

## Developing Certification for Healthcare Interpreters

### CCHI's Mission

The Certification Commission for Healthcare Interpreters (CCHI) is a 501(c)6 organization founded in 2009.

**CCHI's mission is to develop and administer a national, valid, credible, and vendor-neutral certification process.**

**What does this mean?**

**National** – A portable credential that follows an interpreter throughout their career.

**Valid** – The certification test measures what it intends to measure and is based on the knowledge, skills and abilities needed to competently perform the job of healthcare interpreting.

**Credible** – Created by interpreters and other stakeholders, for interpreters and the public good.

**Vendor-Neutral** – Developed from the ground up and not reliant on any existing certification, training, testing or assessment developed or licensed by other organizations. Further, no individual organization, vendor or entity has any financial or other stake in CCHI's program or its administration.

**CCHI offers two national certifications:** the Core Certification Healthcare Interpreter™ (CoreCHI™) and language-specific, performance Certified Healthcare Interpreter™ (CHI™) certification in Arabic, Mandarin and Spanish.

The development of certification for healthcare interpreters has been the focus of discussions for over twenty years. Efforts at developing certification picked up steam after 2006. Throughout 2006 and 2007, the National Council on Interpreting in Health Care (NCIHC) held twelve national forums on certification.<sup>2</sup> In May of 2007 and 2008, Language Line Services (LLS), a for-profit vendor of language services, held the first two National Medical Interpreter Certification Forums in Boston, Massachusetts and Portland, Oregon. Then, in June 2007, the Interpreting Stakeholder Group<sup>3</sup> of Minnesota convened an Expert Panel on Community Interpreter Testing and Certification.<sup>4</sup> The goal of the meeting was to further an ongoing national discussion of certification for healthcare interpreters.



**The three goals of the meeting were to:**

1. Convene a group of people with experience and expertise regarding assessment of interpreter qualifications;
2. Begin to assess what we know and what we need to do to build a fair and reliable certification process;
3. Explore how state and national initiatives can work together for their mutual benefit.<sup>5</sup>

In addition to ISG members, representatives from NCIHC, California Healthcare Interpreting Association (CHIA), and International Medical Interpreters Association (IMIA) attended. The recommendations from the meeting were to move forward with certification by identifying a national organizing or coordinating group to take the lead.

With the recommendations from ISG in hand, NCIHC secured funding from The California Endowment to advance national certification. NCIHC invited CHIA, IMIA, and the American Translators Association (ATA) to form a steering committee for a new coalition, the National Coalition on Health Care Interpreter Certification (NCC).<sup>6</sup> This steering committee met throughout Fall 2007 to discuss how to create a representative body to develop certification.

In early 2008, through an open call for nominations, the NCC Steering Committee selected fourteen additional organizations to participate that represented five stakeholder groups – interpreter associations, purchasers/users of interpreting services, language companies, educators and researchers, and government/accrediting organizations.<sup>7</sup>

The purpose statement of the NCC, agreed to by the eighteen original members, was as follows:

*“The National Coalition on Healthcare Interpreter Certification (NCC) is committed to developing standards for a valid, credible, inclusive, and transparent national process to ensure competency of healthcare interpreters and improve access and quality of care for patients with limited English proficiency in our culturally diverse communities.”*

In January 2009, one day prior to the third scheduled NCC in-person meeting, two NCC members – Language Line Services and IMIA – publicly announced their own efforts to develop national certification independent of the NCC.<sup>8</sup> In March 2009, LLS and IMIA announced the formation of the National Board of Certification for Medical Interpreters. LLS and IMIA developed their certification program throughout 2009. In October, 2009, LLS and IMIA opened registration for its certification program at the same time the first members of its National Board of Certification for Medical Interpreters were named.<sup>9</sup> According to the NBCMI’s Bylaws, the Board shall have a minimum of seven members and IMIA and LLS will each hold one seat on the Board of Directors in perpetuity as founding organizations and will not be subject to an election process.<sup>10</sup>

The NBCMI did not develop its own examinations but licenses its oral examination from LanguageLine University (currently LanguageLine Academy™ (LLA), a division of LanguageLine Solutions™) and its written examination from IMIA.<sup>11</sup> Further, as stated in NBCMI’s Bylaws,

*“The National Board does not have the authority to significantly alter the purpose of the certification program, create additional certification programs, or terminate certification programs without the approval of both founding organizations, the International Medical Interpreters Association (IMIA) and Language Line Services (LLS).”<sup>12</sup>*

Further, NBCMI pays LLA \$125 for each oral examination administered and IMIA \$75 for each written exam administered.<sup>13</sup> In 2012, NBCMI merged with IMIA and became its affiliate.<sup>14</sup>

In July 2009, seeking a more formal organizational and legal structure to develop certification,<sup>15</sup> fifteen of the NCC’s original members created and incorporated the Certification Commission for Healthcare Interpreters (CCHI) to continue the goals of the NCC to develop certification through an inclusive process involving all stakeholders. CCHI’s founders felt strongly about involving a broad array of stakeholders and thus formed advisory panels to bring together many of the healthcare provider associations, policy makers, and experts in certification to advise CCHI.<sup>16</sup> CCHI’s Bylaws call for a range of nine to thirteen members, and no seats are provided to any founding member in perpetuity.

After its official launch in September 2009, CCHI initiated development of its certification program which was launched nationally in early 2011. CCHI develops its examinations itself and retains full ownership and control over the examinations. Currently, CCHI offers two certifications – Core Certification Healthcare Interpreter™ (CoreCHI™) and Certified Healthcare Interpreter™ (CHI™).

CCHI is the first organization certifying interpreters to receive the NCCA (National Commission for Certifying Agencies) accreditation. In June 2012, NCCA accredited the CHI™ -Spanish certification, and in June 2014 – the CoreCHI™ certification. This affirms that both exams comply with the NCCA’s Standards for the Accreditation of Certification Programs. In 2017, CCHI re-accredited the CHI™ -Spanish certification. **As of 2018, CCHI is the only certifying body for interpreters with nationally accredited programs.**

Recognizing the importance of professional healthcare interpreter training, CCHI launched its Continuing Education Accreditation Program (CEAP) in September 2013, to assess, analyze and accredit continuing education programs for healthcare interpreters.

Please see CCHI’s web site for more information:

[www.cchicertification.org](http://www.cchicertification.org)

Contact us: [info@CCHLcertification.org](mailto:info@CCHLcertification.org)

## Footnotes:

- 1 ©2010 by the Certification Commission for Healthcare Interpreters. This summary is based on information in the public domain documenting the development of healthcare interpreter certification.
- 2 Avery, Maria-Paz Beltran. 2007. *Are We Ready for National Certification of Health Care Interpreters? A Summary of NCIHC Open Forums*. Washington DC: NCIHD. Available at <http://data.memberclicks.com/site/ncihc/NCIHC%20Working%20Paper%20-%20Report%20on%20National%20Certification%20Forum.pdf> (accessed August 9, 2010).
- 3 ISG is a membership group within the Upper Midwest Translators and Interpreters Association.
- 4 The Final report of the Expert Panel is available at: <http://umtia.org/ExpertPanel/Expert%20Panel%20Final%20Report.pdf> (accessed August 9, 2010).
- 5 Id.
- 6 This historical information is based on presentations by Katharine Allen at the California Healthcare Interpreters Association Conference in March 2010 and Lynn Fors at the Southeast Regional Medical Interpreter Conference (SERMIC) in June 2010.
- 7 The original members of the NCC were: American Translators Association, Association of Language Companies, California Healthcare Interpreting Association, California Pan-Ethnic Health Network, Center for Immigrant Health, New York University School of Medicine, CyraCom International, Inc., Institute for Diversity in Health Management of the American Hospital Association, International Institute of Akron, Inc. International Medical Interpreter Association, Interpreting Stakeholder Group-Minnesota, Jewish Vocational Service, Language Line Services, Massachusetts Department of Public Health, National Council on Interpreting in Health Care, National Health Law Program, National Consortium of Interpreter Education Centers & Registry of Interpreters for the Deaf, Portland Community College/Institute for Health Professionals, and Spectrum Health.
- 8 See <http://www.pr-inside.com/print1019099.htm> (accessed August 9, 2010).
- 9 See <http://www.certifiedmedicalinterpreters.org/history> (accessed August 9, 2010).
- 10 See Bylaws of the National Board of Certification for Medical Interpreters, Section 3.2, [http://www.certifiedmedicalinterpreters.org/sites/default/files/NBCMI\\_Bylaws\\_final\\_2010.pdf](http://www.certifiedmedicalinterpreters.org/sites/default/files/NBCMI_Bylaws_final_2010.pdf). (accessed August 9, 2010).
- 11 See <http://www.certifiedmedicalinterpreters.org/national-board-under-Principles-and-Structure> (accessed August 9, 2010).
- 12 See Bylaws of the National Board of Certification for Medical Interpreters, Section 10.1: [http://www.certifiedmedicalinterpreters.org/sites/default/files/NBCMI\\_Bylaws\\_final\\_2010.pdf](http://www.certifiedmedicalinterpreters.org/sites/default/files/NBCMI_Bylaws_final_2010.pdf) (accessed September 23, 2010).
- 13 Presentation by Nelva Lee, NBCMI Chair, at the Southeast Regional Medical Interpreter Conference (SERMIC) in June 2010.
- 14 See <http://www.certifiedmedicalinterpreters.org/national-board-merge> (accessed February 22, 2012).
- 15 While the NCC provided much of the groundwork towards establishment of national certification, it was not organized as a legal entity and lacked many of the structures needed to develop certification.
- 16 For more information on CCHI, including its Commissioners, Advisors, and Supporters, see <http://cchicertification.org>.