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For Persons with Disabilities
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Hartford, CT 06120-1551
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Anonymous Interpreter Survey

I. DEMOGRAPHIC INFORMATION:

a. Are you currently registered to work as an interpreter in Connecticut?
Yes ☐ No ☐

b. Do you currently hold certification to interpret in a medical setting?
Yes ☐ No ☐

c. In which of the following counties do you work or prefer to work?

Fairfield	☐	Hartford	☐
Litchfield	☐	New London	☐
New Haven	☐	Tolland	☐
Middlesex	☐	Windham	☐

(Refer to attached county map)

d. Are you currently employed as an interpreter on a full time or part time basis? (E.G. by a school system, VRI service, etc.) ☐ Yes ☐ No

If yes, how many hours per week are you scheduled to work? _____

e. Are you currently affiliated with, or do you receive interpreting assignments or referrals from a dispatch or referral agency?
☐ Yes ☐ No

If yes, which one(s):

___Family Services Woodfield

___Commission on the Deaf and Hearing Impaired

___Other _____

f. Do you accept freelance interpreting assignments?

☐ Yes ☐ No

If so, approximately how many hours per week are you available? _____

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II. AVAILABILITY AND EXPERIENCE WITH MEDICAL INTERPRETING.

a. Are you currently available and working on–call in response to urgent requests for medical interpreting? Yes ☐ No ☐

b. If not, please indicate why not:

___ Not interested in medical interpreting

___ Not certified to interpret in medical settings

___ Committed to other demanding work

___ Scheduling conflicts

___ Inconsistent/erratic scheduling

___ Family care responsibilities

___ Concerns about liability

___ Personal safety concerns

___ Travel time/distances/costs (please explain) _____

_____

___ Other: _____

_____

_____

_____

_____

c. If you do work on-call for medical emergencies:

How often do you get called? _____

When do you get called? _____

How long do medical emergency calls typically last? _____

Have you experienced delays in routing to assignments, or substantial "wait time" or "down time" once at the medical setting?

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Yes ☐ No ☐ If "yes", please explain:

_____

_____

_____

d. Do you find that the patients' needs and circumstances have been sufficiently understood and described sufficiently? Yes ☐ No ☐
If "No", what do you think would help?

_____

_____

_____

_____

e. Realistically, how many "after-hours" (e.g. between 5:00 PM and 8:00 AM, Monday through Friday, or anytime weekends) medical emergency calls are you willing or able to respond to per month? _____

f. Based on your experience:

i. Which aspects of medical interpreting do you find most interesting or rewarding?

_____

_____

_____

_____

ii. Which aspects are most challenging?

_____

_____

_____

_____

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iii. What steps do you think could be taken to encourage more interpreters to provide on-call medical interpreting?

_____
_____
_____
_____
_____

III. COMPENSATION FACTORS:

On a scale of 1-10, where 1 is "not important", and 10 is "extremely important", please rate the following factors related to compensation:

___ Being paid some type of stipend while "on-call"

___ Assurance of minimum compensation for each assignment (e.g., minimum of 2 hours pay, even for assignments of shorter duration.)

___ Being paid a competitive hourly compensation rate

___ Differential compensation for assignments on nights and weekends

___ Adequate reimbursement for travel costs

___ Other_____
_____
_____

IV. TRAINING FACTORS:

Please list the types of training and/or mentoring experiences that you think are most important to assure good quality medical interpreting:

_____
_____
_____

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V. AGENCY SUPPORT OR INDEPENDENT CONTRACTING?

a. In deciding whether you will be available to interpret in medical emergencies, is having the support of a dispatch or referral agency important to you?

☐ Yes ☐ No

Which of the following features would you consider important for such an agency to maintain?

___ Ability to send back-up/relief for extended assignments

___ Ability to screen/obtain useful information about specific situation

___ Ability to locate and timely dispatch a C.D.I. or a different interpreter.

___ Ability to provide on-going training

___ Ability to provide mentoring

___ Other (please explain)

_____

_____

_____

b. Would you consider joining an existing on-call dispatch/referral system for urgent medical interpreting in hospitals if you could be assured you would only be called for occasional nighttime and/or weekend assignments?

☐ Yes ☐ No

c. Would you prefer establishing a direct contractual relationship to provide on-call interpreting services with one or more hospitals?

☐ Yes ☐ No

d. If you would prefer to contract directly with hospitals, what types of information and/or guidance would you find helpful?

_____

_____

_____

_____

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VI. FOLLOW-UP

a. In order to gather a better understanding of the various factors that influence the availability of qualified interpreters for medical interpreting assignments, OPA and CHA would like to interview interpreters who have experience interpreting in medical environments. The identities of interviewees would be protected. Would you be interested in being interviewed?

☐ Yes ☐ No

Do you have any other thoughts or suggestions?

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(Specific information about how to arrange to be interviewed will be provided to all registered interpreters via future email and on OPA's website.)