

New Academic Program Proposal

**Master of Science
in
Health Care Interpretation**

**American Sign Language and Interpreting Education
National Technical Institute for the Deaf
Rochester Institute of Technology**

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April 8, 2015
Version 6

Table of Contents

Glossary of Terms.....	1
1. Program Description and Purpose	2
a. Program description as it will appear in the course catalog	2
b. Educational and Career Outcomes	2
c. Program Fit with Mission, Vision, Values	4
d. Justification and documented need for this program and its contribution to RIT strategic plan and key result areas.	9
e. Curricular features that support scholarship, research, creativity and emerging disciplines... ..	12
f. Description and list of documented curricular interconnections and integration between this program and other disciplines, programs, and colleges at the University	13
g. Role of Faculty in the Program’s Design	14
h. Input from External Partners	14
i. Enrollment Projections for Year 1 through Year 5	16
2. Program Courses and Schedule	17
a. Table 1b: Graduate Program Schedule – Full-Time.....	18
b. RIT’s General Education Framework – N/A.....	20
c. CHST will offer three of the required courses in the program.	20
d. Schedule Description.....	20
e. Existing courses from CHST’s MS Degree in Health Care Systems Administration.....	20
f. New Courses from ASLIE: See course outlines in the pages that follow.	21
3. Faculty	52
4. Financial Resources and Instructional Facilities	55
a. Instructional facilities and equipment needed to ensure the success of the program:	55
1. Space.....	55
2. Lab or studio space/equipment to be shared.....	55
3. Equipment specific to the HCIA program	55
4. Computer facilities.....	55
5. Other space and equipment.....	55
b. New Program Expenditures.....	56
5. Library Resources.....	56
a. Analysis of Library Resources	56
b. Response to Identified Needs	57
6. Admissions and Enrollment.....	57
a. Admission requirements.....	57
b. Describe the process for evaluating exceptions to admission requirements.....	58

c.	Encouraging enrollment by persons from groups historically underrepresented in the discipline or occupation.....	58
7.	Academic Support Services.....	58
8.	External Review of Graduate Programs	59
9.	Credit for Experience	64
10.	Program Assessment and Improvement	64
a.	Program Level Outcomes Assessment Plan	66
b.	Accreditation and Program Review.....	68
11.	New/Emerging Field and Allied Health Areas.....	68
12.	Transfer to Baccalaureate Programs.....	68
13.	Application for Distance Education	68
	References.....	69
	Appendix A – New or Revised Course Outline Form	70
	Appendix B – Enrollment and Market Analysis	71
	Appendix C – Internal Letters of Support.....	74
	Appendix D – Program Need and Marketability: Evidence and Letters of Support.....	82
	Appendix E – Space Allocation/Renovation Request.....	105
	Appendix F - Full Faculty CVs.....	106
	Appendix G – Cost Model: Revenue/Cost Projections/Expenses.....	182

Glossary of Terms

ASL	American Sign Language
ASLIE	American Sign Language and Interpreting Education
ASPA	Association of Specialized and Professional Accreditors
CCIE	Collegiate Commission of Interpreter Education
CHI	Certificate in Health Care Interpreting
CHST	College of Health Sciences and Technology
HCIA	Health Care Interpreting (course code)
HLTH	Health (course code)
IDC	Intertribal Deaf Council
MSHCI	Master of Science in Health Care Interpreting
NADC	National Asian Deaf Congress
NAOBI	National Alliance of Black Interpreters
NBDA	National Black Deaf Advocates
NCDHR	National Center for Deaf Healthcare Research
NTID	National Technical Institute for the Deaf
RID	Registry of Interpreters for the Deaf

1. Program Description and Purpose

a. Program description as it will appear in the course catalog

The Master of Science degree program in Health Care Interpretation (MSHCI) is designed to meet the demands of nationally-certified sign language interpreters desiring a master's degree specific to working in health care environments. The National Technical Institute for the Deaf (NTID) Department of American Sign Language and Interpreting Education (ASLIE) will administer the program. The College of Health Sciences and Technology (CHST) will collaborate by offering three courses (9 credits) within this 33-credit degree. This unique program will:

- meet the growing demand for specialized sign language health care interpreters as more and more deaf and hard-of-hearing people¹ enter the medical/health care fields
- increase the number of specialized sign language interpreters working in patient health care settings
- prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings

The program will commence with a one-week on-campus residency Professional Seminar. The remainder of the curriculum will employ an online pedagogical approach including accelerated eight-week courses as its primary delivery system.

b. Educational and Career Outcomes

Educational Outcomes

1. Demonstrate advanced competency in interpreting health care discourse

Students will effectively interpret for deaf consumers (patients and family members), deaf students preparing for health care careers, and deaf health professionals in academic and health care environments.

- a. Students will perform with advanced competency in interpreting the content of complex health care discourse.
- b. Students will demonstrate understanding of human anatomy, physiology, common diseases, illnesses, diagnoses, and treatments.

2. Analyze, Conduct, and Consult on the Effective and Efficient Provision of Interpreting Services in Health Care Institutions

Students will demonstrate an understanding of how health care laws are developed and transformed into policy. They will exhibit critical thinking and organizational skills needed to manage language access services by

¹ Throughout this proposal, the terms “deaf” and “hard of hearing” refer to deaf and hard-of-hearing individuals who use American Sign Language.

developing an organizational framework for recruiting, retaining, compensating, and terminating employees.

3. Integrate Knowledge of Health Care Environments and Language Access to Build on Body of Knowledge in the Field

Students will integrate their learning in a final research project or paper that is significant to interpreting and/or language access administration in health care environments. Students will use appropriate research or project design and implementation methods to plan and describe a research project/paper that includes a research question. They will select an appropriate sample, sampling technique, and data collection method(s) to produce their final project or research paper.

Career Outcomes

The MSHCI program will provide in-depth specialized education in the field of health care interpretation that is not currently available to interpreters. The program will appeal to certified interpreters (deaf and hearing) aspiring to direct their careers into health care environments, as well as to interpreters who are currently working in the health care field.

Interpreters in Health Care Environments

“Between 2012 and 2022, the Bureau of Labor Statistics projects 46 percent employment growth for interpreters and translators, which is much faster than the average for all occupations. The field is on track to add more than 29,000 new positions during that time period” (U.S. News and World Report, 2012). Graduates of the MSHCI program may find work as staff interpreters, freelance interpreters, or employment on a per-diem basis in health care, health care education, and health care research settings nationwide.

Administrative Roles in Health Care Environments

Another potential career outcome for MSHCI graduates is employment in administrative roles in health care settings. For example, the NYS Hospital Code currently requires all hospitals within the state to designate a Language Access Coordinator. Language Access Coordinators oversee all aspects of the provision of interpreting services within an organization, including: hiring, training, contract management, and clinical supervision of the interpreter workforce; consulting on the effective and efficient provision of interpreting services in health care; and training the health care workforce. Standards set by the body that accredits hospitals require a similar role in all hospitals nationwide.

The health care administration courses from CHST along with supervisory skills developed in the Healthcare Practical Interpreting course will position graduates to assume leadership positions for the administration of language access services within health care systems nationwide.

Teaching, Training, and Consulting

The knowledge and skills acquired in the MSHCI program will transfer to opportunities to consult on language access services in both health care and non-health care environments. In addition, a master's degree may open opportunities for graduates to teach in interpreting education programs, to lead case conferencing discussions with practicing interpreters, and to provide professional development training.

c. Program Fit with Mission, Vision, Values

The MS degree in Health Care Interpretation that is currently being proposed aligns with and advances the mission, vision, values, and reputation of RIT. This proposed program addresses the RIT Academic Portfolio Blueprint characteristics in the following ways.

1. Centrality

The MS degree in Health Care Interpretation will provide students with an opportunity to expand their knowledge and skills specialized in the area of health care interpretation through their studies, research, and projects in the curriculum. This major will prepare the students well to work in a global society by promoting understanding of linguistic, social, and cultural influences that impact health care interactions while working with a variety of deaf and hard-of-hearing consumers.

(a) Emerging Career Areas

RIT's mission states that "...We rigorously pursue new and emerging career areas." Health care professions are just beginning to be open to deaf individuals. The advanced skill sets required to interpret in health care, health care education, and health care research environments constitute an emerging specialization in the interpreting profession. There are currently no programs in the United States that offer a master's degree in health care interpretation.

(b) Collaboration

According to RIT's mission, "Our community is committed to diversity and student centeredness and is distinguished by our innovative and collaborative spirit."

The proposed MSHCI program is designed as a collaborative venture between NTID and the College of Health Sciences and Technology. This will be the first time in history that NTID will be partnering with another college of RIT to provide an MS degree program. As part of this collaboration, CHST will offer three courses in the program. ASLIE will be responsible for all aspects of offering and administering the program.

(c) NTID's Secondary Mission

NTID's secondary mission statement affirms that "NTID prepares professionals to work in fields related to deafness; undertakes a program of applied research designed to enhance the social, economic and educational accommodation of deaf people; and shares its knowledge and expertise through outreach and other information dissemination programs" (<http://www.ntid.rit.edu/about>).

(1) Preparing Professionals to Work in Fields Related to Deafness

In accordance with this secondary mission, the MSHCI program will provide students with the skills they need to become interpreting professionals working with the diverse deaf community in the field of health care. It will increase the number of qualified interpreters available to deaf students pursuing education in health care fields.

(2) Sharing Knowledge and Expertise

The American Sign Language and Interpreting Education program is strongly committed to teaching, learning, scholarship, research, innovation, and leadership development in promoting student success through this new MS program. The program will disseminate its knowledge and expertise to CHST, the NTID Healthcare Commission, the Registry of Interpreters for the Deaf Certification Council, and professional organizations within the fields of interpreting and health care.

(d) Adding an MS Degree to NTID's Portfolio

NTID's *Strategic Decisions 2020* calls for the establishment of an MS degree to add to its degree portfolio. In addition, it calls for the expansion of NTID's role as a National Resource Center of Excellence. The proposed MS degree in Health Care Interpretation effectively matches the criteria for the establishment of a master's degree and will without doubt promote RIT and NTID's reputation nationally.

2. Marketability

The proposed program's mission is aligned with the University's mission through the development of an emerging career area which is set to experience substantial growth in the coming years. "Interpreters for the deaf will continue to have favorable employment prospects because there are relatively few people with the needed skills. Job prospects should be best for those who have at least a bachelor's degree and for those who have professional certification. Those with a master's degree in interpreting and/or translation should also have an advantage" (U.S. Bureau of Labor Statistics).

A large need exists for specialized training for interpreters providing ASL/English interpretation. Because most existing master's degree programs focus on interpreting pedagogy, there are limited opportunities for professional interpreters to pursue a master's degree in interpretation.

A needs assessment (2009) conducted by the National Consortium of Interpreter Education Centers (authorized and funded by the Rehabilitation Services Administration through the U.S. Department of Education) surveyed deaf consumers' access to interpreting services in general. The survey identified health care as the most important setting for qualified interpreting services (78% of respondents).

Paradoxically, the health care setting was also identified as the “most difficult” (52%) for obtaining interpreting services. “Yet, despite these findings, few comprehensive programs exist to educate or prepare interpreters to work in the varied and demanding settings of the health care industry. Furthermore, there has been a lack of nationally agreed upon standards for specialization in health care and a lack of educational materials, resources and supervised induction to create a qualified pool of healthcare interpreters” (Swabey and Dutton, 2014, p. 1).

The MSHCI program will attract nationally-certified sign language interpreters wishing to advance their skills in interpreting for several types of consumer: deaf patients and families in health care environments; deaf health professionals working in academic and health care environments; and deaf individuals training for careers in health care professions. Other prospective audiences include individuals who wish to understand the complexities of service provision within health care organizations and/or pursue a leadership position within a health care organization; and members of organizations which hire and provide interpreting services.

Given the unique nature of this degree option and the expertise required for entrance into the program, it is anticipated that there will be no effect on enrollment in other degree programs.

3. Quality

(a) Evidence-Based Instruction

Best-practices programming employs research-based instructional methods and practice techniques. Such evidence informs and infuses the MSHCI curriculum.

This program is structured through the lens of demand control schema (DC-S). DC-S is an innovative approach to interpreting practice and interpreter education (both spoken and signed languages). DC-S is the framework that underpins the philosophy that interpreting in community settings is a *practice profession*, like medicine, teaching, or law enforcement.

DC-S is a work and decision analysis tool that seeks to frame the effectiveness of practice decisions and improve overall ethical reasoning.

DC-S and related teaching approaches have been the focus of over fifteen publications, several federal grants, and many collaborative projects both nationally and internationally. Research into the effectiveness of DC-S shows that interpreting students and practitioners report an increase in confidence in their work. Educational interventions resulted in improved micro-moral critical thinking and advancements in broader ethical reasoning.

(b) Curricular Features

Along with DC-S, the program is infused with reflective practice and the use of problem-based learning approaches which improve critical thinking and work and decision analysis skills. The focus on case analysis, reflective practice, and supervision all prepare those graduates desiring administrative positions in which they may supervise other interpreters.

Unique curricular features that incorporate rigorous academic and career preparation included in this primarily online degree include: production of ASL/English skill development videos recorded and evaluated by peers and faculty, webinar-delivered case conferencing sessions led initially by faculty and progressing to student-led sessions; papers, exams, and a final capstone project.

In addition, the Director of the proposed MSHCI program received an Innovation Fund grant from NTID (January, 2015) to create educational videos on various health care topics relevant to the work of health care sign language interpreters. The objective of this project is to enhance students' skill set and knowledge to effectively interpret for deaf consumers (patients and family members), deaf students pursuing health care careers and deaf health care providers in academic as well as health care environments. The project will result in approximately 20–25 video recordings of deaf health providers presenting in ASL on topics in their expertise; experienced health care interpreters discussing specialty areas of health care interpreting; as well as identified lectures in the College of Health Sciences and Technology (CHST), such as the Premedical Studies and Physician Assistant program. These films will be infused into the online component of the MS degree.

(c) Ongoing Evaluation

The program goals and student outcomes will be evaluated on an ongoing basis. During their final semester, students will be given a Student Satisfaction Survey. In addition, feedback from a stakeholder advisory board will be incorporated into an annual action plan that will lead to continuous improvement.

4. Financial Viability

In accordance with RIT's guiding principles and key result areas, the proposed MSHCI program is a fiscally responsible program that will generate revenue. According to the costing model analysis prepared by Assistant Vice President for NTID Finance and Budget Steve Morse, total revenue minus expenses over the first five years is estimated to be \$225K.

**American Sign Language and Interpreting Education Department
Master of Science in Healthcare Interpretation Degree Program
Summary of Program Expenditures, Revenue, and Resource Requirements
Table 4**

	***** 2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	Total
Personnel	\$ 118,968	\$ 122,600	\$ 126,300	\$ 130,100	\$ 134,000	\$ 631,968
Benefits	\$ 45,000	\$ 48,000	\$ 51,000	\$ 53,000	\$ 55,000	\$ 252,000
Computer Charges	\$ 20,300	\$ 35,600	\$ 43,400	\$ 44,700	\$ 46,000	\$ 190,000
Instructional Supplies	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 5,000
Equipment	\$ 3,000	\$ 500	\$ 500	\$ 500	\$ 500	\$ 5,000
Telephone	\$ 800	\$ 800	\$ 800	\$ 800	\$ 800	\$ 4,000
Software Licenses	\$ 1,200	\$ 1,200	\$ 1,200	\$ 1,200	\$ 1,200	\$ 6,000
Travel-Conferences	\$ 2,000	\$ 2,000	\$ 2,000	\$ 2,000	\$ 2,000	\$ 10,000
Advertising	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 5,000
Tuition Payments for RIT Credits	\$ 31,800	\$ 58,900	\$ 76,700	\$ 79,000	\$ 81,400	\$ 327,600
Expense	\$ 224,868	\$ 271,800	\$ 303,900	\$ 313,300	\$ 322,900	\$ 1,436,568
Overhead (RIT Indirect Costs)	\$ 45,000	\$ 54,300	\$ 60,800	\$ 62,700	\$ 64,600	\$ 287,400
Total Expense	\$ 269,868	\$ 325,900	\$ 364,700	\$ 376,000	\$ 387,500	\$ 1,723,968
Enrollment *	11	20	24	24	24	103
Tuition	\$ 387,200	\$ 332,800	\$ 394,700	\$ 409,700	\$ 425,300	\$ 1,949,700
Federal Appropriation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total Revenue	\$ 387,200	\$ 332,800	\$ 394,700	\$ 409,700	\$ 425,300	\$ 1,949,700
Total Rev. - Total Exp.	\$ 117,332	\$ 6,900	\$ 30,000	\$ 33,700	\$ 37,800	\$ 225,732

***** This year includes the first summer semester of the program (summer AY15-16) as well as the summer semester for AY16-17.

* Reviewed by RIT Enrollment Management & Career Services (Jim Miller). These enrollment numbers reflect students enrolled in the Fall semester for each academic year. Refer Table 2 for semester detail.

- d. Justification and documented need for this program and its contribution to RIT strategic plan and key result areas.

Need Identified by the Task Force on Health Care Careers

The Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community, a historic partnership between RIT/NTID, the University of Rochester's National Center on Deaf Health Research, Gallaudet University, and Rochester General Health Systems (RGHS), was formed in 2010 to address the limited opportunities for qualified deaf and hard-of-hearing individuals to pursue health care careers. The Task Force published two comprehensive reviews with the ultimate vision that by the year 2022, "deaf and hard-of-hearing individuals across the country will have levels of access to education, employment and career advancement in a variety of health care occupations that match their skills and aspirations" (Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community, 2012, p. 2).

One of the major barriers identified in the Task Force report was deaf and hard-of-hearing individuals' ability to access information. Those individuals currently pursuing training in health care report the limited availability of quality access services, particularly sign language interpreters with specialized knowledge in the health care settings (Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community, 2012, p. 20).

The Task Force's Final Report includes the recommendation that NTID/RIT take the lead in identifying and developing best practices with respect to specialized interpreting for deaf and hard-of-hearing individuals in health care fields. If the 2022 strategic vision of the Task Force is to be realized, the training of ASL/English interpreters with a specialization in health care must be addressed.

Need Demonstrated by the Increasing Number of Deaf and Hard-of-Hearing Graduate Students in Health Careers

As more and more deaf and hard-of-hearing students enter health care careers, interpreters must be prepared to accompany them throughout their education experience and into job placement. It is difficult to secure interpreters that can effectively interpret the rigorous content in the biomedical and behavioral sciences fields. For example, this difficulty has been reported by ASLIE faculty member Peter Hauser, PhD, the principal investigator in a \$2.1 million "Bridges to Doctorate Program" National Institute of General Medicine grant to provide support for deaf and hard-of-hearing graduate students who strive for doctoral training in the biomedical sciences or behavioral sciences.

Need Recognized by the Registry of Interpreters for the Deaf

The Registry of Interpreters for the Deaf (RID), the national certifying body of sign language interpreters in the U.S., lists 45 BA/BS programs and 4 MA/MS programs offering degrees in American Sign Language/English interpretation. Of these 49 degree programs, none offer specialized training in the health care arena beyond introductory coursework.

The RID recently began requiring a bachelor's degree as a prerequisite to taking the national certification exam. This raised the bar for entry to the field and instituted higher education as a mandatory component of interpreter preparation. Most bachelor-level programs focus on generalist training for interpreters and do not prepare graduates to specialize in a particular setting.

The fact that other universities now offer MS degrees in interpretation provides further evidence that there is a growing need for graduate education. However, most graduate degree programs focus on interpreting pedagogy—not on specialized areas of interpreting practice such as health care. The RID recognizes that language access remains a matter of national importance. At the 2013 National RID Conference, a motion was passed to investigate health care as a specialty certification area within the sign language interpreting field. The proposed MSHCI program addresses the need for graduate education that provides advanced skills in the specialty of health care interpreting.

Need Demonstrated by Unmet Demand for NTID's Certificate Program

NTID's Department of American Sign Language and Interpreting Education (ASLIE) currently offers a four-year BS degree in ASL/English Interpretation. This program prepares the generalist interpreter, with only a few elective courses designed to give an introduction to health care interpreting. The BS program does not prepare graduates to work in specialized settings.

Recognizing the critical need for deaf patient access to quality interpreting in health care settings, in 2010 ASLIE began offering a nine-month non-credit Certificate in Health Care Interpreting (CHI) program. This blended program focuses on interpreting for deaf patients within health care systems and currently reaches a national audience. Although most applicants have a bachelor's degree, it is not required for admission to the program. The average annual CHI applicant pool has been 45 students with an enrollment cap of 15. The response to this program has been outstanding and speaks to the need for formal education in the specialty area of health care interpreting.

Need for Higher-Level Interpreting Skills and Medical Content Knowledge

While the present non-credit Certificate Program in Health-Care Interpreting will continue to be taught because it prepares interpreters adequately to work with deaf patients and family members, the proposed 33-credit Master's Degree program addresses the complex interpreting skill sets and specialized medical content knowledge needed for (1) interpreting in health care educational programs (interpreting for deaf faculty and students) or for (2) communication among professionals (interpreting for deaf health care professionals or researchers).

Interpreting for provider-provider health care dialogue requires a greater level of knowledge and a more sophisticated skill set than provider-patient interactions. The

proposed Master's Degree program enables students to develop higher-level knowledge and skills required for interpreting in these settings in several ways:

- Prepares graduates to work with deaf health care providers; deaf students training for health care professions; deaf researchers; and deaf patients and family members
- Prepares graduates to work in administrative positions in health care settings
- Prepares graduates to conduct research and to be consumers of research conducted by others
- Addresses advanced interpreting theory
- Addresses current perspectives in Deaf Studies, including the Deaf Gain paradigm and Social Justice Theory relevant to health care interpreting
- Addresses theory and best practices for working with Certified Deaf Interpreters
- Addresses deaf people's health knowledge, health literacy, and special needs; provides students with the opportunity to develop skills to apply this knowledge to working with the diverse deaf community
- Prepares graduates to: consult on language access services in both health care and non-health care environments; teach in interpreting education programs; lead case conferencing discussions with practicing interpreters; and provide professional development training.

Need for Administrative Personnel

In addition to a focus on higher-level knowledge and interpreting skill sets, the MS program will also address knowledge of health care administrative systems and infrastructure and incorporate critical reflection on the interpreting process as informed by the current canon in the field. The national hospital accreditation body known as The Joint Commission sets standards for the provision of language access services. Each hospital in the United States must comply with these standards. Graduates of the MS program will be eligible to pursue such positions as Language Access Coordinator, a position required of all hospitals in New York State, and similar positions in other states.

Need Attested to by Hiring Managers

In a letter of support for this proposed degree program, Elizabeth Ballard, CHI graduate and Manager of Interpreter Services at the University of Rochester Medical Center, attests to the growing need for and challenges in finding qualified interpreters to meet the demand for interpreting in the UR Medicine Enterprise (which is expanding to include most of Western New York).

Dr. Steven Barnett, a deaf Rochester physician who is also an educator and researcher, describes the current shortage of qualified interpreters who have the skills necessary for working in health care, public health, and health research settings. In his letter of support for the MSHCI program, he attests to the shortage of qualified interpreters in Rochester, New York City, and outside New York state and indicates

that he and his research partners outside of Rochester would consider hiring graduates of the program.

Both of these letters may be found in Appendix D.

Leadership

Rochester is uniquely positioned to offer an MS in this area of specialization due to the large number of health care professionals who are deaf and fluent in American Sign Language whose expertise can be utilized to deliver the curriculum. Many of the local deaf health professionals work at the University of Rochester's Deaf Wellness Center and National Center for Deaf Healthcare Research. The local deaf talent comprises psychologists, social workers, M.D.s, RN's, laboratory workers, medical students, and health care researchers.

The Registry of Interpreters for the Deaf, which offers the national sign language generalist certification, is actively exploring the creation of a specialty certification in health care interpretation. With the addition of the MS degree in Health Care Interpretation, ASLIE will be at the forefront of a national effort to provide specialized, high-quality interpreting services to deaf and hard-of-hearing students, professionals, and patients in the health care arena. This program will directly contribute to RIT's Strategic Plan by maximizing opportunities for innovation, creativity, research, and scholarship in a unique program that will be the first of its kind in the U.S.

With this proposed degree, RIT/NTID has the opportunity to take the lead in the field of health care interpreting. Initially, the program will focus on interpretation between American Sign Language and English. Whereas the field of spoken language interpretation does not currently offer a degree program in health care interpretation, the MSHCI program has the potential to serve as a model to address this gap.

- e. Curricular features that support scholarship, research, creativity and emerging disciplines

According to Swabey and Nicodemus, "One of the fundamental issues in our field is the persistent lack of evidence-based research on the practice of ASL-English interpreting in the healthcare system in the United States" (Swabey and Faber, 2012, p. 18). Because health care interpreting is an emergent field, there is currently a dearth of scholarship. Major, Napier, and Stubbe add that "[r]esearch on interpreter-mediated healthcare communication is in its infancy. The majority of the published work in this area has been on spoken language healthcare interpreting" (2012, p. 35). The MSHCI program affords faculty the opportunity to conduct research into best practices in the delivery of health care interpreting and pedagogy related to health care interpreting. In addition, students will take a Research Methods course and conduct research leading to a paper or project.

This degree will provide specialized educational opportunity to a unique market niche that is unparalleled both nationally and internationally. There is currently no other graduate degree offered in the United States focusing on interpreting in health care environments. Rochester is known for its deaf/hard-of-hearing health care

professionals. A deaf medical health care professional will be one of the primary faculty in this program, providing a rich learning experience conducted in American Sign Language (ASL). This will allow for language modeling of complex medical concepts in ASL. The capstone course will provide students with the opportunity to conduct research, develop a plan with evaluation components, and submit a final summative project or paper as demonstration of attainment of knowledge-based outcomes. The online format of this program allows for both full-time and part-time study. Another distinct advantage of this online program is that the participants' diverse geographic locations will allow for examining multiple perspectives in the delivery of language access services. The curriculum offers faculty and students opportunities for scholarship and innovation leading to improving the effectiveness of health care interpreting and service delivery.

Health care organizations continue to face challenges to accommodate increasingly diverse patient populations; e.g., there are more than 28 million people with hearing loss and about 47 million people who speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations. Additionally, the New York Public Health Law, Article 28, mandates hospitals to designate a Language Access Coordinator to facilitate the provision of language access services. The health care administration courses found in the MS degree will position our graduates to assume leadership positions within health care systems nationwide for the administration of language access services to these populations.

- f. Description and list of documented curricular interconnections and integration between this program and other disciplines, programs, and colleges at the University

The MS in Health Care Interpretation will be administered under the American Sign Language & Interpreting Education (ASLIE) department at the National Technical Institute for the Deaf (NTID). It will, however, be a collaborative degree fostering integration between NTID's American Sign Language and Interpreting Education program and the College of Health Science and Technology's (CHST) MS in Health Systems Administration. The proposed degree will integrate the content areas of human body systems and diseases, theoretical and practical applications of interpreting, and foundational coursework in policy and law formation, health care economics, ethics, innovation, leadership and research. Integrating interpreting theory and health care administration into the health care model of our society is a necessary and appropriate development to address the most pressing access-related issues in medical settings faced by our nation. This unique collaboration will give students an understanding of the administrative issues that influence health care interpreting delivery and issues concerning access to interpreting services in health care settings.

CHST will provide three of the required courses. All of the courses from CHST are currently taught online. The required courses from CHST are: HLTH-700 Research Methods, HLTH-723 Human Resources in Health Care and HLTH-710 Health Care Governance and Economics.

g. Role of Faculty in the Program's Design

The entire faculty of ASLIE has been involved in the planning and execution of the MS in Health Care Interpretation degree proposal. Input was solicited and integrated into the original concept paper and the full program proposal during department meetings over the past year and a half.

h. Input from External Partners

ASLIE received a total of 13 letters of support from stakeholders in the field of health care interpretation and community advocacy.

Ms. Elizabeth Ballard, Manager of the Interpreting Services at the University of Rochester Medical Center, writes, "Your new MS degree will meet the growing demand of specialized health care interpreters as more deaf and hard-of-hearing people enter the medical/health care fields, increase the number of specialized interpreters working in patient health care settings, and prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings. I am fully supportive of this effort."

Dr. Michael McKee, who uses sign language and teaches in the Family Medicine Program at the University of Michigan, writes, "...as a family physician, I am fully supportive of this new MS program in Health Care Interpretation to help ensure successful delivery of the new degree in healthcare interpretation."

Dr. Steven Barnett, a family physician and director of the Rochester Prevention Research Center (RPRC): National Center for Deaf Health Research (NCDHR) writes, "Access to healthcare communication, health information, and quality interpreter services are recurrent themes in my experiences as a family physician working in a practice with many Deaf patients and families, as a healthcare and public health researcher working with Deaf ASL users, and as a medical school faculty working with scholars who are deaf. The MS program you propose would help to address those issues." He also states that "We are already beginning to experience the shortage of available interpreters with the skills and experience to work in healthcare, public health and health research settings. RPRC/NCDHR has experienced this shortage here in Rochester, in NYC, and outside of NYS. RPRC/NCDHR would certainly hire graduates of the RIT/NTID MS program to work with us, and would encourage our partners in and outside of Rochester to consider hiring the graduates of the RIT/NTID MS program."

Chris Wagner, President of the National Association of the Deaf (NAD), writes, "The mission of the NAD is to preserve, protect, and promote the civil, human and linguistic rights of all deaf and hard of hearing individuals in this country. We receive frequent calls, emails and requests from countless deaf and hard of hearing individuals everyday who report an inability to properly access health care services particularly with the lack of qualified sign language interpreters with specialization in health care....This new program will help take the lead in the identification and development of best practices with respect to specialized interpreting for deaf and hard of hearing

individuals in the healthcare fields.” He also writes, “To the best of our knowledge, none of the existing interpreter training programs in the United States currently offers specialized training in the healthcare field beyond introductory coursework... [H]ealthcare organizations face challenges to accommodate the communication needs of this diverse population. The Masters Degree in Health Care Interpretation program is an optimal means to meet those needs.”

Dr. Robert Pollard, a professor of Psychiatry and Director of Deaf Wellness Center at the University of Rochester’s Medical Center, writes, “As a healthcare practitioner myself, an advocate for appropriate education for deaf people and for interpreters, and as co-author of the Demand-Control Schema, which is an approach toward interpreter education that is increasingly used in healthcare-related training, I can attest that NTID’s proposed program will quickly emerge as the national leader in the identification and development of best practices with respect to specialized interpreting for deaf and hard-of-hearing individuals in healthcare fields, again, as patients and providers. NTID’s MS degree program proposal has my utmost support and admiration.”

Ms. Lydia Callis, a freelance interpreter agency owner and interpreter who was seen on national news interpreting for former New York City Mayor Michael Bloomberg in his press conference related to Hurricane Sandy, writes, “At the 2013 National RID Conference, a motion was made to investigate healthcare as a specialty certification area within the sign language interpreting field because language access remains a matter of national importance. Healthcare organizations continue to face challenges to accommodate increasingly diverse patient populations i.e. more than 28 million people with hearing loss and about 47 million people who speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations. This will fit the mission of the MS in Health Care Interpretation program.”

Dr. Debra Russell, President of the World Association of Sign Language Interpreters (WASLI), writes, “As I continue to build on my research agenda in the areas of interpreting access and quality service provision, I would welcome the opportunity to work with graduate students on projects related to health care access. I believe these students will enjoy employment opportunities not only in the US, but also throughout the globe as there are no comparable programs in other countries. I strongly support this application and look forward to collaborating with NTID every way possible to support this highly desirable program.”

Interpreter trainers from throughout the country, including Dr. Brenda Nicodemus (Gallaudet University); Dr. Keith Cagle (Gallaudet University); Ms. Jane Hecker-Cain (Suffolk County Community College); Mr. Rob Hills (LaGuardia Community College); Dr. Jack Hoza (University of New Hampshire); and Dr. Linda Stauffer (University of Arkansas-Little Rock), all emphasize that members of the Association of Medical Professionals with Hearing Loss (AMPHL) attest to the need for qualified interpreters for deaf individuals training for health care careers. All these educators acknowledge that the Registry of Interpreters for the Deaf, the national certifying body of sign language interpreters, lists 45 BA/BS degree programs and 4 MA/MS degrees

in American Sign Language/English interpreting. None of these programs offer specialized training in the healthcare arena beyond introductory coursework. Most bachelor level programs focus on generalist level training for interpreters.

i. Enrollment Projections for Year 1 through Year 5

The abbreviated Enrollment Projections table below details the five-year MSHCI program enrollment projections that were reviewed and approved by Dr. James Miller, Senior VP of Enrollment Management and Career Services at RIT.

The enrollment goal will be eight (FTE) new students in the first year that the program is offered; ten (FTE) new students in the second year that the program is offered; and 12 (FTE) new students each subsequent year. The program will offer both full-time and part-time options.

Given the completion rate of NTID's only other master's degree program, along with the graduation rates associated with the Bachelor of Science in ASL-English Interpretation program, it is proposed that students entering the Master of Science in Healthcare Interpretation full-time track complete their studies, and graduate, within six terms at a rate of 80%. It is further proposed that students entering the part-time track complete their studies, and graduate, within eight terms at a rate of 80%. These proposed rates will apply to the first three entering cohorts, and revisited in subsequent years.

See the table below for total enrollments projected per semester for years 1-5 of the program. Persistence rates are not reflected in the enrollment projections due to the complexities of the mix of full- and part-time students.

Healthcare Interpretation MS Enrollment Projections

	Year 1*		Year 2	Year 3	Year 4	Year 5
	AY 2015-16	AY 2016-17	AY 2017-18	AY 2018-19	AY 2019-20	AY 2020-21
Enrollment Fall Semester		5FT & 6PT	6FT & 14PT	8FT & 16PT	8FT & 16PT	8FT & 16PT
Enrollment Spring Semester		5FT & 6PT	6FT & 14PT	8FT & 16PT	8FT & 16PT	8FT & 16PT
Enrollment Summer Semester	5FT & 6PT**	11FT & 14PT	14FT & 16PT	16FT & 16PT	16 FT & 16 PT	16 FT & 16 PT
Total Terms of Enrollment***	5FT & 6PT	21 FT & 26 PT	26 FT & 44 PT	32 FT & 48 PT	32 FT & 48 PT	32 FT & 48 PT

*Students entering Year 1 (AY 2016-17) need to begin coursework in the summer, which occurs during AY 2015-16.

Note: To determine part-time numbers, take projected enrollment minus full-time and double the number of students left; e.g., if 8 incoming were projected and 5 are FT, there are 6 PT.

2. Program Courses and Schedule

The curriculum will require the completion of 33 semester credits with 11 required courses (3 credits each). The program can be completed in one academic year (with two summers) for full-time students or completed in two academic years (with two summers) for part-time students.

The program begins with a one-week on-campus Professional Seminar. This course consists of pre-readings, 40 hours of classroom instruction, and assignments to be completed after the on-campus sessions. The course is designed to deliver crucial introductory content and create connections which build trust and rapport among classmates. This initial connection promotes student engagement in the reflection-based components of the MSHCI program. The Professional Seminar course establishes the theoretical parameters that students are expected to follow in case analysis and establishes a framework for conducting online discussions in safe and confidential ways.

The remaining coursework is taken online. In their final semester students will complete a capstone project consisting of either a research paper or project.

The 11 required courses:

- Summer 1: HCIA- 705 Professional Seminar (3) (On-campus residency)
HCIA- 715 Human Body Systems/Diseases I (3)
HCIA- 719 Theories of Translation and Interpretation (3)
- Fall 1: HCIA- 720 Health Care Practical Interpreting I (3)
HCIA- 730 Human Body Systems/Diseases II (3)
HLTH- 700 Research Methods* (3)
- Spring 1: HCIA- 740 Health Care Practical Interpreting II (3)
HLTH- 710 Health Care Governance and Economics* (3)
HLTH- 723 Human Resources in Health Care* (3)
- Summer 2: HCIA- 750 Health Care Interpreting Within a Diverse Deaf Community (3)
HCIA- 770 Capstone Professional Project or Research Paper (3)

* Existing Courses from CHST

a. Table 1b: Graduate Program Schedule – Full-Time

- Indicate academic calendar type: ☒ Semester ☐ Quarter ☐ Trimester ☐ Other (describe)
- Label each term in sequence, consistent with the institution's academic calendar (e.g., Fall 1, Spring 1, Fall 2)

Term: Summer 1				Term: Fall 2			
Course Number & Title	Credits	New	Prerequisite(s)	Course Number & Title	Credits	New	Prerequisite(s)
HCIA 705 Professional Seminar	3	X					
HCIA 715 Human Body Systems/Diseases I	3	X	HCIA 705				
HCIA 719 Theories of Translation and Interpretation	3	X	HCIA 705				
Term credit total:	9			Term credit total:	6		
Term: Fall 1				Term: Spring 2			
Course Number & Title	Credits	New	Prerequisite(s)	Course Number & Title	Credits	New	Prerequisite(s)
HCIA 720 Health Care Practical Interpreting I	3	X	HCIA 705				
HCIA 730 Human Body Systems/Diseases II	3	X	HCIA 715				
HLTH 700 Research Methods	3						
Term credit total:	9			Term credit total:			
Term: Spring 1				Term: Electives			
Course Number & Title	Credits	New	Prerequisite(s)	Course Number & Title	Credits	New	Prerequisite(s)
HCIA 740 Health Care Practical Interpreting II	3	X	HCIA 720				
HLTH 710 Health Care Governance and Economics	3						
HLTH 723 Human Resources in Health Care	3						
Term credit total:	9			Term credit total:			
Term: Summer 2				Term:			
Course Number & Title	Credits	New	Prerequisite(s)	Course Number & Title	Credits	New	Prerequisite(s)
HCIA 750 Health Care Interpreting Within a Diverse Deaf Community	3	X	HCIA 730; HCIA 740				
HCIA 770 Capstone Professional Project or Research Paper	3	X	HCIA 719; HCIA 730; HCIA 740; HLTH 700; HLTH 710; HLTH 723				
Term credit total:	6			Term credit total:			
Program Totals:	Credits: 33	For Master's programs, identify the required comprehensive, culminating element(s) (e.g., thesis), including course number if applicable: HCIA 770 Capstone Professional Project or Research Paper					

New: indicate if new course

Prerequisite(s): list prerequisite(s) for the noted course

PROGRAM COURSES AND SCHEDULE

Table 1b: Graduate Program Schedule – Part-Time

- Indicate academic calendar type: ☒ Semester ___Quarter ___Trimester ___Other (describe)
- Label each term in sequence, consistent with the institution's academic calendar (e.g., Fall 1, Spring 1, Fall 2)

Term: Summer 1				Term: Fall 2			
Course Number & Title	Credits	New	Prerequisite(s)	Course Number & Title	Credits	New	Prerequisite(s)
HCIA 705 Professional Seminar	3	X		HLTH 700 Research Methods	3		
HCIA 715 Human Body Systems/Diseases I	3	X	HCIA 705				
Term credit total:		6		Term credit total:		3	
Term: Fall 1				Term: Spring 2			
Course Number & Title	Credits	New	Prerequisite(s)	Course Number & Title	Credits	New	Prerequisite(s)
HCIA 720 Health Care Practical Interpreting I	3	X	HCIA 705	HLTH 710 Health Governance and Economics	3		
HCIA 730 Human Body Systems/Human Diseases II	3	X	HCIA 715	HCIA 770 Capstone Professional Project /or Research Paper	3	X	HCIA 719; HCIA 730; HCIA 740; HLTH 700; HLTH 710; HLTH 723
Term credit total:		6		Term credit total:		6	
Term: Spring 1				Term: Electives			
Course Number & Title	Credits	New	Prerequisite(s)	Course Number & Title	Credits	New	Prerequisite(s)
HLTH 723 Human Resources in Health Care	3						
HCIA 740 Health Care Practical Interpreting II	3	X	HCIA 720				
Term credit total:		6		Term credit total:			
Term: Summer 2				Term:			
Course Number & Title	Credits	New	Prerequisite(s)	Course Number & Title	Credits	New	Prerequisite(s)
HCIA 719 Theories of Translation and Interpretation	3	X	HCIA 705				
HCIA 750 Health Care Interpreting Within a Diverse Deaf Community	3	X	HCIA 730; HCIA 740				
Term credit total:		6		Term credit total:			
Program Totals:		Credits: 33		For Master's programs, identify the required comprehensive, culminating element(s) (e.g., thesis), including course number if applicable: HICA 770 Capstone Professional Project /or Research Paper			

New: indicate if new course

Prerequisite(s): list prerequisite(s) for the noted course

- b. RIT's General Education Framework – N/A
- c. CHST will offer three of the required courses in the program.

Letters of support for each course can be found in Appendix C.

- d. Schedule Description

This Program will be delivered online with the exception of one face-to-face on-campus course commencing the program, which will also have some online components to be completed prior to and subsequent to the week on campus.

- e. Existing courses from CHST's MS Degree in Health Care Systems Administration

HLTH-700 Research Methods - This is an introductory graduate-level survey course on research design/methods and analysis. The course provides a broad overview of the process and practices of social research in service-related contexts. Content includes principles and techniques of research design, sampling, data collection, and analysis, including the nature of evidence, types of research, defining research questions, sampling techniques, data collection, data analysis, issues concerning human subjects and research ethics, and challenges associated with conducting research in real-world contexts. This course instructs the learner how to conduct research using tools the RIT library can provide. Fundamentals include use of online search engines and databases. The analysis component of the course provides an understanding of statistical methodology used to collect and interpret data found in research as well as how to read and interpret data collection instruments.

HLTH-710 Health Care Governance and Economics - The Health Care Governance and Economics course is intended to provide the learners with an appreciation of the role law and economics plays in the everyday operation of the health care system in the United States. The course will capture the essence of health law and economics from management's perspective. The students will have an opportunity to explore the fundamental elements of health care law and how regulatory statutes are developed. In addition, we will investigate and understand the production, function, and the demand for health care. We will explore the core economic concepts to focus on key policy areas, such as the structure and effects of Medicare reform, insurance plans, and new technologies in the health care community. We will investigate lifestyle choices—such as alcohol consumption, obesity, and tobacco use—and how individual choices affect everyday health and the health care system at large. The latest theoretical developments, Medicaid and SCHIP, insurance plans, new technologies, international comparative studies, and policy updates are integrated where appropriate.

HLTH-723 Human Resources in Health Care - This course focuses on the changing competitive health care business environment that has made human capital an organization's key asset, with HR largely responsible for cultivating it. Specifically, students will learn the impact that human capital has on the HR division

and function of health care organizations. The focus will be on how the “New HR” has become more strategic and fundamental to a health care organization’s success.

- f. New Courses from ASLIE: See course outlines in the pages that follow.

	<p>ROCHESTER INSTITUTE OF TECHNOLOGY COURSE PROPOSAL FORM</p> <p>National Technical Institute for the Deaf</p>
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American Sign Language and Interpreting Education

NEW (or REVISED) COURSE: NTID- HCIA- 705- Professional Seminar

1.0 Course Designations and Approvals

Required course approvals:	Approval request date:	Approval granted date:
Academic Unit Curriculum Committee	10/22/2014	11/24/2014
College Curriculum Committee	12/10/2014	3/19/2015

Optional designations:	Is designation desired?	*Approval request date:	**Approval granted date:
General Education:	Yes No X		
Writing Intensive:	Yes No X		
Honors	Yes No X		

2.0 Course information:

Course title:	Professional Seminar
Credit hours:	3
Prerequisite(s):	N/A
Co-requisite(s):	N/A
Course proposed by:	Lynn Finton
Effective date:	AY 2016

	Contact hours	Maximum students/section
Classroom		
Lab		
Studio		
Other (specify)	40 hours one week on campus, plus 85 additional student-effort hours	16

2.a Semester(s) offered (check)

Fall	Spring	X Summer	Other
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All courses must be offered at least once every 2 years. If course will be offered on a bi-annual basis, please indicate here:

2.b Student Requirements

Students required to take this course: (by program and year, as appropriate)
Students enrolled in the MS in Health Care Interpretation during the first semester.

Students who might elect to take the course:

In the sections that follow, please use sub-numbering as appropriate (e.g. 3.1, 3.2, etc.)

3.0 Goals of the course (including rationale for the course, when appropriate):

- 3.1 To familiarize students with the foundation of the practical skills and knowledge undergirding the program
- 3.2 To introduce Demand Control- Schema and Reflective Practice
- 3.3 To understand health care systems, culture, institutional hierarchy, state and federal regulations regarding the provision of Language Access Services in hospital settings

4.0 Course description (as it will appear in the RIT Catalog, including pre- and co-requisites, and semesters offered)**HCIA 705****Professional Seminar**

This course is the first course taken in the MS in Health Care Interpreting degree program. This week long on-campus residency professional seminar will build a foundation of the practical skills and knowledge undergirding the master's degree program. It is intended to provide the learner with an overview of the course management system, webinar software, and sign language health care skills development used throughout the program. This course addresses the theoretical constructs and the approach to the practice of interpreting based on the demand-control schema and reflective practice and the federal regulations and policies impacting communication access and the work of interpreters. The latest research regarding health care disparities in the deaf population will be presented and health care interpreting skill development activities will commence.

Class 3, Credit 3 (Su)

5.0 Possible resources (texts, references, computer packages, etc.)

- 5.1 Dean, R. and Pollard, R, (2013), *The Demand Control Schema: Interpreting as a Practice Profession*, Create Space Independent Publishing Platform, South Carolina
- 5.2 Crezee, I, (2013), *Introduction to Healthcare for Interpreters and Translators*, John Benjamin Publishing, Amsterdam
- 5.3 Body Language – web-based ASL/English interpreting skill development program

6.0 Topics (outline):

- | |
|--|
| <ul style="list-style-type: none">6.1 Demand Control-Schema including the theoretical construct and dialogic work analysis and reflective practice6.2 Federal and state and regulations regarding Language Access Services in hospitals6.3 Health care disparities and the deaf population6.4 The patient interview6.5 Introduction to health care discourse- Body Language – English to ASL interpreting skill development6.6 Interpreting in the emergency room |
|--|

7.0 Intended course learning outcomes and associated assessment methods of those outcomes (please include as many Course Learning Outcomes as appropriate, one outcome and assessment method per row).

Learning Outcomes	Assessment Method
<i>7.1 To familiarize students with the foundation of the practical skills and knowledge undergirding the program (Goal 3.1)</i> 7.1.1 Demonstrate increased knowledge and bilingual fluency of medical terminology in English and ASL 7.1.2 Demonstrate ability to interpret health care dialogues based on the context of the setting and appointment 7.1.3 Compare and contrast recorded interpretations of one's own work with the work of other interpreters	7.1.1, 7.1.2, 7.1.3 Pre and post assessment of video recordings
<i>7.2 To introduce Demand Control- Schema and Reflective Practice (Goal 3.2)</i> 7.2.1 Describe basic constructs of DC-S (theoretical construct, dialogic work analysis) 7.2.2 Identify and discuss personal and professional demands that occur during health care interpreting assignments and identify strategies leading to an effective interpretation 7.2.3 Articulate unique demands of interpreting in emergency settings	7.2.1, 7.2.2, 7.2.3 Final exam

Learning Outcomes	Assessment Method
<p><i>7.3 To understand health care systems, culture, institutional hierarchy, federal and state regulations and policies associated with communication and language access in hospital settings (Goal 3.3)</i></p> <p>7.3.1 Identify state and federal regulations regarding the provision of Language Access Services in hospital settings</p> <p>7.3.2 Identify and describe health care systems, culture, institutional hierarchy and roles that professionals hold within those systems</p> <p>7.3.2 Demonstrate awareness of liability issues related to ineffective interpretation with grave errors, including risk to the consumers and interpreter</p>	<p>7.3.1, 7.3.2 Final exam</p>

8.0 Program outcomes and/or goals supported by this course

Effectively interpret for deaf consumers (patients, family members, and deaf health professionals) in health care environments.

10.0 Other relevant information (such as special classroom, studio, or lab needs, special scheduling, media requirements, etc.)

A classroom with movable chairs, controllable lighting, whiteboard, LCD projector, computer and visualizer for the first week only.



ROCHESTER INSTITUTE OF TECHNOLOGY
COURSE PROPOSAL FORM

National Technical Institute for the Deaf

American Sign Language and Interpreting Education

NEW (or REVISED) COURSE: NTID-HCIA-715- Human Body Systems/Diseases I

1.0 Course Designations and Approvals

Required course approvals:	Approval request date:	Approval granted date:
Academic Unit Curriculum Committee	10/22/2014	11/24/2014
College Curriculum Committee	12/10/2014	3/19/2015

Optional designations:	Is designation desired?		*Approval request date:	**Approval granted date:
General Education:	Yes	No X		
Writing Intensive:	Yes	No X		
Honors	Yes	No X		

2.0 Course information:

Course title:	Human Body Systems/Diseases I
Credit hours:	3
Prerequisite(s):	HCIA 705 Professional Seminar
Co-requisite(s):	None
Course proposed by:	Lynn Finton
Effective date:	AY 2016

Contact hours		Maximum students/section
Classroom		
Lab		
Studio		
Other (specify)	8-week online course plus 135 student-effort hours	16

2.a Semester(s) offered (check)

Fall	Spring	X Summer	Other
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All courses must be offered at least once every 2 years. If course will be offered on a bi-annual basis, please indicate here:

2.b Student Requirements

Students required to take this course: (by program and year, as appropriate)
Students accepted into the MS in Health Care Interpretation during the first year.

Students who might elect to take the course:

In the sections that follow, please use sub-numbering as appropriate (e.g., 3.1, 3.2, etc.)

3.0 Goals of the course (including rationale for the course, when appropriate):

3.1 To help prepare interpreters for work in medical settings by gaining knowledge and expertise in human body systems and diseases from a deaf health care professional perspective

3.2 Gain knowledge of medical terminology in English and American Sign Language

3.3 Gain an understanding of general medical procedures, testing and medications

4.0 Course description (as it will appear in the RIT Catalog, including pre- and co-requisites, and semesters offered)

HICA 715

Human Body Systems/Diseases I

This first course in a two-course sequence will help interpreters build a strong foundation in human body systems and diseases. Within each body system topics for discussion include: anatomy and physiology (structure and function), common conditions/diseases, common medications and treatments, specialized terms, health care provider specialties, medical tests, and procedures and equipment. This class is conducted in ASL. (HICA 705)

Class 3, Credit 3 (Su)

5.0 Possible resources (texts, references, computer packages, etc.)

5.1 Zelman, et al. (2010). *Human Disease: A Systematic Approach*; Pearson: Upper Saddle River, N.J.

5.1 Gross & Guernsey (2010). *Pulse: Voices from the Heart of Medicine – The First Year*. Change in Healthcare Publishing: New York, NY

6.0 Topics (outline):

6.1 Week 1

- a. Introduction to Human Disease
- b. Immunity and Lymphatic System

6.2 Week 2

- a. Infectious Disease
- b. Cancer

6.3 Week 3

- a. Heredity and Disease
- b. Case Discussion I – Inside the Mind of Deaf and Hearing Doctors

6.4 Week 4
a. Cardiovascular Diseases
b. Case Discussion II – Inside the Mind of Deaf Patients
6.5 Week 5
a. Blood Diseases
6.6 Week 6
a. Respiratory System Diseases
6.7 Week 7
a. Gastrointestinal System Diseases
b. Case Discussion III– Inside the Mind of Medical Interpreters
6.8 Week 8
a. Review / Final Exam

7.0 Intended course learning outcomes and associated assessment methods of those outcomes

Course Learning Outcome	Assessment Method
<p><i>7.1 To help prepare interpreters for work in medical settings by gaining knowledge and expertise in human body systems and diseases from a deaf health care professional perspective (Goal 3.1)</i></p> <p>7.1.1 Identify and describe human anatomy and physiology as it applies to interpreting professionals in the medical setting</p> <p>7.1.2 Identify and describe common human illnesses and diseases on a systematic basis, including basic etiology, common diagnoses, common treatments, and prognoses</p> <p>7.1.3 Recognize and become familiar with medical training and the physician thought process with regard to patient care and illness</p> <p>7.1.4 Analyze and discuss ethical dilemmas from a provider's perspective</p> <p>7.1.5 Identify the practice profession approach from a physician perspective and the meaning of professional responsibility</p> <p>7.1.6 Analyze and discuss ethical dilemmas from a provider's perspective</p> <p><i>7.2 Gain knowledge of medical terminology in English and American Sign Language(Goal 3.2)</i></p>	<p>7.1.1,7.1.2,7.1.3,7.1.3 Case Discussions Exam</p> <p>7.2.1, 7.2.2 Case discussions Exam</p>

Course Learning Outcome	Assessment Method
<p>7.2.1 Identify and be familiar with medical terms in English and ASL</p> <p>7.2.2 Appreciate and recognize the unique ways language and terminology are used in medical settings</p> <p>7.3 <i>Gain an understanding of general medical procedures, testing and medications (Goal3.3)</i></p> <p>7.3.1 Demonstrate understanding of common procedures and medications in English and ASL.</p>	<p>7.3.1</p> <p>Case discussions</p> <p>Exam</p>

8.0 Program outcomes and/or goals supported by this course

Effectively interpret for deaf consumers (patients, family members, and deaf health professionals) in health care environments.

10.0 Other relevant information (such as special classroom, studio, or lab needs, special scheduling, media requirements, etc.)

N/A



ROCHESTER INSTITUTE OF TECHNOLOGY
COURSE PROPOSAL FORM

National Technical Institute for the Deaf

American Sign Language and Interpreting Education

NEW (or REVISED) COURSE: NTID-HCIA-719-Theories of Translation and Interpretation

1.0 Course Designations and Approvals

Required course approvals:	Approval request date:	Approval granted date:
Academic Unit Curriculum Committee	10/22/2014	11/24/2014
College Curriculum Committee	12/10/2014	3/19/2015

Optional designations:	Is designation desired?	*Approval request date:	**Approval granted date:
General Education:	Yes No X		
Writing Intensive:	Yes No X		
Honors	Yes No X		

2.0 Course information:

Course title:	Theories of Translation and Interpretation
Credit hours:	3
Prerequisite(s):	HCIA 705 Professional Seminar
Co-requisite(s):	N/A
Course proposed by:	Lynn Finton
Effective date:	AY 2016

	Contact hours	Maximum students/section
Classroom		
Lab		
Studio		
Other (specify)	8-week online course plus 135 student-effort hours	16

2.a Semester(s) offered (check)

Fall	Spring	X Summer	Other
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All courses must be offered at least once every 2 years. If course will be offered on a bi-annual basis, please indicate here:

2.b Student Requirements

Students required to take this course: (by program and year, as appropriate)
This is a required course for all students enrolled in the MS in Health Care Interpreting during their first year.

Students who might elect to take the course:

In the sections that follow, please use sub-numbering as appropriate (e.g. 3.1, 3.2, etc.)

3.0 Goals of the course (including rationale for the course, when appropriate):

- 3.1 Describe the various scope of practice ascribed to or adopted by interpreters in health care settings
- 3.2 Illustrate how scope of practice expectations impact the process of interpreting with examples from health care
- 3.3 Develop a personal model of the interpreting process that is research-based and define it with examples

4.0 Course description (as it will appear in the RIT Catalog, including pre- and co-requisites, and semesters offered). Please use the following format:

HCIA 719

Theories of Translation and Interpretation

This course will begin with an examination of the scope of practice of spoken language interpreters in health care settings and this will then be compared to the models of professional deportment in sign language interpreting. From there, we will review the major paradigms in the field of translation and interpretation, that of formal or functional (dynamic) equivalence, and how the scope of practice expectations impact the interpretation process. Finally, students will explore the concept of “sense” or meaning and how to convey that in a medical setting. (HCIA 705)

Class 3, Credit 3 (Su)

5.0 Possible resources (texts, references, computer packages, etc.)

- 5.1 Blum-Kulka, S. (2000). Shifts of cohesion and coherence in translation. In L. Venuti (Ed.), *The Translation Studies Reader* (pp. 298-313). London and New York: Routledge.
- 5.2 Gumul, E. (2006). Explication in simultaneous interpreting: A strategy or a by-product of language mediation? *Across Languages and Cultures*, 7(2), 171-190
DOI: 10.1556/Acr.7.2006.2.2
- 5.3 Livingston, S., Singer, B. & Abramson, T. (1995). A Study to Determine the Effectiveness of Two Kinds of Interpreting. In *A Confluence of Diverse Relationships: Proceedings of the Thirteenth National Convention of the Registry of Interpreters for the Deaf* (pp. 154 - 176). Silver Springs: RID Publications.

- 5.4 McDermid, C. (2010). Culture brokers, advocates, or conduits: Pedagogical considerations for Deaf interpreter education. *International Journal of Interpreter Education*, 2, 76-101
- 5.5 McDermid, C. (2014). A pragmatic, multi-dimensional model of the interpreting process. *Gallaudet Symposium Selected Papers, Vol 1*.

6.0 Topics (outline):

- 6.1 Scope of Practice and Expectations
- 6.2 Interpretation Process–Formal or Functional
- 6.3 What is Meaning? Utterances have a variety of “senses” or levels of meaning, including literal and implied, which vary across languages.
- 6.4 Explication Hypothesis
- 6.5 Cohesion–utterances are held together through a variety of means (reference, conjunctive devices, lexical cohesion, substitution, and ellipsis).
- 6.6 Application of theory to diagnostic feedback

7.0 Intended course learning outcomes and associated assessment methods of those outcomes (please include as many Course Learning Outcomes as appropriate, one outcome and assessment method per row).

Course Learning Outcome	Assessment Method
<p>7.1 <i>Describe the various scope of practice ascribed to or adopted by interpreters in health care settings (Goal 3.1)</i></p> <p>7.1.1 Explain the helper, machine, ally models in sign language interpreting</p> <p>7.1.2 Explain the concept of culture broker, agent of the state or medical institution, co-therapist</p> <p>7.1.3 Contrast those models to community or employer expectations</p> <p>7.1.4 Reflect on role of “outsider” as a culture broker</p> <p>7.2 <i>Illustrate how scope of practice expectations impact the process of interpreting with examples from health care(goal3.2)</i></p> <p>7.2.1 Describe how scope of practice may dictate choice to follow a paradigm of formal or functional interpretation</p> <p>7.2.2 Provide examples of translations based on a formal or functional paradigm and tie that into scope of practice expectations</p> <p>7.2.3 Predict the benefits and pitfalls of both approaches in terms of patient health, treatment success, etc.</p>	<p>7.1.1,7.1.2,7.1.3,7.1.4 Paper and video presentation</p> <p>7.2.1, 7.2.2, 7.3.3 Video presentation and paper</p>

Course Learning Outcome	Assessment Method
<p><i>7.3 Develop a personal model of the interpreting process that is research based and define it with examples (Goal 3.3)</i></p> <p>7.3.1 Explain the two major paradigms concerning the process of interpreting, formal or functional</p> <p>7.3.2 Expand on the concept of “sense” or the conveyance of meaning</p> <p>7.3.3 Summarize the research on the Explicitation Hypothesis and sign language interpreting</p> <p>7.3.4 Develop a model, with examples, of how various texts could be translated and later interpreted</p>	<p>7.3.1, 7.3.2, 7.3.3, 7.3.4</p> <p>Video presentation, paper, with multi-media presentation including examples of translation</p>

8.0 Program outcomes and/or goals supported by this course

Effectively interpret for deaf consumers (patients, family members, and deaf health professionals) in health care environments.

10.0 Other relevant information (such as special classroom, studio, or lab needs, special scheduling, media requirements, etc.)

N/A



ROCHESTER INSTITUTE OF TECHNOLOGY
COURSE PROPOSAL FORM

National Technical Institute for the Deaf

American Sign Language and Interpreting Education

NEW (or REVISED) COURSE: NTID-HCIA-720-Health Care Practical Interpreting I

1.0 Course Designations and Approvals

Required course approvals:	Approval request date:	Approval granted date:
Academic Unit Curriculum Committee	10/22/2014	11/24/2014
College Curriculum Committee	12/10/2014	3/19/2015

Optional designations:	Is designation desired?		*Approval request date:	**Approval granted date:
General Education:	Yes	No X		
Writing Intensive:	Yes	No X		
Honors	Yes	No X		

2.0 Course information:

Course title:	Health Care Practical Interpreting I
Credit hours:	3
Prerequisite(s):	HCIA 705 Professional Seminar
Co-requisite(s):	N/A
Course proposed by:	Lynn Finton
Effective date:	AY 2016

	Contact hours	Maximum students/section
Classroom		
Lab		
Studio		
Other (specify)	8-week online course plus 135 student-effort hours	16

2.a Semester(s) offered (check)

Fall X	Spring	Summer	Other
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All courses must be offered at least once every 2 years. If course will be offered on a bi-annual basis, please indicate here:

2.b Student Requirements

Students required to take this course: (by program and year, as appropriate)
Students enrolled in the MS in Health Care Interpretation during the first year.

Students who might elect to take the course:

In the sections that follow, please use sub-numbering as appropriate (eg. 3.1, 3.2, etc.)

3.0 Goals of the course (including rationale for the course, when appropriate):

3.1 To enhance interpreting skills and health care knowledge

3.2 To develop an understanding of the practice realities of interpreting within inpatient and outpatient settings

3.3 To recognize and monitor components of self-care

4.0 Course description (as it will appear in the RIT Catalog, including pre- and co-requisites, and semesters offered). Please use the following format:

HCIA 720

Health Care Practical Interpreting I

This interpreting course exposes interpreters to interpreting in mental health, cardiology, OB/GYN, and orthopedic outpatient and inpatient settings. This course will expose interpreters to medical professionals, common medical service protocols, typical diagnostic and treatment dialogues or clinical "scripts" of common conditions, diagnoses, and initial presenting complaints. Exposure to this new content knowledge happens via observations of medical student practice dialogues with simulated patients and other problem-based learning activities. In addition to this new knowledge and the unique observation opportunity, participants will be further reinforcing and integrating the Human Body Systems course content in their analyses of medical interpreted cases. English to ASL/ASL to English skill development activities will be employed. (HCIA 705)

Class 3, Credit 3 (F)

5.0 Possible resources (texts, references, computer packages, etc.)

5.1 Pollard, R. (1998) Mental Health Interpreting: A Mentored Curriculum, University of Rochester

5.2 Pedersen, Darlene D. (2008) Psych notes: Clinical Pocket Guide (Spiral-bound). F.A. Davis Company

5.3 Swabey, L., & Malcolm, K. (2012). *In our hands: Educating Healthcare Interpreters*. Gallaudet University Press: Washington, D, C.

5.4 Body Language Program—web based ASL/English interpreting skill development program

6.0 Topics (outline):

6.1 Mental Illness and the DSM System

6.2 Ethics in Mental Health Interpreting

- 6.3 Mental Health Settings and Clinicians' Objectives
- 6.4 Interpreting and Dysfluent Patients
- 6.5 Dynamics of Mental Health Interpreting Work
- 6.6 Body Language – The Cardiovascular System
- 6.7 Interpreting in OBGYN settings
- 6.7 Body Language – The Muscular Skeletal System
- 6.8 Self-Care
- 6.9 Webinars – case conferencing

7.0 Intended course learning outcomes and associated assessment methods of those outcomes (please include as many Course Learning Outcomes as appropriate, one outcome and assessment method per row).

Course Learning Outcome	Assessment Method
<p><i>7.1 To enhance interpreting skills and health care knowledge (Goal3.1)</i></p> <p>7.1.1 Analyze likely dialogues of various initial meetings with health care professionals (e.g. headaches, chest pain/palpitations, shortness of breath, vaginal bleeding, depression, anxiety disorders, and orthopedic conditions.).</p> <p>7.1.2 Identify and describe patient conditions and treatments associated with various illnesses and conditions (e.g., high blood pressure, heart disease, infectious diseases, mental illness).</p> <p>7.1.3 Produce and post video recordings in ASL from medical stimulus materials in the Body Language program.</p>	<p>7.1.1, 7.1.2, 7.1.3 Video analysis/reflections</p> <p>Pre and post video assessments</p>
<p><i>7.2 To develop an understanding of the practice realities of interpreting within inpatient and outpatient settings(Goal 3.2)</i></p> <p>7.2.1 Present, analyze, and discuss interpreting cases</p> <p>7.2.2 Apply knowledge of health care systems and the rights and needs of deaf, deaf-blind, and hard-of-hearing people to effect positive and systematic change</p>	<p>7.2.1 Video analysis/reflections Case presentation</p>
<p><i>7.3 To recognize and monitor components of self-care(Goal3.3)</i></p>	

Course Learning Outcome	Assessment Method
<p>7.3.1 Articulate issues in the work environment that may create distress within oneself and employ strategies for dealing with feelings.</p> <p>7.3.2 Articulate personal safety practices to employ in health care settings</p>	<p>7.3.1,7.3.2 Analysis/reflections Case presentation</p>

8.0 Program outcomes and/or goals supported by this course

Effectively interpret for deaf consumers (patients, family members, and deaf health professionals) in health care environments.

10.0 Other relevant information (such as special classroom, studio, or lab needs, special scheduling, media requirements, etc.)

N/A



ROCHESTER INSTITUTE OF TECHNOLOGY
COURSE PROPOSAL FORM

National Technical Institute for the Deaf

American Sign Language and Interpreting Education

NEW (or REVISED) COURSE: NTID-HCIA-730-Human Body Systems/Diseases II

1.0 Course Designations and Approvals

Required course approvals:	Approval request date:	Approval granted date:
Academic Unit Curriculum Committee	10/22/2014	11/24/2014
College Curriculum Committee	12/10/2014	3/19/2015

Optional designations:	Is designation desired?		*Approval request date:	**Approval granted date:
General Education:	Yes	No X		
Writing Intensive:	Yes	No X		
Honors	Yes	No X		

2.0 Course information:

Course title:	Human Body Systems/Diseases II
Credit hours:	3
Prerequisite(s):	HCIA 715 Human Body Systems/Diseases I
Co-requisite(s):	None
Course proposed by:	Lynn Finton
Effective date:	AY 2016

	Contact hours	Maximum students/section
Classroom		
Lab		
Studio		
Other (specify)	8-week online course plus 135 student-effort hours	16

2.a Semester(s) offered (check)

Fall	X	Spring	Summer	Other
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All courses must be offered at least once every 2 years. If course will be offered on a bi-annual basis, please indicate here:

2.b Student Requirements

Students required to take this course: (by program and year, as appropriate) Students enrolled in the MS in Health Care Interpretation program in their first year
Students who might elect to take the course:

In the sections that follow, please use sub-numbering as appropriate (e.g. 3.1, 3.2, etc.)

3.0 Goals of the course (including rationale for the course, when appropriate):

- | |
|---|
| 3.1 To help prepare interpreters for work in medical settings by gaining knowledge and expertise in human body systems and diseases from a deaf physician perspective |
| 3.2 Gain knowledge of medical terminology in English and American Sign Language |
| 3.3 Gain an understanding of general medical procedures, testing and medications |

4.0 Course description (as it will appear in the RIT Catalog, including pre- and co-requisites, and semesters offered). Please use the following format:

HCIA 730	Human Body Systems/Diseases II
This second course in a two-course sequence in Human Body Systems/Diseases will continue to help interpreters build a strong foundation in human body systems and diseases by addressing the remaining body systems not covered in the first course. Within each body system, topics for discussion include: anatomy and physiology (structure and function), common conditions/diseases, common medications and treatments, specialized terms, health care provider specialties, medical tests, and procedures and equipment. (HCIA 715)	
Class 3, Credit 3 (F)	

5.0 Possible resources (texts, references, computer packages, etc.)

- | |
|---|
| 5.1 Zelman, et al. (2010). Human Disease: A Systematic Approach; Pearson: Upper Saddle River, NJ |
| 5.2 Gross & Guernsey (2010). Pulse: Voices from the Heart of Medicine – The First Year. Change in Healthcare Publishing: New York, NY |

6.0 Topics (outline):

- | |
|---|
| 6.1 Week 1 |
| a. Urinary System Diseases |
| 6.2 Week 2 |
| a. Reproductive System Diseases |
| 6.3 Week 3 |
| a. Endocrine System Diseases |
| b. Case Discussion I – Inside the Mind of Diabetic Patients |
| 6.4 Week 4 |
| a. Nervous System Diseases |
| 6.5 Week 5 |

<ul style="list-style-type: none"> a. Mental Illnesses and Cognitive Disorders b. Case Discussion II – Interpreting for Mentally Ill Deaf Patients
6.6 Week 6
<ul style="list-style-type: none"> a. Musculoskeletal Diseases
6.7 Week 7
<ul style="list-style-type: none"> a. Integumentary (Skin) Disease b. Case Discussion III– Fitting in the Future Health Care System
6.8 Week 8
<ul style="list-style-type: none"> a. Review and Final Exam

7.0 Intended course learning outcomes and associated assessment methods of those outcomes

Course Learning Outcome	Assessment Method
<p><i>7.1 To help prepare interpreters for work in medical settings by gaining knowledge and expertise in human body systems and diseases from a deaf physician perspective (Goal 3.1)</i></p> <ul style="list-style-type: none"> 7.1.1 Identify and describe human anatomy and physiology as it applies to interpreting professionals in the medical setting. 7.1.2 Identify and describe common human illnesses and diseases on a systematic basis including basic etiology, common diagnoses, common treatments, and prognoses 7.1.3 Recognize and become familiar with medical training and the physician thought process with regard to patient care and illness. 7.1.4 Analyze and discuss ethical dilemmas from a provider's perspective 7.1.5 Identify the practice profession approach from a physician perspective and the meaning of professional responsibility 7.1.6 Analyze and discuss ethical dilemmas from a provider's perspective 	<p>7.1.1,7.1.2,7.1.3,7.1.3 Case Discussions Exam</p>
<p><i>7.2 Gain knowledge of medical terminology in English and American Sign Language(Goal 3.2)</i></p> <ul style="list-style-type: none"> 7.2.1 Identify and be familiar with medical terms in English and ASL 7.2.2 Appreciate and recognize the unique ways language and terminology are used in medical settings 	<p>7.2.1, 7.2.2 Case discussions Exam</p>
<p><i>7.3 Gain an understanding of general medical procedures, testing and medications (Goal3.3)</i></p>	<p>7.3.1</p>

7.3.1 Describe common procedures and medications in English and ASL	Case discussions Exam
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8.0 Program outcomes and/or goals supported by this course

Effectively interpret for deaf consumers (patients, family members, and deaf health professionals) in health care environments.

10.0 Other relevant information (such as special classroom, studio, or lab needs, special scheduling, media requirements, etc.)

N/A



**ROCHESTER INSTITUTE OF TECHNOLOGY
COURSE PROPOSAL FORM**

NTID

American Sign Language and Interpreting Education

NEW (or REVISED) COURSE: NTID-HCIA-740-Health Care Practical Interpreting II

1.0 Course Designations and Approvals

Required course approvals:	Approval request date:	Approval granted date:
Academic Unit Curriculum Committee	10/22/2014	11/24/2014
College Curriculum Committee	12/10/2014	3/19/2015

Optional designations:	Is designation desired?		*Approval request date:	**Approval granted date:
General Education:	Yes	No X		
Writing Intensive:	Yes	No X		
Honors	Yes	No X		

2.0 Course information:

Course title:	Health Care Practical Interpreting II
Credit hours:	3
Prerequisite(s):	HCIA-720 Health Care Practical Interpreting I
Co-requisite(s):	N/A
Course proposed by:	Lynn Finton
Effective date:	AY 2016

Contact hours		Maximum students/section
Classroom		
Lab		
Studio		
Other (specify)	8-week online course plus 135 student-effort hours	16

2.a Semester(s) offered (check)

Fall	Spring X	Summer	Other
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All courses must be offered at least once every 2 years. If course will be offered on a bi-annual basis, please indicate here:

2.b Student Requirements

Students required to take this course: (by program and year, as appropriate)
Students enrolled in the MS in Health Care Interpretation Program during the first year

Students who might elect to take the course:

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In the sections that follow, please use sub-numbering as appropriate (e.g. 3.1, 3.2, etc.)

3.0 Goals of the course (including rationale for the course, when appropriate):

3.1 To enhance interpreting skills and health care knowledge

3.2 To develop skills as a facilitator of case conferencing/reflective practice discussions.

4.0 Course description (as it will appear in the RIT Catalog, including pre- and co-requisites, and semesters offered). Please use the following format:

HCIA 740

Health Care Practical Interpreting II

This course is continuation of HICA 720 Health Care Practical Interpreting I. The course content will address interpreting for surgery, end of life care, pediatrics, and cancer inpatient and outpatient settings. It will also advance students' ability to facilitate group supervision based on DC-S constructs. Using reflective practice techniques already employed and demonstrated in the program's courses, students will be expected to emulate similar techniques with their colleagues. Case presentation and case analysis of actual interpreting assignments will form the basis for the course material and activities. Students will be expected to identify and articulate the unique contextual factors of the case (the demands of the job), the decisions made by the interpreting in the case, and discuss all ethical attributes of these demand-control pairings. Students will also be expected to use DC-S constructs to restructure the dialogue that emerges from case analysis discussions. Students will be further reinforcing and integrating the Human Body Systems course content in their analyses of medical interpreted cases. English to ASL/ASL to English skill development activities will be employed. (HCIA 720)

Class 3, Credit 3 (S)

5.0 Possible resources (texts, references, computer packages, etc.)

5.1 Crezee, I.,(2013), Introduction to Healthcare for Interpreters and Translators

5.2 Body Language – web-based ASL/English interpreting skill development program

6.0 Topics (outline):

6.1 Interpreting for Surgery

6.2 The Digestive System – Body Language

6.3 Interpreting for End of Life Care

6.4 The Respiratory System – Body Language

6.5 Interpreting in Pediatrics

6.6 Diabetes – Body Language

6.7 Interpreting in Cancer Outpatient and Inpatient Settings

6.8 Reflective practice, supervision and case conferencing in interpreting

6.9 Thematic supervision and other reflective practice activities

6.10 Case analysis and structured ethical dialogue

7.0 Intended course learning outcomes and associated assessment methods of those outcomes

<p>7.1 <i>To enhance interpreting skills and health care knowledge (Goal3.1)</i></p> <p>7.1.1 Students will demonstrate knowledge of the likely dialogues for various initial complaints/illnesses/conditions (e.g., asthma, gastrointestinal disorders, well child checkups and end of life care.).</p> <p>7.1.2 Students will demonstrate knowledge of patient education and treatment associated with various illnesses/conditions (e.g., diabetes, ear infections, infectious diseases, asthma).</p> <p>7.1.3 Students will produce and post video recordings in ASL from medical stimulus materials in the Body Language program</p>	<p>7.1.1, 7.1.2, 7.1.3 Video analysis/reflections</p> <p>Pre and post video assessments</p>
<p>7.2 <i>To develop skills as a facilitator of case conferencing/reflective practice discussions (Goal 3.2)</i></p> <p>7.2.1 Present, analyze, and discuss interpreting cases</p> <p>7.2.2 Identify and articulate medical practice values evident in cases</p> <p>7.2.3 Effectively identify the aspects of the dialogic work analysis, the decision-making model of DC-S</p> <p>7.2.4 Demonstrate abilities to query, validate, and challenge colleagues using the structure of DC-S</p> <p>7.2.5 Demonstrate advanced decision-making skills and know when ethical dilemmas need to be resolved in collaboration with the patient and health care provider in order to lead to the best outcome for patient treatment and recovery.</p>	<p>7.2.1, 7.2.2, 7.2.3, 7.2.4 Video analysis/reflections Case presentation</p>

8.0 Program outcomes and/or goals supported by this course

Effectively interpret for deaf consumers (patients, family members, and deaf health professionals) in health care environments.

10.0 Other relevant information (such as special classroom, studio, or lab needs, special scheduling, media requirements, etc.)

N/A



ROCHESTER INSTITUTE OF TECHNOLOGY
COURSE PROPOSAL FORM

National Technical Institute for the Deaf

American Sign Language and Interpreting Education

NEW (or REVISED) COURSE: NTID- HCIA-750-Health Care Interpreting Within a Diverse Deaf Community

1.0 Course Designations and Approvals

Required course approvals:	Approval request date:	Approval granted date:
Academic Unit Curriculum Committee	10/22/2014	11/24/2014
College Curriculum Committee	12/10/2014	3/19/2015

Optional designations:	Is designation desired?		*Approval request date:	**Approval granted date:
General Education:	Yes	No X		
Writing Intensive:	Yes	No X		
Honors	Yes	No X		

2.0 Course information:

Course title:	Health Care Interpreting within a Diverse Deaf Community
Credit hours:	<u>3</u>
Prerequisite(s):	HCIA 730 Human Body Systems/Diseases II; HCIA 740 Health Care Practical Interpreting II
Co-requisite(s):	N/A
Course proposed by:	Lynn Finton
Effective date:	AY 2016

	Contact hours	Maximum students/section
Classroom		
Lab		
Studio		
Other (specify)	8-week online course, plus 135 student-effort hours	16

2.a Semester(s) offered (check)

Fall	Spring	Summer X	Other
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All courses must be offered at least once every 2 years. If course will be offered on a bi-annual basis, please indicate here:

2.b Student Requirements

Students required to take this course: (by program and year, as appropriate)
Students enrolled in the MS Health Care Interpretation degree program during their final semester

Students who might elect to take the course:

In the sections that follow, please use sub-numbering as appropriate (eg. 3.1, 3.2, etc.)

3.0 Goals of the course (including rationale for the course, when appropriate):

3.1 To gain an understanding of deaf people's health knowledge, health literacy, and special needs and develop skills to apply this knowledge to working with the diverse deaf community

3.2 To gain an understanding of current perspectives on deaf individuals from the discipline of Deaf Studies including the Deaf Gain paradigm, Deaf Capital Theory, and Social Justice Theory

3.3 To develop skills in working with deaf medical professionals, biomedical and behavioral science students, and deaf interpreters in the health care settings as well as other professional or educational settings

4.0 Course description (as it will appear in the RIT Catalog, including pre- and co-requisites, and semesters offered). Please use the following format:

**HICA 750
Community**

Health Care Interpreting Within a Diverse Deaf

Short Title: Diverse Deaf Community

This course is for health care interpreting students to learn how to work with the diverse Deaf community. The course begins with a discussion of current perspectives in Deaf Studies including the Deaf Gain paradigm and Social Justice Theory relevant to medical interpreting. Current research on deaf individuals' health knowledge, health literacy, and health outcomes are presented. Class discussions will focus on working with deaf individuals fluent in foreign sign languages, minority Deaf populations, deaf individuals with special needs, deaf-blind individuals, deaf interpreters, deaf students, and deaf professionals. Students will develop skills interpreting for some of these deaf individuals. (HICA 730; HICA 740)

Class 3, Credit 3 (Su)

5.0 Possible resources (texts, references, computer packages, etc.)

5.1 Bauman, H-D. L., & Murray, J. J. (Eds). (2014). *Deaf Gain: Raising the stakes for human diversity*. University of Minnesota Press: Minneapolis, MN.

5.2 Hauser, P. C., Finch, K., & Hauser, A. B. (2008). *Deaf professionals and designated interpreters: A new paradigm*. Gallaudet University Press: Washington, DC.

5.3 Swabey, L., & Malcolm, K. (2012). *In our hands: Educating healthcare interpreters*. Gallaudet University Press: Washington, D.C.

6.0 Topics (outline):

- 6.1 Diverse Deaf Community and Interpreting Needs Overview
- 6.2 Current Perspectives in the Deaf Community: Deaf Gain
- 6.3 Social Justice
- 6.4 Deaf Health Knowledge and Health Literacy
- 6.5 International Sign and Signers of Foreign Sign Languages
- 6.6 Deaf Minority Populations
- 6.7 Working with Deaf Individuals with Special Needs
- 6.8 Working with Deaf-Blind individuals
- 6.9 Designated Interpreter in the Medical Setting
- 6.10 Working with Deaf Interpreters in the Medical Setting
- 6.11 Working with Deaf Biomedical and Behavioral Science Students
- 6.12 Working with Deaf Medical Professionals

7.0 Intended course learning outcomes and associated assessment methods of those outcomes

Course Learning Outcome	Assessment Method
<i>7.1 To gain an understanding of the diverse deaf community, their health knowledge, health literacy, and special needs. (Goal 3.1)</i> 7.1.1 Describe the diverse deaf community and different types of deaf individuals who require interpreting (Topics 6.1 – 6.12) 7.1.2 Describe deaf individuals' health knowledge, health literacy, and health outcomes (Topic 6.4)	7.1.1 Seminar postings and Test 1 on assigned readings 7.1.2 Seminar postings and Test 1 on assigned readings
<i>7.2 To gain an understanding of current perspectives on deaf individuals from the discipline of Deaf Studies including the Deaf Gain paradigm, Deaf Capital Theory, and Social Justice Theory. (Goal 3.2)</i> 7.2.1 Describe the Deaf Gain paradigm, Deaf Capital, and Social Justice (Topics 6.2 – 6.3) 7.2.2 Explain how the Deaf Gain paradigm, Deaf Capital, and Social Justice are relevant to medical interpreting (generally or related to one of the special populations discussed in class) (Topics 6.2 – 6.3)	7.2.1 Seminar postings and Test 2 on assigned readings
<i>7.3 To develop skills in working with deaf medical professionals, biomedical and behavioral science students,</i>	

Course Learning Outcome	Assessment Method
<i>and deaf interpreters in the medical setting as well as other professional or educational settings. (Goal 3.3)</i> 7.3.1 Describe the different needs of deaf individuals who medical interpreters may work with in the future (Topics 6.5–6.12) 7.3.2 Perform receptive and expressive interpreting for one of the groups discussed in the class from Topics 6.5–6.12. 7.3.3 Write an APA style paper on one of the groups discussed in class from Topics 6.5–6.12.	7.2.2 Six-page paper with a review of literature 7.3.1 Seminar postings and Test 3 on assigned readings 7.3.2 Video samples of interpreting 7.2.3 Six-page paper with a review of literature

8.0 Program outcomes and/or goals supported by this course

Effectively interpret for deaf consumers (patients, family members, and deaf health professionals) in health care environments.

10.0 Other relevant information (such as special classroom, studio, or lab needs, special scheduling, media requirements, etc.)

N/A



ROCHESTER INSTITUTE OF TECHNOLOGY
COURSE PROPOSAL FORM

National Technical Institute for the Deaf

American Sign Language and Interpreting Education

NEW (or REVISED) COURSE: NTID-HCIA- 770- Capstone Professional Project or Research Paper

1.0 Course Designations and Approvals

Required course approvals:	Approval request date:	Approval granted date:
Academic Unit Curriculum Committee	10/22/2014	11/24/2014
College Curriculum Committee	12/10/2014	3/19/2015

Optional designations:	Is designation desired?	*Approval request date:	**Approval granted date:
General Education:	Yes No X		
Writing Intensive:	Yes No X		
Honors	Yes No X		

2.0 Course information:

Course title:	Capstone Professional Project or Research Paper
Credit hours:	3
Prerequisite(s):	HCIA 719 Theories of Translation and Interpretation; HCIA 730 Human Body Systems/Diseases II; HCIA 740 Health Care Practical Interpreting II; HLTH 700 Research Methods; HLTH 710 Health Care Governance and Economics; HLTH 723 Human Resources in Health Care
Co-requisite(s):	N/A
Course proposed by:	Lynn Finton
Effective date:	AY 2016

	Contact hours	Maximum students/section
Classroom		
Lab		
Studio		
Other (specify)	8-week online course, plus 135 student-effort hours	16

2.a Semester(s) offered (check)

Fall	Spring	Summer X	Other
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All courses must be offered at least once every 2 years. If course will be offered on a bi-annual basis, please indicate here:

2.b Student Requirements

Students required to take this course: (by program and year, as appropriate) Students enrolled in the MS in Health Care Interpretation during their final semester.
Students who might elect to take the course:

In the sections that follow, please use sub-numbering as appropriate (e.g. 3.1, 3.2, etc.)

3.0 Goals of the course (including rationale for the course, when appropriate):

3.1 Provide a framework within which students can write and submit the capstone project/paper on a topic within the field of health care interpreting. Since the program addresses several aspects of interpreting service provision, interpreting pedagogy, interpreting performance, and interpreting policy, students can choose from any aspect of these topic areas. The requirements of this process will be identified by the instructor prior to the class starting.
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4.0 Course description (as it will appear in the RIT Catalog, including pre- and co-requisites, and semesters offered). Please use the following format:

HCIA 770	Capstone Professional Project or Research Paper
The purpose of this course is to provide students the opportunity to conduct research, develop a plan and evaluation components, or submit a project as a demonstration of final proficiency in the program. The faculty teaching the class will guide the topic selected by the student and it will require the student to coalesce and incorporate into the final project or paper a culmination of their entire course work in the program to date (e.g., if a student is employed in a health care setting a project related to enhancing the provision of Language Access Services could be conducted). (HCIA 719; HCIA 730; HCIA 740; HLTH 700; HLTH 710; HLTH 723)	
	Class 3, Credit 3 (Su)

5.0 Possible resources (texts, references, computer packages, etc.)

Nicodemus, B., Metzger, M., (2014) <i>Investigations in Healthcare Interpreting</i> . Gallaudet University Press: Washington, D.C.
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6.0 Topics (outline):

To be defined by the faculty responsible for the class and as appropriate for the program

7.0 Intended course learning outcomes and associated assessment methods of those outcomes (please include as many Course Learning Outcomes as appropriate, one outcome and assessment method per row).

Course Learning Outcome	Assessment Method
7.1 Submit a final project which integrates knowledge from all the course material taken prior within the program and according to the direction provided by the faculty member teaching the class	Rubric created by the faculty member evaluating the final project/paper.

8.0 Program outcomes and/or goals supported by this course

Integrate knowledge of health care environments and language access to build on body of knowledge in the field.

10.0 Other relevant information (such as special classroom, studio, or lab needs, special scheduling, media requirements, etc.)

N/A

3. Faculty

Table 2: Current Faculty, Full-Time

Faculty Member Name and Title/Rank at Institution (include and identify Program Director)	Expected Program Course Assignments	Percent of Teaching Time to Program	Highest and Other Applicable Earned Degrees and Disciplines (include College/University)	Additional Qualifications: list related certifications/licenses; professional experience in field, scholarly contributions, other academic affiliations.
<p>Miraglia, Kathy Lecturer</p> <p>Health Care Program Coordinator</p> <p>*Program Director</p>		<p>25% AY</p> <p>(Summer – add pay for admin fees)</p>	M.S., Career and Human Resource Development, Rochester Institute of Technology	<ul style="list-style-type: none"> National Interpreter Certification, Registry of Interpreter for the Deaf (RID) Nationally recognized health care interpreter with 30+ years of health care interpreting experience Currently on B.S. degree faculty
<p>Dean, Robyn Assistant Professor</p>	<p>HCIA 705 - Professional Seminar</p> <p>HCIA 720 – Health Care Practical Interpreting I</p> <p>HCIA 740 – Health Care Practical Interpreting II</p> <p>HCIA 770 – Capstone Professional Project or Research Paper</p>	<p>50 - 100% AY (varies by semester)</p> <p>(Summer – add pay)</p>	PhD, ABD 2015, Translation and Interpreting Studies, Heriot Watt University	<ul style="list-style-type: none"> National Interpreter Certification, Registry of Interpreter for the Deaf (RID) 23 years' experience as a health care interpreter Active scholar publishing in top Journals

Faculty Member Name and Title/Rank at Institution (include and identify Program Director)	Expected Program Course Assignments	Percent of Teaching Time to Program	Highest and Other Applicable Earned Degrees and Disciplines (include College/University)	Additional Qualifications: list related certifications/licenses; professional experience in field, scholarly contributions, other academic affiliations.
McDermid, Campbell Assistant Professor	HCIA 719 - Theories of Translation and Interpretation	0% AY (Summer – add pay)	PhD, Education, York University	<ul style="list-style-type: none"> • Certificate of ASL-English Interpretation (COI) • Association of Visual Language Interpreters of Canada (AVLIC) • Active scholar publishing in top • Journals • Currently on BS degree faculty
Hauser, Peter Associate Professor	HCIA 750 – Health Care Interpreting Within a Diverse Deaf Community	0% AY (Summer – add pay)	PhD, Psychology, Gallaudet University	<ul style="list-style-type: none"> • Edited a book on interpreting for deaf professionals including health care professionals • Conducts research on cognitive, linguistic, and psychosocial aspects of the Deaf experience • Active scholar publishing in top journals
Kurz, Kim B. Department Chair		Administrative work	PhD, Special Education/Deaf Education University of Kansas	

Table 3: Current Faculty, Part-Time

Faculty Member Name and Title/Rank at Institution (include and identify Program Director)	Program Courses which may be Taught	Highest and Other Applicable Earned Degrees and Disciplines (include College/University)	Additional Qualifications: list related certifications/ licenses; professional experience in field, scholarly contributions, other academic affiliations.
Bergun-Fitzgerald, Denise Adjunct	HLTH 700 Research Methods	MBA University of Rochester	<ul style="list-style-type: none"> Experienced senior health care executive Research methods faculty in RIT research methods course for the MS in Health Systems Administration
Kirkland, Jeremiah Adjunct	HLTH 723 - Human Resources in Health Care	MS, Health Care Administration Roberts Wesleyan College	<ul style="list-style-type: none"> Experienced human resources manager with Rochester General Hospital Experienced adjunct faculty with Roberts Wesleyan College, teaching health care human resources
Smith, Scott Adjunct	HCIA 715 - Human Body Systems/Diseases I HCIA 730 - Human Body Systems/Diseases II	MD, Brody School of Medicine MPH, Harvard School of Public Health	<ul style="list-style-type: none"> Board certified Developmental-Behavioral Pediatrician since 2011 New York State Medical License since 2004 12 years clinical experiences (1996-2008) Active scholar publishing in top journals
Walence, William W. Program Director, Health Systems Administration, RIT	HLTH 710 - Health Governance Economics	PhD, Organizational Communication/Health Administration Ohio University	<ul style="list-style-type: none"> Health administration faculty for 28 years Former health facility administrator in U.S. and Canada Current governance board member at numerous facilities and health department agencies

4. Financial Resources and Instructional Facilities

- a. Instructional facilities and equipment needed to ensure the success of the program:

1. Space

The MS program will be delivered primarily online. There will be a one-week course (HCIA 705 Professional Seminar) taught at NTID during the summer to begin the program. That course will be taught utilizing existing ASLIE classroom facilities.

There are three lab classrooms (LBJ-3615, LBJ-3625, LBJ-3635) available in the ASLIE department. Each lab classroom will accommodate up to 10-12 students. The RIT ASL & Deaf Studies Community Center (RADSCC) located at the Wallace Library is another possible classroom that our program could use during the summer.

Students who will be staying on campus during the one-week course will have an option of staying at the Global Village apartments or the residence halls on RIT campus. Students are also welcome to stay off campus if they have transportation of their own.

2. Lab or studio space/equipment to be shared

This program will not share lab or studio space/equipment with other programs during the time that the program is offered.

3. Equipment specific to the HCIA program

Since ten out of eleven classes are online, students will be responsible for their own equipment such as computers, tablets, and access to internet. Laptops for our faculty members, including our program director and our adjunct faculty, will be obtained through annual NTID equipment process.

4. Computer facilities

For the HCIA 705 Professional Seminar course (the only on-site course), the American Sign Language and Interpreting Education lab classrooms are equipped with appropriate computer facilities to accommodate the maximum class size of 12 students. The lab classrooms are equipped with sufficient chairs, tables, electrical capacity, internet connections, and computers.

5. Other space and equipment

There are no additional space needs.

b. New Program Expenditures

The NTID cost model analysis in **Appendix G** prepared by Steve Morse, Assistant Vice President for NTID Finance and Budget, includes four tables detailing projected expenditures and revenue over the first five years of the program. There are no anticipated capital expenditures. New Program costs for each year over a three-year period are shown below in Table 5. These costs include faculty/staff salary and benefits plus costs such as computers, instructional supplies, telephone, software licenses, travel/conferences, and tuition payment for RIT credits.

American Sign Language and Interpreting Education Department
Master of Science in Healthcare Interpretation Degree Program
Projected Expenditures For The Proposed Program

Table 5 – New Resources

New Expenditures	Year 1	Year 2	Year 3
Personnel			
Library			
Equipment	\$ 3,000	\$ 500	\$ 500
Laboratories			
Supplies & Expenses (Other Than Personal Service) **	\$ 26,300	\$ 41,600	\$ 49,400
Capital Expenditures			
Other ^	\$ 76,600	\$ 113,200	\$ 137,500
Total all	\$ 105,900	\$ 155,300	\$ 187,400

Year 1 This year includes the first summer semester of the program (summer AY15-16) as well as the summer semester for AY16-17

** The amounts in this row represent RIT computer charges for students/faculty/staff involved in the program, instructional supplies, honoraria, hospitality, travel / conferences for faculty, and advertising. A breakdown of these expenses may be found on Table 1 – Projected Expenditures for the Proposed Program.

^ The amounts in this row represent tuition payments for RIT credits and overhead (RIT indirect costs). A breakdown of these expenses may be found on Table 1 – Projected Expenditures for the Proposed Program.

5. Library Resources

a. Analysis of Library Resources

NTID Education Librarian Joan Naturale stated that “This program will have a minimal impact on the library’s services and collection of books, journals and databases.” Please refer to the supporting letter from Joan Naturale in Appendix C.

b. Response to Identified Needs

The Wallace Library’s College of Health Science and Technology collection of journals, books, and databases also supports the MS in Health Care Interpretation.

6. Admissions and Enrollment

a. Admission requirements

Applicants must satisfy the following for entrance into the program:

- Certification from the National Registry of Interpreters for the Deaf (RID) or equivalent
- Baccalaureate degree from a regionally accredited college or university
- Have a cumulative undergraduate GPA of 3.0 or above (or superior endorsement)
- Submit an ASL interpretation sample (audio/video file or text translation will be provided)
- Submit two letters of reference from individuals who have had the opportunity to observe the applicant’s interpreting work
- Submit official transcripts (in English) of all previously completed undergraduate and graduate course work
- Submit completed graduate application
- A personal interview prior to admission will be offered by invitation only to selected applicants and will be conducted by videophone in ASL.
- Proof of completion of a course in medical terminology required after admission into the program and taken prior to the beginning of the summer session. This \$99 self-paced online course is called “Language of Medicine.”

The NTID Admissions Office will accept applications into the MSCHI with an admissions deadline of February 1. Applicant files will be made available to the MSCHI Program Director through the OnBase system. The MSCHI Program Director, in conjunction with program faculty, will review and make final selection of MS candidates for acceptance. This is the same process used by the other graduate program within NTID. A rubric delineating the criteria for admissions will be utilized in the selection process. All accepted candidates must meet the admission criteria of RID certification and a BS degree. Remaining Admissions criteria (GPA, interpretation sample, letters of reference, transcripts) will be evaluated using a rubric on a scale from weak to strong. The rubric scoring will determine the top candidates for admissions. The final candidates will be required to complete a personal interview, to be conducted via a video call in American Sign Language. The interview will assess candidate’s background and experience with Medical/Mental Health interpreting, and their ability to communicate effectively in American Sign Language. Based on this interview, top candidates will be offered admission. Following the NTID Admissions process, admission decisions will be communicated by March 15.

- b. Describe the process for evaluating exceptions to admission requirements.

Each applicant will be evaluated on the merits of his or her academic achievement, work experience, and history related to the profession. The program faculty will assess the likelihood of success for each potential candidate.

- c. Encouraging enrollment by persons from groups historically underrepresented in the discipline or occupation

Recruitment practices and procedures will be in accordance with those established by NTID and RIT to promote diversity in the program. The following organizations will be included in outreach efforts:

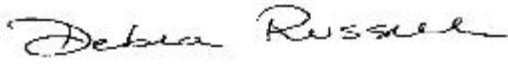
- Mano a Mano, an organization made up of professional tri-lingual interpreters (Spanish-ASL-English) working to advance the interpreting profession and supporting diversity
- The National Alliance of Black Interpreters (NAOBI), an organization that promotes excellence and empowerment among African Americans/Blacks in the profession of sign language interpreting in the context of a multi-cultural, multi-lingual environment. NAOBI is the only organization with the specific scope of increasing the talent pool of skilled African American/Black interpreters.
- The Intertribal Deaf Council (IDC) is a non-profit organization of Deaf and Hard-of-Hearing American Indians whose goals are similar to many Native American organizations. IDC promotes the interests of its members by fostering and enhancing their cultural, historical, and linguistic tribal traditions.
- The National Asian Deaf Congress (NADC) provides cultural awareness and advocacy for the interests of the Asian deaf and hard-of-hearing community.
- The National Black Deaf Advocates' (NBDA) mission is to promote leadership development, economic and educational opportunities, social equality, and to safeguard the general health and welfare of black deaf and hard-of-hearing people.

7. Academic Support Services

In terms of direct student support, we anticipate the Program Director of the MS in Health Care Interpretation to oversee key aspects of the program. This person will, among other things, be responsible for ensuring that courses are offered in a manner consistent with student needs (e.g., course schedules make it possible for students to take required courses), coordinating marketing and enrollment activities, "exception" processing, serve as a graduate advisor, and the first point of contact with students. Online tutoring support will be provided for this degree program.

8. External Review of Graduate Programs

Evaluation Report Form for Program Proposals

Institution:	NTID
Program title:	MS in Heath Care Administration
Degree:	Master of Science
Date of evaluation:	January 30, 2015
Evaluator Name: (Please print)	Debra Russell, Ph.D.
Evaluator Title and Institution:	University of Alberta, Assistant Professor, Western Canadian Centre for Deaf Studies
Evaluator Signature:	

I. Program

1. Assess program purpose, structure, and requirements as well as formal mechanisms for program administration and monitoring.

This program is well designed to meet the growing demand for interpreters who are specializing in health care interpreting. The structure that requires a face-to-face summer institute followed by on-line learning is a structure that will be attractive to working professionals who are seeking to advance their qualifications. The requirements will result in a rigorous and demanding program that will provide exceptional training that is not offered elsewhere in the US. NTID has extensive relationships with RID, the deaf community and interpreters, and the administrative aspects of this program fall nicely in line with skills and resources of NTID. There appears to be very solid institutional support from all levels, with demonstrated support from the Vice-Dean at RIT, College of Heath Sciences & Technology, University of Rochester Medical Centre, Manager of Interpreting, and representatives from Gallaudet University, University of Michigan and the National Association of the Deaf.

2. Comment on the special focus of this program, if any, as it relates to the discipline.

There are no other programs currently offered in the US that provides advanced training in the healthcare arena, leading to a master's degree. The program is designed to meet one of the major barriers identified in the Task Force Report on Health Care Careers for the Deaf and Hard of Hearing Community. It is unique and the hybrid program is designed to meet the needs f working professionals. The market research has been conducted to verify the level of interest in such a program

3. Comment on the plans and expectations for continuing program development and self-assessment.

The proposal has an excellent plan for assessing individual course outcomes and addresses the sequence of courses and activities; it also speaks the opportunity for the programs to seek accreditation from CCIE after three cohorts of students, which would mean an extensive process of documenting the assessment processes used in the program.

4. Assess available support from related programs.

The letters of support indicate that the program developers have addressed the need for library resources and support, and as such the library has confirmed its ability to respond to the program needs with little impact on current resources; similarly, given the program will be largely offered on-line, the Teaching and Learning Services have also provided support, indicating that the current system of modular courses and the associated technology will meet the needs of students and faculty. RIT has also confirmed students in the new MS program can be enrolled in the Research Methods and Healthcare Governance and Economics classes within the College of Health Sciences, thereby providing efficient and cost-effective ways to collaborate across programs.

5. What is the evidence of **need and **demand** for the program locally, in the State, and in the field at large? What is the extent of occupational demand for graduates? What is the evidence that demand will continue?**

The market analysis work included in the proposal identifies the growing demand for interpreters with specialized training in health care, given the numbers of Deaf and Hard of Hearing students entering health care careers or taking graduate work in the areas of biomedical or behavioral sciences. The Certificate in Health Care Interpreting has been outstanding, however the program does not address the specialized interpreting skills required for health care education. The statistical evidence suggested that there are more than 28 million people with hearing loss and there are approximately 7000 hospitals providing language access to diverse patient care populations. These numbers support the mission of the MS in Health Care Interpretation. Finally, the field through its national interpreting organization, RID, has begun to investigate healthcare as a specialty certification area given how important this issue is for each state, and nationally.

II. Faculty
<p>6. Evaluate the faculty, individually and collectively, in regard to training, experience, research and publication, professional service, and recognition in the field.</p>
<p>When reviewing the faculty that will provide the instruction in the program, it is clear that an outstanding team of scholars, both emerging and established, have been selected to lead this innovative program. Individually, each faculty member has demonstrated their research and publication record, and they are all recognized for the teaching, professional service and scholarly work. Each of them are extremely well-respected in the field and their skills and experiences combined make this an outstanding program that will attract students.</p>
<p>7. Assess the faculty in terms of size and qualifications. What are plans for future staffing?</p>
<p>The number of full time and adjunct faculty assigned to the proposed program appears to be suitable for the program model and courses are well suited to the assigned faculty member.</p>
<p>8. Evaluate credentials and involvement of adjunct and support faculty.</p>
<p>The use of adjunct faculty for the courses for which they are assigned, for example Health Care Governance and Research Methods allows the program to capitalize of existing experienced faculty working across programs. The support/administrative role will provide the necessary support to ensure the effective delivery of the program.</p>
III. Resources
<p>9. Comment on the adequacy of physical resources and facilities, e.g., library, computer, and laboratory facilities; practical and internship sites; and support services for the program, including use of resources outside the institution.</p>
<p>Given the program is to be delivered primarily online, there is no need for additional classroom space. The use of existing classrooms and labs will be suitable for the summer institute at the beginning of the program. The library resources are already in place and the program will have a minimal impact upon the current holdings and services.</p>
<p>10. What is the institution's commitment to the program as demonstrated by the operating budget, faculty salaries, and the number of faculty lines relative to student numbers and workload.</p>
<p>The cost analysis model suggests that the program will early \$1.25M in revenue and the estimated costs of the program are approximately \$760K. The number of faculty assigned to the workload is sufficient to manage the student numbers and provide a rigorous program.</p>

11. Describe the alignment of student support services with the nature of the proposed student body.

The students will be distance students and the proposal indicated that there will be no tutoring services available to students. The proposal did not address how students with accommodation needs will be handled and/or academic supports (writing workshops, editing, etc.) be required.

IV. Summary Comments and Additional Observations

12. Summarize the **major strengths and weaknesses** of the program as proposed with particular attention to feasibility of implementation and appropriateness of objectives for the degree offered. Include any further observations important to the evaluation of this program proposal and provide any recommendations for the proposed program.

Strengths – tremendous institution support from all levels and from outside the institution; committed and talented faculty who are well respected in their field for their knowledge, vision, and their reputations will draw students to the program; NTID has a long history of working with Deaf and hard of hearing students and has many other successful related programs; the program is strongly aligned with the mission and strategic direction of the institution; the hybrid program meets market demand and the needs of working professional; the infrastructure exists to support online learning; the market analysis has been conducted in order to ascertain the level of interest in the program; the program is aligned with activities undertaken by the national interpreting association, RID; and finally, it will be the first program of its kind in the US, thereby addressing a huge gap in advanced training for healthcare interpreters.

Weaknesses – the program does not address how they will deal with issues of universal design within the online courses, nor does it specify how students with disabilities will be accommodated; students requiring additional academic support will not have access to tutoring that would be provided if they were being served in a traditional program. There is no mention of an advisory board that will allow for local, state and national input on the development of this unique program; meeting could be held using virtual meeting platforms and given that this is the first offering of the program, advice from the professionals involved in healthcare interpreting would be very useful. Finally, the program is in a desirable place to determine what statistical and employability data would be most useful before starting the program so that relevant data can serve program revisions.

Master Degree in Health Care Interpretation Proposal Committee's Responses to External Review's Suggestions for Improvements

Areas of Concern From External Reviewer	Our Responses
<p>The program does not address how they will deal with issues of universal design within the online courses, nor does it specify how students with disabilities will be accommodated.</p>	<p>All curricular materials will be provided in print or ASL. Materials that include sound will be captioned and/or supplemented with ASL interpretation.</p> <p>Susan Ackerman, RIT's Disability Services Director, states that "RIT has a posted procedure at www.rit.edu/dso for how students with disabilities who require accommodations can identify themselves as a person with a disability and request accommodations."</p> <p>The Teaching and Learning Services office at RIT's Wallace Center has acknowledged that this is a very important area and states that "design that is accessible for everyone benefits everyone in the course."</p>
<p>Students requiring additional academic support will not have access to tutoring that would be provided if they were being served in a traditional program.</p>	<p>ASLIE offers professional and peer tutoring for our BS students and will offer this same support to our MS degree students. Individual or group tutoring will be made available to our students via online videoconferencing technologies.</p> <p>Dr. Linda Bryant, Director of NTID's Learning Center (NLC), and NLC Supervisor Wesley Blue have experience in the area of remote tutoring. ASLIE will consult with Dr. Bryant regarding effective delivery of online tutoring services.</p> <p>The RIT Innovative Learning Institute (ILI) also offers support and resources related to online classes and tutoring.</p>

Areas of Concern From External Reviewer	Our Responses
<p>There is no mention of an advisory board that will allow for local, state and national input on the development of this unique program. Meeting could be held using virtual meeting platforms and given that this is the first offering of the program, advice from the professionals involved in healthcare interpreting would be very useful.</p>	<p>ASLIE highly values ongoing feedback and advice from professionals involved in the health care interpreting profession. ASLIE will develop a Stakeholder Advisory Board for the MS program in Health Care Interpretation. The Board will consist of 6 to 10 members: health care professionals working with deaf and hard-of-hearing patients; health care interpreters; managers of interpreting services; and deaf and hard-of-hearing health care providers from all over the country.</p> <p>The Stakeholder Advisory Board meetings will be held using virtual meeting technology.</p>
<p>The program is in a desirable place to determine what statistical and employability data would be most useful before starting the program so that relevant data can serve program revisions.</p>	<p>ASLIE will administer a survey to students who have been accepted to the MSHCI program to assess their current employment; income range; certification held; settings where they interpret; and types of deaf consumers for whom they interpret.</p> <p>This survey will be repeated one year post graduation.</p> <p>In addition, ASLIE will conduct a Student Satisfaction Survey with students in their last semester before graduation.</p> <p>The results of these surveys will be used for continuing program improvement.</p>

9. Credit for Experience

Credit by exam or credit by experience will be given where appropriate (up to six credit hours). RIT Policy will be followed and course outcomes will be met via test or written assignments. (Ex.: graduates of CHI may be considered for credit by exam or by experience.)

10. Program Assessment and Improvement

The essential goal of the MSHCI program is to prepare students for employment as health care interpreters and/or administrative roles in the provision of interpreting services in health care institutions. Graduates of the MS degree will gain content knowledge in health care discourse and sign language interpreting skill development to effectively interpret for deaf consumers (patients, family members, students, and deaf health professionals) in

health care and academic environments. They will also develop organizational skills for managing employees and consulting on the effective and efficient provision of interpreting services. The cutting-edge innovative MSHCI curriculum aligns with the RIT academic program profile by fostering the development of critical thinking and ethical reasoning required to work effectively in the specialty field of language access services in health care.

The Outcomes Assessment Plan for the MS in Health Care Interpreting is provided on the next page. This plan was reviewed and approved by Dr. Anne Wahl, RIT Assistant Provost for Assessment and Accreditation. The chairperson of the ASLIE department at NTID will coordinate the assessment process. Results of outcomes assessment measures and the use of results will be shared with faculty and used to inform changes in instructional strategies and/or curriculum. Results will also be disseminated through the NTID Annual Assessment Summary, NTID Annual Report, and RIT reports as requested. The MS program will be evaluated annually based on student success in meeting the identified outcomes.

a. Program Level Outcomes Assessment Plan

Program Name/College: MS in Health Care Interpretation/NTID

Program Contact for Program Assessment: Dr. Kim Kurz

Program Goals	Student Learning Outcomes	Academic Program Profile	Data Source/Measure Curriculum Mapping	Benchmark	Timeline	Data Analysis Key Findings	Use of Results Action Items and Dissemination
Please List program-level goals	Students will be able to: (task, capability, knowledge, skills, and dispositions) Use measurable verbs.	Alignment to the five RIT essential outcomes - check all that apply	Assessment opportunity (course/experience) method/measures, assignment/rubric)	Standard, target, or achievement level (usually a %) Statement of student Success	Identify when and how data are collected, aggregated, and analyzed	Identify who is responsible and list key findings	Identify how results are used and shared. List any recommendations or action items
1. Effectively interpret for deaf consumers (patients, family members, and deaf health professionals) in health care environments.	1.1 Demonstrate advanced competency in interpreting health care discourse.	<input checked="" type="checkbox"/> Critical Thinking <input checked="" type="checkbox"/> Ethical Reasoning <input type="checkbox"/> Integrative Literacies <input type="checkbox"/> Global Interconnectedness <input checked="" type="checkbox"/> Creative/Innovative Thinking	HICA 740 Health Care Practical Interpreting II Pre and Post Videotaped Samples	85% of students will perform @ "B" or above on each rubric measurement of post video sample.	Data will be collected annually (Spring semester) by course instructor(s) and given to program director who will aggregate and analyze.	Program Chair	Data will be shared with: <ul style="list-style-type: none"> • Faculty and used to inform changes in instructional strategies and/or curriculum. • NTID Annual Assessment summary • NTID Annual Report • RIT reports as requested
	1.2 Demonstrate knowledge of human anatomy, physiology, common diseases, illnesses, diagnosis and treatments as they apply to interpreting in health-care settings.	<input checked="" type="checkbox"/> Critical Thinking <input checked="" type="checkbox"/> Ethical Reasoning <input type="checkbox"/> Integrative Literacies <input type="checkbox"/> Global Interconnectedness <input checked="" type="checkbox"/> Creative/Innovative Thinking	HICA 730 Human Body Systems/ Diseases II Course Final Exam	85% of students will earn a B or better grade (80%) on the final exam.	Data will be collected annually (Spring semester) by course instructor(s) and given to program director who will aggregate and analyze.	Program Chair	Data will be shared with: <ul style="list-style-type: none"> • Faculty and used to inform changes in instructional strategies and/or curriculum. • NTID Annual Assessment summary • NTID Annual Report • RIT reports as requested
2. Analyze, conduct, and consult on the effective and efficient provision of interpreting services in health care institutions.	2.1 Develop an organizational framework for managing and developing all levels of health care professionals including: recruitment, retention, compensation, and termination.	<input checked="" type="checkbox"/> Critical Thinking <input checked="" type="checkbox"/> Ethical Reasoning <input type="checkbox"/> Integrative Literacies <input type="checkbox"/> Global Interconnectedness <input checked="" type="checkbox"/> Creative/Innovative Thinking	HLTH 723 Human Resources in Health Care Final Application Paper	85% of students will earn a B or better grade on the Final Application Paper (80%)	Data will be collected annually (Spring semester) by course instructor(s) and given to program director who will aggregate and analyze.	Program Chair	Data will be shared with: <ul style="list-style-type: none"> • Faculty and used to inform changes in instructional strategies and/or curriculum. • NTID Annual Assessment summary • NTID Annual Report • RIT reports as requested

Program Goals	Student Learning Outcomes	Academic Program Profile	Data Source/Measure Curriculum Mapping	Benchmark	Timeline	Data Analysis Key Findings	Use of Results Action Items and Dissemination
3. Integrate knowledge of health care environments and language access to build on body of knowledge in the field.	3.1 Utilize appropriate research or project design and implementation methods.	<input checked="" type="checkbox"/> Critical Thinking <input checked="" type="checkbox"/> Ethical Reasoning <input type="checkbox"/> Integrative Literacies <input type="checkbox"/> Global Interconnectedness <input checked="" type="checkbox"/> Creative/Innovative Thinking	HCIA 770 Capstone Professional Project or Research Paper Final project or research paper	85% of students will perform @ satisfactory level or above on each rubric measurement of the final project/research paper.	Data will be collected annually (Spring semester) by course instructor(s) and given to program director who will aggregate and analyze.	Program Chair	Data will be shared with: <ul style="list-style-type: none"> • Faculty and used to inform changes in instructional strategies and/or curriculum. • NTID Annual Assessment summary • NTID Annual Report • RIT reports as requested
4. Measure the quality of the program	4.1 Determine progress on achieving program-specific knowledge and skills	<input type="checkbox"/> Critical Thinking <input type="checkbox"/> Ethical Reasoning <input type="checkbox"/> Integrative Literacies <input type="checkbox"/> Global Interconnectedness <input type="checkbox"/> Creative/Innovative Thinking	Graduate Satisfaction Survey	85% of the students will indicate overall satisfaction with the program and its impact on advancing their achievement of the student learning outcomes	Data will be collected annually (Spring semester – part-time and Summer semester– full-time.	Program Chair	Data will be shared with: <ul style="list-style-type: none"> • Faculty and used to inform changes in instructional strategies and/or curriculum. • NTID Annual Assessment summary • NTID Annual Report • RIT reports as requested

b. **Accreditation and Program Review**

The Collegiate Commission of Interpreter Education (CCIE) has as its mission the promotion of professionalism in the field of interpreting education and has established interpreter education standards at all degree levels (AAS, BS, MS). It provides accreditation of professional preparation programs and encourages the development of excellence in program development. The CCIE is a member of the Association of Specialized and Professional Accreditors (ASPA). The MS degree in Health Care Interpreting is eligible to apply for accreditation upon the graduation of three cohorts of students.

11. **New/Emerging Field and Allied Health Areas**

N/A – only applies to undergrad programs.

12. **Transfer to Baccalaureate Programs**

N/A

13. **Application for Distance Education**

Will be submitted to the New York State Education Department

References

- Major, G., Napier, J., and Stubbe, M. (2012). What happens truly, not text book! In L. Swabey and K. Malcolm (Eds.), *In our hands: Educating healthcare interpreters* (pp. 27-53). Washington, DC: Gallaudet University Press.
- National Technical Institute for the Deaf at Rochester Institute of Technology (2010). *Strategic Decisions 2020: Shaping NTID's Future Through Innovation*. Retrieved from: <http://www.ntid.rit.edu/president/sd2020>
- The National Consortium of Interpreter Education Centers. *Phase II Deaf Consumer Needs Assessment Final Report*. Retrieved from: <http://www.interpretereducation.org/wpcontent/uploads/2011/06/FinalPhaseIIDCReport.pdf>
- Swabey, L., and Dutton, L. (2014). *Interpreting in healthcare settings: Annotated bibliography*, St. Paul, Minnesota: St. Catherine University.
- Swabey, L. and Faber, Q. C. (2012). Domains and competencies for healthcare interpreting. In L. Swabey and K. Malcolm (Eds.), *In our hands: Educating healthcare interpreters* (pp. 1-26). Washington, DC: Gallaudet University Press.
- Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community (2012). *Building Pathways to Health Care Careers for the Deaf and Hard-of-Hearing Community: A Final Report*. Retrieved from: http://www.rit.edu/ntid/hccd/system/files/FINAL_REPORT_Building_Pathways_March_2012.pdf
- Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community (2011). *Building Pathways to Health Care Careers for the Deaf and Hard-of-Hearing Community: An Interim Report*. Retrieved from: http://www.rit.edu/ntid/hccd/system/files/task_force_june_interim_report_6_30_2011.pdf
- U.S. Bureau of Labor Statistics. Occupational outlook handbook: Interpreters and translators. Retrieved from: <http://www.bls.gov/ooh/media-and-communication/interpreters-and-translators.htm#tab-6>
- U.S. News and World Report (2012). *Best Social Service Jobs: Interpreters and Translators*. Retrieved from: <http://money.usnews.com/careers/best-jobs/interpreter-and-translator>

Appendix A – New or Revised Course Outline Form

See proposed course outlines on pages 21 to 51.

Appendix B – Enrollment and Market Analysis

Enrollment Projections

The Enrollment Projections table below details the five-year MSHCI program enrollment and graduation rate projections that were reviewed and approved by Dr. James Miller, Senior VP of Enrollment Management and Career Services at RIT.

We project 8 FTE during the first year, which translates to 5 full-time and 6 part-time students. Over the course of the first three years, enrollment increases by two students per year. We anticipate stable enrollment at 12 beyond Year 3. Each summer's enrollment projection reflects two overlapping cohorts—one beginning their coursework and the second cohort completing their final coursework.

Persistence rates are not reflected in the enrollment projections due to the complexities of the mix of full- and part-time students.

Healthcare Interpretation MS Enrollment Projections

	Year 1*		Year 2	Year 3	Year 4	Year 5
	AY 2015-16	AY 2016-17	AY 2017-18	AY 2018-19	AY 2019-20	AY 2020-21
Enrollment Fall Semester		5FT & 6PT	6FT & 14PT	8FT & 16PT	8FT & 16PT	8FT & 16PT
Enrollment Spring Semester		5FT & 6PT	6FT & 14PT	8FT & 16PT	8FT & 16PT	8FT & 16PT
Enrollment Summer Semester	5FT & 6PT**	11FT & 14PT	14FT & 16PT	16FT & 16PT	16 FT & 16 PT	16 FT & 16 PT
Total Terms of Enrollment***	5FT & 6PT	21 FT & 26 PT	26 FT & 44 PT	32 FT & 48 PT	32 FT & 48 PT	32 FT & 48 PT

*Students entering Year 1 (AY 2016-17) need to begin coursework in the summer which occurs during AY 2015-16.

** To determine part-time numbers, take projected enrollment minus full-time and double the number of students left; e.g., if 8 incoming were projected and 5 are FT, there are 6 PT.

Anticipated Graduation Rate

As part of the Master of Science in Health Care Interpretation program, expected graduation rates were developed considering the following cohorts:

- Master of Science in Secondary Education (SEDDEAF-MS) students
- Bachelor of Science in ASL-English Interpretation (ASLINT-BS) students

These two cohorts combine to cover the unique aspects about the proposed program, justifying what NTID is proposing as an expected *completion* rate. The aforementioned completion rate should be thought of differently than the typical graduation rate calculations that consider first-time, full-time students. While the program is expecting the large majority of students to fall under the distinction of full-time, a part-time track is proposed as well.

Under the full-time track, students are required to complete coursework, and graduate, in a minimum of four terms, whereas the part-time track requires students to complete coursework, and graduate, in a maximum of six terms. Respectively speaking, NTID is proposing completion intervals equivalent to 150% of the aforementioned term constraints, resulting in a six and eight term interval, depending on the track. Regardless of which track, NTID suggests that the proposed completion rate be applied to both.

<u>Completion Rate (Three Year Weighted Average)</u>	
150% of Program Length of Time	
MS in Secondary Education (SEDDEAF-MS)	78.13%

What must also be considered is the success of NTID's Bachelor of Science ASL-English Interpretation program. While the direct comparison of a bachelor to graduate degree program is not appropriate, NTID feels it necessary to apply an inflationary factor to the completion rate associated with the Master of Science in Healthcare Interpretation program. Justification for this inflationary factor lies with the observation that the most recent Bachelor of Science in ASL-English Interpretation six-year graduation rate far exceeds that which is associated with all RIT bachelor degree programs, at a rate of 78.9%, which the table on the following page shows. Additionally, the five-year graduation rate for the 2009 cohort is already 91.7%, again exceeding the rates associated with all RIT bachelor degree programs. The graduation rates associated with all RIT bachelor degree programs can be found on the Institute Reporting dashboard of MyAnalytics.

Given the completion rate of NTID's only other master's degree program, along with the graduation rates associated with the Bachelor of Science in ASL-English Interpretation program, it is proposed that students entering the Master of Science in Health Care Interpretation full-time track complete their studies, and graduate, within six terms at a rate of 80%. It is further proposed that students entering the part-time track complete their studies, and graduate, within eight terms at a rate of 80%. These proposed rates will apply to the first three entering cohorts, and revisited in subsequent years.

ASL-English Interpretation Graduation Rates

Fall Cohort	Cohort Count	Graduation Rate			
		Four Years After Entry	Five Years After Entry	Six Years After Entry	Seven Years After Entry
2007	8	50.0	62.5	62.5	62.5
2008	19	68.4	73.7	78.9	
2009	24	91.7	91.7		
2010	19	63.2			

Notes:

Students are categorized based on their major at entry to RIT.

Figures exclude students in international programs (e.g., Kosovo, Croatia).

Students are counted as graduates if they graduate within 150% of their program's length, in alignment with IPEDS reporting requirements.

Competing Programs

Currently, there are three master's degree programs in ASL-English Interpretation offered in the U. S. None of these programs prepares graduates for work in health care settings.

Anticipated Geographic Draw

Due to the online delivery format of this program, we anticipate the program will attract students from across the U.S.

Program Delivery Format

The MSHCI program commences with a one-week on-campus residency; all subsequent courses will be delivered online. Both full-time and part-time options will be offered.

Appendix C – Internal Letters of Support

Joan Naturale, EdD

Ian Webber

Richard Doolittle, PhD

Kim B. Kurz, PhD

RIT Libraries

Innovative Learning Institute

College of Health Sciences & Technology

NTID American Sign Language & Interpreting Education



Memorandum

TO: Kathleen Miraglia, Healthcare Program Coordinator, American Sign Language & Interpreter Education, NTID

CC: Shirley Bower, Director, RIT Libraries
Sheila Smokey, Manager, RIT Libraries Acquisitions & Serials

FROM: Joan Natunale, NTID Librarian, RIT Libraries

DATE: July 25, 2014

RE: Library support for proposed online MS in Healthcare Interpretation

The following outlines the impact of NTID's Department of American Sign Language & Interpreter proposed online MS program in Healthcare Interpretation. This program will have a minimal impact on the library's services and collection of books, journals, and databases.

RIT Libraries now use a demand/user-driven model of acquisition for the majority of its book purchases ensuring books purchased are those that users want.

Our current holdings (journals and databases) are at acceptable levels for masters' level programs. This is based on requests for books not published yet and new journal titles for an anticipated number of 4 faculty and 35-50 MS students.

The Wallace library's **online and print interdisciplinary collection of journals, books and databases**, supports the graduate degree programs for: deaf studies, interpreting studies, sign language studies, social sciences, biomedical sciences, nutrition management, physician assistant, diagnostic medical sonography, health systems administration, medical illustration, applied psychophysiology and premedical studies. We have a content library specialist in Science, Adwoa Boateng, and her online [LibGuides](#) are available as well as mine related to [deaf and interpreting issues](#).

The library subscribes to **online standard core collections** of medical and life sciences as well as deaf and interpreting related **online databases, books and journals** by professional associations and publishers for example, Medline-PubMed, Cochrane Library, eMedicine, Harrison's Online, EBSCO, Elsevier Science Direct, Springer, Wiley, Proquest, Ebrary Ebooks, NTID Deaf Index, Digiterp-College of St. Catherine, Sign Enhancers, Gallaudet University Press, University of Rochester, NTID at RIT, Signs of Development, DawnSignPress, and others.

The Wallace library is a member of the Rochester Regional Library Council (RRLC), which provides RIT students, researchers, and faculty access to materials at other Monroe County libraries, using free **RRLC Library access cards**. Requested journal articles and books not owned by the Wallace Library will be obtained on a timely basis through the library's **interlibrary loan and document delivery services (IDS)** and **ConnectNY**.

November 9, 2014

Kim B. Kurz, Ph.D.
Chairperson, American Sign Language & Interpreting Education
National Technical Institute for the Deaf at RIT
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz,

It is my understanding that you are developing a new Master of Science degree program in Health Care Interpretation at the Rochester Institute of Technology's National Technical Institute for the Deaf (RIT/NTID) to begin in the fall of 2016. Your new MS degree will meet the growing demand of specialized health care interpreters as more deaf and hard-of-hearing people enter the medical/health care fields, increase the number of specialized interpreters working in patient health care settings, and prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings. I am fully supportive of this effort.

I understand that this MS program will be offering online courses with the aid of my staff and resources through the Teaching and Learning Services department here at RIT. My department provides online learning support here at RIT, to provide students with a robust, engaging, success-oriented experience; a continually expanding array of demand-based online programs; and exceptional social, academic, technical support and course media support including captioning. RIT Online's system of modular courses, stackable credentials, and accelerated options allows students to efficiently and affordably pursue an RIT master's or bachelor's degree, an RIT certificate, or a new competency. This will fit the mission of the MS in Health Care Interpretation program and meet the needs of students and faculty in the program.

Again, I am fully supportive of this new MS program in Health Care Interpretation and my department is prepared to work with the CHI program coordinator and ASLIE department faculty in ensuring successful delivery of the program's online courses and captioning services.

Sincerely,



Ian Webber
Assistant Director ILI, Manager TLS Operations
Rochester Institute of Technology

College of Health Sciences and Technology
153 Lomb Memorial Drive
Rochester, NY 14623-5604
585-475-5972

December 8, 2014

Kathy Miraglia, M.S., C.S.C.
Healthcare Program Coordinator/Instructor
American Sign Language & Interpreter Education
National Technical Institute for the Deaf/ Rochester Institute of Technology
52 Lomb Memorial Drive
Rochester, New York 14623

Dear Kathy,

I'm writing as a means of support for the proposed MS degree program in Healthcare Interpretation that you are constructing through the National Technical Institute for the Deaf. As part of that program, you are requesting incremental sections of the following course that exists currently within our Health Systems Administration program to be offered to students enrolled in what you propose:

Research Methods – HLTH 700

I anticipate costs to range at around \$4000 for faculty hired as adjunct to offer this class. This is what is done currently for the vast majority of courses run through our HSA program, a fully online degree.

Please let me know if you have any questions or concerns about these classes. We stand ready to support your Program to the best of our ability in the true spirit of collaboration!

Regards,

A handwritten signature in dark ink, reading 'Richard L. Doolittle'. The signature is written in a cursive, flowing style.

Richard L. Doolittle, PhD/Vice Dean

College of Health Sciences and Technology
153 Lomb Memorial Drive
Rochester, NY 14623-5604
585-475-5972

December 8, 2014

Kathy Miraglia, M.S., C.S.C.
Healthcare Program Coordinator/Instructor
American Sign Language & Interpreter Education
National Technical Institute for the Deaf/ Rochester Institute of Technology
52 Lomb Memorial Drive
Rochester, New York 14623

Dear Kathy,

I'm writing as a means of support for the proposed MS degree program in Healthcare Interpretation that you are constructing through the National Technical Institute for the Deaf. As part of that program, you are requesting incremental sections of the following course that exists currently within our Health Systems Administration program to be offered to students enrolled in what you propose:

Healthcare Governance and Economics – HTH 710

I anticipate costs to range at around \$4000 for faculty hired as adjunct to offer this class. This is what is done currently for the vast majority of courses run through our HSA program, a fully online degree.

Please let me know if you have any questions or concerns about these classes. We stand ready to support your Program to the best of our ability in the true spirit of collaboration!

Regards,



Richard L. Doolittle, PhD/Vice Dean

College of Health Sciences and Technology
153 Lomb Memorial Drive
Rochester, NY 14623-5604
585-475-5972

December 8, 2014

Kathy Miraglia, M.S., C.S.C.
Healthcare Program Coordinator/Instructor
American Sign Language & Interpreter Education
National Technical Institute for the Deaf/ Rochester Institute of Technology
52 Lomb Memorial Drive
Rochester, New York 14623

Dear Kathy,

I'm writing as a means of support for the proposed MS degree program in Healthcare Interpretation that you are constructing through the National Technical Institute for the Deaf. As part of that program, you are requesting incremental sections of the following course that exists currently within our Health Systems Administration program to be offered to students enrolled in what you propose:

Human Resources in Healthcare – HETH 723

I anticipate costs to range at around \$4300 for faculty hired as adjunct to offer this class. This is what is done currently for the vast majority of courses run through our HSA program, a fully online degree.

Please let me know if you have any questions or concerns about these classes. We stand ready to support your Program to the best of our ability in the true spirit of collaboration!

Regards,

A handwritten signature in dark ink, appearing to read 'Richard L. Doolittle'. The signature is written in a cursive, flowing style.

Richard L. Doolittle, PhD/Vice Dean



Rochester Institute of Technology

National Technical Institute for the Deaf
Department of American Sign Language
And Interpreting Education
Lyndon Baines Johnson Building
52 Lomb Memorial Drive
Rochester, NY 14623-5604
Tel: TTY 585-475-6839 Fax 585-475-6800

To: NTID Curriculum Committee
From: Kim B. Kurz, Department Chairperson
American Sign Language & Interpreting Education Department
Date: January 27, 2015
Subject: Health Care Interpretation Master's Degree Program

This memo is to acknowledge my unequivocal support for Master of Science in Health Care Interpretation. This program is a direct outcome of NTID's intentional efforts to develop new programs and to the growing interest and needs for a graduate, specialized degree related to health care interpretation as reported the national task force on health care and deaf and hard of hearing population. Internal and external letters of support document the need, demand, and attractiveness of a Master of Science degree in Health Care Interpretation.

The Master of Science degree program in Health Care Interpretation is designed to meet the demands of working professional sign language interpreters desiring a master's degree specific to working in health care environments. The National Technical Institute for the Deaf (NTID) Department of American Sign Language and Interpreting Education (ASLIE) will administer the program. The College of Health Sciences and Technology (CHST) will collaborate by offering 3 courses (9 credits) within this 33 credit degree. This unique program will:

- Meet the growing demand for specialized sign language health care interpreters as more and more deaf and hard-of-hearing people enter the medical/health care fields
- Increase the number of specialized sign language interpreters working in patient health care settings
- Prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings

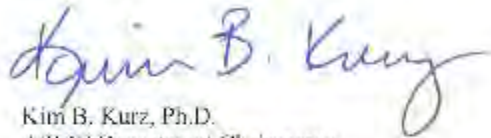
If approved, this new offering will strengthen NTID's academic portfolio and become the first program to provide a graduate degree in Health Care Interpretation.

The program will appeal to working interpreters (Deaf and hearing) aspiring to direct their careers into health care environments as well as interpreters who are currently working in the health care field. Successful completion of this program could lead to employment as a sign language health care interpreter and/or a Language Access Coordinator of sign and spoken language interpreting services in one of the most important new fields in health care. "Between 2012 and 2022, the Bureau of Labor Statistics projects 46 percent employment growth for interpreters and translators, which is

much faster than the average for all occupations. The field is on track to add more than 29,000 new positions during that time period" (U.S. News and World Report).

I look forward to reviewing the proposal with you in the near future. Please do not hesitate to contact me should you have any further questions about the proposal.

Sincerely,

A handwritten signature in blue ink that reads "Kim B. Kurz". The signature is fluid and cursive, with the first name "Kim" and last name "Kurz" being more prominent than the middle initial "B.".

Kim B. Kurz, Ph.D.
ASLIE Department Chairperson

Appendix D – Program Need and Marketability: Evidence and Letters of Support

Letters of Support were received from the individuals below.

Name	Title	Organization
Elizabeth Ballard, MS, Certificate in Healthcare Interpreting	Manager, Interpreting Services	University of Rochester Medical Center
Steven Barnett, MD	Associate Professor, Departments of Family Medicine and Public Health Sciences; Director, Rochester Prevention Research Center: National Center for Deaf Health Research; Co- Director, Rochester Bridges to the Doctorate Program for Deaf and Hard-of-Hearing Students	University of Rochester Medical Center
Lydia Callis	Owner/Interpreter	LC Interpreting Services, LLC
Michael McKee, MD, MPH	Assistant Professor	University of Michigan -Ann Arbor
Brenda Nicodemus, PhD	Associate Professor & Director of Center for the Advancement of Interpreting and Translation Research	Gallaudet University
Christopher Wagner	President	National Association of the Deaf
Keith Cagle, PhD	BA Program in Interpretation Coordinator	Gallaudet University
Jane Hecker-Cain	American Sign Language Program Coordinator	Suffolk County Community College
Rob Hills	Project Director, ASL- English Interpretation Program	LaGuardia Community College
Jack Hoza, PhD	Professor & Director, Sign Language Interpretation Program	University of New Hampshire-Manchester
Robert Pollard, PhD	Professor of Psychiatry & Director of Deaf Wellness Center	University of Rochester Medical Center
Debra Russell, PhD	President	World Association of Sign Language Interpreters (WASLI)
Linda Stauffer	Associate Professor and Coordinator of Interpreter Education Program	University of Arkansas at Little Rock



November 13, 2014

Kim B. Kurz, Ph.D.
Chairperson, American Sign Language & Interpreting Education
National Technical Institute for the Deaf at RIT
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz,

It is my understanding that you are developing a new Master of Science degree program in Health Care Interpretation at the Rochester Institute of Technology's National Technical Institute for the Deaf (RIT/NTID) to begin in the fall of 2016. Your new MS degree will meet the growing demand of specialized health care interpreters as more deaf and hard-of-hearing people enter the medical/health care fields, increase the number of specialized interpreters working in patient health care settings, and prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings. I am fully supportive of this effort.

As stated in the Task Force's final report related to health care careers for the deaf and hard of hearing community, one of the major barriers identified in the Task Force report was deaf and hard-of-hearing individuals' ability to access information. Those individuals currently pursuing training in healthcare report the limited availability of quality access services, particularly sign language interpreters with specialized knowledge in the healthcare settings. As a manager of the Interpreting Services at the Strong Hospital in Rochester, I can attest that this new program will help take the lead in the development of best practices with respect to specialized interpreting for deaf and hard-of-hearing individuals in healthcare. I am singularly tasked with hiring qualified interpreters for the entire UR Medicine Enterprise, which serves not only Rochester, but is expanding to most of Western New York. Finding qualified, well-trained candidates is always a barrier to proper care for our patients and families. This Master's program will assist in that effort not only here, but across the United States as graduates choose to return to their cities of origin to practice.

Currently in the US, the Registry of Interpreters for the Deaf (RID), the national association and certifying body of sign language interpreters, lists 45 BA/BS degree programs and 4 MA/MS degrees in American Sign Language/English interpreting. Of all of these programs, none offer specialized training in the healthcare arena beyond introductory coursework. Most bachelor level programs focus on generalist level training for interpreters. At the 2013 National RID Conference, a motion was

made to investigate healthcare as a specialty certification area within the sign language interpreting field because language access remains a matter of national importance. Healthcare organizations continue to face challenges to accommodate increasingly diverse patient populations i.e. more than 28 million people with hearing loss and about 47 million people who speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations. This will fit the mission of the MS in Health Care Interpretation program.

Again, I am fully supportive of this new MS program in Health Care Interpretation and as a professional in the field of healthcare interpretation; this proposal has my full support in ensuring successful delivery of the new degree in healthcare interpretation.

Sincerely,

Elizabeth Ballard, CI, CT, MS

Certificate in Healthcare Interpreting
Manager, Interpreter Services
University of Rochester Medical Center
601 Elmwood Ave, Box 602
Rochester, NY 14642

Letter to Dr. Kurz
Re: RIT/NTID MS program in healthcare interpretation

November 17, 2014
Page 2 of 2

experience to work in healthcare, public health and health research settings. RPRC/NCDHR has experienced this shortage here in Rochester, in NYC, and outside of NYS. RPRC/NCDHR would certainly hire graduates of the RIT/NTID MS program to work with us, and would encourage our partners in and outside of Rochester to consider hiring the graduates of the RIT/NTID MS program.

The RIT/NTID MS Program in Health Care Interpretation will address an important gap in the education and preparation of sign language interpreters to work in healthcare and education programs in the health professions and health-related research. The graduates of the MS program will address the shortage of sign language interpreters qualified to work in these settings in Rochester, statewide and across the country. Thank you and your team for developing the MS program.

Sincerely,



Steven Barnett MD
Associate Professor, Departments of Family Medicine and Public Health Sciences
Director, Rochester Prevention Research Center; National Center for Deaf Health Research (NCDHR)
Co-Director, Rochester Bridges to the Doctorate Program for Deaf and Hard-of-Hearing Students
University of Rochester Medical Center
slevern_barnett@urmc.rochester.edu



Dear Dr. Kurz,

It is my understanding that you are developing a new Master of Science degree program in Health Care Interpretation at the Rochester Institute of Technology's National Technical Institute for the Deaf (RIT/NTID) to begin in the fall of 2016. Your new MS degree will meet the growing demand of specialized health care interpreters as more deaf and hard-of-hearing people enter the medical/healthcare fields, increase the number of specialized interpreters working in patient healthcare settings, and prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings. I am fully supportive of this effort.

As stated in the Task Force's final report related to healthcare careers for the deaf and hard of hearing community, one of the major barriers identified in the Task Force report was deaf and hard-of-hearing individuals' ability to access information. Those individuals currently pursuing training in healthcare report the limited availability of quality access services, particularly sign language interpreters with specialized knowledge in the healthcare settings. As an alumni of ASLIE at RIT/NTID and a freelance interpreter in the NYC area, I can assert that this new program will help take the lead in the identification and development of best practices with respect to specialized interpreting for deaf and hard-of-hearing individuals in healthcare fields.

The extensive training that I received from NTID/RIT helped prepare me to interpret during a stressful emergency situation. I was able to remain calm and implement the strategies I and learned from the interpreting program to do my job effectively. By working with governmental officials during hurricane Sandy, I was able to advocate for the deaf community and be in the cameras' view. Deaf New Yorkers were able to receive the pertinent information that they needed to keep out of harm's way and have access to any resources that were available. Since graduating from NTID/RIT I have established my own interpreting company here in New York City which allows me to meet the needs of several deaf consumers on a daily basis. This is all because I had the opportunity to learn and grow with some of the very best interpreters and deaf educators in the field today.

Currently in the US, the Registry of Interpreters for the Deaf (RID), the national association and certifying body of sign language interpreters, lists 45 BA/BS degree programs and 4 MA/MS degrees in American Sign Language/English interpreting. Of all of these programs, none offer specialized training in the healthcare arena beyond introductory coursework. Most bachelor level programs focus on generalist level training for interpreters. At the 2013 National RID Conference, a motion was made to investigate healthcare as a specialty certification area within the sign language interpreting field because language access remains a matter of national importance. Healthcare organizations continue to face challenges to accommodate increasingly diverse patient populations i.e. more than 28 million people with hearing loss and about 47 million people who speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations. This will fit the mission of the MS in Health Care Interpretation program.

Again, I am fully supportive of this new MS program in Health Care Interpretation and as a professional in the field of healthcare interpretation; this proposal has my full support in ensuring successful delivery of the new degree in healthcare interpretation.

Sincerely,

Lydia Callis
RID Nationally Certified ASL Interpreter
Owner, LC Interpreting Services, LLC
Rochester Institute of Technology/National Technical Institute for the Deaf Bachelor's Degree in
ASL-English Interpretation



DEPARTMENT OF FAMILY MEDICINE
1018 Fuller Street
Ann Arbor, Michigan 48104-1213

(734) 938-7122 Administration
(734) 988-7138 Predoctoral Education Office
(734) 988-7120 Research Office
(734) 988-7335 Fax

November 11, 2014

Kim B. Kurz, Ph.D.
Chairperson, American Sign Language & Interpreting Education
National Technical Institute for the Deaf at RIT
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz,

It is my understanding that you are developing a new Master of Science degree program in Health Care Interpretation at The Rochester Institute of Technology's National Technical Institute for the Deaf (RIT/NTID) to begin in the fall of 2016. Your new MS degree will meet the growing demand of specialized health care interpreters as more Deaf and Hard-of-Hearing (DHH) people enter the medical/health care fields, increase the number of specialized interpreters working in patient health care settings, and prepare interpreters to work in administrative roles, so as to ensure language access to patients in hospital settings. I am fully supportive of this effort.

As stated in the final report by the Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community, one of the major barriers identified for the DHH community regarding careers was the DHH individuals' inability to access information. Those individuals currently pursuing training in healthcare report the limited availability of quality access services, particularly sign language interpreters with specialized knowledge in the healthcare settings. As a family doctor and advocate for the DHH community, I strongly support this new program to help take the lead in the identification and development of best practices with respect to specialized interpreting for DHH individuals in healthcare fields. I have 13 years of experience in caring for DHH patients. These individuals struggle with medical terminology and basic health knowledge when compared with my hearing, English-speaking patients. It is vital that we address these issues to narrow some of the health disparities seen in this population.

Currently in the US, the Registry of Interpreters for the Deaf (RID), the national association and certifying body of sign language interpreters, lists 45 BA/BS degree programs and 4 MA/MS degrees in American Sign Language/English interpreting. Of all of these programs, none offer specialized training in the healthcare arena beyond introductory coursework. Most bachelor level programs focus on generalist level training for interpreters. At the 2013 National RID Conference, a motion was

made to investigate healthcare as a specialty certification area within the sign language interpreting field because language access remains a matter of national importance. Healthcare organizations continue to face challenges to accommodate increasingly diverse patient populations, i.e. more than 28 million people with hearing loss and about 47 million people who speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations. This will fit the mission of the MS in Health Care Interpretation program.

Again, as a family physician, I am fully supportive of this new MS program in Health Care Interpretation to help ensure successful delivery of the new degree in healthcare interpretation.

Sincerely,



Michael McKee, MD, MPH
Assistant Professor
Family Medicine Department
University of Michigan
101B Fuller Street
Ann Arbor, MI 48104-1213
VP: 734-418-7851
Tel: 734-998-7120
Fax: 734-998-7335
mmmckee@med.umich.edu



November 9, 2014

Kim B. Kurz, Ph.D.
Chairperson, American Sign Language & Interpreting Education
National Technical Institute for the Deaf at RIT
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz,

I was very pleased to learn that your department at Rochester Institute of Technology's National Technical Institute for the Deaf (RIT/NTID) is developing a new Master of Science degree program in Health Care Interpretation with the goal of beginning in the fall of 2016. I am certain that the master's degree will help to meet the growing demand of specialized healthcare interpreters. As you know, increasing numbers of deaf and hard of hearing people are entering medical/healthcare fields and need qualified interpreters in their training. Further, there is a high demand for specialized interpreters working in patient healthcare settings. Finally, the degree will prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings. For these reasons, I am fully supportive of your efforts.

As stated in the national Task Force's final report related to healthcare careers for the deaf and hard of hearing community, one of the major barriers identified for deaf and hard of hearing individuals was the ability to access information. I am aware of this lack of access through my involvement with the Association of Medical Professionals with Hearing Loss (AMPHL), where deaf and hard of hearing healthcare professionals frequently speak of the need for qualified interpreters for their training. Further, as a long-time interpreter myself, I feel confident that this new program will take the lead in the identification and development of best practices with respect to specialized interpreting for deaf and hard-of-hearing individuals in healthcare fields.

Currently in the U.S., the Registry of Interpreters for the Deaf (RID), the national association and certifying body of sign language interpreters, lists 45 BA/BS degree programs and 4 MA/MS degrees in American Sign Language/English interpreting. Of all of these programs, none offer

specialized training in the healthcare arena beyond introductory coursework. Most bachelor level programs focus on generalist level training for interpreters. Further, at the 2013 National RID Conference, a motion was made to investigate healthcare as a specialty certification area within the sign language interpreting field because language access remains a matter of national importance. Healthcare organizations continue to face challenges to accommodate increasingly diverse patient populations, i.e. more than 28 million people with hearing loss and about 47 million people who speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations. These statistics support the mission of the MS in Health Care Interpretation program.

I wholeheartedly offer my support of this new MS program in Health Care Interpretation. I believe this proposal will advance the successful delivery of healthcare interpretation to deaf and hard of hearing citizens.

Best wishes,

A handwritten signature in black ink, appearing to read "Brenda M" followed by a long horizontal flourish.

Brenda Nicodemus, PhD
Associate Professor
Director, Center for the Advancement of Interpreting and Translation Research
Department of Interpretation
Gallaudet University
800 Florida Avenue, NE
Washington, DC 20002



November 14, 2014

Kim B. Kurz, Ph.D.
Chairperson, American Sign Language & Interpreting Education
National Technical Institute for the Deaf at RIT
32 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz,

The National Association of the Deaf (NAD) submits this letter to support a new Master of Science degree program in Health Care Interpretation at the Rochester Institute of Technology's National Technical Institute for the Deaf (RIT/NTID) which you propose to begin in the fall of 2016. Your new MS degree program is critical to meet the growing demand of specialized health care interpreters as more deaf and hard-of-hearing people enter the medical/health care fields, increase the number of specialized interpreters working in patient health care settings, and prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings.

The mission of the NAD is to preserve, protect, and promote the civil, human and linguistic rights of all deaf and hard of hearing individuals in this country. We receive frequent calls, emails and requests from countless deaf and hard of hearing individuals everyday who report an inability to properly access health care services particularly with the lack of qualified sign language interpreters with specialization in health care.

This new program will help take the lead in the identification and development of best practices with respect to specialized interpreting for deaf and hard-of-hearing individuals in healthcare fields. To the best of our knowledge, none of the existing interpreter training programs in the United States currently offers specialized training in the healthcare field beyond introductory coursework. Interpreter training programs focus on general training for interpreters. There are 48 million deaf and hard of hearing individuals in the country, and healthcare organizations face challenges to accommodate the communication needs of this diverse population. The Masters Degree in Health Care Interpretation program is an optimal means to meet those needs.

It is our sincere hope that you get the funding and support needed to make this much needed program a reality. There is no doubt that the students who enroll in this program and graduate with the Masters Degree in Health Care Interpretation would immediately find work across the country.

Sincerely,

Christopher D. Wagner
President



Department of Interpretation
800 Florida Avenue
Washington, D.C. 20002
202.651.5149 (v/vp)
202.651.5172 (fax)

November 24, 2014

Kim Kurz, Ph.D.
Chair of ASL and Interpretation Education
One Lomb Memorial Drive
Rochester, New York 14623

Dear Dr. Kurz,

This letter is to express our support for RIT/NTID's endeavor to create a new Master of Science program of Interpretation in Healthcare and implement the program in summer of 2016.

As baby boomers are reaching their 60s and entering retirement, the population of senior citizens with hearing loss will increase to more than 28 million, and about 47 million people who would speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations. The demand for health care will increase nationwide.

Many of the new senior citizens will face some degree of hearing loss and some of them will learn sign language, and then they will rely on sign language interpreters to assist their communications with the medical professionals and services. A new MS in Healthcare Interpretation program will help to meet the growing demand of specialized healthcare interpreters as more deaf and hard-of-hearing people enter the medical and health care fields, increase the number of specialized interpreters working in patient health care settings, and prepare interpreters to work in administrative roles in ensuring language access to deaf and hard-of-hearing patients in hospital and medical settings.

There has been a serious demand for qualified interpreter teachers in at least 146 interpreter education programs across the country. The graduates from the Master program in Healthcare may apply and study in the Ph.D. in Interpretation program at Gallaudet University.

The students in Bachelor in Interpretation (BAI) program at Gallaudet University are required to take one course in Medical Interpretation. The graduates from BAI at Gallaudet University will have the option to enroll and study in NTID's future MS program in Healthcare Interpretation. The Department of Interpretation housing BA, MA and Ph.D. in Interpretation programs at Gallaudet University desires to strengthen the working relationship and collaboration between the two universities.

We the fellows at Gallaudet University's Department of Interpretation heartfelt support RIT/NTID's curriculum proposal to create a new Master of Sciences in Healthcare Interpretation.

Sincerely yours,

A handwritten signature in black ink that reads "Keith M. Cagle". The signature is written in a cursive style with a large, stylized 'K' and 'C'.

Keith M. Cagle, Ph.D.
Coordinator of BA in Interpretation at Gallaudet University
Graduate of RIT/NTID in 1982

Cc: Dr. Melanie Metzger, Chair of Department of Interpretation
Dr. Isaac Agboola, Dean
Dr. Carol Erting, Provost
Dr. Alan Hurwitz, President



Department of Education, Health and Human Services

American Sign Language Program

November 24, 2014

Kim B. Kurz, Ph. D.
RIT/NTID
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz:

I am writing to support RIT/NTID's proposed Masters of Science degree in Healthcare Interpretation. As a sign language interpreter for the past 34 years, I have witnessed the evolution of the interpreting profession which, through its national association and certifying body the Registry of Interpreters for the Deaf (RID), has striven to keep abreast with the interpreting needs of America's deaf and hard of hearing community. That community is now asking for interpreters who have the specialized knowledge required to ensure language access in medical/healthcare settings not only for deaf and hard of hearing patients, but for deaf and hard of hearing doctors, nurses, and administrators. No other college in the U.S. offers this much needed specialty so the graduates of this program will be highly sought after nationwide.

As the Coordinator of an ASL/English Interpreter Education Program (IEP) that offers an AAS degree, I provide academic advisement to hundreds of students, many of whom express a desire to specialize in healthcare interpreting. I have long recommended NTID to my students. With NTID offering an MS in Healthcare Interpretation I, and IEP Coordinators throughout the country, will be able to map out a plan with our students that goes beyond a Bachelor's degree.

I strongly encourage the establishment of this degree at RIT/NTID.

Jane Hecker-Cain

Jane Hecker-Cain, M.S., NIC-Adv., SC: I.
Coordinator, American Sign Language Program
Ammerman Campus
631-451-4157 voice
631-880-6370 videophone

Ammerman Campus
533 College Road
Selden, New York 11784-2899
(631) 451-4110

Grant Campus
Crooked Hill Road
Brentwood, New York 11717-1092
(631) 851-8700

Eastern Campus
121 Speonk-Riverhead Road
Riverhead, NY 11901-3499
(631) 548-2500



**CONTINUING
EDUCATION**
People, Changing

December 3, 2015

Kim B. Kurz, Ph.D.
Chairperson, American Sign Language & Interpreting Education
RIT/NTID
Lyndon Baines Johnson Building
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz,

Please accept this letter of support for RIT/NTID's proposed MS degree in Healthcare Interpretation. A high quality program at the graduate level, which has very specific expertise in medical and healthcare ASL-English interpreting, would help address a very clear and increasing national need in the deaf community for interpreter specialization.

Please consider that:

- As more deaf and hard-of-hearing (d/hh) people enter the medical/health care fields, increased numbers of specialized interpreters working in patient health care settings and in administrative roles, to ensure language access to patients in hospital settings, are needed.
- As stated in a multi-institutional Task Force on Health Care Careers for the Deaf and Hard of Hearing Community's final report, one of the major barriers identified was d/hh individuals' ability to access information. Those individuals currently pursuing training in healthcare report the limited availability of quality access services, particularly sign language interpreters with specialized knowledge in the healthcare settings.
- At the 2013 National RID Conference, a motion was made to investigate healthcare as a specialty certification area within the sign language interpreting field because language access remains a matter of national importance. Healthcare organizations continue to face challenges to accommodate increasingly diverse patient populations, i.e. more than 28 million people with hearing loss and about 47 million people who speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations.

ADDRESS: 3110 Thompson Avenue
Long Island City, NY 11101

PHONE: 718-482-5300
WWW: www.laguardia.edu/ce





**CONTINUING
EDUCATION**
People, Changing

- Currently in the U.S., the Registry of Interpreters for the Deaf (RID), the national association and certifying body of sign language interpreters, lists 45 BA/BS degree programs and 4 MA/MS degrees in American Sign Language (ASL)-English interpreting. Of all of these programs, none offer specialized training in the healthcare arena beyond introductory coursework. Most bachelor level programs focus on generalist level training for interpreters.

The U.S. Department of Education funded ASL-English Interpretation Program (AEIP), here at City University of NY (CUNY)-LaGuardia, is one of those Bachelors level programs *offered in collaboration with State University of NY (SUNY)-Empire State College*. AEIP graduates would benefit from the availability of a graduate degree program that offers them the opportunity to develop themselves as specialists.

Developing and offering a level of programming that can truly produce highly skilled and specialized practitioners is imperative. Although I have not reviewed program sequence and curricula, I am please to understand that program candidates will already have attained national RID certification as an entrance requirement; and that faculty will be highly specialized, being required to have an extensive experience in healthcare/medical interpreting, in addition to RID certification, and a terminal degree for tenure track and at least a Masters degree for the lecturer position.

With these components in place, and if appropriate healthcare/medical field work partners can also be established - all of which are critical in offering a program such that is being proposed - the AEIP looks forward to working with RIT/NTID as a potential feeder program. Please do not hesitate to contact me should you have any questions or required additional information.

Best of luck, and I look very much forward to receiving more particulars on the offering as your process moves forward.

Sincerely,

Rob Hills

Rob Hills, Project Director/PI
ASL-English Interpretation Program

ADDRESS: 3110 Thomson Avenue
Long Island City, NY 11101

PHONE: 718-487-5300
E-MAIL: www.laGuardia.edu





UNIVERSITY of NEW HAMPSHIRE
M A N C H E S T E R

Kim B. Kurz, Ph.D.
Chairperson, American Sign Language & Interpreting Education
RIT/NTID
Lyndon Baines Johnson Building
52 Lomb Memorial Drive
Rochester, NY 14623

December 4, 2014

Dear Dr. Kurz:

I am very happy to write this letter of support for RIT/NTID's proposal for a new *Master's degree program in Healthcare Interpretation*. As the director of the baccalaureate degree program in Sign Language Interpretation at the University of New Hampshire at Manchester, I whole-heartedly support this proposal. There is a great need for this program, and having it at the Master's level is apropos given the number of Bachelor degree programs such as ours that could serve as feeders for such a Master's program, which would be the only Master's program of its kind in the country.

As you know, many Deaf and hard of hearing people experience great frustration with accessing the healthcare system. The number of qualified interpreters in healthcare interpreting is low, and interpreters who do specialize in healthcare generally take workshops and other trainings to develop this expertise. However, this is not an ideal way to develop expertise in such an important specialization.

In 2013, a motion was made at the national conference of the Registry of Interpreters for the Deaf (RID) to establish a specialty certificate in healthcare interpreting. This shows that the RID membership is concerned about the state of healthcare interpreting and the need for this specialty.

The issue remains as to how interpreters can specialize in healthcare interpreting. Having a carefully developed Master's program specifically for this purpose is an ideal solution that can address this need so that all stakeholders -- healthcare providers as well as patients -- can best be served by an increased number of specialists in healthcare interpreting.

RIT/NTID has long been a major leader in the area of interpreter education and is in an ideal position to provide such a program. I enthusiastically support this proposal.

Feel free to contact me if you have any questions. It is best to contact me at <jack.hoza@unh.edu> or at 603-641-4143 (standard/voice phone).

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Jack Hoza'.

Jack Hoza, Ph.D.
Professor and Director
Sign Language Interpretation Program

UNIVERSITY OF NEW HAMPSHIRE MANCHESTER

400 COMMERCIAL STREET MANCHESTER, NH 03101-1113 603-641-4321

UNIVERSITY OF
ROCHESTER
MEDICAL CENTER

FAHMAN DENALI CENTER
SCHOOL OF MEDICINE AND DENTISTRY
SCHOOL OF NURSING
STRONG MEMORIAL HOSPITAL
UNIVERSITY MEDICAL FACULTY GROUP

DEPARTMENT OF PSYCHIATRY
DEAF WELLNESS CENTER

Robert Pollard, Ph.D., Director
Professor of Psychiatry

November 14, 2014

Kim B. Kurz, Ph.D.
Chairperson, American Sign Language & Interpreting Education
National Technical Institute for the Deaf at RIT
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz,

For many months now, I have been following closely the National Technical Institute for the Deaf's (NTID's) plan to develop a Master of Science (MS) degree program in Health Care Interpretation, slated to begin the fall semester of 2016. As you and your colleagues know, myself and my interpreter scholarship collaborator Robyn Dean have taught and published on issues regarding healthcare interpreting – to both spoken and signed language interpreter audiences (and practitioners) for decades. I therefore have extensive knowledge regarding the issues that are relevant to the need for, and successful implantation, of a program such as the one being proposed.

The development your new MS degree program will be a welcomed achievement for NTID and its parent institution, the Rochester Institute of Technology (RIT). Interpreting is not an all situations are equal profession, as you know. There is a dire need for a unique educational approach to interpreting in healthcare settings. This need, and suggested means of meeting that need, are growing areas of interpreting research and scholarship, including our own.

The greater access that deaf and hard-of-hearing persons have to health care, by virtue of the Americans with Disabilities Act, the Affordable Health Care Act, and other factors are swelling the ranks of patients whose care must be mediated through well-trained, specialist sign language interpreters if we are to maximize patient safety, informed consent for medical procedures, effective diagnosis and treatment, etc. Moreover, I am proud to be directly involved with an increasing number of deaf and hard-of-hearing persons who are becoming medical providers. These individuals, too must work in close collaboration with well trained, specialist sign language interpreters for their educations and careers to be effective. A third role for the specialists you will train in this program will be to function as administrators who insure appropriate, skilled language access for all patients with limited English abilities, not just deaf or hard-of-hearing persons – a role that your NTID colleague, Ms. Miraglia, filled at our medical center for many years. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient populations, underscoring the importance of the mission of NTID's MS in Health Care Interpretation program.

I have been a member of the national Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community, a collaboration between NTID, Gallaudet University and a local health care system,

since its inception. One of the major barriers identified in the Task Force's final report was deaf and hard-of-hearing individuals' ability to access information. Those deaf and hard-of-hearing individuals currently pursuing training as healthcare providers or researchers regularly report that their training is constrained by the limited availability of quality access services, particularly sign language interpreters with specialized knowledge of healthcare topics.

I also am a part-time researcher at the National Center for Deaf Health Research (NCDHR)—a program of the University of Rochester Medical Center. NCDHR staff, many of whom are deaf, conduct public health research pertaining to illness prevention and health promotion in the Deaf and hard-of-hearing communities. Our research work would be greatly enhanced when the interpreters we work with are well-versed in healthcare topics, something which is not always the case. Further, NCDHR is very active in training the new generation of public health researchers who are themselves Deaf or hard of hearing. As with the deaf and hard of hearing practitioners in training mentioned above, graduates of the proposed MS program would be extraordinarily beneficial to the education and later research careers of these pioneering individuals.

The Registry of Interpreters for the Deaf (RID), the nation's primary association and certifying body of sign language interpreters, states that there are 45 baccalaureate degree programs and four MA/MS degree programs in American Sign Language/English interpreting. None of these programs offer specialized training in the healthcare arena beyond limited exposure in coursework and some practicum settings. As noted, virtually all such baccalaureate programs provide only generalist training for interpreters, under the presumption that bilingualism and knowledge of Deaf culture and the RID Code of Ethics is sufficient for all types of interpreting practice—including in specialty settings, such as healthcare. My work with Ms. Dean has long contested this inaccurate and, frankly, dangerous presumption.

As a healthcare practitioner myself, an advocate for appropriate education for deaf people and for interpreters, and as co-author of the Demand-Control Schema, which is an approach toward interpreter education that is increasingly used in healthcare-related training, I can attest that NTID's proposed program will quickly emerge as the national leader in the identification and development of best practices with respect to specialized interpreting for deaf and hard-of-hearing individuals in healthcare fields, again, as patients and providers. NTID's MS degree program proposal has my utmost support and admiration. I would be happy to do anything within my power to assist in its establishment and ongoing success.

Sincerely,



Robert Pollard, Ph.D.
Professor of Psychiatry
Director, Deaf Wellness Center

6-102 Education North
Edmonton, Alberta, Canada T6G 2G5
Tel: 780.492.1156
Fax: 780.492.1318
debra.russell@ualberta.ca
www.wccds.ualberta.ca

Nov 22, 2014

Dr. Kim Kurz, Chairperson
American Sign Language & Interpreting Education
RIT/NTID
Lyndon Baines Johnson Building
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz:

I am writing to express my support for the proposal MS degree in Health Care Interpretation. NTID and their faculty are well positioned to deliver the training outlined in this proposal. The current faculty possesses the skills, knowledge and experience to extend their training to prepare interpreters at the graduate level to work health care settings. A new MS degree will meet the growing demand of specialized health care interpreters as more deaf and hard-of-hearing people enter the medical/health care fields, increase the number of specialized interpreters working in patient health care settings, and prepare interpreters to work in administrative roles in ensuring language access to patients in hospital settings. The need for graduate training with a health care specialization has been a major barrier for deaf and hard of hearing consumers accessing health care services. A new degree program in the area will help to address that shortage. In addition, it will also address a second barrier that has been identified which is the demand for interpreters with specialized knowledge in health care in order to interpret for deaf and hard of hearing people who are pursuing careers in the health care, be that in nursing, medicine, dental, pharmacy or physical therapy.

Currently in the US, the Registry of Interpreters for the Deaf (RID), the national association and certifying body of sign language interpreters, lists 45 BA/BS degree programs and 4 MA/MS degrees in American Sign Language/English interpreting. Of all of these programs, none offer specialized training in the healthcare arena beyond introductory coursework. Most bachelor level programs focus on generalist level training for interpreters. These programs will also serve as feeder programs to the new MS program.

At the 2013 National RID Conference, a motion was made to investigate healthcare as a specialty certification area within the sign language interpreting field because language access remains a matter of national importance. Healthcare organizations continue to face challenges to accommodate increasingly diverse patient populations i.e. more than 28 million people with hearing loss and about 47 million people who speak a language other than English. There are approximately 7,000 hospitals in the U.S. providing language access services to diverse patient care populations.



As I continue to build on my research agenda in the areas of interpreting access and quality service provision, I would welcome the opportunity to work with graduate students on projects related to health care access. I believe these students will enjoy employment opportunities not only in the US, but also throughout the globe as there are no comparable programs in other countries. I strongly support this application and look forward to collaborating with NTID every way possible to support this highly desirable program.

Sincerely,

A handwritten signature in cursive script that reads 'Debra Russell'.

Debra Russell, Ph.D., AVLIC COI



DEPARTMENT OF COUNSELING, ADULT
AND REHABILITATION EDUCATION
COLLEGE OF EDUCATION AND HEALTH PROFESSIONS
INTERPRETER EDUCATION PROGRAM
CCIE ACCREDITED

November 19, 2014

Kim B. Kurz, Ph.D., Chairperson,
American Sign Language & Interpreting Education
RFI/NTID
Lyndon Baines Johnson Building
52 Lomb Memorial Drive
Rochester, NY 14623

Dear Dr. Kurz:

It is my pleasure to write this letter in support of NTID's proposed master's degree program in Healthcare Interpreting to begin the summer of 2016. Healthcare interpreting encompasses a wide variety of settings such as doctors' offices, hospitals and clinics, school nurses' offices, mental health settings, and first aid and emergency events. Patients can vary in their language use along a continuum of English to ASL, and use various communication modalities such as sign language, tactile sign language, restricted vision, speechreading, and speech to text technology. Persons who are deaf and hard of hearing experience communication access barriers when seeking community services in the wide array of healthcare settings mentioned above.

Challenges also exist for deaf and hard of hearing persons interested in healthcare careers. According to the final report of the *Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community*, access to healthcare information is a barrier for deaf and hard of hearing persons pursuing healthcare careers. One of the challenges to accessing information is the lack of qualified interpreters who specialize in healthcare.

Most interpreter preparation today continues to be provided at the two-year, associate degree level, with approximately 40 bachelor level interpreter education programs in the country. Most four-year programs prepare graduates for "entry into the profession" and focus on general community work. A few programs offer a minor or concentration in a specialty area with the most common focus being educational, K-12 settings. Two- and four-year "entry ready" graduates are not prepared meet the demands of interpreting in medical and healthcare settings. This is especially true for deaf and hard of hearing service providers or those whose goal is to pursue a healthcare career.

As a CCIE accredited four-year interpreting program preparing interpreters for more than 30 years, our UALR program faculty are well aware of the limitations of even the best programs. Interpreters graduating with our BA in Interpretation: ASL/English often state that their goal is to interpret in the medical profession (two students have mentioned such goals to me today).

UNIVERSITY OF ARKANSAS AT LITTLE ROCK
2801 South University Avenue Little Rock, Arkansas 72204-3099
(O) 501.569.3169 (F) 501.569-8129
www.ualr.edu/halNAS

however, there is little access to graduate level interpreting programs to increase their skills and knowledge in specialty areas such as healthcare. There are only four master's degree programs in ASL-English interpreting. None of these programs offer specialization in healthcare interpreting. Currently the only avenue to acquire higher-level skills and knowledge is through short-term individual workshops or on-the-job experience. This provides neither a coordinated nor integrated path to specialty interpreter education. Interpreters need access to quality graduate level programs and curricula focusing on healthcare interpreting leading to an advanced degree.

The interpreting field further supports more focus on healthcare for interpreters. During the 2013 Registry of Interpreters for the Deaf national conference, the membership moved to investigate healthcare as a specialty certificate for sign language interpreters. This addresses the need for specialty credentialing; however, that does not address the other required element, that is, healthcare education programs for interpreters.

The program you are proposing will become a viable option for graduates from four-year interpreter education programs, such as ours, who are interested in and want to pursue graduate level education in healthcare interpreting. I believe that four-year programs such as ours will become "feeder" programs to graduate interpreter education programs such as the one you are proposing. We will support this avenue for our graduates and welcome recruitment activities with our students. Your proposed program will help these interpreters become better qualified to interpret for both deaf and hard of hearing patients, professionals, and those seeking healthcare careers. This is a very worthwhile and needed endeavor. We stand ready to assist you in any way we can.

Sincerely,



Linda K. Stauffer, Ph.D., CSC, OTC
Associate Professor and Coordinator
Interpreter Education Program

Appendix E – Space Allocation/Renovation Request

N/A

Appendix F - Full Faculty CVs

Denise Fitzgerald Burgen, MBA, MSN, FNP, RN

12 Brook Valley Drive – Rochester, New York 14624
Home Phone: (585)571-4077 / Cell Phone: (585)469-1606
E-mail Address: deniseburgen@rochester.rr.com

SENIOR HEALTH CARE MANAGEMENT EXECUTIVE

High performance, results-driven professional with 25 + year track record of demonstrating leadership, expertise and distinguished performance in health care management. Known for success in ambulatory services, nursing care, developing systems, revenue cycle optimization, processes and procedures to streamline operations, compliance, evidence based outcomes, effectively increasing profits and decreasing expenses.

CORE COMPETENCIES

Multi-Site Operations Management...Operational Leadership...Financial Management...Multi-Disciplinary Teams... Population Health Management... Market Driven Management...Revenue and Profit Growth...Project Management... Practice Acquisition...Capital Projects...Physician Relations... Practice Management...Regulatory and Compliance Standards ...Reimbursement Programs... Executive Management...Business Development...Teaching... Nursing Management...Occupational Health...Global Health and Wellness

CAREER PROGRESSION / ACCOMPLISHMENTS

Bausch and Lomb / Rochester/ New York (2012 – present)

Manager, Corporate Health and Wellness (2012 – present)

- Provide clinical leadership, medical case management and employee health and wellness advocacy to the corporation and its facilities.
- Oversee the performance and partnership of multiple external vendors including occupational health nurses.
- Facilitate the implementation and ongoing evaluation of workers' compensation, family medical and disability leaves, wellness, occupational health testing and surveillance and the employee assistance program (EAP).

Kaleida Health / Buffalo/ New York (2010 – 2012)

Senior Director of Cardiovascular Services (2011-2012)

- Developed an integrated cardiovascular service line in the new Gates Vascular Institute and Buffalo General Medical Center
- Combined two hospitals-Buffalo General Hospital and Millard Fillmore Gates Hospital, in to a new flagship hospital

- Standardized cardiovascular practices across entire service line

Senior Director of Ambulatory Services (2010 – 2011)

- Provide hands-on leadership to team members including site practice managers, coding and reimbursement specialist, financial analyst and credentialing specialist.
- Benchmark providers' production statistics against MGMA (Medical Group Management Association) data demonstrating commensurate income for work performed.
- Foster and develop new business services to meet the needs of the community and significantly increased hospital's profitability.
- Development of a Bariatric Center of Excellence program with Surgical Review (SRC) certification.
- Participate as a key member of the senior leadership team.

University of Rochester: School of Nursing / Rochester/ New York (2010 – present)

Assistant Professor (2010 – present)

- Teach in the Masters in Health Care Leadership program- Medical Informatics, Process Improvement and Measurement Outcomes course.
- Teach in the Masters in Health Care Leadership program- The Leadership Colloquium course.

Roberts Wesleyan College/ North Chili/ New York (2010 – present)

Adjunct Professor (2010 – present)

- Teach in the Masters in Health Care Administration program- Health Care Financial Management course.
- Teach in the Masters in Health Care Administration program- Health Care Marketing course.
- Teach in the Bachelors in Health Care Administration program- Health Care Operations course

Complex Care Solutions-CareManagers Inc./Rochester/ New York (2010 – present)

Nurse Practitioner (2010 – present)

- Conduct Geriatric Home Visits to the frail elderly in the Upstate New York region.
- Document coding levels and risk assessment for this frail elderly population.

Med-Scribe, Inc. Health Care Recruiters/ Fairport/ New York (2009-2010)

Health Care Consultant (2009-2010)

- Developed a Strategic Planning strategy for the business
- Completed the GSA Schedule for contracting with the Federal Government for Healthcare Recruiting Services
- Investigation of new markets and new site selection
- Procedural analysis of company processes
- Revision of company job descriptions

Midlakes Management Corporation/ Clifton Springs/ New York (2007 – 2009)

Chief Executive Officer (2007-2009)

- Directed the physician services company providing planning, guidance and strategic direction.
 - Scope includes 45 clients in NY and PA.
 - Services include medical billing, IT, HR, consulting and accounting.
- Developed and implemented a turn around encompassing:

- Redesign, implementation and monitoring of billing systems to insure optimal viability.
- Recruit and develop staff to head physician service lines of business.
- Collaborate with Board to move the company into the Technology age in Health Care.
- Building of consulting, IT and Accounting service lines
- Responsible for \$5.5 million budget including the entire revenue cycle management of medical practice billing.
- Increased sales by \$20 million in the first half of 2009.
- Represented Midlakes Management in interacting with all applicable regulatory oversight agencies.
- Compliance Officer for the company.
- Certified by the Healthcare Billing & Management Association as a Certified Healthcare Billing and Management Executive (CHBME)

Rochester General Medical Groups / Rochester / New York (1997 – 2007)

Executive Administrator (2003 – 2007)

- Directed the 39 Medical Groups providing planning, guidance and strategic direction.
- Scope includes 180 providers and 370 support staff including Registered Professional Nurses, Licensed Practical Nurses, Nurse Practitioners, Physicians Assistants, Patient Care Technicians and Medical Secretaries.
- Developed and implemented a strategic plan encompassing:
- Financial Management – development, implementation and monitoring of billing systems to insure optimal viability.
- Recruited, developed and evaluated key staff.
- Medical Groups facilities management and targeted site development.
- Collaborated with medical leadership to advocate for and support both patients and providers.
- Responsible for \$44 million budget of medical groups including the entire revenue cycle of practice billing.
- Represented Via Health Medical Groups in interacting with all applicable regulatory oversight agencies.
- Supervised the activities of leadership assigned to clinical quality.
- Redesigned medical practices to improve efficiency and improve healthcare outcomes. Received IHI Innovations Award and HANYS Award in NYS for project outcomes (2007).

Director of Operations (2002 – 2003)

- Administered all aspects of daily operations.
- Conducted all business office and human resources functions.
- Prepared partners' monthly income distribution reports.
- Assisted in recruiting 60+ physicians and over 15 allied health professionals.
- Significantly contributed to the reduction of days in AR by 39% to a low of 40 days.
- Directed day-to-day operations of 19 medical practices (60 physicians, 25 midlevel providers and 200 ancillary staff).
- Implemented policies to ensure full documentation and revenue capture of medical groups.
- Provided guidance, training and monitor daily performance of Practice Managers.
- Participated with Director of Finance to formulate and ongoing variance analysis of \$30 million budget.

Vascular Nurse Practitioner (1997-2002)

- Analyzed computer conversion, rewrote conversion specifications and reconverted the database.
- Implemented all new software modules and retrained all business office employees on the new system.
- Successfully created and implemented a new Nurse Practitioner role into an outpatient vascular surgery clinical setting.
- Developed and organized new protocols for Quality Assurance measures, JCAHO protocols and wound care.
- Managed office staff members in the daily activities of a large vascular practice.
- Designed and coordinated the opening of an innovative Diabetic Foot and Wound Care Center for Via Health, consisting of three Vascular Surgeons and three Podiatrists. Served as wound consultant and Nurse Practitioner at the center.

University of Rochester/Strong Memorial Hospital/ Rochester/New York (1985-1997)

Vascular Nurse Practitioner (1993-1997)

- Acute Care Nurse Practitioner role in a University hospital setting
- Successfully introduced a new acute care vascular nurse practitioner role into a University hospital setting.
- Managed an inpatient vascular surgical population for a 25-bed unit.
- Quality Assurance Liaison to the hospital Quality Assurance Committee for vascular surgery. Compiled data on patient care and compiled reports to state of New York on hospital indicators

Technical Director/Account Manager for Vascular Laboratory (1989-1993)

- Directed a successful Non-Invasive Vascular Lab in a University hospital setting.
- Managed registered vascular technologists.
- Managed a budget of \$300,000 for employees and technical equipment.
- Performed non-invasive vascular studies of hospital inpatients and outpatients.

Nurse Manager, Vascular Surgery Unit (1986-1989)

- Supervised, managed and trained nurses in a 25-bed vascular surgery inpatient unit.
- Responsible for unit budget, hiring of staff, staff scheduling and maintenance of equipment and supplies

E D U C A T I O N

- **Managing Health Care Delivery Certificate (2012)**
Harvard Business School- Boston, Massachusetts
- **Masters of Business Administration (2002)**
University of Rochester William E. Simon Graduate School of Business – Rochester, New York
- **Masters of Science in Nursing- Family Nurse Practitioner (1993)**

University of Rochester School of Nursing- Rochester, New York

- **Bachelors of Science- Nursing (1985)**
Kenka College- Kenka Park, New York

ASSOCIATION MEMBERSHIP

- New York Organization of Nurse Executives (NYONE)-2011-present
- American Association of Occupational Health Nurses (AAOHN) -2012- present
- Finger Lakes Organization of Nurse Executives (FLONE)-2011-present
- Medical Group Management Association (MGMA)- 2002-present
- Health Care Compliance Association (HCCA)- 2007-present
- American College of Health Care Executives (ACHE)- 2002- present
- Health Care Billing and Management Association (HCBMA)- 2007- 2010
- Genesee Valley Nurses Association (GVNA) –President 2002-2004
- International Society of Vascular Nursing (SVN)- 1996-2002- President 1999-2000

HONORS

- **Outstanding Faculty Award**, Roberts Wesleyan College (April 2012)
- **Outstanding Faculty Award**, Roberts Wesleyan College (September 2012)
- **Women of Valor Finalist**, American Diabetes Association (2001)
- **Distinguished Service Award** for Presidency of Society for Vascular Nursing (2000)
- **Forty Under Forty**, *Rochester Business Journal* Award for Civic and Professional Achievements (1999)
- **Kenka College Nursing Honor Society**, Induction for Community Leadership (1999)
- **Sigma Theta Tau International Honor Society**, Induction for Community Leadership (1999)
- **Jeanne E. Doyle Excellence in Vascular Nursing Award**, National Society for Vascular Nursing (1996)
- **Quality Team of the Year**, Team Leader Vascular Services, University of Rochester Medical Center (1995)

PROFESSIONAL LICENSES AND CERTIFICATIONS

- New York State Nursing License No. 379445
- New York State Family Nurse Practitioner Certification No. E330932

- Certified Vascular Nurse
- DEA Registration

Denise Fitzgerald Burgen
 July 1996
 No. MF0112437

PUBLICATIONS

- Fitzgerald, D.M. (2000). Peer Visitation of the Preoperative Amputee Patient. *Journal of Vascular Nursing*, 2, 41-44.
 - Fitzgerald, D.M. (1998). Vascular Nurse Practitioner: Development of an Innovative Role for the 21st Century. *Journal of Vascular Nursing*, 4, 87-92.
 - Norsen, L., Fineout, E., Fitzgerald, D., Horst, D., Knight, R., Kunz, M.E., Lumb, E., Martin, B., Opladen, J., and Schmidt, E. (1997). The Acute Care Nurse Practitioner: Innovative Practice for the 21st Century. In S. Moorhead (editor) *Nursing Roles Evolving or Recycled: Series on Nursing Administration 9*. Thousand Oaks: Sage Publications.
 - Kienast, J., and Fitzgerald, D. (1997). Identifying and Treating Femoral Artery Pseudoaneurysms Following Invasive Cardiac Procedures. *MedSurg Nursing*, 6, 95-97 and 106.
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REFERENCES

Available Upon Request

Robyn K. Dean, CI/CT, MA

Deaf Wellness Center
University of Rochester Medical Center
300 Crittenden Blvd, Box Psych
Rochester, New York 14642
(585) 275-6572
Robyn_Dean@urmc.rochester.edu

337 Rockingham Street
Rochester, New York 14620
(585) 275-6572
robyn.k.dean@gmail.com

Education:

- Maryville College, Maryville, TN; *B.A. in Sign Language Interpreting*, 1990.
- Colgate Rochester Crozer Divinity School, Rochester, NY; *M.A. in Theological Studies*, 2006.
- Heriot-Watt University, Edinburgh, Scotland; *PhD in Translation & Interpreting Studies*, expected 2015.

Certificates/Appointments:

- Associate Fellow, Higher Education Academy, York, United Kingdom, September, 2013.
- Senior Lecturer, University of Rochester School of Medicine, Department of Psychiatry, September 2011
- Adjunct Faculty, National Technical Institute for the Deaf, March 2010
- Adjunct Faculty, University of Northern Colorado, DO IT Center, November 2008
- Faculty Associate, University of Rochester School of Medicine, Department of Psychiatry, November 1999.
- Certificate of Interpretation, Registry of Interpreters for the Deaf, January 1994.
- Certificate of Transliteration, Registry of Interpreters for the Deaf, September 1992.
- Superior Rating, Sign Communication Proficiency Interview, Knoxville, TN, 1988.

Work History:

- 2011 – 2014. Post-graduate student lecturer and researcher, Heriot-Watt University, Edinburgh, Scotland.
- 2001 – 2011. Grant Co-investigator/Researcher, Deaf Wellness Center, University of Rochester Medical Center, Department of Psychiatry (Psychology)
- 2006 – 2008. Teacher and Education Consultant, University of Northern Colorado, Greeley, CO.
- 1993 – 2001. Staff Interpreter and Faculty Associate in Psychiatry, University of Rochester Medical Center/Strong Hospital, Rochester, NY.
- 1992 – present. Freelance Interpreter (independent contractor), Rochester, NY.
- 1992 – 1993. Staff Interpreter, Board of Cooperative Educational Services, Rochester, NY
- 1990 – 1992. Staff Interpreter, National Technical Institute for the Deaf (NTID).
- 1988 – 1990. Office Assistant/Interpreter, Communication Center for the Deaf, Knoxville, Tennessee.

Publications:

Peer-reviewed journal articles (6):

- Dean, R.K. (2014). Condemned to repetition? An analysis of problem-setting and problem-solving in sign language interpreting ethics. *International Journal for Translation and Interpreting*, 6 (1), 60 – 75.
- Dean, R. K. & Pollard, R. Q (2011). Context-based ethical reasoning in interpreting: A demand control schema perspective. *Interpreter and Translator Trainer*, 5(1), 155 – 182.
- Graybill, P., Aggas, J., Dean, R. K., Demers, S., Finigan, E. & Pollard, R. Q (2010). A community-participatory approach to adapting survey items for deaf individuals and American Sign Language. *Field Methods*, 22(4), 429 – 448.
- Pollard, R. Q, Dean, R. K., O'Hearn, A. M. & Haynes, S. L. (2009). Adapting health education material for deaf audiences. *Rehabilitation Psychology*, 54(2), 232 – 238.
- Dean, R. K. & Pollard, R. Q (2009). Effectiveness of observation-supervision training in community mental health interpreting settings. *REDITE-Journal on the Didactics of Translation and Interpreting*, 3, 1-17.
- Dean, R. K. & Pollard, R. Q (2001). Application of demand-control theory to sign language interpreting: Implications for stress and interpreter training. *Journal of Deaf Studies and Deaf Education*, 6(1), 1-14.

Books (2):

- Dean, R. K. & Pollard, R. Q. (2013). *The demand control schema: Interpreting as a practice profession*. North Charleston, SC: CreateSpace Independent Publishing Platform.
- Pollard, R. Q. & Dean, R. K. (Eds.) (2008). *Applications of Demand Control Schema in Interpreter Education*. Proceedings of the August 3, 2007 pre-conference meeting at the national convention of the Registry of Interpreters for the Deaf. Rochester, NY: University of Rochester.

Books chapters (3)

- Dean, R. K. & Pollard, R. Q. (2012). Beyond "interesting": Using demand control schema to structure experiential learning. In K. Malcolm and L. Swabey (Eds.), *In our Hands: Educating Healthcare Interpreters* (pp. 77-104). Washington, DC: Gallaudet University Press.
- Dean, R. K. & Pollard, R. Q. (2009). Challenges in interpreting addressed by demand-control schema analysis. In B. E. Cartwright *Encounters with reality: 1,001 interpreter scenarios* (pp. 307 – 316). Alexandria, VA: RID Press.
- Dean, R. K. & Pollard, R. Q. (2005). Consumers and service effectiveness in interpreting work: A practice profession perspective. In M. Marschark, R. Peterson, & E. Winston (Eds.), *Interpreting and interpreter education: Directions for research and practice* (pp. 259-282). New York: Oxford University Press.

Published Conference Proceedings (4):

- Dean, R. K. & Pollard, R. Q. (2008). Evolution and current status of the DC-S body of work. In R. Q. Pollard & R. K. Dean (Eds.), *Applications of Demand Control Schema in Interpreter Education* (1-6). (Proceedings of the August 3, 2007 pre-conference meeting at the national convention of the Registry of Interpreters for the Deaf.) Rochester, NY: University of Rochester.
- Dean, R. K. & Pollard, R. Q. (2006). From best practice to best practice process: Shifting ethical thinking and teaching. In E. M. Maroney (Ed.), *A new chapter in interpreter education: Accreditation, research and technology* (119 – 131). (Proceedings of the 16th national convention of the Conference of Interpreter Trainers (CIT).) Monmouth, OR: CIT.
- Dean, R. K., Pollard, R. Q., & English, M. A. (2004). Observation-supervision in mental health interpreter training. In E. M. Maroney (Ed.), *CIT: Still shining after 25 years* (pp. 55-75). (Proceedings of the 15th national convention of the Conference of Interpreter Trainers (CIT).) Monmouth, OR: CIT.
- Dean, R. K., Pollard, R. Q., Davis, J., Griffin, M., LaCava, C., Morrison, B., Parmir, J., Smith, A., Storme, S. & Suback, L. (2004). The demand control schema: Effective curricular implementation. In E. M. Maroney (Ed.), *CIT: Still shining after 25 years* (pp. 145-161). (Proceedings of the 15th national Convention of the Conference of Interpreter Trainers (CIT).) Monmouth, OR: CIT.

Other Publications (15):

- Dean, R.K. (in press). "Demand control schema", in Franz Pöchhacker (ed) *Encyclopedia of Interpreting Studies*, Routledge.
- Wurm, S. & Dean R.K. (in progress) "Interpreter Training: University", in Genie Gertz and Patrick Boudreault (eds) *The Deaf Studies Encyclopedia*, Sage Publishing.
- Dean, R. K. & Pollard, R. Q. (2013, Summer/Fall). "I don't think we're supposed to be talking about this:" Case conferencing and supervision for interpreters (reprint). AVLIC News, 29(2), on-line publication for members.
- Sheikh, H., Dean, R.K. & Turner, G.H. (2012). MediSigns: A report on the access to healthcare for Deaf communities across the European Union. A collaboration of three member states and InterResource Group of Ireland.
- Dean, R. K., Pollard, R. Q. & Samar, V. J. (2012). Occupational health risks in different interpreting work settings: Special concerns for VRS and K-12 settings. A reprint published by Nederlandse Beroepsvereniging Tolken Gebarentaal, the Dutch Association of Sign Language Interpreters.
- Dean, R. K., Pollard, R. Q. & Samar, V. J. (2011). Occupational health risks in different interpreting work settings: Special concerns for VRS and K-12 settings. A reprint published in *Across the Board*, the quarterly publication of the Australian Sign Language Interpreters Association, 6(3), 4-8.
- Dean, R. K., Pollard, R. Q. & Samar V. J. (2010, Winter). RID research grant underscores occupational health risks: VRS and K-12 settings most concerning. *VIEWS*, 27(1), 41-43.
- Dean, R. K. & Pollard, R. Q. (2009, Fall). "I don't think we're supposed to be talking about this:" Case conferencing and supervision for interpreters. *VIEWS*, 26(4), 28-30.

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- Dean, R. K. & Pollard, R. Q Jr. (2009, January). Deontological and teleological ethics. *Newsli: Magazine for the Association of Sign Language Interpreters for England, Wales and Northern Ireland*, 67, 3-5.
- Dean, R. K. & Pollard, R. (2008, November). Welche Vorteile bietet der Einsatz des Demand-Control-Schemas im Dometschunterricht? *Das Zeichen*, 80, 472-477.
- Dean, R. K. & Pollard, R. Q (2008, October). "Just when I figured out the answers, someone changed the questions": Thoughts about the interview portion of the NIC. *VIEWS* 25(8), 21-22.
- Dean, R. K. (2007). Revisiting the interpreter's role: A study of conference, court, and medical interpreters in Canada, Mexico, and the United States [book review]. *The Sign Language Translator and Interpreter*, 1(2), 305-308.
- Registry of Interpreters for the Deaf (2007). Standard practice paper: *Interpreting in Mental Health Settings*. Alexandria, VA: Registry of Interpreters for the Deaf. (Chair).
- Dean, R. K. (2005). "Be opened!" Deaf Christians find liberation in Jesus' declaration. *Sofjourners Magazine* 34(7), 8.
- Dean, R. K. & Pollard, R. Q (2004, October). A practice-profession model of ethical reasoning. *VIEWS*, 21(9), 1, 28-29.

Films:

- Dean, R. K. (Executive Producer) & Pollard, R. Q (Contributing Author) (2013). *Introduction to mental health interpreting*. [Motion picture and on-line, interactive instruction.] An on-line training curriculum produced for the Missouri Department of Mental Health. Available through Sign Language Specialists at <https://www.signlanguagespecialists.com/products.html>.
- Pollard, R. Q (Executive Producer). (2009). *Community* (60 second Public Service Announcement on Depression and Suicide Awareness. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Creative consultant.
- Pollard, R. Q (Executive Producer). (2009). *Pride with a Twist* (45 second Public Service Announcement on Depression and Suicide Awareness. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Creative consultant.
- Pollard, R. Q (Executive Producer). (2009). *Pride with a Twist* (30 second Public Service Announcement on Depression and Suicide Awareness. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Creative consultant.
- Pollard, R. Q (Executive Producer). (2008). *Asthma*. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Writer, Creative consultant.
- Pollard, R. Q (Executive Producer). (2008). *Chemical Emergencies*. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Writer, Creative consultant.
- Pollard, R. Q (Executive Producer). (2008). *Dirty Bomb*. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Writer, Creative consultant.
- Pollard, R. Q (Executive Producer). (2008). *Emergency Communication Information for Deaf People*. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642).
- Pollard, R. Q (Executive Producer). (2008). *Facts About Chlorine*. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Writer, Creative consultant.
- Pollard, R. Q (Executive Producer). (2008). *Information on Lead*. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Writer, Creative consultant.
- Dean, R. K. & Pollard, R. Q (Producers). (2008). *The demands of interpreting* [Motion picture]. First in a series of four instructional films on the demand control schema for interpreting. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642).
- Dean, R. K. & Pollard, R. Q (Producers). (2008). *The controls of interpreting* [Motion picture]. Second in a series of four instructional films on the demand control schema for interpreting. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642).
- Dean, R. K. & Pollard, R. Q (Producers). (2008). *Demands and controls together* [Motion picture]. Third in a series of four instructional films on the demand control schema for interpreting. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642).
- Dean, R. K. & Pollard, R. Q (Producers). (2008). *Ethics and interpreting* [Motion picture]. Fourth in a series of four instructional films on the demand control schema for interpreting. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642).

Robyn K. Dean

- Pollard, R. Q. & Dimeff, L. (Executive producers.) (2007). *Practicing radical acceptance: An adaptation from the Deaf perspective* [Motion picture]. (Available from Behavioral Tech, LLC, 2133 Third Avenue, Suite 205, Seattle, WA 98101). Role: Writer, Creative consultant.
- Pollard, R. Q. & Dimeff, L. (Executive producers.) (2006). *Opposite action: An adaptation from the Deaf perspective* [Motion picture]. (Available from Behavioral Tech, LLC, 2133 Third Avenue, Suite 205, Seattle, WA 98101). Role: Creative consultant.
- Pollard, R. Q. (Executive Producer). (2003). *My body, my responsibility: A health education video for deaf women*. [Motion picture]. (Available from the Deaf Wellness Center, 300 Crittenden Boulevard, Rochester, NY 14642). Role: Voice talent.

Current Research Support:

Centre for Translation and Interpreting Studies; Heriot Watt University, Department of Languages. (2011-2014). "Meta-ethical discourse and justice-reasoning among sign language interpreters." Role: PhD Candidate (Researcher/Teacher). Supervisors: Graham H. Turner, Svenja Wurm, and Jemina Napier.

Completed Research Support:

- Missouri Department of Mental Health (2012-2013).* "Web-based Interpreter Training Program." \$12,000.
- National Center for Chronic Disease Prevention and Health Promotion; Centers for Disease Control and Prevention (2009-2011).* "The Rochester Prevention Research Center; National Center on Deaf Health Research." Role: Researcher, Translator.
- National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (2010-2011).* "Factors Influencing Partner Violence Perpetration Affecting Deaf Individuals." Role: Researcher, translator.
- Fund for the Improvement of Post-Secondary Education, US Department of Education (2006-2009).* "Optimizing and Disseminating Proven Reforms in Interpreter Education." Role: Project Director/Curriculum Developer.
- Registry of Interpreters for the Deaf and the National Consortium of Interpreter Education Centers (2009 – 2010).* "Supervision and Case-Conferencing: Building Upon a Practice-Profession Initiative." Role: Project Director.
- Registry of Interpreters for the Deaf (2009).* "The impact of work settings on interpreters' occupational health: A national follow-up study." Role: Project Director.
- National Center for Chronic Disease Prevention and Health Promotion; Centers for Disease Control and Prevention (2004 - present).* "The Rochester Prevention Research Center; National Center on Deaf Health Research." Role: Researcher, Translator.
- American Psychiatric Foundation (2007-2008).* "Public service announcement outreach to the Deaf community: Early recognition of mental illness." Role: Investigator.
- National Institute on Drug Abuse; National Institutes of Health (2005-2007).* "Computer Training and DBT-Skills for BPD Drug Abusers." This was a grant supplement which funded the Deaf Wellness Center to produce two DBT skills films for use with deaf patients. Role: Writer, co-director.
- Alaska Mental Health Trust Authority (2005-2006).* "Four Interpreter Training Projects and Telepsychiatry Planning." Role: Project Director, Trainer.
- National Institute for Disability and Rehabilitation Research (2003-2008).* "Toward equity: Innovative, Collaborative Research on Interpreter Training, DBT, & Psychological Testing." Role: Investigator
- Fund for the Improvement of Post-Secondary Education, US Department of Education (2001-2004).* "Reforming Interpreter Education – A Practice-Profession Approach." Role: Project Director.

Professional Service and Awards:

- Consultant, ethical codes for field missions, International Criminal Court, United Nations, 2014 – present.
- Master's thesis committee member, Western Oregon University, 2012 – 2014.
- Scientific committee, International Post-Graduate Conference in Translation and Interpreting, 2013.
- Review board, International Journal of Interpreter Education (IJIE), 2009 – present.
- Facilitator and trainer, case conferencing/supervision, 2006 – present.
- Member, National Interpreter Certification Task Force, Registry of Interpreters for the Deaf, 2009 – 2010.
- *Mary Stotler Award*, awarded by the Conference of Interpreter Trainers and the Registry of Interpreters for the Deaf, 2008.

- *Interpreter of the Year*, Genesee Valley Registry of Interpreters for the Deaf, 2005.
- Committee Chair, Mental Health Interpreting Standard Practice Paper, National Registry of Interpreters for the Deaf, 2007.
- Membership chair (1992-1999) Genesee Valley Registry of Interpreters for the Deaf.
- Vice president (1994-1996), Genesee Valley Registry of Interpreters for the Deaf.

Courses Designed and Taught (23):

- Developing reflective practice (2013 – present)*. A three-credit course offered within the European Union Master's of Sign Language Interpreting (EUMASLI): A collaboration of universities in Edinburgh, UK.
- Certificate of healthcare interpreting program (2011 – present)*. A year-long course (160 hours) offered by American Sign Language and Interpreter Education department at the Rochester Institute of Technology. Co-taught with Kathy Miraglia, MA.
- Supervision facilitator training for Auslan interpreters* (January to September, 2014). A 15-hour online course sponsored by Auslan Services (Australia).
- Advanced British Sign Language: Interpreting Skills* (Spring semester, 2014). One-credit course-strand offered by the School of Languages and Management at Heriot-Watt University (Scotland, UK).
- Introduction to mental health interpreting* (Spring semester, 2014). A 40-hour online course co-sponsored by Online Focus / Sign Language Specialists and the University of Rochester Medical Center.
- Demand control schema textbook webinar series* (Spring semester, 2014). A 20-hour online course offered as an independent study to interpreter trainers and mentors.
- Demand control schema: dialogic work analysis and observation-supervision* (Summer & Fall 2011). A series of webinars and online course instruction offered through the MARIE center at the University of Northern Colorado, DO IT Center.
- Demand control schema* (Spring, 2010 & 2011). A four-credit course offered by American Sign Language and Interpreter Education department at the Rochester Institute of Technology.
- Basics of demand control schema* (Summer & Winter 2010). A twenty-hour online course offered as an independent study to interpreter trainers and mentors. Co-taught with Amanda Smith, MA.
- DC-S supervision and case conferencing* (Winter, 2010). A twenty-hour online course offered as an independent study to interpreter trainers and mentors. Co-taught with Kendra Keller, MA.
- Demand control schema: Train the trainer* (Summer, 2008). A four-week course offered by the University of Northern Colorado interpreter education program.
- Observation-Supervision survey course* (Fall, 2006). Three-credit course offered through the DO IT Center in the interpreter education program at the University of Northern Colorado, Greeley, Colorado.
- Critical thinking and analysis* (Summers, 2006 and 2007). A four-credit course offered by the University of Northern Colorado interpreter education program.
- DC-S Supervision and Facilitator Training* (Fall, 2005). A four-month course offered through the Community Interpreter Training Grant, National Technical Institute for the Deaf, Rochester, NY.
- Demand control schema for educators* (Winter, 2004). A three-credit online course offered for the Master Mentor Program, Project TIEM at Northeastern University.
- Demand control schema for educators* (Spring, 2004). A three-credit online course offered for the Master Mentor Program, Project TIEM at Northeastern University.
- Application of demand-control theory to sign language interpreting* (Spring, 2004). A summer intensive course offered at the University Tennessee interpreter education program.
- Demand control schema for interpreting* (Summer, 2003). A week-long course offered through the Summer Institute at the National Technical Institute for the Deaf. Co-taught with Robert Pollard, Ph.D.
- Educational interpreting: A problem-based learning approach* (Spring, 2003). A three-credit course offered at the University Tennessee interpreter education program. Co-taught with Carol LaCava, MA.
- Medical interpreting: A problem-based learning approach* (Fall, 2002). A three-credit course offered at the University Tennessee interpreter education program. Co-taught with Jeffrey Davis, Ph.D.
- Application of demand-control theory to sign language interpreting* (Summer, 2002 & 2003). A summer intensive course offered at the University Tennessee interpreter education program.
- Application of demand-control theory to sign language interpreting* (Spring, 2002). A three-credit course offered at the University Tennessee interpreter education program. Co-taught with Jeffrey Davis, Ph.D. and Marie Griffin, MA.
- Mental health interpreting* (Summer, 2001). A week-long course offered through the Summer Institute at the National Technical Institute for the Deaf. Co-taught with Robert Pollard, Ph.D.

Supervision and case conferencing facilitator:

- Edinburgh, Scotland (4 interpreting practitioners, face-to-face): 2013 – present
- Bristol, United Kingdom (6 interpreting practitioners, face-to-face): 2011 – present
- Rochester, NY (6 – 8 supervision facilitators, face-to-face & online): 2005 – present
- Australia (6 interpreting practitioners, online): 2013 – 2014
- United States (5 – 8 interpreting practitioners, online): 2011 – 2012
- Rochester, NY (4 – 8 interpreting practitioners, face-to-face): 2007 – 2011

International presentations, workshops and conference papers:

- Dean, R.K. (July, 2014). *An Idol of the Mind: How the term role may prohibit justice reasoning in sign language interpreters*. Paper presentation at the Association of Visual Language Interpreters of Canada (AVLIC), Winnipeg, Manitoba, Canada.
- Dean, R.K. (July, 2014). *Condemned to repetition? An analysis of problem-setting and problem-solving in SLI ethics*. Paper presentation at the Association of Visual Language Interpreters of Canada (AVLIC), Winnipeg, Manitoba, Canada.
- Dean, R.K. (May/June, 2014). *Supervision for BSL/English interpreters*. Fourteen-hour training sponsored by the Association of Sign Language Interpreters in Scotland, Edinburgh, Scotland.
- Dean, R.K. & Pollard, R.Q. (March, 2014). *Working with Deaf Populations*. Two-day workshop hosted by TIP-Nascholing, Edmond-on-Sea, The Netherlands.
- Dean, R.K. (March, 2014). *Reflective practice and practice professions*. Lectures presented for the European Master's in Sign Language Interpreting, Magdeburg, Germany.
- Dean, R.K. (February, 2014). *Advanced mental health interpreting*. Two-day training session sponsored by the British Society for Mental Health and Deafness, Bromley, UK.
- Dean, R.K. (February, 2014). *Reflective practice and the practice profession of interpreting*. One-day training for interpreter staff at Islington Housing and Adult Social Services, London, UK.
- Dean, R.K. (November, 2013). *Ethics and ethical discourse in community interpreting*. A presentation delivered at the International Post-Graduate Conference in Translation and Interpreting, Edinburgh, Scotland.
- Dean, R.K. (June, 2013). *Healthcare interpreter training: A problem-based learning approach*. Paper presented at Critical Link International 7 conference, Toronto, Canada.
- Dean, R.K. (June, 2013). *Instituting reflective practice and professional development of community interpreters*. Panel presented at Critical Link International 7 conference, Toronto, Canada.
- Dean, R.K. (May, 2013). *A day of reflection on Action: Introducing Supervision to Interpreters*. One-day workshop sponsored by Tenacious Training, Glasgow, UK.
- Dean, R. K. (April, 2013). *Decision-Making using Demand-Control Schema*. 14-hour workshop hosted by The Royal Association for Deaf People, London, United Kingdom.
- Dean, R. K. (April, 2013). *Decision-Making using Demand-Control Schema*. 14-hour workshop hosted by The Association of Sign Language Interpreters, London, United Kingdom.
- Dean, R. K. (March, 2013). *Case Presentation and Analysis: Developing & maintaining ethics for interpreters*. Presentation for the annual meeting of BSMHD, Edinburgh, UK.
- Dean, R. K. (February, 2013). *Mental Health Interpreting: Clinical Information and Work Strategies for a Practice Profession*. One-day workshop sponsored by Tenacious Training, Glasgow, UK.
- Dean, R. K. (November, 2012). *Mental Health Interpreting: Clinical Information and Work Strategies for a Practice Profession*. One-day workshop sponsored by the European Society for Mental Health and Deafness, Lisbon, Portugal.
- Dean, R.K. (November, 2012). *Professional health and demand control schema: Improving the health and effectiveness of your work*. Two-day workshop hosted by TIP-Nascholing, The Netherlands.
- Dean, R.K. (October, 2012). *Mentoring & Reflective Practice: A Practice Profession View of Development*. Presentation at the Annual General Meeting at the Scottish Association of Sign Language Interpreters, Perth, UK.
- Dean, R. K. (September, 2012). *Reconceptualizing the basics: A practice profession approach to interpreting*. Keynote presentation for the ASLI annual conference, Bristol, UK.
- Dean, R. K. (July, 2012). *From 'do nothing' to 'do no harm': Collaborative values in medical interpreting*. Conference paper presented at the International Association of Translation and Intercultural Studies, Belfast, Ireland.

- Dean, R. K. (February, 2012). *Practice Profession Approach to Medical Interpreting*. Ten-hour workshop sponsored by Leonardo da Vinci Program (European Commission) Dublin, Ireland.
- Pollard, R. Q. & Dean, R. K. (November, 2011). *Multidisciplinary treatment of deaf children: Fostering effective practice and communication*. Two-day workshop presented to the National Deaf child and Adolescent Mental Health Service (Southwest). Taunton, England.
- Dean, R. K. (November, 2011). *Surveys, Sign language and Sickness: A report on the translation working group of the National Center for Deaf Health Research*. Lecture offered through EdSign, Edinburgh, UK.
- Dean, R. K. (August, 2009). *I don't think we're supposed to be talking about this: Case conferencing and supervision for interpreters*. One-day workshop sponsored by the Australian Sign Language Interpreters Association's (ASLIA) Interpreter Trainers Workshop, Melbourne, Australia.
- Dean, R. K. (August, 2009). *You say you want a revolution: The Practice Profession Shift in Interpreting*. International keynote presentation at the ASLIA National Conference (ANC), Melbourne, Australia.
- Dean, R. K. & Pollard, R. Q. (August, 2009). *A clever conference theme or reflection of an ethical challenge?* Paper presented at the Australian Sign Language Interpreters Association's national conference. Melbourne, Australia.
- Dean, R. K. & Pollard, R. Q. (August, 2009). *Being Responsible: Does the context also depend on you?* One-day workshop at the post-ANC conference, Melbourne, Australia.
- Dean, R. K. (May, 2009). *Professional Supervision through the eyes of the demand-control schema for interpreting work*. Two and half day workshop hosted by Western Association of Visual Language Interpreters, Vancouver, BC.
- Dean, R. K. (November, 2008). *"It all depends": Demand-control schema for interpreting work*. 10-hour workshop hosted by Western Association of Visual Language Interpreters, Vancouver, BC.
- Dean, R. K. & Pollard, R. Q. (June, 2008). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Four-day workshop sponsored by Alpha Hospitals and the British Society for Mental Health and Deafness. Manchester, England.
- Dean, R. K. & Pollard, R. Q. (June, 2008). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Twelve-hour workshop sponsored by Westächsische Hochschule Zwickau (University of Applied Sciences), Münster/Westf, Germany.
- Pollard, R. Q. & Dean, R. K. (June, 2008). *Multidisciplinary treatment of deaf persons with mental illness: Fostering effective practice and communication*. Twenty-two hour workshop sponsored by VIA hospital and bDDS, Leidschendam, Netherlands.
- Dean, R. K. & Pollard, R. Q. (December, 2007). *Interpreting in mental health settings: A practice profession approach*. Six-hour workshop for sign language interpreters and clinicians. Sponsored by Alpha Hospitals and the British Society for Mental Health and Deafness. London, England.
- Pollard, R. Q. & Dean, R. K. (June, 2006). *Second international workshop on sign language interpreting in mental health and deafness settings*. Twenty-two hour workshop for sign language interpreters from five European countries. Sponsored by the European Society for Mental Health and Deafness and the Spanish Society for Mental Health and Deafness. Universidad Autonoma de Madrid, Madrid, Spain.
- Dean, R. K. & Pollard, R. Q. (November, 2001). *New perspectives on interpreting for mental health settings*. Fifteen-hour workshop for interpreters from six European countries. Madrid, Spain.

National presentations, workshops and conference papers:

- Pollard, R. Q. & Dean, R. K. (August, 2014). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Annual training session for the Mental Health Interpreter Training, sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
- Pollard, R. Q. & Dean, R. K. (August, 2013). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Annual training session for the Mental Health Interpreter Training, sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
- Dean, R. K. (July, 2013). *Applications of demand control schema in interpreter education*. A twenty-hour training offered to faculty / staff at the University of Cincinnati interpreter education program. Cincinnati, OH.
- Dean, R. K. (July, 2013). *Decision-making using demand control schema*. 10-hour workshop hosted by Indiana University, Indianapolis, Indiana.
- Dean, R. K. (December, 2012). *Studying, Signing & Surviving in Scotland: A PhD progress report*. Presented twice for two New York state chapters of the Registry of Interpreters for the Deaf (RID): MetroRID & GVERRID. New York City & Rochester, NY.

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- Pollard, R. Q & Dean, R. K. (August, 2012). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Annual training session for the Mental Health Interpreter Training, sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
 - Pollard, R. Q & Dean, R. K. (August, 2011). *Mental health interpreting: Clinical information and work strategies for a practice profession*. A ten-hour workshop sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
 - Pollard, R. Q & Dean, R. K. (June, 2011). *Interpreting in behavioral health: A practice profession approach*. Presentations hosted by the Monroe County Office of Mental Health, Rochester, NY. (presented twice.)
 - Dean, R.K. (June, 2011). *Decision-making using demand control schema*. 14-hour workshop hosted by J. Sargeant Reynolds Community College, Richmond, VA.
 - Dean, R.K. (May, 2011). *Decision-making using demand control schema*. 14-hour workshop hosted by Douglas College, Toronto, Ontario, Canada.
 - Dean, R.K. (April, 2011). *Beyond Deontology: Exploring the Values of Interpreting*. 2-hour presentation for staff interpreters of Fluent Language Solutions, Charlotte, NC.
 - Dean, R.K. (April, 2011). *Decision-making using demand control schema*. 10-hour workshop hosted by Fluent Language Solutions, Raleigh, NC.
 - Dean, R.K. (April, 2011). *Decision-making using demand control schema*. 10-hour workshop hosted by Professional Interpreting Enterprise, Milwaukee, WI.
 - Dean, R.K. (March, 2011). *"It all depends": Demand-control schema for interpreting*. 10-hour workshop hosted by Hired Hands, Fort Worth, TX.
 - Dean, R. K. (March, 2011). *"It all depends": Demand-control schema for interpreting*. 14-hour workshop hosted by Deaf Adult Services, Inc., Buffalo, NY.
 - Dean, R.K. (March, 2011). *"It all depends": Demand-control schema for interpreting*. 14-hour workshop hosted by Boston University Center for Interpreter Education (BUICE), Boston, MA.
 - Dean, R.K. (November, 2010). *Occupational hazards and opportunities: understanding the practice of interpreting*. One day workshop hosted by Pennsylvania Registry of Interpreters for the Deaf, Pittsburgh, PA.
 - Dean, R.K. (October, 2010). *Beyond "It depends..." The practice profession shift in interpreting*. Keynote presentation at the New Mexico Interpreter Conference, Albuquerque, NM.
 - Dean, R.K. (October, 2010). *Introduction to Interpreting as a Practice Profession*. Three-hour workshop presented at the New Mexico Interpreter Conference. Sponsored by the New Mexico Administrative Office of the Courts, Albuquerque, NM.
 - Dean, R. K. & Pollard, R. Q. (October, 2010). *Teleological vs. deontological approaches to ethical decision making: Theoretical and research evidence*. Presentation and panel discussion at the biennial meeting of the Conference of Interpreter Trainers. San Antonio, TX.
 - Dean, R. K. (October, 2010). *"It all depends": Introduction to demand control schema*. 12-hour workshop sponsored by Pennsylvania Training and Technical Assistance Network, Harrisburg, PA.
 - Dean, R. K. (August, 2010). *Decision-making using demand control schema*. 14-hour workshop hosted by Sorenson Communications and Utah Services of the Deaf and Hard of Hearing, Salt Lake City, UT.
 - Dean, R. K. (August, 2010). *Case Conferencing & Supervision in Interpreting*. Three hour presentation at the Registry of Interpreters for the Deaf Region 1 conference, Albany, NY.
 - Pollard, R. Q & Dean, R. K. (July, 2010). *Mental health interpreting: Clinical information and work strategies for a practice profession*. A ten-hour workshop sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
 - Dean, R. K. (June, 2010). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Two-day workshop sponsored by the Language Resource Center, Charlotte, NC.
 - Dean, R. K. (June, 2010). *"It all depends": Demand control schema for interpreting work*. 14-hour workshop hosted by Maine Registry of Interpreters for the Deaf, Portland, ME.
 - Dean, R. K. (June, 2010). *Interpreting as a practice profession for Deaf Interpreters*. 3-hour workshop hosted by Maine Registry of Interpreters for the Deaf, Portland, ME.
 - Dean, R. K. & Pollard, R. Q. (May, 2010). *Occupational health risks among different interpreting settings: Special concerns for VRS and K-12 interpreters*. Presentation at the National Symposium on Video Interpreting: The State of Practice and Implications. Washington, D.C., Gallaudet University.

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- Dean, R. K. (April, 2010). *"It all depends": Demand control schema for interpreting work*. 14-hour workshop hosted by Illinois Registry of Interpreters for the Deaf, Chicago, IL.
 - Dean, R. K. & Pollard, R. Q. (February, 2010). *Interpreting as a practice profession*. Presentation to deaf interpreters (3 hours), sponsored by the Alaska Mental Health Trust Authority. Anchorage, AK.
 - Dean, R. K. & Pollard, R. Q. (February, 2010). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Full-day workshop sponsored by the Alaska Mental Health Trust Authority. Anchorage, AK.
 - Dean, R. K. (February, 2010). *"Soup of soup": Professional development for facilitators of group supervision*. Full day workshop sponsored by the Alaska Mental Health Trust Authority. Anchorage, AK.
 - Dean, R. K. (February, 2010). *Advancing supervision as a professional development tool for interpreters* (3 hours). Sponsored by the Alaska Mental Health Trust Authority. Anchorage, AK.
 - Dean, R. K. & Pollard, R. Q. (February, 2010). *Introduction to interpreting as a practice profession*. Presentation to a delegation Japanese sign language interpreters and interpreter instructors. Rochester, NY.
 - Dean, R. K. (November, 2009). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Two-day workshop sponsored by New Hampshire Registry of Interpreters for the Deaf, Nashua, NH.
 - Dean, R.K. (October, 2009). *Professional Supervision through the eyes of the demand control schema for interpreting work*. One-day workshop hosted by the Genesee Valley Registry of Interpreters for the Deaf, Rochester, NY.
 - Dean, R.K. (September, 2009). *"It all depends": Demand-control schema for spoken and sign language interpreters*. 10-hour workshop hosted by Fluent Language Services, Raleigh, NC.
 - Dean, R. K. & Pollard, R. Q. (August, 2009). *Occupational health risks in different interpreting work settings*. Presentation at the biennial convention of the Registry of Interpreters for the Deaf. Philadelphia, PA.
 - Dean, R. K. & Pollard, R. Q. (August, 2009). *Optimizing and disseminating proven reforms in interpreter education*. A series of 4 posters presented at the biennial convention of the Registry of Interpreters for the Deaf. Philadelphia, PA.
 - Dean, R.K. (July, 2009). *Training through observation-supervision: Methodologies for Trainers*. Two-day workshop hosted by Sign Language Specialists, Lee's Summit, MO.
 - Pollard, R. Q & Dean, R. K. (June, 2009). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Thirteen hour workshop sponsored by the American Deafness and Rehabilitation Association, Georgia State ADA Coordinator's Office, and Georgia Division of Mental Health. Atlanta, GA.
 - Dean, R.K. (June, 2009). *Professional Supervision through the eyes of the demand-control schema for interpreting work*. Ten-hour workshop hosted by Northern Kentucky Services for the Deaf, Covington, KY.
 - Dean, R. K. (April, 2009). *"It all depends": Demand control schema for interpreting work*. 10-hour workshop hosted by Connecticut Registry of Interpreters for the Deaf, Hartford, CT.
 - Dean, R. K. (March, 2009). *"It all depends": Demand control schema for interpreting work*. 8-hour workshop hosted by Sign Language Interpreter Student Association and the Community Interpreter Grant, Rochester, NY.
 - Dean, R. K. (March, 2009). *"It all depends": Demand-control schema for interpreting work*. 10-hour workshop hosted by Wisconsin Registry of Interpreters for the Deaf, Madison, WI.
 - Dean, R. K. (January, 2009). *Mental health interpreting: Clinical information and work strategies for a practice profession*. A ten-hour workshop sponsored by Gallaudet University Regional Center/Flagler College, the Orlando, FL.
 - Dean, R. K. (January, 2009). *"It all depends": Demand control schema for interpreting work*. 10-hour workshop hosted by Northern Kentucky Services for the Deaf, Covington, KY.
 - Dean, R. K. (November, 2008). *Applications of demand-control schema*. 20-hour workshop hosted by Central California Chapter of the RID Fresno, CA.
 - Dean, R. K. (November, 2008). *Mental health interpreting: Clinical information and work strategies for a practice profession*. A two-day workshop for spoken language interpreters. 8-hour workshop hosted by Fluent Language Services, Charlotte, NC.
 - Pollard, R. Q & Dean, R. K. (October, 2008). *Findings from three national research studies: DC-S dissemination to 15 IPPs, mental health interpreter training, and interpreter occupational health risks*. Presentation at the biennial meeting of the Conference of Interpreter Trainers. San Juan, Puerto Rico.

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- Dean, R. K. & Pollard, R. Q. (October, 2008). *Supervision and case presentation in interpreting*. Presentation at the biennial meeting of the Conference of Interpreter Trainers. San Juan, Puerto Rico.
 - Dean, R. K., Pollard, R. Q., English, M.A., Veltri, D. & Witter-Merithew, A. (October, 2008). *Summary report of a 5-year national research project on observation-supervision in mental health interpreting*. Poster presented at the biennial meeting of the Conference of Interpreter Trainers. San Juan, Puerto Rico.
 - Dean, R. K. (October, 2008). *Professional Supervision through the eyes of the demand control schema for interpreting work*. One-day workshop hosted by the Community Interpreter Grant, Rochester, NY.
 - Pollard, R. Q & Dean, R. K. (August, 2008). *Mental health interpreting: Clinical information and work strategies for a practice profession*. A ten-hour workshop sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
 - Dean, R. K. & Pollard, R. Q. (July, 2008). *"I don't think we're supposed to be talking about this." Case conferencing for interpreters*. Two-day workshop sponsored by the Alaska Registry of Interpreters for the Deaf. Anchorage, AK.
 - Dean, R. K., Pollard, R. Q & Ferguson, K. (July, 2008). *How can you do provide the "talking cure" when you can't "talk" to your client?* Providing competent mental health services to clients from the deaf and limited English proficient communities. Eight hour workshop for mental health clinicians and sign and spoken language interpreters, sponsored by the Alaska Psychological Association, University of Alaska, Catholic Social Services, and the Alaska Mental Health Trust Authority. Anchorage, AK.
 - Dean, R. K. (April, 2008). *Mental health interpreting: Clinical information and work strategies for a practice profession*. A two-day workshop for spoken language interpreters. 10-hour workshop hosted by Fluent Language Services, Charlotte, NC.
 - Dean, R. K. (April, 2008). *Applications of Demand control schema for interpreting work*. Eight-hour workshop for interpreting staff and management for Fluent Language Services, Charlotte, NC.
 - Dean, R. K. (March, 2008). *"It all depends": Demand-control schema for interpreting work*. 10-hour workshop hosted by South Dakota Interpreters Association, Sioux Falls, SD.
 - Dean, R. K. (March, 2008). *Medical Interpreting and the demand control schema for interpreting work*. 2-day workshop hosted by Mt Sinai Hospital Deaf Program, Chicago, IL.
 - Dean, R. K. & Williams, R. (February, 2008). *Mental health interpreting: Clinical information and work strategies for a practice profession*. A two-day workshop sponsored by Eastern Kentucky University, Louisville, KY.
 - Dean, R. K. (February, 2008). *"It all depends": Demand-control schema for interpreting work*. 10-hour workshop hosted by Central California Chapter of the RID Fresno, CA.
 - Dean, R. K. (January, 2008). *"It all depends": Demand-control schema for interpreting work*. 10-hour workshop hosted by Viable Communications, Washington, DC.
 - Dean, R. K. (January, 2008). *Applications of demand control schema for interpreting work*. Two-day workshop for interpreting staff and management for Fluent Language Services, Charlotte, NC.
 - Dean, R. K. (December, 2007). *Applications of demand control schema for interpreting work*. Two-day workshop hosted by Sign Language Services of Michigan, Detroit, MI.
 - Dean, R. K. (November, 2007). *"It all depends": Demand control schema for spoken language interpreters*. 10-hour workshop hosted by Fluent Language Services, Charlotte, NC.
 - Dean, R. K. (November, 2007). *Professional Supervision through the eyes of the demand-control schema for interpreting work*. One-day workshop hosted by the Community Interpreter Grant, Syracuse, NY.
 - Dean, R. K. (October, 2007). *"It all depends": Demand control schema for interpreting work*. 10-hour workshop hosted by SDRID, San Diego, CA.
 - Dean, R. K. (September, 2007). *"It all depends": Demand control schema for interpreting work*. One-day workshop hosted by Utah Services of the Deaf and Hard of Hearing, Salt Lake City, UT.
 - Dean, R. K. (September, 2007). *"It all depends": Demand-control schema for interpreting work*. 10-hour workshop hosted by the Birmingham Area Interpreter Training, Birmingham, AL.
 - Dean, R. K., Storme, S., Mickelson, P. G., Ross, L., Witter-Merithew, A., Forestal, E. & Pollard, R. Q. (August, 2007). *Applications of demand-control schema in interpreter education*. Seven hour pre-conference held in conjunction with the biennial meeting of the Registry of Interpreters for the Deaf, San Francisco, CA.
 - Dean, R. K. & Pollard, R. Q. (July, 2007). *What you don't know your interpreter is doing...but should!* Three hour workshop for social service personnel, sponsored by the Alaska Mental Health Trust Authority and Catholic Social Services. Anchorage, AK.

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- Dean, R. K. & Pollard, R. Q. (July, 2007). *Peer guidance in the interpreting profession. Three hour workshop for spoken and sign language interpreters.* Sponsored by the Alaska Mental Health Trust Authority and Catholic Social Services. Anchorage, AK.
 - Pollard, R. Q & Dean, R. K. (June, 2007). *Mental health interpreting: Clinical information and work strategies for a practice profession.* A ten-hour workshop sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
 - Dean, R.K. (May, 2007). *"I don't think we're supposed to be talking about this...": Employing supervision in interpreting.* A two-day train the trainer course of leading supervision using demand-control schema sponsored by the Community Interpreter Grant, Rochester, NY.
 - Dean, R. K. (March, 2007). *"It all depends": Demand control schema for interpreting work.* 10-hour workshop hosted by Sign Language Services of Michigan, Detroit, MI.
 - Dean, R. K. (March, 2007). *"It all depends": Demand control schema for interpreting work.* 10-hour workshop at the bi-annual conference of the Kentucky Registry of Interpreters for the Deaf, Lexington, KY.
 - Dean, R. K. (February, 2007). *"It all depends": Demand control schema for interpreting work.* 10-hour workshop hosted by Central Piedmont Community College, Charlotte, NC.
 - Pollard, R. Q & Dean, R. K. (February, 2007). *Mental health interpreting: Clinical information and work strategies for a practice profession.* Two-day workshop sponsored by Eastern Kentucky University, Richmond, KY.
 - Dean, R.K. (January, 2007). *Training the demand-control schema trainer.* Two-day training session with field consultants for the Fund for the Improvement of Post-Secondary Education project, Rochester, NY.
 - Dean, R.K. (Winter, 2007). *Employing supervision in interpreting: A practice profession approach to professional development.* Thirty-hour train the trainer course of leading supervision using demand-control schema sponsored by the Community Interpreter Grant, Rochester, NY.
 - Dean, R. K. (October, 2006). *From Best Practice to Best Practice Process.* Presentation at the biennial meeting of the Convention of Interpreter Trainers, San Diego, CA.
 - Dean, R. K. (September, 2006). *Demand control schema for mentoring.* 30-hour workshop hosted by the New Mexico Registry of Interpreters for the Deaf, Albuquerque, NM.
 - Pollard, R. Q & Dean, R. K. (September, 2006). *Mental health interpreting: Clinical information and work strategies for a practice profession.* Two day workshop sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
 - Dean, R. K. (2006). *Mental health interpreting: Clinical information and work strategies for a practice profession.* Two-day workshop sponsored by the Pennsylvania Registry of Interpreters for the Deaf, State College, PA.
 - Dean, R. K. (2006). *"It all depends": Demand control schema for interpreting work.* 6-hour workshop at the Intermountain Special Studies Institute, Pocatello, ID.
 - Dean, R. K. (2006). *"It all depends": Demand control schema for interpreting work.* 8-hour workshop hosted by Sorenson Communications and the Idaho Registry of Interpreters for the Deaf, Boise, ID.
 - Dean, R. K. (2006). *The Evaluation of Critical and Ethical Thinking for Mental Health Interpreters.* Presentation at Breakout 2006, a biennial convention on deafness and mental health, Columbus, OH.
 - Dean, R. K. & Pollard, R. Q (2006). *"It all depends": Demand control schema for interpreting work.* Seven-hour workshop at the Registry of Interpreters for the Deaf Region V conference, Anchorage, AK.
 - Dean, R. K. (2006). *Demand control schema for practitioners and mentors.* 30-hour workshop hosted by Wichita State University, Cowley County Community College & the Kansas Commission for the Deaf and Hard of Hearing, Wichita, KS.
 - Dean, R. K. (2006). *"It all depends": Demand control schema for interpreting work.* 9-hour workshop at the biennial conference of the New Jersey Registry of Interpreters for the Deaf, Edison, NJ.
 - Dean, R. K. (2006). *Demand-control schema for mentoring.* 16-hour workshop hosted by Missouri Commission for the Deaf and Hard of Hearing, Jefferson City, MO.
 - Dean, R. K. (2006). *Demand-control schema for mentoring.* 10-hour workshop hosted by the New Mexico Registry of Interpreters for the Deaf, Albuquerque, NM.
 - Dean, R. K. (2005). *A New Season: Distinguishing the Elements of Kairos.* Keynote Address at the state conference of the Ohio Chapter Registry of Interpreters for the Deaf, Columbus, OH.
 - Dean, R. K. (2005). *"It all depends": Demand control schema for interpreting work.* 10-hour workshop at the state conference of the Ohio Chapter Registry of Interpreters for the Deaf, Columbus, OH.

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- Dean, R. K. (2005). *"It all depends": Demand control schema for interpreting work*. 10-hour workshop at the state conference of the Illinois Registry of Interpreters for the Deaf, Aurora, IL.
 - Dean, R. K. (2005). *"It all depends": Demand control schema for interpreting work*. 30-hour/3 session workshop hosted by Sorenson Communications, Arizona RID, and Phoenix College, Phoenix, AZ.
 - Pollard, R. Q & Dean, R. K. (2005). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Two day workshop sponsored by the Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
 - Pollard, R. Q & Dean, R. K. (2005). *New perspectives on interpreting for mental health settings*. Two-day workshop for Spanish language interpreters, presented at the annual meeting of the Nebraska Association for Translators and Interpreters. Omaha, NE.
 - Dean, R. K. (2005). *"It all depends": Introduction to the demand control schema for interpreting work*. 12-hour course offered by the Educational Interpreter Professional Development Center at Camden County College, Camden, NJ.
 - Dean, R. K. & Pollard, R. Q. (2005). *"It all depends...": Introduction to the demand-control schema for interpreting work*. Four-day course sponsored by the Alaska Registry of Interpreters for the Deaf and the Anchorage School District. Anchorage, AK.
 - Pollard, R. Q & Dean, R. K. (2005). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Two-day workshop for Spanish language interpreters sponsored by Provena Mercy Medical Center, Aurora, IL.
 - Dean, R. K. (2005). *"It all depends": Demand control schema for interpreting work*. 10-hour workshop at the state conference of the Colorado Registry of Interpreters for the Deaf, Colorado Springs, CO.
 - Dean, R. K. (2005). *"It all depends": Demand control schema for educators*. 8-hour workshop hosted by ASL Studies and Interpreter Education Program. Norfolk, VA.
 - Dean, R. K. (2005). *"It all depends": Demand control schema for interpreting work*. 10-hour workshop hosted by the Virginia Beach School District. Norfolk, VA.
 - Dean, R. K. (2005). *"It all depends": Demand control schema for interpreting work*. 10-hour workshop co-hosted by the Oregon Judicial Department and Western Oregon University. Portland, OR.
 - Dean, R. K. (2005). *"It all depends": Demand control schema for interpreting work*. 30-hour/3 session workshop hosted by RSA Region 7. Overland Park, KS.
 - Pollard, R. Q & Dean, R. K. (2004). *Promoting widespread adoption of curricular reforms*. Presentation at the annual meeting of Fund for the Improvement of Post-Secondary Education project directors. Washington, D.C.
 - Dean, R. K. & Pollard, R. Q. (2004). *Demand control schema: Effective curricular implementation*. Presentation at the biennial meeting of the Convention of Interpreter Trainers. Washington, D.C.
 - Dean, R. K., English, M. A., & Pollard, R. Q. (2004). *Observation-supervision: A new training methodology and its effectiveness*. Presentation at the biennial meeting of the Convention of Interpreter Trainers. Washington, D.C.
 - Pollard, R. Q & Dean, R. K. (2004). *Reforming interpreter education: A practice-profession approach*. Part 1 of a FIPSE success story. Presentation to the staff of the Fund for the Improvement of Post-Secondary Education. Washington, D.C.
 - Dean, R. K. (2004). *"It all depends": Demand control schema for interpreting work*. 8-hour workshop for educational interpreters hosted by the Intermediate Unit, 13, Lancaster, PA.
 - Dean, R. K. (2004). *"It all depends": Demand control schema for interpreting work*. 10-hour workshop at the Fall Conference of the Nebraska Registry of Interpreters for the Deaf (NeRID), Omaha, NE.
 - R. Q. Pollard & Dean, R. K. (2004). *Mental health interpreting: Clinical information and work strategies for a practice profession*. Two-day workshop sponsored by Alabama Department of Mental Health, Office of Deaf Services, Montgomery, AL.
 - Dean, R. K. (2004). *"It all depends": Demand control schema for interpreting work*. 2-day workshop hosted by the Washington State Registry of Interpreters for the Deaf (WSRID), Seattle, WA.
 - Dean, R. K. (2004). *"It all depends": Demand control schema for interpreting work*. 2-day workshop hosted by the Southern California Registry of Interpreters for the Deaf (SCRID), Long Beach, CA.
 - Dean, R. K. (2004). *The practical application of demand-control schema in the classroom and mentoring, part II*. Five-day workshop for sign language interpreter trainers hosted by RSA Region 7. Overland Park, KS.

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- Dean, R.K., Gibson, S., Gratzel D., Jackowski, J. Prosen, P. Quiroga, A. (2004). *The Rochester project: A participant's point of view*. Panel presentation on the effectiveness of the National Institute on Disability Rehabilitation Research (NIDRR) interpreting project. Rochester, NY.
 - Pollard, R. Q & Dean, R. K. (2004). *The clinician-interpreter partnership*. Three-hour workshop presentation for mental health clinicians and spoken and signed language interpreters. Unity Health System, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q (2004). *The practical application of demand-control schema in the classroom and mentoring*. Two-day workshop for sign language interpreters and interpreter trainers hosted by RSA Region 7. Overland Park, KS.
 - Dean, R.K. (2003). *Dean & Pollard's demand control schema for interpreting work*. Four-hour training presented at the annual business meeting of the Pennsylvania Registry of Interpreters for the Deaf (PARID), Lancaster, PA.
 - Dean, R.K. (2003). *Dean & Pollard's demand control schema for interpreting work*. Twelve-hour training presented at the annual conference of the Minnesota Registry of Interpreters for the Deaf, Alexandria, MN.
 - Pollard, R. Q & Dean, R. K. (2003). *Mental health services and deaf consumers: A workshop for clinicians and interpreters*. Six-hour workshop sponsored by the doctoral program in clinical psychology at the University of North Carolina at Greensboro, Greensboro, NC.
 - Dean, R. K. & Pollard, R. Q (2003). *"It all depends": Demand control schema for interpreting work*. Two-day workshop sponsored by the Ohio School for the Deaf, Columbus, OH.
 - Dean, R.K. (2003). *Dean & Pollard's demand control schema for interpreting work*. Six-hour training presented to participants involved in the National Institute on Disability Rehabilitation Research (NIDRR) project direct directed by the Deaf Wellness Center, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q (2003). *New perspectives on interpreting in mental health settings*. Three-day workshop for Spanish language interpreters. Sponsored by Language Access to Healthcare, Aurora, IL.
 - Dean, R., Pollard, R. Q, Davis, J., Griffin, M., LaCava, C. & Hinchey, K. (2003). *Reforming interpreter education: A practice profession approach -- Years 1 and 2 progress report*. Three-hour workshop presented at the biennial meeting of the Registry of Interpreters for the Deaf, Chicago, IL.
 - Dean, R. & Pollard, R. Q (2003). *The demand-control schema at work: Effective mentoring techniques for training medically qualified interpreters*. Three-hour workshop presented at the biennial meeting of the Registry of Interpreters for the Deaf, Chicago, IL.
 - Dean, R.K. & Pollard, R.Q (2003). *The practical application of demand-control schema in the classroom*. Two-day workshop for interpreter trainers hosted by the Rehabilitation Services Administration Region V, St. Paul, MN.
 - Dean, R.K. & Pollard, R.Q (2003). *New perspectives on interpreting for mental health settings*. Ten-hour workshop for professional interpreters hosted by Capital Region Interpreter Network (CRIN), Albany, NY.
 - Dean, R.K. & O'Hearn, A. M. (2003). *Group psychotherapy and deaf people*. Presentation at the monthly professional development meeting for Rochester Area Group Psychotherapy Society, inc. Rochester, NY.
 - Pollard, R. Q & Dean, R. K. (2003). *Interpreting/translating in mental health settings: What clinicians AND interpreters need to know*. Grand rounds presentation, Rochester Psychiatric Center, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q (2003). *Reforming Interpreting Education: Progress report and future planning*. Presentation to interpreter training faculty at the National Technical Institute for the Deaf, Rochester, NY.
 - Dean, R. K. (2002). *Dean and Pollard's demand control schema for interpreting work*. Eight-hour workshop supported by the National Technical Institute for the Deaf's NYS training grant for community sign language interpreters, Cortland, NY.
 - Pollard, R. Q & Dean, R. K. (2002). *Making mental health services accessible for members of the deaf and hard-of-hearing communities*. Two-day workshop for clinicians and interpreters hosted by Independent Living, Inc., Newburgh, NY.
 - Dean, R. K. & Pollard, R. Q (2002). *Dean and Pollard's demand control schema for interpreting work*. Six-hour workshop by the Massachusetts Registry of Interpreters for the Deaf, Plainfield, MA.
 - Dean, R. K., Pollard, R. Q, Griffin, M. & Davis, J. (2002). *Reforming Interpreter Education: A Practice-Profession Approach: Year One Progress Report*. Presentation at the biennial meeting of the Conference of Interpreter Trainers, Minneapolis, MN.
 - Dean, R. K. & Pollard, R. Q (2002). *Dean and Pollard's demand control schema for interpreting work*. Poster presentation at the biennial meeting of the Conference of Interpreter Trainers, Minneapolis, MN.

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- Dean, R. K. (2002). *It all depends...: Demand-control theory in educational interpreting*. Keynote address (3 hours) presented at the Educational Interpreting Conference sponsored by Gallaudet University at Flagler College, Valdosta, GA.
 - Dean, R. K. & Pollard, R. Q. (2002). *It all depends...: Demand-control theory in Mental Health Interpreting*. Guest lecture (25 hours) the Basic Interpreter Training Program (BITP) at the University of Tennessee, Knoxville, TN.
 - Dean, R. K. (2002). *It all depends...: Demand-control theory in sign language interpreting*. Keynote workshop (8 hours) presented at the annual state conference of the Tennessee Registry of Interpreters for the Deaf, Knoxville, TN.
 - Pollard, R. Q. and Dean, R. K. (2002). *Interpreters, Deaf People and the Medical Setting*. Presentation to the University of Tennessee medical school faculty, University of Tennessee, Knoxville, TN.
 - Dean, R. K. (2002). *Dean and Pollard's Schema for Interpreting Work*. Full day workshop for the Rehabilitation Services Administration grantee's professional development day. Gallaudet University, Washington, DC.
 - Dean, R. K. (2002). *Funny Women Three: Interpreting in Play Therapy*. Presentation at Breakout 2000, a biennial convention on deafness and mental health, Raleigh, NC.
 - Dean, R. K. & Alpert-Gillis, L. J. (2002). *Child Psychotherapy via an Interpreter: Challenges and Suggestions*. Case conference presentation, Child & Adolescent Faculty, University of Rochester Medical Center Department of Psychiatry, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q. (2001). *It all depends...: Demand-control theory in sign language interpreting*. Keynote workshop (6 hours) presented at the annual meeting of the Northern California Registry of Interpreters for the Deaf, Oakland, CA.
 - Dean, R. K. & Pollard, R. Q. (2001). *It all depends...: Demand-control theory in sign language interpreting for educational settings*. Workshop (3 hours) presented at the annual meeting of the Ohio Registry of Interpreters for the Deaf, Cleveland, OH.
 - Dean, R. K., Haslam-Hopwood, T., & Pollard, R. Q. (2001). *What REALLY happens with interpreters in psychotherapy*. Paper presented at the annual meeting of the American Psychological Association, San Francisco, CA.
 - Dean, R. K. & Pollard, R. Q. (2001). *It all depends...: Demand-control theory in sign language interpreting*. Workshop (6 hours) presented at the biennial meeting of the Registry of Interpreters for the Deaf, Orlando, FL.
 - Dean, R. K. & Pollard, R. Q. (2001). *The what it depends on: Demand-control theory in supervision*. Lecture recorded at the biennial meeting of the Registry of Interpreters for the Deaf, Orlando, FL, for later presentation in an on-line course by the University of Colorado Boulder, CO.
 - Dean, R. K., Haslam-Hopwood, T. (2001). *Interpreter translation decisions in psychotherapy: What clinicians don't know is happening (but should)*. Grand Rounds presentation, Department of Psychiatry, University of Rochester Medical Center, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q. (2001). *It all depends...: Demand-control theory and sign language interpreting*. Workshop (8 hours), Deaf Wellness Center, University of Rochester, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q. (2001). *It all depends...: Demand-control theory and sign language interpreting*. Workshop (8 hours), Deaf Wellness Center, University of Rochester, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q. (2001). *Stress and trauma in the interpreting profession: Personal risk assessment and risk prevention: A workshop for sign language interpreters*. A two-session workshop hosted by the Psychotherapy Institute and the Deaf Wellness Center on stress, injury and burnout in sign language interpreters. University of Rochester, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q. (2001). *Curricular reform in interpreter training: A problem-based learning and demand-control theory approach*. Presentation to the faculty, staff and administrators of the University of Tennessee Interpreter Training Program, Knoxville, TN.
 - Dean, R. K. & Pollard, R. Q. (2001). *Redefining our work: A demand-control theory approach*. Presentation to a distance learning class of interpreting students. University of Tennessee, Knoxville, TN.
 - Dean, R. K. & Pollard, R. Q. (2000). *Demand-control theory: Applications to the interpreting profession*. A six-week workshop (15 hours) Presentation to professional interpreters for the Community Interpreter Training Grant, National Technical Institute for the Deaf/Rochester Institute of Technology, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q. (2000). *Deaf Wellness Center open forum on interpreting, stress, vicarious trauma and the demand-control approach to stress analysis and management for sign language interpreters*. Presentation to foreign language and sign language interpreters, University of Rochester, Rochester, NY.

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- Dean, R. K., Travers, J., Mitchell, M., Grazer, D., Stefani, K., and Miraglia, K. (2001). *Interpreting in medical settings*. Panel presentation to the Genesee Valley Registry of Interpreters for the Deaf, Rochester, NY.
 - Dean, R. K. (2000). *It all depends: Demand-control theory approaches in interpreter education*. Poster presentation at the national convention of the Conference of Interpreter Trainers, Portland, OR.
 - Dean, R. K. (2000). *Redefining our work: A demand-control theory approach*. Presentation to staff interpreters for the Board of Cooperative Educational Services, Rochester, NY.
 - Dean, R. K., & Haslam-Hopwood, T. (2000). *Interpreter translation decisions in psychotherapy: Implications for the interpreter-therapist dyad*. One session of a week-long workshop on mental health interpreting, Rochester Institute of Technology, Rochester, NY.
 - Dean, R. K., & Haslam-Hopwood, T. (2000). *Translation decisions in psychotherapy: What clinicians don't know is happening but should*. Presentation to Department of Psychiatry faculty and staff at the University of Rochester Medical Center, Rochester, NY.
 - Pollard, R. Q. & Dean, R. K. (2000). *Dysfluent language: A diagnostic challenge for the treatment team*. Presentation at Breakout 2000, a biennial convention on deafness and mental health, St. Louis, MO.
 - Nickless, C. J., Pollard, R. Q., Gutman, V., Potrude, S. E., Dean, R. K. (1999). *Emerging issues and standards for training in psychology and deafness*. Panel presentation at the annual meeting of the American Psychological Association, Boston, MA.
 - Pollard, R. Q., Dean, R. K., Potrude, S. E., Nickless, C. J. (1999). *Integrating deaf and hard-of-hearing interns into traditional programs*. Panel presentation at the annual meeting of the American Psychological Association, Boston, MA.
 - Dean, R. K. (1999). *Mental health clinicians and sign language interpreters*, University of Rochester Medical Center, Rochester, NY.
 - Dean, R. K., Pollard, R. Q. and Veltri, D. (1999). *Mental health interpreting: A round table discussion with clinicians*. One session of a week-long workshop on mental health interpreting. National Technical Institute for the Deaf/Rochester Institute of Technology, Rochester, NY.
 - Dean, R. K. (1999). *Certification preparation: Will I ever pass that test?* Presentation to professional interpreters for the Community Interpreter Training Grant, National Technical Institute for the Deaf/Rochester Institute of Technology, Rochester, NY.
 - Dean, R. K. & Pollard, R. Q. (1995). *Stress and the sign language interpreter: Implications for injury*. Presentation to the Genesee Valley Registry of Interpreters for the Deaf, Rochester, NY.
 - Dean, R. K. (1996). *Interpreting for the theater: Translation and ethics*. Presentation at the National Technical Institute for the Deaf, Rochester, NY.

Department of American Sign Language and Interpreter Education
National Technical Institute for the Deaf
Rochester Institute of Technology, Rochester, New York, USA 14623
Peter.Hauser@RIT.edu

EDUCATION

Doctorate of Philosophy in Clinical Psychology	2000
Masters of Arts in Psychology	1999
Masters of Arts in Linguistics	1998
Gallaudet University	
Bachelors of Arts in Psychology	1994
Bachelors of Arts in Philosophy	
Central Connecticut State University	

ACADEMIC EXPERIENCE

Full Professor (Tenured) Department of American Sign Language and Interpreter Education National Technical Institute for the Deaf Rochester Institute of Technology	2014 — Present
Associate Professor (Tenured) Department of American Sign Language and Interpreter Education National Technical Institute for the Deaf Rochester Institute of Technology	2011 — 2014
Adjunct Professor Present Sign Language Education Masters Program Department of ASL and Deaf Studies Gallaudet University	2014 —
Adjunct Professor 2014 Educational Neuroscience Doctoral Program Gallaudet University	2013 -
Adjunct Professor Present Department of Psychology College of Liberal Arts Rochester Institute of Technology	2006 —
Associate Professor (Tenured) Department of Research and Teacher Education National Technical Institute for the Deaf Rochester Institute of Technology	2009 — 2011
Adjunct Professor 2009 Department of Psychology Gallaudet University	2000 —

Assistant Professor Department of Research and Teacher Education National Technical Institute for the Deaf Rochester Institute of Technology	2006 – 2009
Adjunct Professor 2008 Department of School Psychology College of Liberal Arts Rochester Institute of Technology	2007 –
Assistant Professor Department of Psychology College of Liberal Arts Rochester Institute of Technology	2002 – 2006
Instructor Department of Neurology Department of Psychiatry University of Rochester School of Medicine	2000 – 2002
Instructor Department of Medicine University of Miami School of Medicine	1999 – 2000
Adjunct Professor 2000 Department of American Sign Language and Interpreting Miami Dade Community College	1999 –
Adjunct Professor 1999 Department of Educational Foundations and Research Gallaudet University	1996 –

COURSES TAUGHT

Graduate: Biological Bases of Behavior; Foundations of Educational Neuroscience; Social Medicine; Psychology and Sociology of the Deaf Learner; Sign Language Research

Undergraduate: Freshmen Seminar in Psychology; Introduction to Psychology; Introduction to Clinical Psychology; Psychological Statistics; Psychological Testing; Research Methods; Educational Psychology; Abnormal Psychology; Biological Bases of Mental Illnesses; History and Systems of Psychology; Senior Seminar in Psychology; Issues in Interpreting.

ADMINISTRATIVE EXPERIENCE

Program Director Present Rochester Bridges to the Doctorate Rochester Institute of Technology	2014 –
Laboratory Director Deaf Studies Laboratory Rochester Institute of Technology	2003 – Present
Science Mentorship Leader Present	2012 –

Executive Leadership Team Science of Learning Center on Visual Language and Visual Learning Gallaudet University	
Science Director Research Experience for Undergraduates Science of Learning Center on Visual Language and Visual Learning Gallaudet University	2009 –
Research Initiative Director 2011 Neurocognitive Research Science of Learning Center on Visual Language and Visual Learning Gallaudet University	2007 –
Strand Director Cognitive Neuroscience Strand Science of Learning Center on Visual Language and Visual Learning Gallaudet University	2005 – 2007
CLINICAL EXPERIENCE	
Clinical Neuropsychologist 2008 CHE Psychological Services	2003 –
Consulting Clinical Neuropsychologist Tampa Bay Academy	2001 – 2002
Clinical Neuropsychology Fellow 2002 Departments of Psychiatry and Neurology University of Rochester	2000 –
Chief Clinical Psychology Intern 2000 Departments of Neurosurgery, Neurology, and Psychiatry University of Miami/Jackson Memorial Medical Center	1999 –
Pediatric Neuropsychology Extern 1999 Department of Pediatric Neurology Mt. Washington Pediatric Hospital	1998 –
Clinical Psychology Extern 1998 Mental Health Center Gallaudet University	1997 –
Forensic Neuropsychology Extern 1997 Child Guidance Clinic Superior Court of the District of Columbia	1996 –
GRANTS	
NIH-NIGMS R25 “Rochester Bridges to the Doctorate Program for Deaf and 2013 - 2018	

Hard of Hearing Students (P. Hauser, RIT PI, S. Barnett, UR PI) \$2,100,000	
NSF BCS-1251849 "Broadening Participation of Deaf Students in Sign Language Research" (P. Hauser, PI) \$34,240	2013
NTID Innovation Fund "Effect of Sign Language Competency on Psychosocial Functioning" (P. Hauser, PI) \$72,736	2011 - 2012
American Recovery and Reinvestment Act (ARRA) Supplement	2009 - 2010
"Reorganization of Visual Functions after Early Deafness" (D. Bavelier, PI) \$161,199 subcontract	
NSF - Science of Learning Center Grant—SBE-0541953	2006 - 2014
"Visual Language and Visual Learning" (T. Allen, PI) \$1,181,822 Subcontract to date	
NIH- NIDCD R01 "Reorganization of Visual Functions after Early Deafness" (D. Bavelier, PI) \$268,466 Subcontract	2008 - 2012
Gallaudet University Priority Grant	2007 - 2010
"Developing a Theoretical Framework for Sign language Assessment Tests" (R. Paludnevičienė, PI, P. Dudis, co-PI). Non-paid co-PI.	
NTID FEAD Grant to attend CUNY Conference on Human Sentence Processing, San Diego, CA. \$1300	2006
Gallaudet Research Institute Small Grants Funds "Covert Reading Behavior of Deaf Native American Sign Language Users" (P. Hauser, PI) \$2000	1999

AWARDS

NTID National Advisory Group Outstanding Service Award	2009
RIT's Isaac L. Jordan, Sr. Pluralism Award	2006
RIT's Exemplary myCourses (online) Teaching Award	2006
RIT's Eisenhart Provost's Award for Excellence in Teaching	2005
Gallaudet University Outstanding Graduate Student Award	1999
Larry Stewart Outstanding Clinical Psychology Student Award	1998
Central Connecticut State University's President's Citation Award	1994
National American Red Cross Volunteer of the Year	1992

LICENSURE

New York State Psychologist License Number 016776

CONFERENCES ORGANIZED

Marschark, M., & Hauser, P. C. (2007, June). *Cognitive Underpinnings of Learning*. National Technical Institute for the Deaf, Rochester, NY.
 Hauser, P. C. (2003, April). *Expressions of Diversity Conference*. Rochester Institute of Technology, Rochester, NY.

GRANT REVIEWER (ad hoc): National Science Foundation; Institute of Health Research-UK

GRANT REVIEW PANEL MEMBERSHIP

US Department of Education Institute of Educational Sciences	2013
Present	
Special Education Research Scientific Review Panel	

JOURNAL REVIEWER (ad hoc): Aging, Neuropsychology, and Cognition; Cerebral Cortex; Child Development; Child Neuropsychology; Disability and Health Journal; Journal of Cognitive Neuroscience; Journal of Deaf Studies and Deaf Education; Journal of Experimental Child Psychology; Learning & Individual Differences; Memory & Cognition; Motivation & Emotion; Neuropsychologia; Restorative Neurology and Neuroscience; Sign Language & Linguistics; Scandinavian Journal of Psychology; The Clinical Neuropsychologist; Transactions on Accessible Computing

BOOK PROPOSAL REVIEWER: Oxford University Press

COMMITTEES

<i>Chair, NTID Innovation Funding Committee</i>	2010 – 2011
<i>Chair, RIT Diversity Climate Study Committee</i>	2006 – 2007
<i>Chair, RIT Diversity Program Innovations Committee</i>	2004 – 2005
<i>Co-Chair, Senior Lecturer Promotion Committee</i>	2012 – 2013
<i>Co-Chair, NTID Strategic Decision 2020 Communication Expectations Committee</i>	2011 – 2012
<i>Member, RIT Institute Review Board (IRB) for Human Subject Protection</i>	2004 – Present
<i>Member, NTID Lyon Memorial Lectureship Committee</i>	2012 – Present
<i>Member, RIT Strategic Plan Task Force on Graduate Education and Research</i>	2014
<i>Member, Editorial Board, Journal of Deaf Studies and Deaf Education</i>	2005 – 2011
<i>Member, NTID Associate Professor Promotion Committee</i>	2011 – 2013
<i>Member, NTID 2020 Strategic Plan Committee</i>	2008 – 2009
<i>Member, RIT Council on Diversity and Inclusion</i>	2006 – 2007
<i>Member, RIT Search Committee, Counseling Center Clinical Director</i>	2008
<i>Member, RIT's Online Learning Award Committee</i>	2007
<i>Member, RIT's Eisenhart Provost Award Committee</i>	2006
<i>Member, NTID Search Committee, Assistant Director of Student Life Team</i>	2006
<i>Member, NTID Search Committee, Student Life Team Coordinator</i>	2006
<i>Member, RIT President's Agenda for Action Committee</i>	2004 – 2006
<i>Member, RIT Academic Senate, Long Range Planning Committee</i>	2003 – 2005
<i>Member, RIT Commission on Promoting Pluralism</i>	2003 – 2005
<i>Member, former Editor-in-Chief, Deaf Rochester News Advisory Board</i>	2001 – 2007
<i>Member, Board of Trustees, Rochester School for the Deaf</i>	2001 – 2003
<i>Advisor, Collegiate National Association of the Deaf Conference (NTID)</i>	2003
<i>Co-Advisor, NTID Student Congress</i>	2006

PUBLICATIONS

Peer Reviewed Journals

- Guldenoglu, B., Miller, P., Kargin, T., Hauser, P., Rathman, C., Kubus, O., & Spurgeon, E. (in press). A Comparison of the Letter Processing Skills of Hearing and Deaf Readers: Evidence from Five Orthographies. *Journal of Deaf Studies and Deaf Education*.
- Clark, D. M., Hauser, P. C., Miller, P., Kargin, T., Rathmann, C., Buldenoglu, B., Kubus, O., & Israel, E. (in press). Lexical processing in different orthographies: An investigation of hearing, deaf and dyslexic children. *Reading and Writing Quarterly*.
- Supalla, T., Hauser, P. C., & Bavelier, D. (2014). Reproducing American Sign Language sentences: Cognitive scaffolding in working memory. *Frontiers in Psychology*, 8. doi: 10.3389/fpsyg.2014.00859
- Hirshorn, E., Dye, M. W. G., Hauser, P. C., Supalla, T., & Bavelier, D. (2014). Neural networks mediating sentence reading in the deaf. *Frontiers in Human Neuroscience*, 8. doi: 10.3389/fnhum.2014.00394
- Dye, M. W. G., & Hauser, P. C. (2014). Sustained attention, selective attention, and cognitive control in deaf and hearing children. *Hearing Research*, 309, 94-102.
- Quintó-Pozos, D., Singleton, J. L., Hauser, P. C., Levine, S. L., Garberoglio, C. L., & Hou, L. (2013). Atypical sign language development: A case study of challenges with visual perspective-taking. *Cognitive Neuropsychology*, 30, 332-359.
- Hauser, P. C., Lukomski, J., & Samar, V. (2013). Reliability and validity of the BRIEF-A for assessing deaf college students' executive function. *Journal of Psychoeducational Assessment*, 31, 363-374.
- Corina, D. P., Laywer, L. A., Hauser, P. C., & Hirshorn, E. (2013). Lexical processing in deaf readers: An fMRI investigation of reading proficiency. *Public Library of Science ONE*, 8(1), e54696. DOI:10.1371/journal.pone.0054696
- Miller, P., Kargin, T., Guldenoglu, B., Rathmann, C., Kubus, O., Hauser, P. C., & Spurgeon, E. (2012). Factors distinguishing skilled and less skilled readers: Evidence from four orthographies. *Journal of Deaf Studies and Deaf Education*, 17, 439-462.
- Kargin, T., Guldenoglu, B., Miller, P., Hauser, P., Rathman, C., Kubus, O., & Spurgeon, E. (2012). Differences in word processing skills of deaf and hearing individuals reading in different orthographies. *Journal of Developmental and Physical Disabilities*, 24, 65-83.
- Bochner, J. H., Christie, K., Hauser, P. C., & Searls, J. M. (2011). *Learners discrimination of linguistic contrasts in American Sign Language*. *Language Learning*, 61, 1302-1327.
- Hauser, P. C. (2011). Deaf eyes: Visual learning and Deaf gain. *Deaf Studies Digital Journal*.
- Freel, B. L., Clark, M. D., Anderson, M. L., Gilbert, G., Musyoka, M. M., & Hauser, P. C. (2011). Deaf Individuals' Bilingual Abilities: American Sign Language Proficiency, Reading Skills, and Family Characteristics. *Psychology*, 2, 18-23.
- Myers, C., Clark, M. D., Musyoka, M. M., Anderson, M. L., Gilbert, G. L., Agyen, S., & Hauser, P. C. (2010). Black deaf individuals' reading skills: Influence of ASL,

culture, family characteristics, reading experience, and education. *American Annals of the Deaf*, 155, 449-457.

- Newman, A. J., Supalla, T., Hauser, P., Newport, E. L., & Bavelier, D. (2010). Dissociating neural subsystems for grammar by contrasting word order and inflection. *Proceedings of the National Academy of Sciences*, 107, 7539-7544.
- Newman, A. J., Supalla, T., Hauser, P., Newport, E., & Bavelier, D. (2010). Prosodic and narrative processing in American Sign Language: An fMRI study. *Neuroimage*, 52, 669-676.
- Hauser, P. C., O'Hearn, A., McKee, M., Steider, A., & Thew, D. (2010). Deaf epistemology: Deafhood and deafness. *American Annals of the Deaf*, 154, 486-492.
- Dye, M. W. G., Hauser, P. C., & Bavelier, D. (2009). Is visual attention in deaf individuals enhanced or deficient? The case of the Useful Field of View. *Public Library of Science ONE*, 4(5), e5640. DOI:10.1371/journal.pone.0005640.
- Dye, M. W. G., Hauser, P. C., & Bavelier, D. (2008). Visual skills and cross-modal plasticity in deaf readers: Possible implications for acquiring meaning from print. *New York Annals of Science*, 1145, 71-82.
- Baveller, D., Newman, A., Mukherjee, M., Hauser, P., Kemeny, S., Braun, A., & Boutla, M. (2008). Encoding, rehearsal and recall in signers and speakers: Shared network but differential engagement. *Cerebral Cortex*, 18, 2263-2274.
- Hauser, P. C., Cohen, J., Dye, M. W. G., & Bavelier, D. (2007). Visual constructive and visual-motor skills in Deaf native signers. *Journal of Deaf Studies and Deaf Education*, 12, 148-157.
- Hauser, P. C., Dye, M. W. G., Boutla, M., Green, C. S., & Bavelier, D. (2007). Deafness and visual enumeration: Not all aspects of attention are modified by deafness. *Brain Research*, 1153, 178-187.
- Baveller, D., Dye, M. W. G., & Hauser, P. C. (2006). Do deaf individuals see better? *Trends in Cognitive Science*, 10, 512-518.
- Newman, A. J., Supalla, T., Hauser, P. C., Newport, E., & Bavelier, D. (2004). Grammatical, morphological, and narrative structure in American Sign Language: An fMRI study. *Neuroimage*, 22 (Suppl. 1), 523.
- Newman, A. J., Supalla, T., Hauser, P., Newport, E., & Bavelier, D. (2004). Brain organization for morphosyntactic and narrative structure in American Sign Language: An fMRI study. *Cognitive Neuroscience Society Abstracts*, 12.
- Boutla, M., Newman, A., Hauser, P., Kemeny, S., Braun, A., & Baveller, D. (2003). Brain systems for short term memory in signers: An event-related fMRI study. *Society for Neuroscience Abstracts*.
- Hauser, P. C., Maxwell, D. A., Leigh, I. W., & Gutman, V. A. (2000). Internship accessibility issues: No cause for complacency. *Professional Psychology: Research and Practice*, 31, 569-574.
- Hauser, P. C. & Morere, D. A. (1998). Implicit memory and sign stem completion tasks. *Archives of Clinical Neuropsychology*, 13, 26.

Books

- Marschark, M. & Hauser, P.C. (2014). 如何听不见, (How deaf children learn: What parents and teachers need to know. Y.-H. Chen, trans.). Hong Kong: Hong Kong Association for the Deaf.
- Marschark, M. & Hauser, P.C. (2011). *How deaf children learn: What parents and teachers need to know*. New York: Oxford University Press.
- Hauser, P. C., Finch, K., & Hauser, A. (2008). *Deaf professionals and designated interpreters: A new paradigm*. Washington, DC: Gallaudet University Press.
- Marschark, M., & Hauser, P. C. (Eds.). (2008). *Deaf cognition: Foundations and outcomes*. New York: Oxford University Press.
- Hauser, P.C. (2001). *Deaf readers' phonological encoding: An electromyographic study* (Dissertation). Ann Arbor, MI: UMI.

Chapters

- Hauser, P. C., & Kartheiser, G. (in press). Advantages of learning a signed language. In H. D. L. Bauman & J. Murray (Eds.), *Deaf gain: Re-imagining human diversity*. Minneapolis, MN: University of Minnesota Press.
- Hauser, P. C., Quinto-Pozos, D., & Singleton, J. L. (in press). Studying sign language disorders: Considering Neuropsychological Data. In E. Orfanidou, B. Woll, & G. Morgan (Eds.), *Research methods in Sign Language Studies: A Practical Guide*. Hoboken, NJ: Wiley-Blackwell.
- Quinto-Pozos, D., Singleton, J., & Hauser, P., & Levine, S. (2014). A case-study approach to investigating developmental signed language disorders. In D. Quinto-Pozos (Ed.), *Multilingual aspects of signed language communication and disorder* (pp. 70-89). Bristol, England: Multilingual Matters.
- Paludnevičienė, R., Hauser, P. C., Daggett, D., & Kurz, K. B. (2012). Issues and trends in sign language assessment. In D. Morere & T. Allen (Eds.), *Measuring literacy and its neurocognitive predictors among deaf individuals: An assessment toolkit* (pp. 191-207). New York: Springer.
- McKee, M. M., & Hauser, P. C. (2012). Deaf epistemologies: The juggling of two worlds (pp. 45-61). In P. Paul & D. Moores (Eds.), *Deaf Epistemologies*. Washington, DC: Gallaudet University Press.
- Listman, J. D., Rogers, K. D., & Hauser, P. C. (2011). Rethinking deaf adolescents' resilience: Why cultural capital matters. In D. Zand & K. Pierce (Eds.), *Risk and resilience: Adaptation in the context of being deaf* (pp. 279-298). New York: Springer.
- Dye, M. W. G., Hauser, P. C., & Bayelier, D. (2008). Visual attention in deaf children and adults: Implications for learning environments. In M. Marschark & P. C. Hauser (Eds.), *Deaf cognition: Foundations and outcomes* (pp. 250-263). New York: Oxford University Press.
- Hauser, P. C. (2008). History and Systems of Psychology. In M. Starenko (Ed.), *Reflections on Blended Learning: Rethinking the Classroom* (pp. 204-209). San Francisco, CA: LuLu Press.
- Hauser, A., & Hauser, P. C. (2008). The Deaf Professional-Designated Interpreter Model. In P. C. Hauser, K. Finch, & A. Hauser (Eds.), *Deaf professionals and designated interpreters: A new paradigm* (pp. 3-21). Washington, DC: Gallaudet University Press.

- Hauser, P. C., Lukomski, J., & Hillman, T. (2008). Development of deaf and hard of hearing students' executive function. In M. Marschark & P. C. Hauser (Eds.), *Deaf cognition: Foundations and outcomes* (pp. 286-308). New York: Oxford University Press.
- Hauser, P. C., & Marschark, M. (2008). What we know and what we don't know about cognition and deaf learners. In M. Marschark & P. C. Hauser (Eds.), *Deaf cognition: Foundations and outcomes* (pp. 439-457). New York: Oxford University Press.
- Hauser, P. C., Paludnevičienė, R., Supalla, T., & Bavelier, D. (2008). American Sign Language-Sentence Reproduction Test: Development and implications. In R. M. de Quadros (ed.), *Sign Language: Spinning and unraveling the past, present and future* (pp. 160-172). Petropolis, Brazil: Editora Arara Azul.
- Marschark, M., & Hauser, P. C. (2008). Cognitive underpinnings of learning by deaf and hard-of-hearing students: Differences, diversity, and directions. In M. Marschark & P. C. Hauser (Eds.), *Deaf cognition: Foundations and outcomes* (pp. 3-23). New York: Oxford University Press.
- King, B. H., Hauser, P. C., & Isquith, P. K. (2006). Psychiatric aspects of blindness and severe visual impairment, and deafness and severe hearing loss in children. In C. E. Coffey & R. A. Brumback (Eds.), *Textbook of Pediatric Neuropsychiatry* (pp. 397-423). Washington DC: American Psychiatric Association.
- Hauser, P. C., Wills, K., & Isquith, P. K. (2006). Hard of hearing, deafness, and being deaf. In J. E. Farmer, J. Donders, & S. Warschusky (Eds.), *Neurodevelopmental disabilities: Clinical research and practice* (pp. 119-131). New York: Guilford Publications, Inc.
- Hauser, P. C. (2000). Code switching: American Sign Language and cued English. In M. Metzger (Ed.), *Bilingualism and Identity in Deaf Communities* (pp. 43-78). Washington, DC: Gallaudet University Press.

Book Reviews

- Paludnevičienė, R., & Hauser, P. C. (2006). Early Deaf history revealed: French writings from 1764-1840 Translated [Review of *The Deaf Experience*]. *Journal of Deaf Studies and Deaf Education*, 12, 120.
- Hauser, P. C. (2004). One of the greatest linguistic discoveries [Review of *Cross Linguistic Perspectives in Sign Language Research*]. *Journal of Deaf Studies and Deaf Education*, 9, 463.
- Hauser, P. C. & Snyder, P. J. (1999). Generalizability of aphasiology studies [Review of *Aphasia in Atypical Populations*]. *Brain and Language*, 71, 344-349.

PRESENTATIONS

International Keynote Addresses

- Hauser, P. C. (October, 2013). *Sign Gain: The advantages of learning a signed language*. First International Conference of the Deaf Teachers of Sign Language. Ministry of Foreign Affairs of the Czech Republic, Prague, Czech Republic.

- Hauser, P. C. (July, 2013). *Sign language assessment: A bridge between theory and practice*. 11th Theoretical Issues in Sign Language Research Conference, University College London, London, UK.
- Hauser, P. C. (July, 2013). *Deaf scientists need deaf mentors*. 6th Deaf Academics Conference, Catholic University of Portugal, Lisbon, Portugal.
- Hauser, P. C. (2012, November). *Cultural capital and community cultural wealth: Lessons from the deaf community*. Symposium on children with possibilities: New conditions for learning and growing in a complex and changing world, Örebro University, Örebro, Sweden.
- Hauser, P. C. (2011, November). *How deaf children learn*. Endangered Signed Languages Conference, Ål, Norway.
- Hauser, P. C. (2010, November). *Deaf Gain: Our paradigm shift*. 5th Deaf Academics Conference, Florianapolis, Brazil.
- Hauser, P. C. (2010, March). *Neuropsychology of the Deaf Individual: Current Trends*. International Mental Health and Deafness Conference, Buenos Aires, Argentina.
- Hauser, P. C. (2010, March). *Role of Cultural Capital in the Deaf Individuals' Development and Health*. International Mental Health and Deafness Conference, Buenos Aires, Argentina.

National Keynote Addresses

- Hauser, P. C. (2013, March). *What parents and teachers need to know about how deaf children learn*. 4th Early Childhood Education Summit, Texas School for the Deaf, Austin, Texas.
- Hauser, P. C. (2011, June). *Deaf cultural capital: What deaf children need for navigating life*. American Society for Deaf Children Conference, Fredrick, Maryland.
- Hauser, P. C. (2011, February). *Language, cognition, and the developing deaf child: What parents need to know*. Presentation to the American Academy of Pediatrics Luncheon, Early Hearing Detection and Intervention Conference, Atlanta, Georgia.
- Hauser, P. C. (2010, April). *Right-Brain/Left-Brain: Implications for Innovation*. Innovation Forum, National Technical Institute for the Deaf, Rochester Institute of Technology, Rochester, NY.
- Hauser, P. C. (2009, May). *Deaf students' psychosocial development: Role of culture acquisition*. Keynote address at the Conference for Educators and Administrators for Schools of the Deaf, Santa Fe, New Mexico.
- Hauser, P. C. (2008, November). *Neuropsychology and Deafness*. Neuropsychology and Deafness Conference, Gallaudet University, Washington, DC.
- Hauser, P. C. (2007, April). *Signing in public spaces: A deaf scientist's perspective*. Expressions of Diversity Conference, Rochester Institute of Technology, Rochester, NY.

International Conferences (peer reviewed)

- Hauser, P. C., Israel, E., & Contreras, J. (2013, July). *Deaf students' performance on the Color Trails Test: Effect of early sign language acquisition*. 11th meeting of

the Theoretical Issues in Sign Language Research conference, University College London, London, UK.

- Corina, D., Lawyer, L., Hauser, P., Hirshorn, E., & Cates, D. (2013, July). *Lexical processing in deaf readers: An fMRI investigation of reading proficiency*. 11th meeting of the Theoretical Issues in Sign Language Research conference, University College London, London, UK.
- Contreras, J., Israel, E., & Hauser, P. C. (2013, July). *Importance of sign language for cognitive development*. 6th Deaf Academics Conference, Catholic University of Portugal, Lisbon, Portugal.
- Hauser, P. C., Listman, J., Kurz, K., & Colayori, K. (July, 2013). *What makes Deaf people happy?* 6th Deaf Academics Conference, Catholic University of Portugal, Lisbon, Portugal.
- Kubus, O., Rathmann, C., Miller, P., Hauser, P., Spurgeon, E., Kargin, T., and Guidenoglu, B. (January, 2013). *Age of Acquisition effect as a predictor for Deaf reading*. Paper presented at the International Conference on Sign Linguistics and Deaf Education in Asia 2013. The Chinese University of Hong Kong.
- Quintó-Pozos, D., Singleton, J., Hauser, P., Levine, S., Garberoglio, C. L., & Hou, L. (2012, June). *A developmental signed language disorder: The role of visual-spatial cognition*. Poster presentation. International Clinical Phonetics and Linguistics Association (ICPLA), Cork Ireland.
- Kubus, O., Rathmann, C., Miller, P., Hauser, P., Spurgeon, E., Kargin, T., & Guidenoglu, B. (March, 2012). *The role of age of acquisition for deaf readers from a crosslinguistic perspective*. Paper presented at 34. Annual Conference of the German Linguistic Society (DGfS) JW-Goethe Universität, Frankfurt, Germany.
- Dye, M. W. G., Hauser, P. C., & Bavelier, D. (2009, August). *Cross-modal plasticity and deafness: Spatial and temporal components of visual attention*. Poster presented at Rovereto Workshop on Cross-Modal Plasticity in Deafness and Cochlear Implants, Rovereto, Italy.
- Hauser, P. C. & Listman, J. D. (2008, June). *Science as ammo for social justice*. Fourth International Deaf Academics Conference, Dublin, Ireland.
- Hauser, P. C., Paludneviciene, R., Supalla, T., & Bavelier, D. (2006, December). *American Sign Language Grammar Test: Development, implications, and progress report*. Poster presented at the 9th Theoretical Issues in Sign Language Research Conference, Florianópolis, Brazil.
- Newman, A. J., Supalla, T., Hauser, P. C., Newport, E., & Bavelier, D. (2004, May). *Grammatical, morphological, and narrative structure in American Sign Language: An fMRI study*. Poster presented at the Human Brain Mapping Conference, Budapest, Hungary.

National Conferences (peer reviewed)

- Hauser, P. C., Listman, J. D., Kurz, K. B., & Contreras, J. (2014, April). *Self-perception as Disabled is a Resilience Risk Factor: Case of Internalized Audism*. Paper presented at the Association of Psychological Science, San Francisco, CA.
- Contreras, J., Hauser, P. C., DeNaples, G., & Israel, E. (2014, May). *Executive function development in deaf unimodal bilinguals*. Paper presented at the Association of Psychological Science, San Francisco, CA.

- Hauser, P. C., Listman, J. D., & Kurz, K. B. (2014, April). *Importance of Sign Language and Deaf Acculturation for Deaf Individuals Psychosocial Well Being*. Paper presented at Deaf Studies Today Conference, Utah Valley University, Orem, Utah.
- Kurz, K. B., Listman, J. D., & Hauser, P. C. (2014, April). *Deaf Professionals' Resilience: A Qualitative Study*. Paper presented at Deaf Studies Today Conference, Utah Valley University, Orem, Utah.
- Colayori, K., Hauser, P. C., Listman, J. D., & Kurz, K. B. (2014, March). *Perceiving being Deaf as a negative attribute is a resilience risk factor for Deaf college students*. Paper presented at the Inter-Science of Learning Centers Conference, Pittsburg, PA.
- Contreras, J., & Hauser, P. C. (2014, March). *Sign language as a way of facilitating executive function within deaf individuals*. Paper presented at the Inter-Science of Learning Centers Conference, Pittsburg, PA.
- DeNaples, G., & Hauser, P. C. (2014, March). *Effect of language on executive function development: Case of Deaf Signers*. Paper presented at the Inter-Science of Learning Centers Conference, Pittsburg, PA.
- Twitchell, P., Morford, J. P., & Hauser, P. C. (2014, March). *Role of SES and ASL for literacy success in ASL-English bilinguals*. Paper presented at the Inter-Science of Learning Centers Conference, Pittsburg, PA.
- Hauser, P. C., & Contreras, J. (2014, February). *Impact of language exposure on executive function development*. Paper presented at the Association of College Educators for the Deaf and Hard of Hearing, Washington, DC.
- McKee, M., & Hauser, P. C. (2013, September). *Addressing Deaf and Hard of Hearing LGBT individuals' health care needs: A communication and culture primer*. Gay and Lesbian Medical Association Conference, Denver, CO.
- Hauser, P. C., Contreras, J., & Israel, E. (2013, May). *Effect of language on executive function development: Case of deaf signers*. 25th Association of Psychological Science Convention, Washington, DC.
- Colayori, K., Hauser, P. C., Paludneviciene, R., Dudis, P., Riddle, W., & Kurz, K. B. (2013, February). *Development of the American Sign Language Comprehension Test*. Inter-Science of Learning Centers Conference, Philadelphia, PA.
- Contreras, J., & Hauser, P. C. (2013, February). *Impact of early sign acquisition on deaf children's executive function development*. Inter-Science of Learning Centers Conference, Philadelphia, PA.
- Israel, E., & Hauser, P. C. (2013, February). *Deaf students' performance on the Color Trails Test: Effect of early sign language acquisition*. Inter-Science of Learning Centers Conference, Philadelphia, PA.
- Quinto-Pozos, D., Singleton, J., Hauser, P. (2012, June). *A case of Specific Language Impairment in a native Deaf signer of American Sign Language (ASL)*. Paper presentation. Symposium on Research in Child Language Disorders (SRCLD), Madison, Wisconsin.
- Dye, M., & Hauser, P. C. (2012, April). *Testing the auditory scaffolding hypothesis: The role of early language in attentional development*. Poster presented at the Cognitive Neuroscience Society, Chicago, IL.

- Clark, M. D., Musyoka, M., Hauser, P., Israel, E., Miller, P., Rathmann, C., Kargin, T., & Guldenoglu, B. (2012, February). *A systematic developmental skill-oriented investigation of poor and proficient deaf readers from different countries*. Poster presented at the Association for College Educators - Deaf and Hard of Hearing, Jacksonville, FL.
- Corina, D., Lawyer, L., Hirshorn, E., Hauser, P. C., & Cates, D. (2011, December). *Functional neuroanatomy of skilled and non-skilled deaf readers: Data from word and sign processing*. Poster presented at the annual National Science of Learning Centers' Director's Meeting, Arlington, VA.
- Israel, E., Hauser, P. C., Clark, M. D., Miller, P., Rathmann, C., Kargin, T., Musyoka, M., Guldenoglu, B., & Kubus, O. (2011, December). *Cross-linguistic study on the effects of orthographic depth and language acquisition on reading development*. Poster presented at the annual National Science of Learning Centers' Director's Meeting, Arlington, VA.
- Kuhl, P., Petitto, L. A., Hauser, P., Tallal, P., & Perfetti, C. (2011, December). *Brain and learning: Translational research for education panel discussion*. Poster presented at the annual National Science of Learning Centers' Director's Meeting, Arlington, VA.
- Parasnis, I., Hauser, P., Lukomski, J., & Samar, V. J. (2011, May). *Enhanced processing speed in Deaf native signers during distributed visual attention*. Poster presented at the 23rd Annual Convention of the Association for Psychological Science, Washington, DC.
- Dye, M.W.G., Hauser, P. C., & Bavelier, D. (2011, May). *Relative impact of auditory deprivation and language delay on attention deficits in deaf children*. Poster presented at the 2011 Association for Psychological Science Annual Convention, Washington, DC.
- Corina, D. P., Lawyer, L., Hirshorn, E., & Hauser, P. C. (2011, April). *Functional neuroanatomy of skilled and non-skilled deaf readers: Data from implicit word recognition*. Poster presented at the 18th Annual Meeting of the Cognitive Neuroscience Society, San Francisco, CA.
- Musyoka, M., Pucci, C., Anderson, M., Clark, M. D., Hauser, P. C., Miller, P., Rathmann, C., Kargin, T., & Guldenoglu, B. (2011, March). *A systematic developmental skill-oriented investigation of poor and proficient deaf readers from different countries*. Poster presented at the 4th Inter-Science of Learning Center Student and Post-Doc Conference, Gallaudet University, Washington, D.C.
- Daggott, D., Hauser, P. C., Paludnevielen, R., Dudis, P., & Riddle, W. (2011, March). *Assessing the use of depiction in American Sign Language*. Poster presented at the 4th Inter-Science of Learning Center Student and Post-Doc Conference, Gallaudet University, Washington, D.C.
- Hirshorn, E., Dye, M.W.G., Hauser, P. C., & Bavelier, D. (2010, November). *Exploring Alternate Routes to Literacy in Profoundly Deaf Native Signers*. Poster presented at the Neurobiology of Language Conference, San Diego.
- Dye, M.W.G., Kartheiser, G., Hauser, P.C., and Bavelier, D. (2010, September). *Deafness, not sign language, enhances peripheral vision*. Poster presented at

Theoretical Issues in Sign Language Research 10, Purdue University, West Lafayette, IN.

- Hauser, P. C., Paludnevičienė, R., Dudis, P., Riddle, W., Daggett, D., & Freil, B. (2010, September). *The Depiction Comprehension Test in American Sign Language*. Poster presented at the 10th Theoretical Issues in Sign Language Research Conference, West Lafayette, Indiana.
- Spotswood, N., Laywer, L., Hirshorn, E., Patterson, H., Hauser, P., Eden, G., Mendoza, M., & Corina, D. (2010, September). *An fMRI study of implicit sign processing: Functional neuro-anatomy of lexical recognition in American Sign Language*. Poster presented at the 10th Theoretical Issues in Sign Language Research Conference, West Lafayette, Indiana.
- Freil, B. L., Clark, M. D., Anderson, M. L., Bilbert, G. L., Musyoka, M. M., & Hauser, P. C. (2010, May). *Deaf individuals' bilingual abilities: American Sign Language proficiency, reading skills, and family characteristics*. Paper presented at American Psychological Society, Boston, MA.
- Johnson, J.D., Clark, M. D., Anderson, M. L., Bilbert, G. L., Musyoka, M. M., & Hauser, P. C. (2010, May). *Influence of background characteristics on deaf individuals' American Sign Language proficiency*. Paper presented at American Psychological Society, Boston, MA.
- Myers, C. Clark, M. D., Anderson, M. L., Bilbert, G. L., Musyoka, M. M., & Hauser, P. C. (2010, May). *Black deaf individuals' reading skills*. Paper presented at American Psychological Society, Boston, MA.
- Hirshorn, E.A., Dye, M.W.G., Hauser, P.C., & Bavelier, D. (2010, May). *Exploring Alternate Routes to Literacy in Profoundly Deaf Individuals*. Symposium Talk presented at Inter-Science of Learning Center Conference, Boston, MA.
- Hirshorn, E.A., Dye, M.W.G., Hauser, P.C. & Bavelier, D. (2009, May). *The relative contribution of phonological skills and memory in reading in profoundly deaf readers*. Poster presented at the International Mind, Brain and Education 2009 Conference, Philadelphia, PA.
- Spotswood, N., Hirshorn, E., Patterson, H., Hauser, P., Eden, G. & Corina, D. (2010, April). *An fMRI study of implicit sign processing: Functional neuro-anatomy of lexical recognition in American Sign Language*. Poster presented at Cognitive Neuroscience Society, Montreal, Canada.
- Hirshorn, E.A., Dye, M.W.G., Hauser, P.C. & Bavelier, D. (2009, March). *Relative contribution of phonological skills and memory in reading: The case of profoundly deaf individuals*. Poster presented at the 16th Annual Meeting of the Cognitive Neuroscience Society, San Francisco, CA.
- Hauser, P. C. (2008, November). *Introduction to assessment with deaf individuals*. Neuropsychology and Deafness Conference, Gallaudet University, Washington, DC.
- Hauser, P. C. (2008, November). *Neuropsychological assessment of adults*. Neuropsychology and Deafness Conference, Gallaudet University, Washington, DC.
- Hauser, P. C., & Allen, T. E. (2008, October). *When students can't hear: The assessment challenges for visual learners*. Paper presented at the National

Science Foundation Science of Learning Centers Director's Meeting,
Washington, DC.

Hauser, P. C., Finch, K. L. & Hauser, A. B. (2008, May). *Deaf Professional – Designated Interpreter Model*. Presented at the Sign Language Interpreter Research and Practice Conference, Gallaudet University, Washington, DC.

Hirshorn, E. A., Dye, M. W. G., Hauser, P. C., & Bavelier, D. (2008, April). *Routes to achieving literacy in deaf readers: The case of native American Sign Language (ASL) users*. Poster presented at the Cognitive Neuroscience Society Conference, San Francisco, CA.

Listman, J. D., Hauser, P. C., Supalla, T., Paludnevičienė, R., & Bavelier, D. (2008, February). *Development of a sign language competency measure: American Sign Language Sentence Reproduction Test*. Poster presented at the Inter-Science of Learning Center Conference, University of Pittsburgh, Pittsburgh, PA.

Lukomski, J., & Hauser, P. C. (2008, November). *Learning disabilities and college students*. Paper presented at the Neuropsychology and Deafness Conference, Gallaudet University, Washington, DC.

Hauser, P. C. (2007, June). *Deaf individuals' executive functioning*. Presented at the NSF Cognitive Underpinnings of Learning Conference, National Technical Institute for the Deaf, Rochester, NY.

Morere, D. A., & Hauser, P. C. (2004, August). *Neuropsychological assessment of deaf individuals: Research-based Interpretation of data*. Poster presented at the American Psychological Association Annual Convention, Honolulu, HA.

Newman, A. J., Supalla, T., Hauser, P. C., Newport, E., & Bavelier, D. (2004, April). *Impact of morphosyntactic and narrative structure on brain organization for American Sign Language*. Poster presented at the Cognitive Neuroscience Society Conference, San Francisco, CA.

Boutla, M., Neuman, A., Hauser, P., Kemeny, S., Braun, A., & Bavelier, D. (November, 2003). *Brain systems for Short-Term Memory in signers: An event-related fMRI study*. Presentation at Society for Neuroscience, New Orleans, LA.

Workshops

Hauser, P. C., & Bosworth, R. (2014, February). *Visual sign phonology*. Workshop hosted by NSF Science of Learning Center on Visual Language and Visual Learning, Gallaudet University, Washington, DC.

Hauser, P. C., & Singleton, J. (2011, February). *Language acquisition and brain development in children who are deaf or hard of hearing*. Pre-conference workshop at the Early Hearing Detection and Intervention Conference, Atlanta, Georgia.

Hauser, P. C. (2010, June). *Understanding Deaf Culture: The Role of Deaf Cultural Capital*. 7th Indiana Deaf Educators and Educational Interpreters Conference, Indianapolis, Indiana.

Hauser, P. C. (2006, October). *Vocational rehabilitation for deaf and deaf-blind individuals with Attention Deficit-Hyperactivity Disorder*. Workshop offered to the Pennsylvania Annual Conference for Vocational Counselors for the Deaf, State College, PA.

Hauser, P. C. (2002, February). *ADHD and the Deaf Adult*. Workshop offered to Department of Counseling, National Technical Institute of the Deaf, Rochester, NY.

Hauser, P. C. & Isquith, P. K. (1999, May). *Learning disabilities in Deaf and Hard of Hearing children: A framework for assessment*. Co-presenter in a two-day workshop offered at the Bruton Conference for Professionals Serving Children with Hearing Loss, University of Texas at Dallas/Center for Communication Disorders, Dallas, Texas.

International Invited Presentations

Hauser, P. C. (2012, November). *How deaf children learn*. Örebro Deaf Association, Örebro, Sweden.

Hauser, P. C. (2012, November). *How deaf children learn*. Stockholm Deaf Association, Stockholm, Sweden.

Hauser, P. C. (2012, November). *How deaf children learn*. Norbotten Deaf Association, Umeå, Sweden.

Hauser, P. C. (2012, November). *How deaf children learn*. Västervik School, Lesand, Sweden.

Hauser, P. C. (2012, November). *How deaf children learn*. Härnösand School, Härnösand, Sweden.

Hauser, P. C. (2012, November). *How deaf children learn*. Göteborg Deaf Association, Göteborg, Sweden.

Hauser, P. C. (2012, November). *How deaf children learn*. Malmö Deaf Association, Malmö, Sweden.

Hauser, P. C. (2012, November). *How deaf children learn*. Department of Psychology, University of Copenhagen, Copenhagen, Denmark.

Hauser, P. C. (2012, November). *How deaf children learn*. Castberggaard School, Castberggaard, Denmark.

Hauser, P. C. (2012, September). *How deaf children learn*. Iceland Association for the Deaf, Reykjavik, Iceland.

Hauser, P. C. (2012, June). *How deaf children learn*. Assembly of Swedish Associations for the Deaf, Örebro, Sweden.

Hauser, P. C. (2012, May). *Is the Deaf Mind different from the Hearing Mind?* Sweden Association for the Deaf, Stockholm, Sweden.

Hauser, P. C. (2012, May). *Trends in Sign language assessment*. Department of Linguistics, Stockholm University, Stockholm, Sweden.

Hauser, P. C. (2009, November). *Impact of language on advanced cognitive control*. Charles University in Prague, Czech.

Hauser, P. C. (2009, November). *Why culture is important*. Charles University in Prague, Czech.

Hauser, P. C. (2009, November). *Plasticity in the deaf brain*. Charles University in Prague, Czech.

- Hauser, P. C. (2009, October). *Sign Language Assessment*. University of Haifa, Israel.
- Hauser, P. C. (2009, October). *Current trends in cognitive research on deaf individuals' memory processing*. University of Haifa, Israel.
- Hauser, P. C. (2008, October). *Language, Culture and the Brain*. University of Hamburg, Germany.

National Invited Presentations

- Hauser, P. C. (2013, October). *What parents and teachers need to know about how deaf children learn*. Department of Linguistics, University of Pennsylvania, Philadelphia, PA.
- Hauser, P. C. (2013, September). *Deaf cultural capital: What deaf individuals need for navigating life*. Department of Speech and Hearing Science, University of Illinois, Urbana-Champaign, IL.
- Hauser, P. C. (2013, March). *Impact of early language experience on the development of the executive functions*. Department of Linguistics, University of Texas-Austin.
- Hauser, P. C. (2012, July). *What parents need to know about deaf children*. The Learning Center, Framingham MA.
- Hauser, P. C. & Kurz, K. B. (2012, April). *Depiction Comprehension Test*. Workshop on Sign Language Assessment. Gallaudet University, Washington, D.C.
- Hauser, P. C. (2012, April). *American Sign Language-Sentence Reproduction Test*. Workshop on Sign Language Assessment. Gallaudet University, Washington, D.C.
- Hauser, P. C. (2012, March). *How Deaf Children Learn*. The Learning Center, Framingham MA.
- Hauser, P. C. (2011, November). *Deaf individuals' executive functioning*. Visual Language Summit, Center for Mind and Brain, University of California-Davis.
- Hauser, P. C. (2010, March). *Importance of Deaf Culture in Deaf Education*. Maryland School for the Deaf, Fredrick, Maryland.
- Hauser, P. C. (2010, February). *Role of Language Acquisition in Deaf Individuals' Executive Function Development*. Paper presented at the Department of Linguistics, University of New Mexico, Albuquerque, New Mexico.
- Hauser, P. C. (2010, February). *Fostering deaf students' acquisition of cultural capital and community cultural wealth*. New Mexico School for the Deaf, Santa Fe, New Mexico.
- Hauser, P. C. (2010, January). *Current trends in deaf research*. California School for the Deaf, Fremont, California.
- Hauser, P. C. (2009, December). *Role of cultural capital in deaf education*. California School for the Deaf, Fremont, California.
- Hauser, P. C. (2009, December). *Science, social justice and the deaf individual*. California School for the Deaf, Fremont, California.
- Hauser, P. C. (2009, October). *Deaf cultural capital*. Rochester School for the Deaf, Rochester, New York.

- Hauser, P. C. (2009, July). *Deaf knowledge: Identity and cultural capital*. Keynote address at the National Association of the Deaf Youth Leadership Camp, Portland, Oregon.
- Hauser, P. C. (2009, June). *Deaf Capital: Role of culture acquisition*. Keynote address at Deaf Youth USA conference, Ft. Collins, Colorado.
- Hauser, P. C. (2009, January). *The deaf child: Cognitive, linguistic and social development*. Paper presented at the Rochester School for the Deaf, Rochester, NY.
- Hauser, P. C. (2008, November). *Impact of deaf parents on students' perceived cognitive control*. Paper presented at the NSF Science of Learning Center on Visual Language and Visual Learning Presentation Series, Gallaudet University, Washington, DC.
- Hauser, P. C. (2008, February). *Impact of language on executive function development*. Invited presentation, Center on Mind and Brain, University of California-Davis.
- Hauser, P. C. & Paludneviciene, R. (2007, November). *American Sign Language Assessment: Formal versus curriculum based assessment*. Invited presentation, American Sign Language Round Table, Gallaudet University, Washington, DC.
- Hauser, P. C. (2001, November). *Neurolinguistics and psycholinguistics of signed languages*. Guest lecturer, Brain and Cognitive Sciences Program, University of Rochester.
- Hauser, P. C. (2002, 2001, 2000, August). *What happens when languages and cultures come in contact?* Presentation at Culture and Language Colloquium, Department of Graduate Studies and Research, Gallaudet University, Washington, DC.
- Hauser, P. C. (2001, April). *Deaf professional and hearing patient: How to work with interpreters in mental health settings*. Workshop offered to the Clinical Psychology, Counseling, and Sign Language Interpreting graduate programs at Gallaudet University.
- Hauser, P. C. (2001, March). *Neurolinguistics of American Sign Language*. Guest lecturer, American Sign Language Program, Keuka College, Keuka, NY.
- Hauser, P. C. (2000, February). *Deafness from legal, anthropological, linguistic, and psychological perspectives*. Psychology Rounds, Division of Psychology, Department of Psychiatry and Behavioral Sciences, University of Miami School of Medicine/Jackson Memorial Hospital, Miami, Florida.

Rochester Institute of Technology Presentations

- Hauser, P. C. (2014, March) *Creating a Three-Year Scholarship Plan*. Invited panelist, NTID Professional Development Lecture Series, National Technical Institute for the Deaf, Rochester Institute of Technology, Rochester, NY.
- Hauser, P. C., & Listman, J. (2012, May). *Communicating in International Sign*. Invited presentation offered to students of the Department of American Sign Language and Interpreter Education, National Technical Institute for the Deaf, Rochester Institute of Technology, Rochester, NY.

- Hauser, P. C. (2011, September). *Working with NTID Students: Insights from Research and Scholarship*. Invited presentation offered to NTID community, sponsored by the Office of the Vice President for Academic Affairs, Rochester Institute of Technology, Rochester, NY.
- Hauser, P. C. (2010, April). *Current Trends in American Sign Language Assessment*. Paper presented at the Department of American Sign Language and Interpreter Education, National Technical Institute for the Deaf, Rochester Institute of Technology, Rochester, New York.
- Hauser, P. C. (2010, April). *Why culture is important: Role of community cultural wealth in deaf education*. Paper presented at the ASL Lecture Series, National Technical Institute for the Deaf, Rochester Institute of Technology, Rochester, NY.
- Hauser, P. C. (2009, April). *The American Sign Language-Sentence Reproduction Test: Development and Implications*. Paper presented at the Department of Research and Teacher Education Brown Bag Lecture Series, National Technical Institute for the Deaf, Rochester, NY.
- Hauser, P. C. (2008, February). *Deaf college students' psychosocial development: Implications for Student Affairs*. Presentation to RIT Center for Campus Life and NTID Student Life Team staff, Rochester Institute of Technology, NY.
- Hauser, P. C., & Lukomski, J. (2008, January). *Deaf and hard of hearing college students' self-perceptions of their behavior regulation and metacognition*. Presented at the Department of Research and Teacher Education Brown Bag Lecture Series, National Technical Institute for the Deaf, Rochester, NY.
- Hauser, P. C. (2007, September). *Signing in public spaces*. Presented at the American Sign Language Lecture Series, National Technical Institute for the Deaf, Rochester, NY.
- Hauser, P. C., & Dollinger-Meyer, K. D. M. (2007, June). *Working with Deaf and Hard of Hearing Students*. Presentation given to Wallace Library Staff, Rochester Institute of Technology, Rochester, NY.
- Hauser, P. C. (2002, December). *Working with Interpreters in Non-Traditional Situations: the Deaf Professional and the Hearing Consumer*. Presentation sponsored by National Technical Institute for the Deaf Center on Employment, Rochester, NY.
- Hauser, P. C. (2002, March). *Current research on deafness and literacy*. Presented at American Sign Language Series, National Technical Institute of the Deaf, Rochester, NY.
- Hauser, P. C. (2001, September). *The sounds of English: How Deaf students use them to read*. Brown Bag Lecture Series, Center of Research, Teaching, and Learning, National Technical Institute for the Deaf, Rochester, NY.

JEREMIAH KIRKLAND

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SUMMARY OF QUALIFICATIONS

- Over 10 years of progressive leadership responsibility and work experience in both business and clinical areas of the healthcare
- Knowledgeable in sales/retail systems, hospital and health system financing
- Knowledgeable in hospital protocol and health system operations
- Oriented/Trained new employees; monitored distribution of work load
- Experienced in developing and implementing business/strategic plans
- Experience with implementation and selection of EMR (Epic)
- Very skilled in Microsoft Office

EDUCATION

Fall 07-Spr 09	Roberts Wesleyan College, 2301 Westside Dr., MS Health Care Administration	Rochester, NY 14624
Sept 08-Jan 09	University of Rochester Medical Center Patient Safety Certification	Rochester, NY 14627
Fall 03-Spr 07	SUNY Brockport, 350 New Campus Drive Bachelor's degree in Health Science with a concentration in Health Care Administration, Minor in Business Administration.	Brockport, NY 14420

**Successfully passed Board of Governors Exam through the American College of Healthcare Executives (FACHE Candidate)*

WORK EXPERIENCE

Sept 2013- Present	Clinical Innovations, Project Manager Rochester Regional Health System
Jan 2012-Jan 2014	Director of Women's Health Services (2 Hospitals, 4 Outpatient Clinics) Rochester General Hospital, 1425 Portland Avenue Rochester, NY 14621
Jan 2010- Dec 2011	Administrative Fellow to President & CEO Rochester General Hospital, 1425 Portland Avenue Rochester, NY 14621
Sept 2008- Dec 2011	Program Manager, External Healthcare Program (Human Resources) Rochester General Hospital, 1425 Portland Avenue Rochester, NY 14621
2007- 2007	Sales Associate/ Inventory Supervisor (Managerial responsibilities) Kaufman's/Macys, East Ridge Road, Rochester, NY 14621

TEACHING EXPERIENCE

- Jan 2014 Present **Clinical Professorship Appointment**
Rochester Institute of Technology, 11 Lomb Memorial Dr, Rochester, NY
- May 2014 - Present **Adjunct Faculty, Masters in Health Service Administration**
Rochester Institute of Technology, 11 Lomb Memorial Dr, Rochester, NY
- Nov 2010 -Present **Adjunct Faculty, Masters/Bachelors in Health Administration Program**
Roberts Wesleyan College, 2301 Westside Dr, Rochester, NY 14624
- Jan-May 2006 **Research Coordinator (Published Cancer research)**
SUNY Brockport, 350 New Campus Drive Brockport, NY 14420
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One of the courses I teach is Human Resource Management in the Masters of Science in Health Admin program. This course provides graduate level students with a framework for human resource decision-making, an understanding of employee development, appraisal and employee compensation, as well as the recruitment and retention process within health care organizations. This course familiarizes the student with the field of human resources management through an examination of the major components of labor law, collective bargaining, and labor relations. In addition, the course provides purposeful exploration of how strategic management of human resources creates value and delivers results in health care.

I also teach Healthcare Reimbursement Systems in the Masters/Bachelors program. Health Care Reimbursement Systems covers the current state of the health insurance industry and reimbursement for services in the United States. The status of managed care and its continuing evolution is examined in depth. Private and Public reimbursement structures and functions are studied in detail as well as application of reimbursement management principles.

These are only some examples of areas I have taught and feel comfortable sharing best practice in experience and operational work in the business of healthcare.

PROFESSIONAL EXPERIENCE

- ☐ Lead a team of physicians, nurses and mid-levels to become the areas first hospital designated as a Center of Excellence in Minimally Invasive Gynecology and #17 in the world to be so labeled
- ☐ Worked to lead and implement an international patient safety program in the area of Obstetrics across both hospitals and including private physicians
- ☐ Worked with legal counsel to establish contracts for physicians and services for the department of Ob/Gyn
- ☐ Acted as primary contact and lead representative for RGHS when negotiating teaching and service contracts for GYN Oncology at Roswell Park and Perinatal services with the University of Rochester
- ☐ Developed new marketing material and info to share with community leaders and providers
- ☐ Worked closely with community partners to start our journey to patient centered medical homes initiative
- ☐ Assist in the compilation and preparation annual grant application in a timely manner, meeting or exceeding New York State deadlines for filing.
- ☐ Research and attain sources of additional funding at the Federal, State and local level.

- ☐ Maintain communication with administrators, managers and directors involved with programs.
- ☐ Recommend projects and programs consistent with the Hospital's vision as related to community programs.
- ☐ Attend & Participate in Executive committee meetings as they relate to community programs
- ☐ Attend and participate in monthly Steering Committee Meetings and quarterly Advisory Committee Meetings
- ☐ Communicate and assist in the implementation of similar community projects at other health care facilities.
- ☐ Represent Rochester General Hospital at meetings on the Local, State and National level.
- ☐ Community Outreach
- ☐ Coordinated the United Way Campaign for Rochester General Health System (raised close to 200k).
- ☐ Team leader/Supervisor of Inventory and vendor processing in retail stores
- ☐ Implemented efficiency and quality assurance procedures when conducting inventory
- ☐ Internship w/Deb Stamps, in which I assisted in the development of a business plan and RFP to implement a Central Fetal Monitoring System at Rochester General Hospital.
- ☐ Coordinated and supervised "School to Work" students to assist with annual "Help Poverty" food drive. Through this we obtained over 1500 perishable goods and 2000 clothing items for the Rochester community.
- ☐ Over 1000 hours volunteer experience in schools and Non-profit organizations

Additional Experience in Healthcare Leadership

- ☐ Coordination and development of community outreach/education session on healthcare reform for physicians and healthcare professionals.
- ☐ Launched multiple customer service initiatives to gain customer feedback and increase patient satisfaction scores
- ☐ Assisted with the coordination and distribution of patient safety culture assessment surveys delivered to the system
- ☐ Reviewed and actively participated in contract negotiations for renewal of Neurology services for RGHs and URMC
- ☐ Coordinated and assisted in the development of the United Way Campaign for the health system.
- ☐ Organized off-site benchmark visits and developed Continuous PI and Lean Six Sigma benchmark model for Rochester General health System (Sentra Health System, Virtua Health, and Cleveland Clinic to name a few)
- ☐ Recommended methodology for reorganizing procedures and on-boarding services with the Human Resources department
- ☐ Coordinated and assisted in the development of a system-wide health and wellness initiative (Bat Well, Live Well) and walking program
- ☐ Developed surveys and conducted interviews with Primary Care Physicians to assess the current state of our PCP population and make suggestion for strategic planning moving forward

- Wrote and managed submission of multiple research/white papers around the HCR, Primary Care, Health and Wellness, Successful Urgent Care, CPI using Lean Six Sigma, etc...
- ☐ Worked with Navigant Consulting LLC to develop an update for redefining the STARK service areas and strategically reviewing PSA/SSA.
- ☐ Worked with VP of operations to collect pertinent and significant data for a regional survey on meeting the community need regarding patient care services.
- ☐ Assisted in the operating budget and researched reimbursement analysis for capital expansion projects
- ☐ Developed electronic surveys and mailing distribution list for physicians
- ☐ Recommended and implemented improvement in multiple areas within RGH through ideation process
- ☐ Collaborated with senior leadership to developed an improvement plan for primary care
- ☐ Updated Professional Services Agreement between Rochester General Hospital and Rochester City School District
- ☐ Assisted Joint Commission surveyor and acted as a site -liaison for the time spent on-site for the reaccreditation process

MEMBERSHIPS

American College of Healthcare Executives (FACHE Candidate), United Way cabinet leader, National Honors Society, Alpha Phi Alpha support group, Board member for college culture diversity (promotion of events and networking), Head Start volunteer, McNair Scholar, Senior Scholar, Support Student Services (SSSP) Tutor, Mentor for R.I.T., Brockport and Roberts Wesleyan College Students interested in Healthcare leadership and Mentor for Rochester City School Youth Program.

REFERENCES

Dr. William Walence, Director of Health System Administration
Rochester Institute of
Technology
585-943-4939

Dr. Abraham Lichtmacher FACOG Chief
of Women's Health Services
Lovelace Health System
(505) 263-9398

Debbie C. Stamps, Ed, MS, RN, GNP, CNA, BC
Chief Nursing Officer
Newark Wayne Community Hospital (affiliate
of Rochester General Health System)
(315) 359-2684

Degrees:

PhD Education, York University, Faculty of Education	2012
M. Ed. York University, Faculty of Education	2005
M.A., Gallaudet University, Developmental Psychology	1988
B.A., Carleton University, Psychology	1987

Certification and Credentials

Certificate of ASL-English Interpretation (COI)	
Association of Visual Language Interpreters of Canada (AVLIC)	1992

Professional Experience

Assistant Professor, American Sign Language Interpreting Education, National Technical Institute for the Deaf	currently
Professor, Communications George Brown College, Toronto	2010-2012
Professor, ASL - English Interpreter Program George Brown College, Toronto	1999 - 2010
Teaching Assistant, Models and Foundations York University, Faculty of Education	2007 - 2009
Instructor (contract) - Sign Language Interpreter Program (on site and via videoconferencing) Academy Canada, St. John's, New Brunswick	2001
Counselor/Coordinator/Professor Deaf and Hard of Hearing Services ASL - English Interpreter Program George Brown College, Toronto	1996 - 1997
Manager and ASL-English Interpreter Teacher Preparation Programme in the Education of Deaf and Hard of Hearing Students York University, Faculty of Education, Toronto, Ontario	1991 - 1996
Staff Interpreter and Teacher's Aide Ministry of Education, Ernest C. Drury School for the Deaf Milton, Ontario	1989 - 1991

Senior Instructor, IMPACT – ASL Programme Canadian Hearing Society	1988 – 1989
Teaching Assistant, Graduate Statistics Course School Psychology Program, Gallaudet University	1987 – 1988
Supervisor, Independent Study Course, Introduction to Psychology Gallaudet University, Washington	1988

Publications Refereed Since Last Promotion by RIT/NTID

- McDermid, C. (in press). A pragmatic, multi-dimensional model of the interpreting process. *Gallaudet Symposium Selected Papers, Vol 1*.
- McDermid, C. (2014). Evidence of a hearing dialect of ASL? *Journal of Interpretation* 23(1), 1-25
- McDermid, C. (2014). Cohesion in ASL to English simultaneous interpreting. *Journal of Translation and Interpretation*, 6(1), 76-101
DOI: [10.60201.2014.a05](https://doi.org/10.60201.2014.a05)

Publications Refereed (continued)

- McDermid, C. (2011). Language Identity in a Multicultural Canada: The Case of Deaf Canadians. In M. O. Parker and A. D. Petrov (Eds.), *Encyclopedia of Sociology Research (Volume 3)* (pp. 721-756). Hauppauge, NY: Nova Sciences Publishers, Inc. [reprint]
- Buccieri, K., McDermid, C. & Mannette, J. (2011). Not only the sorcerer's apprentice: Re-conjuring the Ph.D. *Journal of Teaching and Learning*, 7(2), 11-23.
- McDermid, C. (2010). Culture brokers, advocates, or conduits: Pedagogical considerations for Deaf interpreter education. *International Journal of Interpreter Education*, 2, 76-101.
- McDermid, C. (2009). Two cultures, one program: Deaf professors as subaltern? *Deafness & Education International*, 4(1), 221-249. DOI: [10.1002/dei](https://doi.org/10.1002/dei)
- McDermid, C. (2009). The ontological beliefs and curriculum design of Canadian interpreter and ASL educators. *International Journal of Interpreter Education*, 1, 7-32.
- McDermid, C. (2009). Language identity in a multicultural Canada: The case of Deaf Canadians. In L. B. Kerwin (Ed.), *Cultural Diversity: Issues, Challenges and Perspectives (pp. 1-36)*. Hauppauge, NY: Nova Sciences Publishers, Inc.
- McDermid, C. (2009). Social construction of ASL-English Interpreters. *Journal of Deaf Studies and Deaf Education*, 14(1), 105-130.
- McDermid, C. (2006). Applying what we know through translation and note taking. In E. M. Maroney (Ed.) *A New Chapter in Interpreter Education: Accreditation, Research and Technology: Proceedings of the 16th National Convention Conference of Interpreter Trainers* (pp. 75 – 86). Conference of Interpreter Trainers.

- McDermid, C. (2000). *Reading Miscue Inventory*. In D.-C. Belanger, N. Smith and M. West (Eds.) *AVLIC '98 at the turn of the century: research and practices in interpretation* (pp. 78 – 82). Edmonton, Alberta: Association of Visual Language Interpreters of Canada.
- Boldrini, G. & McDermid, C. (2000). College or university: where do we belong? In D.-C. Belanger, N. Smith and M. West (Eds.) *AVLIC '98 at the turn of the century: research and practices in interpretation* (pp. 17 –22). Edmonton, Alberta: Association of Visual Language Interpreters of Canada.

Submitted Publications Since Last Promotion (awaiting acceptance)

- McDermid, C., Finton, L. & Chasney, A. Contextualized recognition of fingerspelled words, *Journal of Interpreting*. Empirical study submitted and major revisions requested by editor.
- McDermid, C. *Paraphrasing for Students of ASL-English Interpretation*. Workbook, submitted to RIT press.
- McDermid, C. & Harding, A. *Translating between ISL and English: A multi-dimensional model of meaning*. Abstract submitted to WASLI conference (2015).
- McDermid, C., Houkes, I., Holcombe, K. & Collward, C. *Human Rights for Deaf People: The impact of Groupthink within interpreter cohorts*. Abstract submitted to the World Association of Sign Language Interpreters conference, Turkey (2015).
- McDermid, C. & Harding, A. *Different But Equal Systems of Implying and Inferring: The case of Deaf and hearing language users*. Abstract submitted to the International Congress of the Education of the Deaf, Greece (2015).

Non-Refereed Publications

- McDermid, C. (2012). *Adult second language pragmatic enrichment: The case of ASL*. (Doctoral Dissertation). Proquest Dissertations and Theses Full Text (No. NR92815).
- McDermid, C. (2010). Triggering Skopos and entailments: Creating meaning in target texts. *RID Views*, 35-37.
- McDermid, C. (2008). *Brief history of Canadian ASL-English Interpreting*. Toronto, Canada: York University. (Eric Document Reproduction Service No. ED 502 281)
- McDermid, C. (2005). *Investigation of Canadian ASL-English interpreter education programs*. M.Ed. dissertation, York University (Canada), Canada. Dissertations & Theses @ York University database. (Publication No. AAT MR11854).
- McDermid, C. (2001). The evaluation of interpreters. *Deaf Canada Today*. 4(1). 9.
- McDermid, C. (2000). Signer of interpreter? *Deaf Canada Today*. 3(8). 12.
- McDermid, C. (1999). *ASL-English Interpreter Program at George Brown College Web Site*. George Brown College: Toronto. <http://faculty.georgebrown.ca/~cmcdermid/>
- McDermid, C. & Ball, L. (1998). *Consortium on Communication in Education Conference Proceedings*. George Brown College: Toronto.

- McDermid, C. (1997). *Support Services at George Brown College: Student Manual*. George Brown College: Toronto.
- McDermid, C. (1995, Spring). Report on the Joint Committee on Interpreting in Mental Health Settings: Canadian Hearing Society Peel, Sheridan College. *OASLI Network*, 7.
- McDermid, C. (1994, Spring). Viewpoint - Code of Ethics. *AVLIC News*, 10(1), 10.
- McDermid, C. (1993, Fall). "Support '93" - Association of Canadian Educators of the Hearing Impaired (ACEH/ACEDA) Biennial Conference. *AVLIC News*, 9(3), 14.
- McDermid, C. (1992, March). In support of traditional theories regarding interpreters. *OASLI Network*, 1.
- McDermid, C. (1992, March). Educational interpreting: Into the 1990s. A Review of the Proceedings. *OASLI Network*, 4 - 5.
- McDermid, C. (1992, Spring). Article review: The fiduciary relationship: The legal basis for social workers' responsibilities to clients. *AVLIC News*, 9 - 10.
- McDermid, C. (1991, February). Interpreters in educational settings. *OASLI Network*, 3 - 4.

Invited Conference Presentations and Poster Sessions Since Last Promotion

- McDermid, C. & Finton, L. (2014, October, accepted). Contextualized recognition of fingerspelled words in ASL. Poster session at *Our Roots: The Essence of our Future*. Conference of Interpreter Trainers, Portland, Oregon.
- McDermid, C. (2014). Creating cohesion across languages. *International Symposium on Signed Language Interpretation and Translation Research*. Gallaudet University, Washington, DC.
- McDermid, C. (2014). Do non-native speakers have a "hearing dialect" while interpreting? *International Symposium on Signed Language Interpretation and Translation Research*. Gallaudet University, Washington, DC.
- McDermid, C. (2014). A pragmatic multi-dimensional model of the interpreting process. *International Symposium on Signed Language Interpretation and Translation Research*. Gallaudet University, Washington, DC.
- McDermid, C. & Finton, L. (2014). Contextualized recognition of fingerspelled words. Poster session at the *International Symposium on Signed Language Interpretation and Translation Research*. Gallaudet University, Washington, DC.
- McDermid, C. (2013). *A pragmatic model of language interpretation*. Critical Link 7, Glendon College, Toronto.
- McDermid, C. (2013). *Functional or Formal Message Equivalency in Educational Interpreting? A model of three levels of meaning*. Educational Support Services Personnel Annual Conference, Rome, NY.
- McDermid, C. (2013). *Bilingual Approach to Teaching English Articles*. Council of American Instructors of the Deaf Conference, Rochester.
- McDermid, C. (2013). *Conceptualizing Message Equivalency and Fidelity: How do educational interpreters convey meaning?* Council of American Instructors of the Deaf Conference, Rochester.
- McDermid, C. (2013). *English Articles and ASL*. California Educators of the Deaf and Hard of Hearing Conference, Marina Del Rey, California.

- McDermid, C. (2012). Conceptualizing Message Equivalency: Pragmatic considerations for English – ASL interpreters. Presentation at Creativity & Collaboration: Shaping Our Future, AVLIC 2012 Conference, Calgary.
- McDermid, C. (2012). *English Pragmatics for Hearing Learners of ASL*. Presentation at Embracing the Visual World Through Deaf Children's Eyes, California Educators of the Deaf and Hard of Hearing Conference, Monterey.

Invited Conference Presentations and Poster Sessions (continued)

- McDermid, C. (2010). *Are You Signing What You Think You Are? Miscue Analysis and Language Fluency*. Presentation at The Spirit of Interveners: Sharing the Torch of Knowledge Conference, Toronto.
- McDermid, C. (2010). *Two Cultures. One Programme: Deaf professors as subaltern?* Critical Disability Studies, Graduate Student Conference, York University.
- McDermid, C. (2009). *Differentiating Language Fluency and Cognitive Processing Through Miscue Analysis*. Presentation at Embrace Change – Honor Tradition, RID National Conference, Philadelphia.
- McDermid, C. (2009). *Conversational Implicature: Decreasing the Foreignization of Interpretation*. Presentation at Embrace Change – Honor Tradition, RID National Conference, Philadelphia.
- McDermid, C. (2009). *Two Cultures. One Program: Deaf Professors as Subaltern?* Presentation at Embrace Change – Honor Tradition, RID National Conference, Philadelphia.
- McDermid, C. (2009). *AEIP Instructors' Wisdom on Deaf Interpreters*. Paper presented at Embrace Change – Honor Tradition, 2009 RID National Conference, Philadelphia.
- McDermid, C. (2009). *The Grand Narrative of Hearing and the Disability Inscription of Deaf Instructors of ASL*. Paper presented at Provoking Curriculum Studies Conference, Ottawa University.
- McDermid, C. (2008). *Two Cultures. One Program*. Paper presented at the Association of Visual Language Interpreters of Canada biennial conference, St. John's, NL.
- Buccieri, K., McDermid, C., & Mannette, J. (2008). *Not Only the Sorcerer's Apprentice: Re-conjuring the PhD*. Paper presented at the Provoking Research, Provoking Communities Conference, University of Windsor.
- Buccieri, K., McDermid, C., & Mannette, J. (2008). *Not Only the Sorcerer's Apprentice: Re-conjuring the PhD*. Paper presented at the Praxis in Communities, Communities in Praxis, Seventh Annual York University Graduate Conference in Education, Toronto.
- McDermid, C. (2006). *Review of ASL-English Interpreter and Deaf Studies Programs in Canada*. Poster session, Conference of Interpreter Trainers biennial conference, San Diego, California.
- McDermid, C. (2000). *Improving Visualization Through Note-taking*. Presentation to Parents, Resources, Interpreters, Deaf People, and Educators (PRIDE) conference, Las Vegas, 2000.

- McDermid, C. (2000). *Reading Miscue Inventory*. Presentation to the Association of Visual Language Interpreters of Canada biennial conference, Montreal.
- McDermid, C. (1999). *Reading Miscue Inventory*. Presentation to the Alberta Chapter - Registry of Interpreters for the Deaf, biennial conference, Edmonton, 1999.
- McDermid, C. (1997). *Levels of Processing and Tips on Using Video Resources*. Presentation to the Florida Registry of Interpreters for the Deaf, Clearwater, FL.
- McDermid, C. (1997). *Miscue Analysis*. Presentation to the Registry of Interpreters for the Deaf, biennial convention, Long Beach California.
- McDermid, C. (1996). *Miscue Analysis and sign language interpreters: A preliminary examination of more holistic assessment tools*. Paper presented to the Registry of Interpreters for the Deaf Region IV Conference, Colorado.
- McDermid, C. (1995). *The disempowering effects of discourse style differences in administrative structures*. Paper presented to the International Issues in Interpreting Conference, Durham, England.
- McDermid, C. (1993). *Support services at York University*. Poster session, Association of Canadian Educators of the Hearing-Impaired, Annual General Meeting, Montreal.
- McDermid, C. (1988). *Literacy and Deaf adults*. Paper presented to Ontario Institute for Studies in Education Graduate Student Forum, Toronto.

Invited Presentations Since Last Promotion

- "A contrastive linguistic examination of ASL and English: What every second language user should know." Presentation to Communication Studies and Services Department (CSS), NTID (2014).
- "Functional Equivalence and Breaking from Form: Truly your best friend forever." Presentation to the Pennsylvania Registry of Interpreters for the Deaf, annual conference (2014).
- "Functional of Formal Message Equivalency? A model of three levels of meaning." Presentation to educational interpreters, Boards of Cooperative Educational Services (BOCES), Munroe (2014).
- "Explication hypothesis and cohesion between ASL and English simultaneous interpretation." Presentation to the Department of Access Services (DAS), RIT, Rochester, 2014.
- "Conceptualizing Message Equivalency: A model of meaning at three levels." Presentation to Department of Access Services (DAS), RIT, Rochester, 2012.

Invited Presentations (continued)

- "Adapting the Mainstream to the Needs of Deaf Students." Presentation to the Itinerant Teachers of Southern Ontario (ITSO), Milton, Ontario, 2009.

"Interpreting and translating in K – 12 settings." Presentation to the staff interpreters, Toronto District School Board, Toronto, Ontario, 2009.

"Implicature and ASL." Presentation to teachers and resource staff, Robert's School for the Deaf, London, Ontario, 2008.

"Improving English to ASL translation." Presentation to the Intervener Organization of Ontario, Toronto, 2006.

"Educational Interpreting – Meaning or Form?" Presentation to the Durham Board of Education, Durham, 2005.

"Linguistic Expansions in American Sign Language." Presentation to the Ontario Association of Sign Language Interpreters, Toronto, 2005.

"Ethical Behaviours and Sign Language Interpreters." Presentation to Interpreting Services of Newfoundland and Labrador, St. John's, 2004.

"Levels of Processing for Interpreters." Presentation to Teacher Preparation Programme in the Education of Deaf and Hard of Hearing Students, York University, 1999.

"George Brown College: Deaf and Hard of Hearing Services." Presentation to Ontario College Counselors, Ottawa, 1997.

"Levels of Processing and Diagnostics for Sign Language Students." Presentation to the York University Teacher Preparation Program in the Education of Deaf and Hard of Hearing Students, Milton, 1997.

"Levels of Processing and Diagnostics for Interpreters." Presentation to Sir Sandford Fleming College, Peterborough, 1997.

"Miscue Analysis and Sign Language Interpreters: A preliminary examination of more holistic assessment tools." Presentation to the Sign Language Interpreters of the National Capital, Ottawa, 1996.

"Levels of Processing and Diagnostics for Sign Language Students." Presentation to the York University Teacher Preparation Program in the Education of Deaf and Hard of Hearing Students, Toronto, 1996.

"Interpreters in Educational Settings: Levels of Processing and Discussion of Relevant Documentation." Presentation to the Ontario Association of Sign Language Interpreters, Toronto, 1996.

"Levels of Processing." Presentation and diagnostic assessment for George Brown College, Toronto, 1996.

"Noun/Verb Agreement While Interpreting - English to ASL." Presentation to Sign Language Interpreter Training Program, Sheridan College, Brampton, 1995.

"When Cultures Meet: Conflict/Mediation/Resolution." Guest panelist, 14th Annual Conference, Ontario Council on Deaf Mental Health Issues, Toronto, 1994.

"Role of Interpreters within Post Secondary Institutions." Presentation to Sign Language Interpreter Training Program, Sheridan College, Brampton, 1993.

"Computer Bulletin Boards: Disability Information Services of Canada." Presentation to Oshawa Deaf Centre, Oshawa, 1992.

"Role of Sign Language Interpreters." Presentation to Oshawa Deaf Centre, Oshawa, 1991.

Honours

Nomination by York University, Faculty of Education, for the Governor General's Dissertation Prize award, 2012.

Live It Up! Award, (Lives the Academic Strategy) George Brown College, 2007.

Outstanding Instructor, Ontario Association of Sign Language Interpreters, 2005.

Letter of Appreciation, Silent Voice Canada, 1996, 1997, 1998.

Certificate of Appreciation, Association of Visual Language Interpreters of Canada (AVLIC), 1990, 1992, 1994, 1996, 2002, 2005, 2006.

Certificate of Appreciation, Ontario Association of Sign Language Interpreters (OASLI), 1996, 2005.

Book Award, OASLI, 1993.

Book Award, AVLIC '90 Planning Committee, 1990.

Committee Work and Representation Since Last Promotion

Hiring Committee, member, American Sign Language Interpreting Education Department (ASLIE), tenure and lecturer positions (currently).

Master's Thesis Committee, Kathleen Holcombe, Western Oregon University Interpreter Education Program (currently).

Curriculum Committee, member, ASLIE (currently).

Department Culture, Values and Mission Statement, ASLIE 2014.

Local Area Committee, Scientific Committee, and Sign Language Interpreter Coordinator, Critical Link 7, Glendon College, Toronto, Ontario, 2013.

Technology in the Classroom Committee, member, ASLIE, 2012-2013.

Committee Work and Representation (continued)

Graduate Student Conference on Deaf Education and ASL, co-chair, 2009, 2012.

Ministry of Community and Social Services, Provincial Review of Sign Language Interpreting Services Committee, representative for the Ontario Association of Sign Language Interpreters, 2005 and 2007.

Association of Visual Language Interpreters of Canada, consultant, production of new national certification test materials, 2004 to 2005.

Toronto Association of Visual Language Interpreters, co-founder and past president, 1998 to 2002.

Toronto Board of Education hiring committee for staff ASL-English interpreter, consultant, 2002.

ASL Club, George Brown College, faculty advisor 2000 to 2005.

ASL-English Interpreting Program Alumni, George Brown College, faculty advisor, 2000 to 2002.

Consortium on Communication in Education, coordinator for a national conference for support service providers, Toronto, 1997 and 1999.

Staff Interpreter Hiring Committee, committee member for the Ministry of Education, Bermuda, 1998.

Sign Language Interpreter Summer Training Series, coordinator and teacher for the Ministry of Education, Bermuda, 1997 to 1998.

Ontario Interpreter Services, consultation in creation of provincial assessment protocol for sign language interpreters, Toronto, 1996 to 1997.

Metro Separate School Board, Toronto, consultant, 1995.

CURRICULUM VITAE

Campbell McDermid, PhD, COI
Assistant Professor, ASLIP, NITD
cammas@rit.edu

Bob Rumball Center for the Deaf, Toronto, consultant, 1995.

Provincial Committee on Interpreters in Mental Health Settings, representative for Ontario Association of Sign Language Interpreters (OASLI), 1995.

Loyalist College, Belleville, consultant 1994, 2009.

Ontario Association of Sign Language Interpreters (OASLI), vice-president 1993 to 1994.

Provincial Directory of Sign Language Interpreters, chair, Ontario Association of Sign Language Interpreters (OASLI), 1992 to 1994.

Sign Language Instructors of Canada Evaluation, proctor for the Canadian Cultural Society of the Deaf, 1994.

"Self Directed Study for Interpreters" videotape series produced by the Association of Visual Language Interpreters of Canada (AVLIC), interpreter model, 1994.

Association of Visual Language Interpreters of Canada (AVLIC) Canadian Evaluation System Certificate of Interpretation (C.O.I.), rater, 1993 to 1997.

Newsletter Editor, the Association of Visual Language Interpreters of Canada (AVLIC), 1992 to 1993.

Ontario Ministry of Education committee to examine the role and working conditions of sign language interpreters in educational settings, representative for the Association of Visual Language Interpreters of Canada (AVLIC), 1990.

Fund-raising Chair, the Association of Visual Language Interpreters of Canada (AVLIC), 1988 to 1992.

Special Education Advisory Committee (S.E.A.C.), representative for the Canadian Hearing Society to the Toronto Board of Education, 1988 to 1989.

Graduate Student Association, Gallaudet University, President, 1987 to 1988.

Gallaudet University, representative for the Graduate Student Association committee to select the seventh president of Gallaudet University, 1988.

Professional Memberships

World Association of Sign Language Interpreters
Council of American Instructors of the Deaf (CAID)
Genesee Valley Region Registry of Interpreters for the Deaf (GVRRID)

19 of 12

Conference of Interpreter Trainers
 Association of Visual Language Interpreters of Canada (AVLIC)
 Registry of Interpreters for the Deaf

Grants Since Last Promotion

Scholarship Portfolio Development Initiative (SPDI) grant (\$9,600), co-author with Kim Kurz, Lynn Finton, Kevin Williams and Peter Häuser for a certificate program in educational interpreting (August, 2014)

Mini-Grant Travel (\$300) to attend and present at the International Symposium on Signed Language Interpretation and Translation Research (Gallaudet University, March 2014)

International Travel Grant (\$300) to attend and present at Critical Link 7 (York University, December 2012)

Faculty Evaluation and Development grant (FEAD) (\$1,400) with Lynn Finton to support an undergraduate student assistant and a study on fingerspelling (November, 2012)

Mini-Grant Travel (\$500) to attend the biennial conference of the Conference of Interpreter Trainers (CIT), (October, 2012)

Grants (continued)

Ontario Graduate Scholarship (OGS) (\$15,000, declined) (2009)

Entrance Scholarship, York University (\$4,000.00) (2007)

Summer Student Employment Program through Human Resources and Development Canada (approximately \$3,000.00 per annum) (1999, 2000, 2001)

George Brown College (\$7000.00), funding to Consortium on Communication in Education, (1997)

Educational Support Services (ESS) (\$4,700.00) for funding to Consortium on Communication in Education (1997)

Author and Coordinator, Program for the Development of Official Languages Services, Department of the Secretary of State of Canada; five year proposal for funding to the Association of Visual Language Interpreters of Canada for translation services (matching grants), 1988 to 1992 (in excess of \$30,000)

Compaq Canada (approximately \$1,500.00), computer equipment donation (laptop) to the Association of Visual Language Interpreters of Canada (1991)

Fundraising Efforts Since Last Promotion

Fundraising workshop for Discovering Deaf Words (2013) (\$1,000.00)

Donation to Critical Link 7, Gold Level Sponsor, Ontario Interpreting Services (2013) (\$5,000)

Fundraising Efforts (continued)

Donation to the AVLIC 2008 conference committee (\$500.00)

Donation to the AVLIC 2006 conference committee (\$1,000)

Co-Founder, scholarship for students of interpretation on behalf of the Toronto Association of Visual Language Interpreters, 2000 and 2002 (\$500.00 per annum)

Fundraising Chair, the Association of Visual Language Interpreters of Canada, 1992 (approximately \$1,000 raised)

Kathy Miraglia, M.S., C.S.C.
Department of American Sign Language and Interpreting Education
National Technical Institute for the Deaf
52 Lomb Memorial Drive
Rochester, NY 14623-5604
kamrns@ntid.edu

Academic Qualifications:

M.S., Career and Human Resource Development, 1999, Rochester Institute of Technology, Rochester, NY. Thesis project: Mental Health Interpreting: A Mentored Curriculum

Interpreter Training Program, 1980, University of Arizona at Tucson

B.S. Therapeutic Recreation, 1977, State University of New York at Brockport

Professional Positions:

- **Healthcare Program Coordinator/Lecturer** - American Sign Language & Interpreting Education Department, National Institute for the Deaf, Rochester, NY. Teaching courses in Healthcare Interpreting, Mental Health Interpreting and Skill Development in the BS Interpreting Program as well as the Program Director for the newly created "Certificate in Healthcare Interpreting".

August 2009 - present

- **On Call Interpreter**, University of Rochester Medical Center, Rochester, NY.

2009 – present

- **Manager of Interpreting Services**, University of Rochester Medical Center, Rochester, NY. Provided oversight and management for a staff of 32 sign and spoken language interpreters. Provides leadership and direction to ensure needs of the Limited English Proficient (LEP) population are met throughout the Strong Health System and the University.

1986-2009

Principle Investigator, Robert Wood Johnson Foundation Grant – "Speaking Together"
Led an eighteen month National Learning Collaborative Grant to develop best practices for the delivery of Language Access Services in hospital settings.

2006-2008

Project Manager, Strong Connections Videoconference Interpreter Program,
University of Rochester Medical Center, Rochester, NY. (Part-time)
Managed the development of a not for profit entity of the University of Rochester

providing remote sign language interpretation to hospitals throughout the country using videoconference technology

2000-2009

- **Adjunct Faculty**, Rochester Institute of Technology N.T.I.D. teaching "Introduction to Healthcare Interpreting" 2006 - 2009
- **Video Relay Interpreter**, Sorenson Relay Service, Rochester, N.Y. 2006 - 2014
- **Special Education Teacher/Interpreter**, Brown School Treatment Center, Austin, TX. 1980-1985
- **Community Interpreter**, Travis County Services for the Deaf, Austin, TX. 1980-1985
- **Recreation Therapist**, Texas School for the Deaf, Austin, TX. 1977-1980

Communication Competence

National Registry of Interpreters for the Deaf, Comprehensive Skills Certificate (CSC) 1986
Description retrieved from website, www.nid.org Holders of this full certification have demonstrated the ability to interpret between American Sign Language (ASL) and spoken English, and to transliterate between spoken English and an English-based sign language. Holders of this certification are recommended for a broad range of interpreting and transliterating assignments.

Contributions to the Community

2009-present

- Community Board Advisor to the University of Rochester's Deaf Health Pathway Program 2008 - 2013
- Director on the Board of Genesee Valley Registry of Interpreters for the Deaf (GVRRID) 2009 - 2013
- Local Advisory Board Member of the National Center for Deaf Healthcare Research 2009 - present
- Board Member Advocacy Services for Abused Deaf Victims (ASADV) 2013 - present
- Volunteer interpreter annually at the Finger Lakes Deaf Health Fair, Rochester N.Y.

- Volunteer interpreter annually at the Woman's' Health Fair, Rochester N.Y.

Contributions to the Institute

2009-present

- Task Force Member - Healthcare Careers for the Deaf and Hard of Hearing Community 2009 – 2012
- Committee Member NTID's Healthcare Commission 2012 – present
- Presented to the Department of Access Services (DAS) on "Professional Supervision for Interpreters", Fall 2010
- Conducted supervision sessions with DAS interpreters throughout the 2010 academic year
- Established a relationship with RIT's Physician's Assistant program and lecture to their students on "The Healthcare Provider and Interpreter – Healthy Partnerships" annually
- Provide ongoing clinical supervision to the fulltime sign language interpreter in RIT's Student Health Center
- Provide observation/supervision opportunities to our BS students in medical/psychiatric settings at the University of Rochester Medical Center (approximately 120 individual observations per year).
- Served on ASLIE's search committee for a new tenure track interpreting faculty position in 2013
- Provide supervision sessions to our B.S. students via the Student Interpreter Association throughout each academic year.
- NTID's Job Fair - supervise student interpreters annually
- Deaf Swimming Olympic Competition RIT January 2014 – served as a volunteer interpreter
- RIT Imagine Festival 2014 – volunteered to man the ASLIE booth

Professional Activities

2009-present

Presentations – State/ Local

- Provided a workshop on “Interpreting in the Emergency Room” via Genesee Valley Interpreters for the Deaf, Rochester New York , December 2012
- Provided a workshop on “Interpreting in Healthcare” at Deaf Adult Services in Buffalo, NY February 2014
- Provided a workshop on “Healthcare Interpreting” via Pennsylvania Interpreters for the Deaf, March, 2014

Presentations – National

- Presented at the International Medical Interpreters Association Trainers Symposium on “ASL Healthcare Interpreter Education”, May 2012, NYC
- Presented two different sessions at the National Symposium on Healthcare Interpreting: “Task Force on Healthcare Careers for the Deaf and Hard of Hearing Community” and “NTID’s Certificate in Healthcare Interpreting” July 2012, CATIE Center, Minnesota.
- Presented a Poster on the “NTID’s Certificate in Healthcare Interpreting” program at the Conference of Interpreter Trainers Convention, October 2012, North Carolina
- Consultation provided to the CATIE Center, one of six federally funded centers of the National Consortium of Interpreter Education Centers (NCIEC) on the development of an annotated bibliography categorized following the domains and competencies for medical interpreters

Professional Development

Conferences and courses attended 2009 – present

- Attended the Empire Justice Center’s training on “Language Access: The Rights of Limited English Proficient Deaf and HOH Patients in New York”, December 2009 Rochester, NY
- Attended the Conference of Interpreter Trainers Convention, October 2010, Texas
- Attended RIT’s Faculty Institute on Teaching and Learning, May 2011

- Attended the Association of Medical Professionals with Hearing Loss (AMPHIL) conference in Portland Or, August 2011
- Took “Essentials of Online Teaching”, 2012 RIT’s Wallace Center
- Attended the Conference of Interpreter Trainers Convention, October 2012, North Carolina
- Attended the Distance Learning in Interpreter Education: Design, Delivery and Integration Conference, November 2012, Utah
- Took “Fundamentals of Online Course Design”, 2013 RIT’s Wallace Center

Curriculum Development

- Mental Health Interpreting: A Mentored Curriculum, Project Coordinator/Text Author with Dr. Robert Pollard at the University of Rochester Medical Center
- Introduction to Healthcare Interpreting – designed course and curriculum for this ASLIE Interpreting elective
- Introduction to Mental Health Interpreting – designed course and curriculum for this ASLIE Interpreting elective
- Certificate in Healthcare Interpreting – designed program and curriculum for the 9 month 160 hour training in healthcare interpreting

Internal Documents and Reports

- Proposal to create a Certificate in Healthcare Interpreting, 2010
- Conducted a survey and PowerPoint presentation for the Healthcare National Taskforce on Designated Healthcare Interpreting, 2011
- Concept paper for a M.S. Degree in Healthcare Interpreting, 2014 (in collaboration with ASLIE faculty)
- Currently writing the full proposal for the M.S. in Healthcare Interpretation, fall 2014

SCOTT RICHARD SMITH

PERSONAL

Home Address: 614 Cedarwood Terrace
Rochester, NY 14609

Home Email Address: srsmithmd@rochester.rr.com

Office Address: University of Rochester School of Medicine and Dentistry
Saunders Research Building
Box 708
265 Crittenden Blvd.
Rochester, NY 14642

Office Telephone: (585)-275-0560

Fax: (585)-424-1469

Office Email Address: scott_smith@urmc.rochester.edu

DOB: 02/03/1970

Place of Birth: Winston-Salem, North Carolina

Citizenship: United States of America

EDUCATION AND POST-DOCTORAL TRAINING

Tufts Floating Hospital for Children	Development-Behavioral Pediatrics	2004
MGH Hospital for Children	General Academic Pediatrics	2002
Harvard School of Public Health	Clinical Effectiveness MPH	2001
Children's Hospital of Eastern NC	General Pediatrics	1999
Brody School of Medicine	Medicine MD	1996
East Carolina University	Biochemistry BS	1992

MEDICAL LICENSURES

North Carolina	#9701600	Issued: 05/97 Expired: 12/01 (inactive)
Massachusetts	#160328	Issued: 05/99 Expired: 02/06 (inactive)
New York	#233834	Issued: 08/04 Renewal: 02/16

BOARD CERTIFICATIONS

American Board of Pediatrics General Pediatrics	2004-2011
American Board of Pediatrics Developmental-Behavioral Pediatrics	2011-present

FACULTY APPOINTMENTS

Assistant Professor, Department of Public Health Sciences	2010-present
Secondary Appointment, Department of Pediatrics	2010-present
Clinical Instructor, Department of Pediatrics	2004-2010

PROFESSIONAL AND ADMINISTRATIVE ASSIGNMENTS

Preventive Cardiology Fellow, University of Rochester, Rochester, NY	2008-2010
Attending Physician, Behavioral Pediatrics Program, RGH, Rochester, NY	2004-2008
Developmental-Behavioral Pediatrics Fellow, Tufts, Boston, MA	2002-2004

General Academic Pediatric Fellow, MGH Hospital for Children, Boston, MA	1999-2002
General Pediatrics Resident, Children's Hospital of Eastern NC, Greenville NC	1996-1999
Laboratory Technician, Burroughs-Wellcome, Greenville NC	1990-1991

COMMUNITY SERVICE

Departmental Student IRB Proposal Scientific Reviewer	2013-present
Reviewer, Preventing Chronic Disease	2013-present
Reviewer, European Journal of Pediatrics	2011-present
Mentor for deaf and hard-of-hearing students interested in health care careers	2011-present
Deaf Weight Wise Project	2009-present
Massachusetts Universal Newborn Hearing Screening Advisory Committee	2000-2004
The Next Steps Workgroup	2000-2004

PROFESSIONAL MEMBERSHIPS

American Academy of Pediatrics	1999-present
American Public Health Association	1999-present
Society for Developmental-Behavioral Pediatrics	2011-present

EDUCATIONAL CONTRIBUTIONS

Certificate for Health Care Interpreting Course Co-Instructor	2012-present
NTID Research Colloquium Group Facilitator	2013
Community-Engaged Health Research Methods Course Director	2012-2013
Qualitative Research Methods Course Co-Instructor	2012
Practical Grant Writing Course Grant Reviewer	2011
Mastering Medical Information Course Co-Instructor	2009
Deaf Strong Hospital Group Debriefing Facilitator	2009-present
Residential School House Staff In-Service Training	2002-2004
Teaching Sessions with Pediatric House Staff and Medical Students	1996-present

POST-DOCTORAL FELLOWS, INTERNS, AND STUDENTS SUPERVISED

Name	Project	Date
Robert Nutt	TBD	2012-present
Jara Johnson	Seasonal variations of autism	2012-2014
Denise Thew	Adapting health information for deaf people	2011-2013
Poorna Kushnagar	Adapting quality of life measures for deaf people	2011-2014
Kyle Gahagan	Creating healthy behavioral change in deaf people	2011
Cody Moyers	Teaching about condom use to deaf young adults	2010

HONORS AND AWARDS

<i>Exceptional Parent's</i> Maxwell J. Schleifer Distinguished Service Award	2007
<u>Summa cum laude</u> and Honors program graduate	1992
Outstanding Senior Award from ECU Biology Department	1992
Waters Biology Senior Research Award	1992
University Scholars Award Recipient	1988

RESEARCH AND OTHER FUNDING SUPPORTS

Assessing Cardiovascular Risks in Deaf Adolescents who use Sign Language 1-K01-HL103173-01 National Heart Blood Lung Institute, University of Rochester Scott R. Smith, Principal Investigator	2010-2015 75-80% \$648,303
National Technical Institute for the Deaf Rochester Institute of Technology Consultant, NTID Healthcare Implementation Committee	2012-present 25%
Provost Award to Promote Faculty Diversity University of Rochester Vivian Lewis, Principal Investigator	2010-2011 20%
Preventive Cardiology Training Fellowship 5-T32-HL007937 National Heart Blood Institute, University of Rochester Thomas A. Pearson, Principal Investigator	2009-2010 80%
Relationships between Early Clinical Experiences and Parental Perceptions of Child's Deafness Deborah Noonan Foundation Grant Massachusetts General Hospital Scott R. Smith and James M. Perrin, Co-Principal Investigators	2001-2002 80% \$50,000
General Academic Pediatrics Training Fellowship T32-HS00063 Agency for Healthcare Research and Quality, Harvard School of Medicine James M. Perrin, Principal Investigator	1999-2001 80%

PROFESSIONAL PRESENTATIONS

Smith SR, Thew D. (2013). Pilot validation of the Short form of the Test of Functional Health Literacy in Adults (S-TOFHLA) in deaf college students who use sign language. *Health Disparities at the Intersection of Race, Ethnicity, and Disability: A National Conference.*

Smith SR (2011). Health knowledge and literacy of deaf adolescents who use sign language: formative research findings. *Third Health Literacy Annual Research Conference.*

Smith SR, Kuhlthau KA, Perrin JM (2002). Do early disability-related clinical experiences influence parental perceptions of childhood disability? A study of families with deaf children and hearing parents. *Pediatric Academic Societies Annual Meeting.*

Smith SR, Kuhlthau KA, Perrin JM. (2000). The deaf and hard-of-hearing community's knowledge of HIV/AIDS. *Pediatric Academic Societies Annual Meeting.*

Recently Submitted Abstracts:

Smith SR, Samar, VJ. (2014). Exploring health literacy constructs in deaf adolescents. *Sixth Health Literacy Annual Research Conference*

Smith SR, Samar VJ. (2014). Deaf Adolescents' Health Knowledge and Health Literacy: Preliminary Findings. *Sixth Health Literacy Annual Research Conference*

INVITED PRESENTATIONS (SELECTED)

"Cardiovascular Disease in the Deaf Community: Risk and Prevention", Buffalo Association of the Deaf	2014
"Health Knowledge and Health Literacy of Deaf Adolescents", Visual Language Visual Learning Webinar at Deaf Studies Laboratory, NTID	2013
"Using a Community Approach to Increase Health Literacy among Deaf Adolescents", Process of Discovery Presentation, URM	2012-4
"Diversity in Survey Research: Including Deaf People in Health Research", URM	2012-4
"The Public Health Issues of Deaf People", URM	2011
"The Obesity Epidemic in Deaf People", Center for Disability Right, NTID/RI	2010-1
"Fostering Diversity in the Learning Environment", SURF Orientation	2011
"How to Give a Professional Presentation", STEP Lecture	2010
"Socioemotional Development of Deaf Children", Rochester School for the Deaf	2009
"Autism Spectrum Disorders in Deaf Children", Rochester School for the Deaf	2008
"Children with ADHD and Other Developmental and Behavioral Problems", RSD	2008
"Asperger Syndrome and Autistic Spectrum Disorders", RSD	2007
"Adjustment Disorders: ADI and Related Comorbidities", RSD	2007
"Development of Children with Hearing Loss", St. Anne's Hospital, Tufts-NEMC	2004
"Medical Work-up for Congenital Sensorineural Hearing Loss", Consortium	2003
"Do Early Clinical Experiences Affect Parents' View of Childhood Deafness?"	2002
"Promoting Appropriate Development and Expectations of Deaf Children"	2001-2
"Clinical Management of Early Childhood Deafness", Consortium/Conference	2000-1
"Language Development in Deaf Children", Multiple Venues	1998-2001

PUBLICATIONS

Under Construction:

Smith SR, Samar VJ. et al. Assessing deaf adolescents' cardiovascular health knowledge and literacy.

Revise/Resubmit:

Smith SR, Kushalnagar P, Hauser PC. Deaf adolescents' cardiovascular health knowledge and health literacy skills. *Disability and Health Journal*

In Press:

Kushalnagar P, McKee M, **Smith SR**, Hopper M, Kavin D, Atcherson SR. Conceptual model for quality of life among adults with congenital or early deafness. *Disability and Health Journal*. (In Press)

Published:

Kushalnagar P, Naturale J, Paludneviciene R, **Smith SR**, Werfel E, Doolittle R, Stephens J, DeCaro J. Health websites: Accessibility and usability for American Sign Language users. *Health Communication* 2014:1-8.

Humphries T, Kushalnagar R, Mathur G, Napoli DJ, Padden C, Rathmann C, **Smith S**. Bilingualism: a pearl to overcome certain perils of cochlear implants. *Journal of Medical Speech-Language Pathology*. 2014 21(2):107-125.

Humphries T, Kushalnagar R, Mathur G, Napoli DJ, Padden C, Rathmann C, **Smith S**. The right to language. *Journal of Law, Medicine & Ethics*. 2013 Winter;41(4):872-84. PMID: 24446945. PMCID: Pending.

McKee MM, **Smith S**, Barnett S, Pearson TA. Commentary: What are the benefits of training deaf and hard-of-hearing doctors? *Academic Medicine*. 2013 Feb;88(2):158-61.

Thew D, **Smith SR**, Chang C, Starr M. The Deaf Strong Hospital Program: A model of diversity and inclusion training for first-year medical students. *Academic Medicine*. 2012 Nov;87(11):1496-1500.

Humphries T, Kushalnagar P, Mathur G, Napoli DJ, Padden C, Rathmann C, **Smith SR**. Language acquisition for deaf children: reducing the harms of zero tolerance to the use of alternative approaches. *Harm Reduction Journal*. 2012 Apr 2;9(1):16. Epub ahead of print.

PMID: 22472091. Translated and reprinted in *Das Zeichen* 26: 91 (2012) – S. 334-337. To be reprinted in *The Endeavor for the American Society of Deaf Children* 2012.

Smith, SR, Chin NP. Social determinants of health disparities: deaf communities. *Public Health - Social and Behavioral Health* (Maddock J, ed.). InTech. 2012 Mar. ISBN: 979-953-307-499-2

Kushalnagar P, Mathur G, Morcland C, Napoli DJ, Padden C, Rathmann C, **Smith SR**. The right to language: ethical considerations, ideal situation, and practical measures toward reaching the idea. *Cochlear Implant Research Updates* (Umat C, and Tange RA, eds.). InTech. 2012 Feb. ISBN: 978-953-51-0582-4.

McKee M, Schlehofer D, Cuculick J, Starr M, **Smith S**, Chin NP. Perceptions of cardiovascular health in an underserved community of deaf adults using American Sign Language. *Disability Health Journal*. 2011 Jul;4(3):192-7. Epub 2011 May 14. PMID: PMC3378999.

Barnett S, McKee M, **Smith SR**, Pearson TA. Deaf sign language users, health inequities, and public health: opportunity for social justice. *Preventing Chronic Disease*. 2011 Mar;8(2):A45. Epub 2011 Feb 15. PMID: 21324259.

McCubrey JA, **Smith SR**, Algate PA, DeVente JE, White MK, Steelman LS. Retroviral infection can abrogate the factor-dependency of hematopoietic cells by autocrine and non-autocrine mechanism depending on the presence of a functional viral oncogene. *Oncogene* 1993 Nov;8(11):2905-15. PMID: 8414494

William W. Walence, Ph.D.

Education

Doctor of Philosophy	Organizational Communication/Health Administration: Ohio University, 1989
Master of Arts	Audiology: Kent State University, 1974
Bachelor of Arts	Communication Education: Kent State University, 1972

Experience

August 2013 1991 to Present:	Program Director Rochester Institute of Technology Health Systems Administration Programs College of Health Sciences and Technology 153 Lomb Memorial Drive Rochester, NY 14623 585-475-4761 Email: William.walence@rit.edu
July 2003 to July 2013	Chair, Division of Adult Professional Studies (Professor, Tenured) Director, Health Administration Programs Roberts Wesleyan College 2301 Westside Drive Rochester, NY 14624 email: walence_william@roberts.edu NOTE: <i>Retired from Roberts Wesleyan College July 1, 2013</i> <i>Awarded Faculty Emeritus status November 4, 2013.</i>
July 1991 to July 2003	Chairperson (Associate Professor, Tenured) Rochester Institute of Technology Health Systems Administration Programs College of Continuing Education/Applied Science 14 Lomb Memorial Drive Rochester, NY 14623
Sept. 1989 to July 1991	Program Director (Assistant Professor) D'Youville College Health Services Administration Masters Degree Program, Division of Business, Dietetics & Health Administration 320 Porter Ave. Buffalo, NY 716-881-7612
April 1988 to August 1989	Administrator Southtowns Primary Care Center, Inc. 6300 Powers Rd. Orchard Park, NY
January 1986 to June 1987	Department Director Scarborough General Hospital Speech/Language Pathology & Audiology Departments Scarborough, Ontario, Canada
May 1980 to January 1986	Clinical Supervisor (Instructor) Ohio University School of Hearing & Speech Sciences College of Health and Human Services and the College of Osteopathic Medicine Athens, Ohio

William W. Walence, Ph.D.

July 1978 to May 1980	Audiologist Nicola Milet, M.D., Inc., Nathaniel Soifer & Assoc., M.D., Inc., Dayton, OH
March 1975 to June 1978	Audiologist & Audiology Coordinator Columbus Speech & Hearing Center Columbus, OH

William W. Walence, Ph.D.

Professional Activities

- 2012: Launched course sequence in Nursing Home Administration to fulfill state Health Dept. requirements
- 2011: Feasibility study and market research, Certificate, Nursing Home Administration
- 2011: Launching of NYSED approved M.S. in Health Information Administration
- 2009: Feasibility study and market research, M.S. in Health Information Administration
- 2008: Implementation of the BS in Health Administration and development of the MS in Public Administration
- 2007: Implementation of the Bachelor of Science degree in Public Safety Administration, Roberts Wesleyan College
- 2006: Development and Implementation of the Master of Science degree program in Health Administration, Roberts Wesleyan College
- 2006: Development of the Bachelor of Science degree in Public Safety Administration, Roberts Wesleyan College
- 2003: Achieved full Accreditation Status for the BS in Organizational Management from the International Assembly of Colleges of Business Education, Roberts Wesleyan College
- 2003: Finalist for the RIT Eisenhart Teacher of the Year Award, RIT
- 2002: Secured Accreditation Candidacy for the MS in Health Systems Administration from the Accreditation Commission on Education in Health Services Administration, Washington, DC
- 2002: Finalist for the RIT Eisenhart Teacher of the Year Award
- 2002: Curriculum development for the Advanced Certificate in Senior Living Management
- 2001-02: Recipient of Faculty Development Grant in fund pursuit of credential in Medical Practice Administration
- 2001-02: Development of undergraduate BS in Health Administration
- 2001-02: Implementation of graduate certificate in Health Information Resources
- 2000: Selected for Pilot Project by RIT Office of Distance Learning, Course Info Software Trial
- 1999: Development of Master of Science degree program in Health Information Resources & Systems
- 1996: Implementation of new Master of Science Degree Program in Health Systems Administration
- 1995: Development of new Master of Science Degree Program in Health Systems Administration
- 1995: Recipient of Provost's Productivity Grant Award (two projects), RIT
- 1994: Author and Team Facilitator, Master of Science Degree Program in Health Systems Administration, Rochester Institute of Technology, final approval by RIT Policy Council, May 11, 1994
- 1994: Recipient of Provost's Productivity Grant Award (two projects), RIT:
 - 'Total Quality in Health Systems Administration' video series.
 - 'Health Systems Administration' videos, distance learning course.
- 1991-1993: Implementation of Quality Team Management System, Business and Computer Science Support Department, National Technical Institute for the Deaf, RIT.
- 1991: Outstanding Faculty Member Award, Division of Business, Dietetics & Health Administration, D'Youville College, Buffalo, NY.
- 1990: Launching, marketing, recruiting, and final curriculum development of new Master of Science in Health Services Administration program, D'Youville College, Buffalo, NY.
- 1986: Development and design of new out-patient clinic facilities for Speech Pathology and Audiology Departments, Scarborough General Hospital, Toronto, Canada.
 - Implementation of participative management system in both departments.
- 1985: Development and design of first private audiological practice in Athens, OH.
- 1981: Development and design of new outpatient clinic facilities for Audiology services, College of Osteopathic Medicine, Ohio University, Athens, OH.
- 1979: Establishment, development, and design of full-scale audiology facilities in private medical practice, Dayton, OH.
- 1976: Implementation of first mobile audiological services for mentally and physically disabled adults and children, Columbus Speech and Hearing Center, Columbus, OH.
- 1972: Inducted into Kappa Delta Pi, National Education Honor Society, Kent State University Chapter.

Professional Licensure & Organizations

- Member: New York State Department of Health, Board for Professional Conduct, Albany, NY
- K-12 Teacher's Certificate, State of Ohio

William W. Walence, Ph.D.

- Association of University Programs in Health Administration...member
- Medical Group Management Association...member
- New York Medical Group Management Association...member
- Audiologist, State of New York, License #1000

Academic and Professional Activities

- Reviewer, health care management text project, Delmar Publishing, 2008.
- "A Systems Approach to Outcomes Assessment: From Mission to Measurement," accepted paper for the Association of University Programs in Health Administration Annual Conference, Washington, D.C., June 5-8, 2008.
- "The History of Health Care and Insurance," new employee orientation program/Preferred Care (managed care HMO), Rochester, NY, January, 2003.
- National Association of Purchasing Management, Rochester Chapter, "A Leadership Trilogy," Presentation, December 12, 2001.
- American Society for Quality, Rochester Chapter, 57th Annual Conference, Presentation: Manage Things, Inspire People, Engage Culture: A Leadership Trilogy, March, 2001.
- American Society for Quality, Rochester Chapter, Presentation: Manage Things, Inspire People, Engage Culture: A Leadership Trilogy, November 14, 2000.
- Committee Member, Office of Distance Learning Faculty Development Initiative, RIT, 1997-1998.
- Panelist on Distance Learning Programs & Teaching Strategies, RIT College of Business Workshop for Faculty from 2-Year Colleges, April, 1996.
- "Health care reform and managed care," Invited presentation, Speech/Language Pathology & Audiology Department, Strong Memorial Hospital, Rochester, NY, July, 1995.
- "Health administration programs: development and design," Invited presentation & consultation, College of Business, Montana State University, Bozeman, Montana, June, 1994.
- "Health Care Reform: Do Economics and Ethics Mix?" Presentation at Open Forum on Health Care Reform, Webb Auditorium, RIT, September 16, 1994.
- Site Coordinator for League of Women Voters video conference, "Citizen's Voice for Citizen's Choice: A National Satellite Town Meeting on Health Care Reform," Webb Auditorium, RIT, September 16, 1994.
- "Management Models for Speech and Hearing Departments," Invited panelist, National Technical Institute for the Deaf, RIT, September 27, 1994.
- "Health Care and Future Employee Expectations," Invited presenter, Career and Human Resource Development Executive Leader Seminar, RIT, August 10, 1994.
- "Implementing CQI in A Healthcare Organization," Invited workshop presented to and sponsored by the Western New York Healthcare Quality Association, Buffalo, NY, June 14, 1994.
- Walence, W. W. (1994). "Health Systems Administration Distance Learning Course." Writing and filming of nine-video series, RIT.
- "Skills Required of Future Health Care Administrators and Managers," Invited presentation to the Industrial Management Council, Rochester, NY, April, 1994.
- Moderator and Participant: Panel Discussion and Public Forum, "Managed Care and Its Impact on Rochester Health Care," Ingle Auditorium, RIT, October, 1993.
- Site Coordinator for PBS video conference, "Reducing Costs Through Managed Care," Ingle Auditorium, RIT, October 1993.
- Orlando, R. & Walence, W. W. (1993). "Tutoring services for deaf students," Presentation at the Annual Conference of the Association on Higher Education and Disability, Baltimore, MD, July.
- Orlando, R. & Walence, W. W. (1993). "National recommendations and your mainstream program," Presentation at the Seventh Annual Conference of the New York State Organization of Support Service Personnel, Ithaca, NY, April.
- "Total Quality Management," Invited presenter, Curriculum for the 90's - Special Interest Group, National Technical Institute for the Deaf, March 29, 1993.
- "Children with deafness," Invited presentation, Occupational and Physical Therapy Department, D'Youville College, Buffalo, NY, 1990.

William W. Walence, Ph.D.

- Walence, W.W. & Chapman, R. (1990). 'Boasting & Boosting: External and Internal Marketing of Residential and Health Care Facilities for the Elderly,' Seminar presentation, D'Youville College, Buffalo, NY, July.

Academic Writing and Curriculum/Program Development

- Walence, W. W. (2006). Online Learning Report, commissioned by the Academic Dean, Roberts Wesleyan College
- Walence, W. W. (2000-present). Development of culture and leadership research and teaching
- Walence, W. W. (1999-00). Research and proposal for Master of Science in Health Information Resources, RIT
- Walence, W. W. (1997-98). Research and proposal for Bachelor of Science in Health Information Management, RIT
- Walence, W. W. (1995). Managed care and reform: A formula for the demise of speech and hearing? Paper accepted for presentation at the annual New York State Speech Language Hearing Association, New York, NY, April.
- Walence, W. W. (1995). Academic program evaluation and development: A customer-driven approach. Paper accepted for presentation at the annual conference of Academic Chairpersons: The Many Faces of Evaluation, Orlando, FL, February.
- Walence, W. W. (1994). Curriculum and course outlines for Master of Science in Health Systems Administration, RIT.
- Walence, W. W. (1994). Program Proposal: Master of Science Degree in Health Systems Administration, RIT.
- Walence, W. W. (1994). A study of economic indicators underlying low-cost health care in Rochester, New York. Paper accepted for presentation at the Health Services Symposium, Ohio University, Athens, OH, March.
- Bondi Wakcott, J., Hurwitz, A., Marshall, L., Mowl, G., Sack, C., Lauscher, M., Walence, W., & Winchester, K. (1993). Philosophy and principles of access. Report by the Task Force on Access, National Technical Institute for the Deaf, RIT.
- Walence, W. W. (1991). Curriculum and course outlines for MS in Health Services Administration, Division of Business, Dietetics & Health Administration, D'Youville College, Buffalo, NY.
- McClive, L., Balocco, S., Dewds, R., Kazmarek, N., McMillen, S., & Walence, W. (1990). The liberal arts and sciences initiative. A study and plan presented to the President of D'Youville College for recruitment and retention of baccalaureate students.
- Walence, W.W. (1989). Long-Term care nurses' impressions of their own communication competence, communication apprehension, and patient attraction. Ohio University, Athens, OH, Doctoral Dissertation.
- Specifications for a Computerized Office Management System in Rehabilitative Medicine, Scarborough General Hospital, Ontario, Canada, 1987. [co-author]
- Scope of Professional Practice for Audiology and Speech Pathology, Ontario Ministry of Health, Toronto, Ontario, Canada, 1986. [co-contributor]
- Walence, W. W. (1986). Report: Hearing aid dispensing in the hospital environment. Scarborough General Hospital, Ontario, Canada.
- Walence, W. W. (1985). Apple Macintosh with MacPaint for forms generation. Journal for Computer Users in Speech and Hearing, 1 (2), 144-145.
- DeWine, S., James, A. & Walence, W. (1985). Validation of organizational communication audit instruments. Paper presented at the annual meeting of the International Communication Association, Honolulu, Hawaii.
- Health Maintenance Organization Feasibility Study, Ohio University College of Osteopathic Medicine, Athens, OH, 1984, co-author.
- DeWine, S., Brannner, K., Lukens, L., Rauschenberg, D., Shatto, M. & Walence, W. (1984). The communication of organizational myths. Paper presented at the annual meeting of the Speech Communication Association, Chicago, IL.
- Walence, W. W. (1982). Nonverbal communication behavior in the clinical paradigm. Paper presented at the annual meeting of the Ohio Speech and Hearing Association, Columbus, OH.
- Walence, W. W. (1982). Ethical considerations in business communication consulting. Paper presented at the annual meeting of the American Business Communication Association, Indianapolis, IN.

William W. Walence, Ph.D.

Walence, W. W. (1974). *Estimations of vibro-tactile sensation magnitude by untrained subjects*, Kent State University, Masters Thesis.

William W. Walence, Ph.D.

Academic Vita

Roberts Wesleyan College

- Chair - Task Force on Academic Organization (college reorganization feasibility study)
- Member - Course Management System Task Force
- Chair - Nontraditional Education Council
- Past Chair - Graduate Education Council
- Past Chair - Academic Planning and Coordination Committee
- Member - Academic Planning Council
- Member - President's Council

Rochester Institute of Technology

Current Activities

- Elected Member: Academic Senate, RIT
- Member: RIT Institute Council
- Elected Member: CAST College Faculty Governance Committee

Previous Activities

- Member: Academic Senate Long Range Planning Committee
- Chairperson: Student Affairs Committee, Academic Senate
- Member: Office of Distance Learning Faculty Development Committee
- Member: Dean's Upward Evaluation Committee
- Member: Dean's Leadership Team
- Elected Communications Officer: Faculty Council, RIT
- Elected Member: Policy Council, RIT
- Elected Member: Faculty Council, RIT
- Member: Advisory Committee for the Bachelors/ Associates Degree programs in Applied Arts and Sciences, RIT
- Member: Curriculum Development Team, NTID
- Member: Institute Strategic Planning Task Force on Community, RIT
- Chairperson: Faculty Search Committee, RIT and NTID
- Member: Philosophy and Principles Regarding Access Task Force, Strategic Planning Implementation, NTID
- Member, secretary: Support Services Administrators Group, NTID
- Member: Support Departments Council, NTID
- Member: Quality Committee, College of Business
- Member: Advisory Board for Masters program in Health Services Administration, D'Youville College, Buffalo, NY
- Skilled in use of sign language

D'Youville College

- Member: Institutional Review Board
- Member: Graduate Council (grad faculty, governing body)
- Member: Graduate Curriculum Committee
- Elected Vice President: Graduate Curriculum Committee
- Member: Faculty Council
- Member: Liberal Arts and Sciences Initiative Committee

William W. Walence, Ph.D.

Service to Community

- Participant, NY State Department of Health, NYS Electronic Certificate of Need (NYSE-CON) project, Albany, NY July 29, 2009
- Past Chairman, Board of Directors, Wesley On East (long-term care facilities)
- Active Member, Board of Directors, Wesley Gardens (long-term care facility)
- Active Member, New York State Department of Health, Board of Professional Medical Conduct
- Churchville Lions Club, Churchville, NY
- Resource to CNN Financial News, *Gannett Papers*, and *Rochester Business Journal* regarding health care issues
- Past member, Town of Riga Conservation Board

References

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Robert Jones, MS

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Rochester, NY 14607
585-241-2120
bjones@wesleygardens.com

Note: Written references available upon request.

Appendix G – Cost Model: Revenue/Cost Projections/Expenses

The cost model analysis prepared by Steven Morse, the Assistant Vice-President for NTID Finance and Budget, includes five tables detailing projected expenditures and revenue over the first five years of the program. There are no anticipated capital expenditures.

Table 1 below shows the projected expenditures for each of the first five years of the proposed program. These expenditures include faculty/staff salary and benefits, plus costs such as computers, instructional supplies, software licenses, travel/conferences, tuition payment for RIT credits, and RIT indirect costs. The grand total costs in Year 5 is \$387,500.

**American Sign Language and Interpreting Education Department
Master of Science in Healthcare Interpretation Degree Program
Projected Expenditures For The Proposed Program
Table 1**

	***** Year 1 AY16-17	Year 2 AY17-18	Year 3 AY18-19	Year 4 AY19-20	Year 5 AY20-21
Faculty Positions (1.70 FTE) - Salary	\$ 113,968	\$ 117,400	\$ 120,900	\$ 124,500	\$ 128,200
Staff Assistant (0.10 FTE) - Salary	\$ 6,000	\$ 5,200	\$ 5,400	\$ 5,600	\$ 5,800
Benefits	\$ 45,000	\$ 48,000	\$ 51,000	\$ 53,000	\$ 55,000
Total Salary and Benefits	\$ 165,968	\$ 170,600	\$ 177,300	\$ 183,100	\$ 189,000
	\$ -	\$ -	\$ -	\$ -	\$ -
Computer Charges	\$ 20,300	\$ 35,500	\$ 43,400	\$ 44,700	\$ 46,000
Instructional Supplies (Office, computer, 3D printer)	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000
Equipment	\$ 3,000	\$ 500	\$ 900	\$ 500	\$ 500
Honoraria	\$ 800	\$ 800	\$ 800	\$ 900	\$ 800
Hospitality	\$ 1,200	\$ 1,200	\$ 1,200	\$ 1,200	\$ 1,200
Travel-Conferences	\$ 2,000	\$ 2,000	\$ 2,000	\$ 2,000	\$ 2,000
Advertising	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000
Tuition Payments for RIT Credits *	\$ 31,600	\$ 58,900	\$ 76,700	\$ 79,000	\$ 81,400
Overhead (RIT Indirect Costs)	\$ 45,000	\$ 54,300	\$ 60,800	\$ 62,700	\$ 64,600
Other	\$ 105,900	\$ 155,300	\$ 187,400	\$ 192,900	\$ 198,600
New Program Total Costs	\$ 269,968	\$ 325,900	\$ 364,700	\$ 376,000	\$ 387,600
Grand Total Costs to NTID	\$ 269,968	\$ 325,900	\$ 364,700	\$ 376,000	\$ 387,600

***** This year includes the first summer semester of the program (summer AY15-16) as well as the summer semester for AY16-17

* This dollar amount represents the charge for NTID students taking classes in RIT's College of Health Science & Technology (CHST). The CHST classes yield a faculty requirement of 0.375 FTE each year provided that no seats are available in existing class sections. The 0.375 FTE is calculated as follows (16 students x 3 classes = 48 seats; 48 seats / 16 seat average class size = 3.0 classes; 3.0 classes / 8 classes per year for lecturer faculty member = 0.375 FTE).

Table 2 below shows the projected revenue for each of the first five years of the program. These revenue projections have been reviewed and approved by Dr. James Miller, Senior VP of Enrollment Management and Career Services at RIT. Based on projected enrollment, tuition revenue of \$425,300 is realized by Year 5.

**American Sign Language and Interpreting Education Department
Master of Science in Healthcare Interpretation Degree Program
Projected Revenue For The Proposed Program
Table 2**

	**** Year 1 AY16-17	Year 2 AY17-18	Year 3 AY18-19	Year 4 AY19-20	Year 5 AY20-21
Full-Time Summer Semester Enrollment	16	14	16	16	16
Part-Time Summer Semester Enrollment	20	16	16	16	16
Full-Time Fall Semester Enrollment	5	6	8	8	8
Part-Time Fall Semester Enrollment	6	14	16	16	16
Full-Time Spring Semester Enrollment	5	6	8	8	8
Part-Time Spring Semester Enrollment	6	14	16	16	16
Total Semesters	56	70	80	80	80
Full-Time Students' Credit Hours	294	216	264	264	264
Part-Time Students' Credit Hours	264	248	254	264	264
Total Credit Hours	558	462	528	528	528
Full-Time & Part-Time Graduate Rate per Credit Hour	\$ 694	\$ 720	\$ 748	\$ 776	\$ 806
Total Student NTID Tuition Revenue	\$ 387,200	\$ 332,800	\$ 394,700	\$ 409,700	\$ 425,300
State Revenue	\$0	\$0	\$0	\$0	\$0
Federal Appropriation	\$ -	\$ -	\$ -	\$ -	\$ -
Grand Total Revenue	\$ 387,200	\$ 332,800	\$ 394,700	\$ 409,700	\$ 425,300

**** This year includes the first summer semester of the program (summer AY15-16) as well as the summer semester for AY16-17

Table 3 shows that there are no projected capital expenditures. There are no additional facilities required for this primarily online program offering. As with all programs, existing equipment will need to be upgraded as technology evolves. This expense will be supported through existing NTID policies and funded through current operating budgets.

***American Sign Language and Interpreting Education Department
Master of Science in Healthcare Interpretation Degree Program
Projected Capital Expenditures
Table 3***

	<i>Year 1 AY16-17</i>	<i>Year 2 AY17-18</i>	<i>Year 3 AY18-19</i>	<i>Year 4 AY19-20</i>	<i>Year 5 AY20-21</i>
Capital Facilities	\$0	\$0	\$0	\$0	\$0
Equipment	\$0	\$0	\$0	\$0	\$0
Total Capital Expenditures	\$0	\$0	\$0	\$0	\$0

Additional equipment to support this program is not required. As with all programs there will be needs for existing equipment to be upgraded as technology develops. This expense will be supported through existing NTID policies and funded through current operating budgets.

New facilities, such as laboratories, will not be required for this program.

Table 4 provides a summary of program expenditures, revenue, and resource requirements for the new MS in Health Care Interpreting program.

**American Sign Language and Interpreting Education Department
Master of Science in Healthcare Interpretation Degree Program
Summary of Program Expenditures, Revenue, and Resource Requirements
Table 4**

	AAAAA					
	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	Total
Personnel	\$ 118,968	\$ 122,800	\$ 126,300	\$ 130,100	\$ 134,000	\$ 531,968
Benefits	\$ 45,000	\$ 48,000	\$ 51,000	\$ 53,000	\$ 55,000	\$ 252,000
Computer Charges	\$ 20,300	\$ 35,600	\$ 43,400	\$ 44,700	\$ 48,000	\$ 190,000
Instructional Supplies	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 5,000
Equipment	\$ 3,000	\$ 500	\$ 500	\$ 500	\$ 500	\$ 5,000
Telephone	\$ 800	\$ 800	\$ 800	\$ 800	\$ 800	\$ 4,000
Software Licenses	\$ 1,200	\$ 1,200	\$ 1,200	\$ 1,200	\$ 1,200	\$ 6,000
Travel-Conferences	\$ 2,000	\$ 2,000	\$ 2,000	\$ 2,000	\$ 2,000	\$ 10,000
Advertising	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 5,000
Tuition Payments for RIT Credits	\$ 31,600	\$ 58,900	\$ 76,700	\$ 79,000	\$ 81,400	\$ 327,600
Expense	\$ 224,868	\$ 271,600	\$ 303,900	\$ 313,300	\$ 322,900	\$ 1,436,568
Overhead (RIT Indirect Costs)	\$ 45,000	\$ 54,300	\$ 60,800	\$ 62,700	\$ 64,600	\$ 287,400
Total Expense	\$ 269,868	\$ 325,900	\$ 364,700	\$ 376,000	\$ 387,500	\$ 1,723,968
Enrollment *	11	20	24	24	24	103
Tuition	\$ 387,200	\$ 332,800	\$ 394,700	\$ 409,700	\$ 425,300	\$ 1,949,700
Federal Appropriation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total Revenue	\$ 387,200	\$ 332,800	\$ 394,700	\$ 409,700	\$ 425,300	\$ 1,949,700
Total Rev. - Total Exp.	\$ 117,332	\$ 6,900	\$ 30,000	\$ 33,700	\$ 37,800	\$ 225,732

AAAA This year includes the first summer semester of the program (summer AY15-16) as well as the summer semester for AY16-17

* Reviewed by RIT Enrollment Management & Career Services (Jim Miller). These enrollment numbers reflect students enrolled in the Fall semester for each academic year. Refer Table 2 for semester detail.

MEMORANDUM

To: Dr. Stephen Aldersley
From: John-Allen Payne, Chair, NCC
Date: March 2015
Re: MS in Health Care Interpretation



After reviewing the Master of Science in Health Care Interpretation program proposal submitted by the NTID Department of American Sign Language and Interpreting Education (ASLIE), the NTID Curriculum Committee (NCC) has unanimously recommended approval without reservation. All of our concerns were addressed adequately during the three-month period of review and revision.

The NCC is of the opinion that this new program will be a flexible and challenging addition to our current programs that will not only attract highly qualified students but also serve as a leader in the field of advanced interpreting.



Sat 4/11/2015 12:11 PM

Kathleen Miraglia

FW: Letter of support

To: Kim Kurz; Marianne Gustafson; Lynette Finton

 You forwarded this message on 4/11/2015 8:08 PM.

From: William Walence
Sent: Friday, April 10, 2015 7:41 PM
To: Kathleen Miraglia
Subject: Letter of support

H Kathy,

Please see below Dr. Ornt's letter of support for the MS program.

Regards,
Bill

William W. Walence, Ph.D.
Director, Health Systems Administration
Rochester Institute of Technology
College of Health Sciences and Technology
Louise Slaughter Hall, Room 1127
153 Lomb Memorial Drive
Rochester, NY 14623-5608

Email: William.Walence@rit.edu
Office Phone: 585-475-4761
Cell Phone: 585-943-4939

From: Daniel Ornt <dboihst@rit.edu>
Date: Friday, April 10, 2015 at 6:11 PM
To: William Walence <wwihst@rit.edu>
Subject: Re: URGENT: Letter of support

Bill
CHST supports the MS in Healthcare Interpretation, and hope we can be a resource for its success.
Please pass onto their leadership

Dan

Daniel B. Ornt, MD, FACP
Vice President, Institute of Health Sciences & Technology
Dean & Professor, College of Health Sciences & Technology
Rochester Institute of Technology
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