

Canopy Toolkit for Bilingual Healthcare Communication

2022

TABLE OF CONTENTS

User Guide	3
Canopy's Inventory of Essential Skills for Bilingual Healthcare Communication	7
Canopy's Pedagogy: Authentic Context Tutoring (ACT)	9
CanopyLearn Curriculum	10
Canopy's Scale for Bilingual Proficiency in Healthcare Communication	14
Alignment of Canopy Scale with other Proficiency Scales	17
CanopyCredential Self-Assessment Questionnaire and Scorecards	18
Canopy's Scale for Sociocultural Communicative Competence in Healthcare	21
Canopy's Can-Do Statements for Bilingual Healthcare Communication	23
Coming Soon: Canopy's Guide for Determining the Qualified Bilingual Staff (QBS) Credential at Your Facility	32
References	33

USER GUIDE

Language barriers undermine the quality of care for more than 27 million patients with Limited English Proficiency in the United States and cause significant workflow and financial constraints for healthcare organizations. Resources for addressing language barriers are not always available or sufficient.

We created this Toolkit and our [Canopy360](#) suite of products in order to offer solutions for language-related challenges in the healthcare domain. Drawing on dozens of in-depth interviews with healthcare administrators, clinicians, and educators, this Toolkit is designed with the following issues in mind.

- Existing standards and resources focus on medical interpreters and do not meet the current need for training and certifying bilingual clinicians and staff members. This makes it difficult for healthcare administrators to make HR decisions and support a more bilingual workforce.
- Few tests of language proficiency are contextualized for the healthcare domain, and even fewer give meaningful and actionable feedback to test takers or offer systematic resources to support individuals in their bilingual medical proficiency journey.
- There is a lack of tools that medical language educators can use as the basis for curriculum development or pedagogical decision-making.

These challenges exemplify the growing and unmet demand for evidence-based and standardized resources for measuring medical language proficiency and for creating a roadmap that supports healthcare providers and staff in developing medical language abilities. We created this Toolkit to meet these challenges directly. We look forward to continually validating and enhancing this Toolkit as we work with you to eliminate language barriers in healthcare.

→ THE CANOPY360 PRODUCT SUITE

This Toolkit is a resource for getting to know and learning to implement the [Canopy360](#) suite of products. Our products adhere to healthcare-specific standards, offer innovative methods in language teaching and assessment, and are based on research carried out with the support of the National Institutes of Health (NIH).

CanopyLearn

The #1 Medical Spanish Online Training Program

CanopyLearn is an online, self-paced eLearning platform that offers the most robust medical Spanish and medical English curriculum, tailored for healthcare professionals based on everyday clinical encounters. It combines medical terms, Spanish learning foundations, and cultural knowledge together in every lesson.



CanopyCredential

The Only Scenario-based Bilingual Medical Proficiency Assessment

CanopyCredential is a standardized exam to measure and certify bilingual medical language proficiency for healthcare providers. It is designed to assist the healthcare facilities in qualifying bilingual staff to be compliant with Section 1557 of the Affordable Care Act.



CanopyCompliance

An Interactive Training on Language Access for Healthcare Staff

CanopyCompliance is an online training program that helps professionals understand the laws and regulations surrounding language access, interpretation, and bilingual staff in the healthcare space.

CanopySpeak

The Largest Corpus of Pre-translated Medical Phrases

CanopySpeak is a medical phrasebook mobile app. It contains over 5,000 pre-translated medical phrases in over 15 languages, including Spanish, Mandarin, Cantonese, French, Arabic, Japanese, Korean, Russian, and Portuguese.



→ WHO THIS TOOLKIT IS FOR

This Toolkit is for anyone who would like to know more about how to get the most out of the [Canopy360](#) suite of products, which are designed to improve the way our healthcare system communicates with patients with limited English proficiency (LEP). This may include:

- Administrators, diversity and inclusion executives, or compliance officers in charge of language services
- Educators who teach Medical Spanish, Medical English, or similar courses
- Healthcare professionals interested in developing or assessing their proficiency in a target language

The Toolkit will be most beneficial for organizations and individuals who have already used or are planning to use Canopy's products, for example, if you have completed or are planning to complete a [CanopyLearn Medical Spanish](#) or [CanopyLearn Medical English](#) course, or if you have taken or are planning to take the [CanopyCredential Bilingual Medical Proficiency Assessment](#).

→ HOW WE DEVELOPED THE TOOLKIT

Our [Canopy Inventory of Essential Skills for Bilingual Healthcare Communication](#) is the result of a systematic needs analysis that involved a review of literature, legal material, and interviews with over 50 stakeholders. The [Canopy Pedagogy](#) and the [CanopyLearn Curriculum](#) draw on constructivist learning theories to offer an experience of learning language in socially meaningful contexts, such as through the Spanish telenovela series developed for the [CanopyLearn Medical Spanish](#) course. The [Canopy Scale](#) and the [Canopy Can-Do Statements for Bilingual Proficiency in Healthcare Communication](#) were developed by adapting the standardized and internationally recognized level descriptors of the Common European Framework of Reference for Language (CEFR) for the healthcare domain. Everything you can find in this Toolkit has been developed using the collaborative, evidence-based approaches that Canopy has always employed to create our products.

→ THE PEOPLE BEHIND THE TOOLKIT



Bill Tan, Founder

Canopy's founder, **Bill Tan**, grew up accompanying his parents and grandparents to their healthcare visit as his family's interpreter. He witnessed up close the adverse impact that the language barrier had on patients and the frustration experienced by providers who were unable to deliver adequate care. He founded Canopy Innovations with the mission of eliminating the language barrier in healthcare for language-minority communities.

This Toolkit was compiled by **Kate Riestenberg, Ph.D.**, Director of Content and Pedagogy at Canopy Innovations. Kate is an applied linguist and expert on language learning across the lifespan. Her work on revitalizing minority languages earned the Best Research Article award from the International Association for Task-based Language Teaching in 2019. For over a decade, Kate has designed dynamic and evidence-driven language materials, curricula, and assessments for audiences ranging from government professionals to K-12 students in seven different languages. Kate taught college-level linguistics courses for several years and has held research positions at the Smithsonian Institution and the Center for Applied Linguistics.



Kate Riestenberg, Ph.D.
Director of Content and
Pedagogy

→ HOW TO CITE OR REFERENCE THIS TOOLKIT

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For more information about this Toolkit or about the Canopy360 suite of products, visit withcanopy.com or [contact us](#) through our website.

Canopy's Inventory of Essential Skills for Bilingual Healthcare Communication

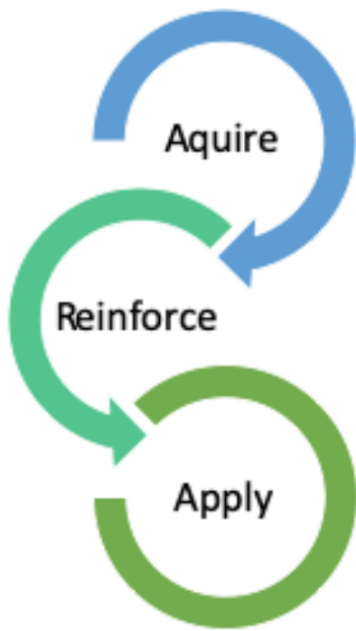
This Inventory of Essential Skills serves as the basis for the development of Canopy products such as the [CanopyCredential](#) **Medical Bilingual Proficiency Assessment** and the [CanopyLearn](#) **Medical Spanish** and **Medical English** courses.

LISTENING SKILLS
L1: Understand information about patient habits, lifestyle, or living situation
L2: Understand patient symptoms or history
L3: Understand information about traumatic incidents or accidents
L4: Understand test results, diagnosis, treatment, or medication
L5: Understand information related to follow-up care
L6: Understand medical advice or recommendations
L7: Understanding questions and requests about procedures and gaining consent
L8: Evaluate a patient's mental state or vital signs
L9: Understand non-clinical issues
L10: Understand speaker mood, tone, attitude, and emotional or psychological state
L11: Understand information or instructions from other clinicians (primarily in English)

SPEAKING SKILLS	
S1:	Ask about or discuss patient habits, lifestyle, living situation, symptoms, or history
S2:	Explain or discuss test results or a diagnosis
S3:	Explain or discuss a treatment or medication
S4:	Explain or discuss follow-up care, medical advice, or recommendations
S5:	Provide instructions or explain a procedure
S6:	Evaluate a patient's mental state or vital signs
S7:	Address non-clinical issues
S8:	Use a respectful tone and provide appropriate emotional reactions or support
S9:	Summarize, relay, or translate information written in English
S10:	Give information or instructions to other clinicians (primarily in English)

Canopy's Pedagogy: Authentic Context Tutoring (ACT)

At the core of the Canopy platform is the Authentic Context Tutoring (ACT) Methodology, which consists of three components: Acquisition, Reinforcement, and Application. Created to emulate the experience of learning from a personal language tutor, the ACT Methodology's three-step process fosters a learner's progression from the passive role of receiving information to the active role of producing and applying newly gained skills.



Acquire
Introduce lesson material through tutor videos, emphasizing comprehension of key concepts, lexical items, and cultural issues.



Reinforce
Contextualize the reprocessing of newly acquired information through a variety of interactive exercises.



Apply
Encourages learner to actively utilize and speak the target language through authentic patient-provider role-play scenarios.



CanopyLearn Curriculum

Our [CanopyLearn Medical Spanish](#) and **Medical English** courses rely on a curriculum with three pillars: Language, Culture, and Health. The curriculum was developed in conversation and collaboration with healthcare administrators, practitioners, and educators as well as applied linguists. Through stakeholder interviews, we created an inventory of important items related to each pillar: Language, Culture, and Health.



We then mapped together relevant items in order to present the learning objectives in a highly contextualized manner, such as through our original *El Puente Del Destino* telenovela series for [CanopyLearn Medical Spanish](#). For example, a lesson on giving a patient dosing instructions for a medicine (Health), is combined with an explanation of the differences between drugs and medicine (Culture), and with learning key words and phrases related to numbers and quantities (Language).



A scene from the original *telenovela* series *El Puente del Destino* developed for CanopyLearn™ Medical Spanish

canopy™

Medical Spanish Curriculum

Level 1

Lesson	Vocabulary	Grammar	Pronunciation	Culture	Objective
1	Greetings	Gender and number agreement	Basic vowel sounds	Informal and formal speech	Introduce yourself to patients and address them
2	Pain descriptions	Subject pronouns - Ser (to be)	Vowel sounds - A and O	<i>Tú and Usted</i>	Talk to patients at the clinic and ask questions about pain
3	Gastrointestinal (GI) terms	Question words - Estar (to be)	Vowel sounds - E and I	Regional Spanish - Slang words for stomach	Ask questions about pain and basic GI issues
4	Basic physical exam terms	<i>Ser and Estar</i>	Vowel sounds - U	Home remedies in Latino culture	Give basic pulmonary exam instructions and ask questions about cold and flu symptoms
5	Diabetes terms	-AR verbs	Consonant sounds - R and RR	Diabetes prevalence in Latino communities	Discuss diet and Diabetes prevention
6	Body parts, minor injury terms, and numbers	-AR, -ER, and -IR verbs	Consonant sounds - L and LL	N/A	Explore and discuss minor injuries with patients
7	Vaccinations, allergies, and time and date	<i>Tener</i> (to have)	Consonant sounds - N and Ñ	Vaccines in immigrant communities	Discuss vaccinations and allergies with patients
8	Cardiology and family terms	Stem changing verbs and possessive pronouns	Consonant sounds - J and H	Family in Latino culture	Talk about basic heart conditions and ask questions about family history
9	Cancer and internal organs	<i>Por</i> and <i>Para</i> (for)	Consonant sounds - B and V	Myths about cancer in Latino communities	Discuss breast cancer screenings and referrals with a patient
10	Depression and anxiety terms	Using irregular verbs	Consonant sounds - D and T	Stress and anxiety in Latino culture	Ask questions about anxiety and social history
11	Headache and migraine terms	<i>Doler, Saber, and Conocer</i> (expressions of pain) and using the near future tense	Consonant sounds - X	Mind-body connection	Ask questions about headaches and discuss migraine treatments
12	Review				

Level 2

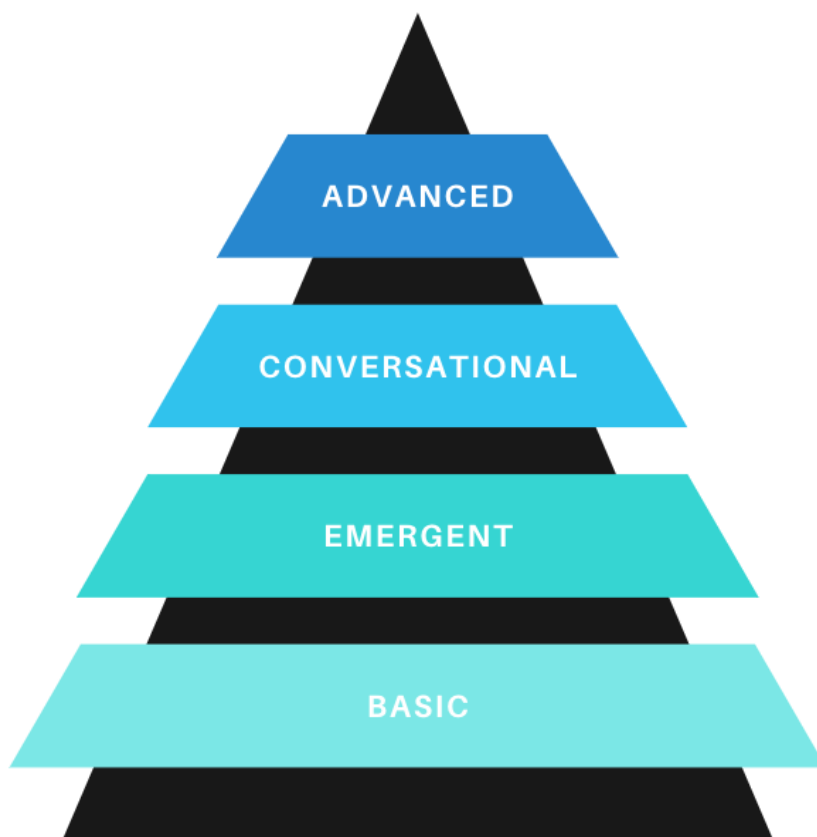
Lesson	Vocabulary	Grammar	Culture	Objective
1	Review of Level 1			
2	Contraception and sexually transmitted infection (STI) terms	Idiomatic expressions as commands	Contraception methods	Discuss sexual history with patients and talk about contraception and STIs
3	Cardiology and myocardial infarction (MI) terms	Reflexive verbs	Expressions to attract attention	Ask questions about MI symptoms and discuss heart murmurs with patients
4	Pneumology and allergy terms	Present progressive tense	Religion and health in Latino culture	Talk about asthma symptoms and allergies with patients
5	Medication and dosage terms	Present perfect tense	Differences between Latin American and U.S. pharmacies	Describe medications to a patient and explain dosing instructions
6	Urology terms	False cognates and imperatives	N/A	Talk about a vasectomy
7	Obstetric terms	Preterite tense - AR verbs	La Cuarentena (a period of confinement after childbirth)	Talk with patients during a pre-natal exam and ask questions during labor
8	Pre- and post-op and surgical terms	Preterite tense with - ER and - IR verbs and direct object pronouns	Fatalism and beliefs about death in Latino culture	Talk to a patient during pre-op
9	Elder care terms	Irregular preterite tense	Collectivism in Latino culture	Talk to an elderly patient during a mental acuity exam
10	Drug and alcohol abuse terms	Imperfect tense and indirect object pronouns	N/A	Ask questions about drug and alcohol abuse
11	Stroke terms	Differences between imperfect and preterite tenses	N/A	Ask questions about stroke symptoms and talk about stroke recovery
12	Review			

Level 3

Lesson	Vocabulary	Grammar	Objective
1	Review of Level 2		
2	Tuberculosis terms	Imperfect progressive tense and comparatives and superlatives	Talk with a patient about Tuberculosis
3	Metabolic terms	Hacer in time clauses and demonstrative adjectives and pronouns	Talk with a patient about metabolic syndrome
4	Major trauma terms	Simple prepositions - A, De, En, Por, and Para	Discuss major trauma injuries with patients
5	Discharge planning terms	Pluperfect tense and compound prepositions	Talk with a patient about discharge planning
6	Terms for cancers affecting women	Prepositions with verbs and future tense	Discuss cancer with patients and talk about a breast exam
7	Well baby visit and child safety terms	Conditional tense and impersonal construction with Se	Discuss questions during a well baby visit and talk about child-proofing a home
8	Palliative care terms	Present subjunctive and subjunctive with verbs of volition	Talk about end-of-life planning and care
9	HIV/AIDS terms	Subjunctive and expressions of doubt	Talk about HIV/AIDS and ask questions about risk factors
10	Depression and suicide terms	Subjunctive and expressions of emotion	Talk to at-risk patients about depression and suicide
11	Seizure terms	Subjunctive and impersonal expressions	Talk with a patient about a seizure and discuss a mental acuity exam after a seizure
12	Review		

Canopy's Scale for Bilingual Proficiency in Healthcare Communication

The Canopy Scale was created to provide a uniform measure of bilingual proficiency in the medical industry. With funding support from the National Institutes of Health (NIH), the scale is designed to serve as a consistent designation for recognizing the linguistic and cultural competence of the healthcare workforce. The scale was created by adapting the level descriptors from the widely recognized Common European Framework of Reference (CEFR) to the medical context based on a needs analysis of the specific domain of U.S. healthcare. Accordingly, the [CanopyCredential](#) **Medical Bilingual Proficiency Assessment** is scored using the healthcare-specific descriptors of the Canopy Scale.



Canopy Level	Listening	Speaking
Advanced	<p>You can follow the main idea and specific details of extended speech on complex medical topics, such as a technical discussion related to a patient's history or test results, even when the topic goes beyond your area of specialization. You can recognize and understand both formal and informal speech and shifts between them. You understand most medical expressions and terminology with ease though you may occasionally need to confirm certain details. You can follow extended speech even when it is not clearly structured and when some of the meaning is implied rather than explicit. You can take into consideration the speaker's mood, tone, and point of view to better understand what is being expressed.</p>	<p>You can speak clearly for an extended period of time on complex medical topics, such as a technical discussion related to a patient's diagnosis. You can give elaborate descriptions and narratives, integrating sub-level themes, developing particular points, and rounding off with an appropriate conclusion. You can communicate clearly detailed distinctions between ideas and explain trade-offs, such as the pros and cons for treatment options. You can give instructions on carrying out a series of complex medical procedures, such as those related to surgery. You can develop and support an argument and speculate about a hypothetical situation. You can use natural, colloquial phrasing and tone shifts to show appropriate social and emotional reactions to situations that are familiar as well as those that are unexpected. You can use a variety of strategies to appropriately share sensitive news or approach difficult decisions with patients.</p>
Conversational	<p>You can understand the main ideas of complex speech related to a wide range of medical topics, including technical discussions related to patient symptoms, history, diagnosis, and treatment. You can understand extended speech in most situations you encounter, including both familiar and unfamiliar medical topics. You can follow complex lines of argument provided the medical topic is familiar, and the explanation is well organized. You can understand a speaker's mood and tone, even when the situation is unfamiliar.</p>	<p>You can give clear, systematic descriptions related to a wide range of medical topics, such as explaining a complex diagnosis. You can highlight significant points and give relevant supporting details, justifications, and examples. You can develop a clear argument and explain advantages and disadvantages, such as for different treatment options. You can use a variety of expressions or tone shifts to show appropriate social and emotional reactions to most situations, including when giving sensitive news or advice to patients.</p>

Canopy Level	Listening	Speaking
Emergent	You can understand the main point and most details of a narrative explanation about familiar medical matters, such as a patient's medical history. You can understand moderately complex medical terms, carry out familiar but technical instructions, and understand a variety of questions and requests. You can identify a speaker's mood and tone, including expressions of concern, complaints, or problems.	You can give straightforward explanations related to a variety of familiar medical topics, such as describing a common diagnosis. You can offer advice or recommendations and give detailed instructions. You can ask and answer questions in both routine and non-routine situations. You can explain why something is a problem or express a concern, indicating emotions appropriately through language.
Basic	You can understand basic medical terminology, phrases and frequently used expressions as part of routine, everyday tasks such as collecting patient demographic information or documenting common symptoms. You can follow the main point of a short explanation that is slowly and clearly articulated, with occasional need for repetition.	You can ask and answer questions in simple and routine situations that require a direct exchange of information, such as collecting patient demographic information or documenting common symptoms. You can use basic medical terminology, phrases, and expressions to give straightforward information on familiar medical topics, such as describing a treatment plan as a simple list of points. You can rely on a small set of simple phrases to show concern, empathy, kindness and respect.

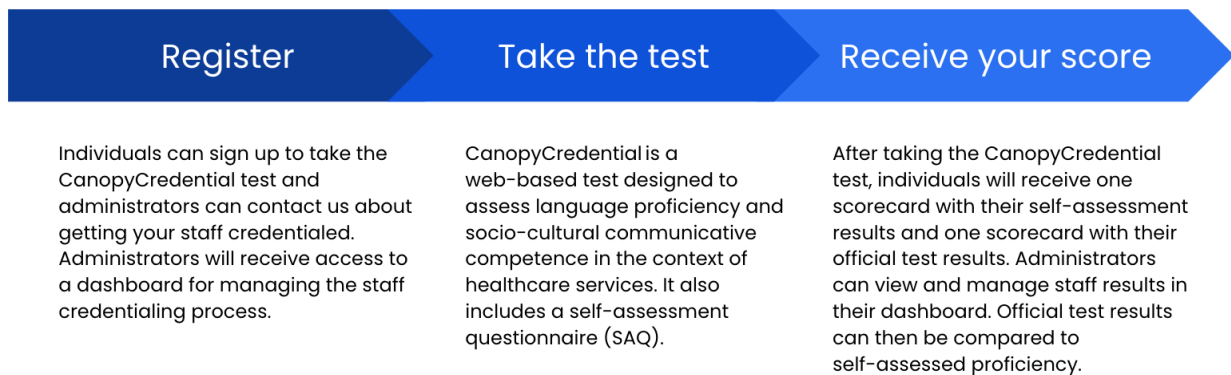
Alignment of Canopy Scale with other Proficiency Scales

There are three standardized, international scales for assessing second-language proficiency: the Proficiency Guidelines of the American Council the Teaching of Foreign Languages (ACTFL), the Skill Level Descriptions of the Interagency Language Roundtable (ILR), and the Common European Framework of Reference for Language (CEFR). Comparatively, the CEFR is a more versatile scale with increasing popularity around the world, and the CEFR descriptors are particularly useful for creating customized assessments and pedagogical materials for specific contexts, which is why the [Canopy Scale](#) has adapted the CEFR level descriptors for healthcare communication. For those who prefer the CEFR, ACTFL, or ILR descriptors for score reporting and interpretation, the table below can serve as an approximate, unofficial guide for cross-referencing those options with the [Canopy Scale](#) based on a review of existing alignment literature and a qualitative analysis of each scale's level descriptors³⁻⁷.

Canopy Scale	CEFR	ILR	ACTFL
Advanced - Level 2	C2	3+	Superior
Advanced - Level 1	C1	3	Advanced High
Conversational - Level 2	B2 High	2+	Advanced Mid
Conversational - Level 1	B2 Low	2	Advanced Low
Emergent - Level 2	B1 High	1+	Intermediate High
Emergent - Level 1	B1 Low	1	Intermediate Mid
Basic - Level 2	A2	1	Intermediate Low
Basic - Level 1	A1	0+	Novice High

CanopyCredential Self-Assessment Questionnaire (SAQ) and Scorecards

The [CanopyCredential Medical Bilingual Proficiency Assessment](#) has several components that help you make the most of the test. The process is as follows:



The test includes a short self-assessment questionnaire which asks basic questions about your language background and abilities. The self-assessment questionnaire is based on [Canopy's Inventory of Essential Skills for Healthcare Communication](#) and serves the following purposes:

- Gives a user a sense of their English or Spanish proficiency level, to determine whether they would like to take the [CanopyCredential Medical Bilingual Proficiency Assessment](#)
- Allows a user to waive out of testing in English, depending on their language background and in accordance with institution-specific policies
- Identifies discrepancies between one's perceived language proficiency and their proficiency as measured through the [CanopyCredential Medical Bilingual Proficiency Assessment](#)

Test-takers will receive two scorecards after completing the test, one with their self-assessment results and one with their official test results. Official test results can then be compared to self-assessed proficiency according to the [Canopy Scale](#).

SELF-ASSESSMENT SUMMARY

Name: Katharine Neal

Date: July 20, 2021

Birthdate (MM/DD): 07/12

This summary reflects your responses on the self-assessment questionnaire, which is administered as a precursory step to help you determine if you are ready to take the Canopy Credential test. This summary is for your information only and should not be presented to any institution for academic admission, employment consideration or other purposes. Results of your linguistic proficiency will be provided on the official Canopy Credential Scorecard, after you have completed that assessment test.

Your self-assessment suggests that you are ready to take the Canopy Credential Test of Medical Bilingual Proficiency. Learn more about the credential process and schedule a test session on the Canopy website.

Your Self-Assessed Bilingual Proficiency for Healthcare Communication

As measured on the Canopy Scale

Basic Level 1	Basic Level 2	Emergent Level 1	Emergent Level 2	Conversational Level 1	Conversational Level 2	Advanced Level 1	Advanced Level 2
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• Not covered by this version of the questionnaire.

According to your self-assessment, your medical Spanish is at or around the level of "Conversational - Level 1" and your medical English is at or around the level of "Conversational - Level 2". These levels correspond to the following descriptions of communicative ability. For the full set of level descriptions on the Canopy Scale, visit the [Canopy website](#).

ENGLISH LISTENING

Conversational Level 2

Based on your self-assessment of your English listening skills, you can understand the main ideas of complex speech related to a wide range of medical topics, including technical discussions related to patient symptoms, history, diagnosis, and treatment. You can understand extended speech in most situations you encounter, including both familiar and unfamiliar medical topics. You can follow complex lines of argument provided the medical topic is familiar, and the explanation is well organized. You can understand a speaker's mood and tone, even when the situation is unfamiliar. Your self-assessment indicated that you could use some extra practice with the following English listening skill(s).

- Understand patient symptoms or history
- Understand advice or recommendations
- Understanding questions and requests about procedures and gaining consent

ENGLISH SPEAKING

Conversational Level 2

Based on your self-assessment of your English speaking skills, you can understand the main ideas of complex speech related to a wide range of medical topics, including technical discussions related to patient symptoms, history, diagnosis, and treatment. You can understand extended speech in most situations you encounter, including both familiar and unfamiliar medical topics. You can follow complex lines of argument provided the medical topic is familiar, and the explanation is well organized. You can understand a speaker's mood and tone, even when the situation is unfamiliar. Your self-assessment indicated that you could use some extra practice with the following English speaking skill(s).

- Understand patient symptoms or history
- Understand advice or recommendations
- Understanding questions and requests about procedures and gaining consent

SPANISH LISTENING

Conversational Level 1

Based on your self-assessment of your Spanish listening skills, you can understand the main ideas of complex speech related to a wide range of medical topics, including technical discussions related to patient symptoms, history, diagnosis, and treatment. You can understand extended speech in most situations you encounter, including both familiar and unfamiliar medical topics. You can follow complex lines of argument provided the medical topic is familiar, and the explanation is well organized. You can understand a speaker's mood and tone, even when the situation is unfamiliar. Your self-assessment indicated that you could use some extra practice with the following Spanish listening skill(s).

- Understand patient symptoms or history
- Understand advice or recommendations
- Understanding questions and requests about procedures and gaining consent

SPANISH SPEAKING

Conversational Level 1

Based on your self-assessment of your Spanish speaking skills, you can understand the main ideas of complex speech related to a wide range of medical topics, including technical discussions related to patient symptoms, history, diagnosis, and treatment. You can understand extended speech in most situations you encounter, including both familiar and unfamiliar medical topics. You can follow complex lines of argument provided the medical topic is familiar, and the explanation is well organized. You can understand a speaker's mood and tone, even when the situation is unfamiliar. Your self-assessment indicated that you could use some extra practice with the following Spanish speaking skill(s).

- Understand patient symptoms or history
- Understand advice or recommendations
- Understanding questions and requests about procedures and gaining consent

Quickview of Canopy Scale

Self-assessment results

Descriptions of proficiency at self-assessed levels for English and Spanish speaking and listening

YOUR BILINGUAL PROFICIENCY FOR HEALTHCARE COMMUNICATION

As measured on the Canopy Scale



According to your performance on the Canopy Credential assessment, your medical Spanish was rated at "Conversational - Level 1" and your medical English was rated at "Advanced - Level 1". Your scores correspond to the following descriptions of communicative ability. For the full set of level descriptions on the Canopy Scale, visit the [Canopy website](#).

ENGLISH LISTENING	ENGLISH SPEAKING	SPANISH LISTENING	SPANISH SPEAKING
Advanced Level 1	Advanced Level 1	Conversational Level 1	Conversational Level 1
You can follow the main idea and specific details of extended speech on complex medical topics, such as a technical discussion related to a patient's test results, even when the topic goes beyond your area of specialization. You can easily understand speech in a variety of contexts and interpret meaning even when it is implied rather than explicit.	You can speak clearly for an extended period of time on complex medical topics, such as giving a technical explanation of a patient's diagnosis. You can give elaborate and detailed descriptions and arguments, including about hypothetical situations. You can speak naturally in a variety of contexts and are comfortable discussing sensitive topics with patients.	You can understand the main ideas of discussions on a wide range of medical topics, such as an extended explanation of a patient's medical history. When the topic is familiar, you can pick up on a speaker's tone and understand complex lines of argument, and you can mostly follow along in unfamiliar situations too.	You can give clear, systematic descriptions related to a wide range of medical topics, such as explaining a patient's diagnosis. You can give a clear argument with relevant supporting details and examples. You can handle a variety of contexts and are mostly comfortable discussing sensitive topics with patients.

Congratulations on completing the Canopy Credential proficiency assessment!

Your eligibility to function as "Qualified Bilingual Staff (QBS)" is determined by the institution where you work. Canopy provides a toolset for hospitals and other care delivery organizations to determine the applicable cutoff level on the Canopy Scale. Please consult with your institution for your QBS status.

- This scorecard can be accessed through your Canopy Profile.
- The authenticity of this Scorecard and Certificate ID can be verified on the [Canopy website](#).
- To interpret the scores using the CEFR, ILR or ACTFL scale, consult the [Canopy Toolkit for Qualified Bilingual Proficiency](#).
- We recommend test-takers re-certify their proficiency every two to three years, depending on efforts and progress made.

Disclaimer: The results depicted on this scorecard represent the test-taker's performance in a simulated oral proficiency interview on the date of the assessment, and do not guarantee or predict any quantitative or qualitative performance in an actual healthcare setting and/or with an actual patient.



Temporary report during pilot study, to be replaced by an official version

YOUR SOCIO-CULTURAL COMMUNICATIVE COMPETENCE


Socio-Cultural Communicative Competence measures one's ability to deliver accurate content effectively and impartially. Your performance has been rated "Somewhat Competent" for Effectiveness and "Highly Competent" for Impartiality. These ratings do not factor in your Bilingual Proficiency score and are provided for your awareness only. For a detailed description of the competence levels, visit the [Canopy website](#).

IMPARTIALITY	EFFECTIVENESS
Highly Competent	Somewhat Competent
You clearly avoid any emotional involvement that would affect your ability to treat patients neutrally and objectively. You avoid biased judgment, stereotyping, and making generalizations about groups of people. You do not include personal information or opinion. You completely respect the patient's cultural perspectives and preferences.	You deliver mostly accurate information and partly achieve your communication goals. You sometimes demonstrate empathy, rapport, respect, or friendliness. You may occasionally struggle to use language that is accessible to patients or to smoothly transition between medical and informal language. Your speed of speech is usually easy to follow.

Quickview of Canopy Scale

Official proficiency test results

Institution-specific information about credentialing as qualified bilingual staff (QBS)

Socio-cultural communicative competence results

Canopy's Scale for Sociocultural Communicative Competence in Healthcare

In addition to measuring language proficiency, CanopyCredential offers an assessment of socio-cultural communicative competence (SCCC) designed to help healthcare institutions comply with Section 1557 of the Affordable Care Act (ACA). This states that healthcare staff and providers who treat patients in a language other than English must demonstrate to their institution that they are “able to **effectively, accurately, and impartially** communicate directly with individuals with limited English proficiency in their primary language.” Canopy's SCCC scale focuses on **effectiveness, accuracy, and impartiality** to provide an additional layer of confidence that someone is qualified to speak directly with patients.

4 Highly Competent	You deliver completely accurate information and fully achieve your communication goals. You always use language that is accessible to patients, and you smoothly transition between medical and informal language. Your speed of speech is easy to follow. You demonstrate empathy and respect while avoiding any emotional involvement that would affect your ability to treat patients neutrally and objectively. You always use an appropriate tone and avoid biased judgment or stereotyping.
3 Reasonably Competent	You nearly always deliver accurate information and generally achieve your communication goals. You almost always use language that is accessible to patients and smoothly transition between medical and informal language. Your speed of speech is almost always easy to follow. You usually demonstrate empathy and respect while avoiding any emotional involvement that would affect your ability to treat patients neutrally and objectively. You usually use an appropriate tone and avoid biased judgment or stereotyping.

<p>2</p> <p>Somewhat competent</p>	<p>You deliver mostly accurate information and partly achieve your communication goals. You may occasionally struggle to use language that is accessible to patients or to smoothly transition between medical and informal language. Your speed of speech may not always be easy to follow. You may not always clearly demonstrate empathy and respect, and you may show emotional involvement that could affect your ability to treat patients neutrally and objectively. You may not always use an appropriate tone and may show occasional signs of biased judgment or stereotyping.</p>
<p>1</p> <p>Not yet competent</p>	<p>You deliver only somewhat accurate information and may not achieve your communication goals. You often struggle to use language that is accessible to patients or to smoothly transition between medical and informal language. Your speed of speech may not be easy to follow. You may not clearly demonstrate empathy and respect, and you may show emotional involvement that could affect your ability to treat patients neutrally and objectively. You may use an inappropriate tone or show clear signs of biased judgment or stereotyping.</p>

Canopy's Can-Do Statements for Bilingual Healthcare Communication

Language proficiency is primarily about what you can do in the languages you know. Can you understand a patient who is describing their symptoms? Can you explain to a patient how to use a particular medication? While the number of vocabulary words and grammatical patterns that you know contributes to your language knowledge, these factors on their own do not show that you can communicate effectively. For this reason, many language proficiency scales are accompanied by “can-do” statements that describe the types of social interactions that you can successfully achieve in a language.

At Canopy, we have developed the only set of can-do statements that are specific to language proficiency as it applies in healthcare settings. The [Canopy Can-Do Statements](#) provide a link between the [Canopy Inventory of Essential Skills](#) and the [Canopy Scale for Bilingual Proficiency](#). They offer specific expectations about the extent to which someone at a given proficiency level can carry out a given skill. The can-do statements serve diverse functions, including:

- Helping healthcare professionals to identify their own language proficiency level
- Supporting healthcare professionals in setting language learning goals and assessing their progress
- Serving as a benchmark for educators to develop curricula and lesson plans specific to language and healthcare
- Assisting administrators in identifying qualified bilingual staff (QBS) and setting language access policies

Essential Skill	Listening			
	Basic	Emergent	Conversational	Advanced
L1: Understand information about patient habits, lifestyle, or living situation	Can understand phrases and frequently used expressions in routine exchanges about patient habits, lifestyle, and living situation. Can follow the main point of a short explanation about habits, lifestyle, or living situation that is slowly and clearly articulated.	Can understand a short narrative explanation of patient habits, lifestyle, or living situation. Can identify both main points and most details when the topic is familiar and speech is straightforward and clearly articulated.	Can understand an extended explanation about patient habits, lifestyle, or living situation, provided speech is well organized	Can understand a detailed explanation about patient habits, lifestyle, or living situation, even when speech is not well organized and some of the meaning is implied rather than explicit.
L2: Understand patient symptoms or history	Can understand basic medical terminology, phrases and frequently used expressions in routine exchanges about patient symptoms and history. Can follow the main point of a short explanation about symptoms or history that is slowly and clearly articulated.	Can understand a short narrative explanation of patient symptoms and history, including moderately complex medical terminology and phrases. Can identify both main points and most details when the topic is familiar and speech is straightforward and clearly articulated.	Can understand the main points of a complex discussion related to patient symptoms or history. Can understand a wide range of medical expressions and terminology.	Can understand the main points and specific details of a complex technical discussion related to patient symptoms or history, even when the topic goes beyond your area of expertise. Can understand most medical expressions and terminology with ease.
L3: Understand information about traumatic incidents or accidents	Can understand basic medical terminology and frequently used expressions in routine exchanges about a traumatic incident or accident. Can follow the main point of a short explanation about a traumatic	Can understand a short narrative explanation of a traumatic incident or accident, including moderately complex medical terminology and phrases. Can identify both main points and most details when	Can understand an extended explanation about a traumatic incident or accident, provided that speech is well organized. Can understand a wide range of medical	Can understand a detailed explanation about a traumatic event or incident, even when speech is not well organized and some meaning is implied rather than explicit. Can understand most medical expressions and

	incident or accident that is slowly and clearly articulated.	the topic is familiar and speech is straightforward and clearly articulated.	expressions and terminology.	terminology with ease.
L4: Understand test results, diagnosis, treatment, or medication	Can understand familiar questions about test results, diagnosis, treatment, or medication, with occasional need for repetition.	Can understand a variety of questions, requests, and simple technical information related to test results, diagnosis, treatment, or medication.	Can understand the main points of a complex argument or technical discussion related to test results, diagnosis, treatment, or medication. Can understand patients' detailed or technical questions or requests.	Can understand the main points and specific details of a complex technical discussion related to test results, diagnosis, treatment, or medication, even when the topic goes beyond your area of expertise.
L5: Understand information related to follow-up care	Can understand familiar questions about follow-up care, with occasional need for repetition.	Can understand a variety of questions, requests, and simple technical information related to follow-up care.	Can understand the main points of an extended explanation about follow-up care. Can understand detailed questions or requests related to follow-up steps, as long as speech is clear and well organized.	Can understand the main points and specific details of an extended explanation or question about follow-up care, even when speech is not well organized.
L6: Understand medical advice or recommendations	Can understand familiar questions about medical advice and recommendations, with occasional need for repetition.	Can understand a variety of questions, requests, and simple technical information related to medical advice or recommendations.	Can understand the main points of a complex argument or technical discussion related to medical advice and recommendations. Can understand detailed questions or requests related to medical advice or recommendations.	Can understand the main points and specific details of a complex technical discussion related to medical advice or recommendations, even when the topic goes beyond your area of expertise.

L7: Understanding questions and requests about procedures and gaining consent	Can understand familiar questions about a procedure. Can understand if permission or consent is given as part of a simple, routine exchange.	Can understand a variety of (familiar and unfamiliar) questions and requests related to a procedure. Can understand if permission or consent is given as part of a familiar exchange.	Can understand detailed questions or requests related to a procedure, as long as speech is clear and well organized. Can understand if permission and consent is given even in an unfamiliar context.	Can understand detailed, complex questions or requests related to a procedure, even when speech is not well organized. Can understand if permission and consent is given even in an unfamiliar context.
L8: Evaluate a patient's mental state or vital signs	Can understand enough to assess a patient's mental state or vital signs through a simple, routine exchange.	Can understand enough to assess a patient's mental state or vital signs, including short narrative explanations and follow-up questions.	Can understand the main points of an extended explanation related to a patient's mental state or vital signs, as long as the explanation is clear and well organized.	Can understand the main points and technical details of an extended explanation related to a patient's mental state or vital signs, even when the explanation is not well organized.
L9: Understand non-clinical issues	Can understand familiar questions about payment, scheduling, operational policies, or other non-clinical issues, with occasional need for repetition.	Can understand a variety of questions and requests related to payment, scheduling, operational policies, or other non-clinical issues.	Can understand the main points of an extended explanation about payment, scheduling, operational policies, or other non-clinical issues, as long as speech is clear and well organized.	Can understand the main points and specific details of an extended explanation about payment, scheduling, operational policies, or other non-clinical issues, even when speech is not well organized.
L10: Understand speaker mood, tone, attitude, and emotional or psychological state	Can use context clues to interpret a speaker's mood, tone, attitude, and emotional or psychological state, even if unable to follow everything being said.	Can identify a speaker's mood, tone, attitude, and emotional or psychological state through the language they use in most familiar situations, including expressions of concern, complaints, or problems.	Can identify a speaker's mood, tone, attitude, and emotional or psychological state through the language they use in a range of familiar and unfamiliar situations, including expressions of concern,	Can identify a speaker's mood, tone, attitude, and emotional or psychological state through the language they use in both familiar and unfamiliar situations. Can understand expressions of concern, complaints, or problems, even when meaning is implied

			complaints, or problems.	rather than explicit, and can take this into consideration to better understand what is being expressed.
L11: Understand information or instructions from other clinicians (primarily in English)	Can carry out familiar instructions from other clinicians and understand straightforward questions. Can follow the main point of a short explanation about patient status or workplace procedures that is slowly and clearly articulated.	Can understand the main points and most details of a narrative explanation about patient status or workplace procedures, then carry out related tasks, as long as speech is clearly articulated and the topic is familiar.	Can understand the main points of an extended, complex explanation about patient status or workplace procedures, then carry out related tasks, as long as the explanation is well organized.	Can understand the main points and specific details of an extended, complex explanation about patient status or workplace procedures, then carry out related tasks, even when the explanation is not well organized.

Essential Skill	Speaking			
	Basic	Emergent	Conversational	Advanced
S1: Ask about or discuss patient habits, lifestyle, living situation, symptoms, or history	Can ask and answer familiar questions to be able to meet a range of concrete needs related to patient habits, lifestyle, living situation, symptoms, and history.	Can ask and answer both routine and non-routine questions related to patient habits, lifestyle, living situation, symptoms, and history. Can summarize what a patient has told you as a linear sequence of points. Can obtain further details, give a brief explanation, or express a concern as needed.	Can obtain detailed information and engage in a straightforward but extended discussion related to patient habits, lifestyle, living situation, symptoms, and history. Can summarize what a patient has told you expanding on particular points as appropriate.	Can obtain detailed information and engage in an extended, complex discussion related to patient habits, lifestyle, living situation, symptoms, and history. Can summarize what a patient has told you and draw on this information to support your own arguments, opinions, or advice.
S2: Explain or discuss test results or a diagnosis	Can use basic medical terminology, phrases, or expressions to give a simple test result or diagnosis as part of a familiar exchange.	Can give a straightforward description of a familiar diagnosis or test result, appropriately expressing any concerns.	Can give clear, systematically developed descriptions related to patient diagnosis or test results, with appropriate highlighting of significant points and relevant supporting detail.	Can speak clearly and fluently for an extended period of time on complex subjects related to patient diagnosis or test results. Can systematically develop a detailed and well-structured argument related to a diagnosis by including examples and justifications, elaborating on particular points, and giving a summarizing conclusion. Can speculate or hypothesize about other possibilities but appropriately justify my own views.

S3: Explain or discuss a treatment or medication	Can describe a familiar medication in simple terms or give a treatment plan as a simple list of points.	Can give a straightforward description of a familiar treatment or medication, including relevant details.	Can give detailed and complex explanations of treatment or medication, clearly explaining the advantages and disadvantages of different options.	Can speak clearly and fluently for an extended period of time about treatment or medication, elaborating and adding details as appropriate. Can communicate detailed distinctions between ideas, explaining trade-offs or advantages and disadvantages, such as for treatment options.
S4: Explain or discuss follow-up care, medical advice, or recommendations	Can give medical advice and recommendations or explain follow-up steps in simple terms as part of a familiar exchange.	Can give a straightforward description of follow-up steps and offer medical advice and recommendations, including relevant details.	Can give detailed explanations of follow-up care, medical advice, or recommendations, developing a clear argument and expanding on your point of view with relevant justifications and examples.	Can give detailed, multi-step instructions related to follow-up care. Can systematically develop a detailed and well-structured argument related to medical advice or recommendations by including examples and justifications, elaborating on particular points, and using an appropriate, summarizing conclusion. Can clearly communicate distinctions between ideas, explaining trade-offs or advantages and disadvantages.
S5: Provide instructions or explain a procedure	Can provide instructions or explain a procedure as a simple list of points.	Can provide detailed instructions or explain the details of a procedure as an elaborated list of points.	Can give multi-step instructions and appropriately gain permission or consent. Can give a detailed explanation of a straightforward procedure using appropriate terminology.	Can give detailed, complex, multi-step instructions and appropriately gain permission or consent. Can give a clear, detailed explanation of a complex procedure using appropriate terminology.

S6: Evaluate a patient's mental state or vital signs	Can ask and answer familiar questions to be able to meet concrete needs related to evaluating a patient's mental state or vital signs.	Can ask and answer a range of questions related to a patient's mental state or vital signs, obtain further details, and check and confirm information.	Can obtain detailed information and engage in an extended discussion related to a patient's mental state or vital signs.	Can obtain detailed information and engage in a complex, extended discussion related to a patient's mental state or vital signs.
S7: Address non-clinical issues	Can ask and answer familiar questions to meet concrete needs related to payment, scheduling, operational policies, or other non-clinical issues.	Can give a straightforward description or explanation related to payment, scheduling, operational policies, or other non-clinical issues.	Can give detailed explanations related to payment, scheduling, operational policies, or other non-clinical issues.	Can give detailed, complex explanations related to payment, scheduling, operational policies, or other non-clinical issues. Can clearly communicate distinctions between ideas, explaining trade-offs or advantages and disadvantages.
S8: Use a respectful tone and provide appropriate emotional reactions or support	Can rely on a small set of simple phrases to show concern, empathy, kindness and respect.	Can explain why something is a problem or express a concern, indicating emotions appropriately through language.	Can use certain expressions or tone changes to show appropriate social and emotional reactions to familiar situations, including when giving sensitive news or advice to patients.	Can use natural, colloquial phrasing and tone shifts to show appropriate social and emotional reactions to both familiar and unexpected situations. Can use a variety of strategies to appropriately share sensitive news or advice with patients.
S9: Summarize, relay, or translate information written in English	Can relay (in a language other than English) the main points of simple, short informational texts (in English) on familiar topics, especially with the help of illustrations or graphics.	Can summarize and relay (in a language other than English) the main points and most details of straightforward informational texts, such as brochures, notices, or letters (written in English).	Can synthesize, summarize, and relay (in a language other than English) the main points of longer and complex texts (in English), such as formal reports, which may contain technical medical information.	Can summarize (in a language other than English) long, demanding, or technical texts (in English), even when the information goes beyond your own field of medical specialization. Can explain (in a language other than English) the relevance of specific information found in a particular section of a long, complex text (written in English). Can draw on information from a complex written text

				(in English) to support your own spoken argument, opinion, or advice (in a language other than English).
S10: Give information or instructions to other clinicians (primarily in English)	Can ask and answer simple questions when interacting with other clinicians in familiar settings. Can meet concrete needs related to discussing patient status or workplace procedures with other clinicians.	Can give a straightforward description or set of instructions related to patient status or workplace procedures. Can obtain further details as needed and pass on straightforward factual information.	Can engage in a detailed and complex discussion related to patient status or workplace procedures. Can obtain and pass on detailed information.	Can systematically develop a detailed and well-structured argument or explanation related to patient status or workplace procedures. I can obtain and pass on detailed, complex information.

Coming Soon: Canopy's Guide for Determining the Qualified Bilingual Staff (QBS) Credential at Your Facility

We developed the [Canopy Scale for Bilingual Communication](#) and the [CanopyCredential Medical Bilingual Proficiency Assessment](#) to offer a standardized, evidence-based way for healthcare professionals to measure and validate their bilingual medical proficiency (both Medical Spanish and Medical English). These tools recognize the wide range and variability in language skills among healthcare professionals, and they help facilities to recognize the language skills of their staff. However, they do not on their own determine whether a particular individual has met the designation of Qualified Bilingual Staff (QBS) necessary to treat patients in a language other than English as outlined in Section 1557 of the Affordable Care Act. This determination should be made by each institution according to their particular needs and context.

For this reason, we are developing a tool that administrators can access through their Canopy Dashboard for establishing an official QBS credential at your facility. Using this tool in combination with the [Canopy Scale](#) and the [Canopy Can-Do Statements](#) in this Toolkit, you will be able to certify individuals as QBS at your institution. If you are interested in this QBS tool, please [contact us](#) for updates.

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