

**Individual Options Waiver
Review of Continuing Certification Requirements for Interpreter
Agency/Individual**

Provider Name _____ County _____ ODMR/DD Contract # _____
 Reviewer Name _____ Date of Certification _____ Date of Review _____

Item	Waiver Standards & Assurances	Standard Met S/P/N/NA	Comments
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1.	<p>Does the interpreter meet one of the criteria listed below?</p> <ul style="list-style-type: none"> a. Certified interpreter, as certified by the Registry of Interpreters for the Deaf, Inc. (RID) b. Non-certified interpreter training programs (minimum two (2) year program) plus one year of documented service experience; c. Individual with successful completion of written test plus one year of documented service experience; and d. Individuals with two years of documented service experience. 		
2.	<p>Is the interpreter providing services according to the assurances below?</p> <p>Does the interpreter participate in the ISP meeting when requested?</p> <p>ISP Compliance:</p> <ul style="list-style-type: none"> a. Render the message faithfully, always conveying the content and the spirit of the consumer, using language most readily understood by the person (s) whom they serve; b. Not counsel, advise, or interject personal opinions, and c. Participate in the consumer’s ISP team meeting if and when requested by the consumer. 		

Legend: S=Substantial Compliance P= Partial Compliance N=Non Compliance NA= Not Applicable