted)

Akio NISHIMURA Program adviser, NPO Multilingual Society Resource Kanagawa Board, The Japan Association for Public Service Interpreting and Translation
 Aguri SHIGENO Chairperson of the board, NPO Center for Multicultural Society Kyoto
 Supervisor, Medical Interpreter Dispatch Project
 Facilitator, Biwako Forum for International Medical Services

(Names described below Japanese alphabet in reverse)

Naomi MORITA Medical interpreter (English), NPO Multilingual Society Resource Kanagawa
 Conference interpreter
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 Mitsuko TSURUTA Chairperson of the board, NPO Multilingual Society Resource Kanagawa
 Supervisor (social welfare counselor), Saint Theresia Hospital's welfare medical service consultation room
 Airi TAKASHIMA Board and Medical interpreter coordinator, NPO Center for Multicultural Society Kyoto
 Facilitator, Biwako Forum for International Medical Services
 Nurse, Health nurse ,
 Takashi SAWADA Board, NPO Multilingual Society Resource Kanagawa
 Director, Minatomachi clinic
 Petty SATOH Medical interpreter (Chinese), NPO Multilingual Society Resource Kanagawa

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8 Usage Manner of the Standards

① You shall not be prohibited from copying, diverting and revising the standards only for the purpose of medical interpreter's promotion and dissemination.

② You shall show the reference in the using of the item ① above. Any dispatch organization/association shall notify the head office of its plan to have formulated own standards by revising the any items of the standards.

③ You shall get head office permission to use the standards including the use of ① above for commercial

ends.

■ 発行年月 2010年10月15日
■ 発行者 医療通訳の基準を検討する協議会
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