

HARFORD COUNTY HEALTH DEPARTMENT POLICY

Title of Policy: Services for Clients who are Deaf and Hard of Hearing	
Program Area: Health Department Services	
Approved By: <i>Susan Kelly</i>	Original Effective Date: 4/7/14
Susan Kelly, Health Officer	Revised Dates:

1.0 POLICY

As a unit of the Maryland Department of Health and Mental Hygiene (DHMH), the Harford County Health Department (HCHD) follows DHMH Policy 01.02.01, Service Nondiscrimination Policy, effective March 7, 2011 (Attachment A), prohibiting discrimination in the delivery of all services. In following this policy, Harford County Health Department employees are required to provide reasonable accommodations to individuals who are deaf and hard of hearing. The employees should use the manual titled "Services for Clients with Disabilities" (Attachment B) in order to access the appropriate visual communication service when accommodating those individuals who request such a service.

2.0 PURPOSE

This policy provides guidance to health department employees in the delivery of services to individuals who are deaf and hard of hearing who call or come to the health department for services.

3.0 PROCEDURES

Discrimination is prohibited in the delivery of all services provided by the HCHD. Employees will provide reasonable accommodations to individuals with disabilities to ensure an equivalent level of delivery of service. Extra care and service are required when communicating with individuals who are deaf and hard of hearing.

- 3.1 Management will provide initial training regarding accessing visual communication services for the deaf and hard of hearing to ADA Representatives and Receptionists. After the initial training session, ADA Representatives will be responsible for providing training to employees in their divisions. ADA Representatives should forward a copy of the sign in sheet from the training they provide to Human Resources so that training can be recorded in employees' files.
- 3.2 A hard copy of the "Services for Clients with Disabilities" manual will be provided at the initial training. Subsequent copies can be printed from the HCHD Intranet.
- 3.3 The attached "Services for Clients with Disabilities" manual includes information about two different forms of interpretive services:

- Interpreting – visual language interpretation, including American Sign Language, Pidgin Signed English, Signed Exact English (I and II), Oral, Tactile and/or Cued Speech; and
 - CART – Computer Assisted Real-Time Transcription, which is instant verbatim translation of the spoken word into English text.
- 3.4 Employees should follow the list in the manual to contact the appropriate vendor to be used for each type of service (e.g. video relay interpretation or CART) with an individual who is deaf and hard of hearing. (Attachment B)
- 3.5 Employees should follow the procedures outlined in the manual in providing interpretive services, taking care to complete the appropriate forms provided to document or schedule the services in a timely manner. (Attachment B)

3.6 **ROLES and RESPONSIBILITIES**

All Staff

- Provide visual communication services to clients as described in this policy.
- Complete necessary forms indicating services rendered or services needed.

ADA Representatives

- Ensure all staff in their program will be trained.
- Provide immediate assistance with trouble-shooting.
- Report issues to the ADA Coordinator.
- Assist staff in ordering on-site services and remote CART services.

ADA Coordinator

- Provide compliance training.
- Provide technical assistance and advice to staff in administrative and program units regarding nondiscriminatory delivery of services.
- Provide written reference materials to ADA representatives.

Compliance Officer

- Monitor and enforce HCHD compliance efforts to avoid discrimination.
- Monitor policies and procedures necessary for compliance with applicable Federal and State mandates.
- Conduct on-site review as necessary, to ensure nondiscrimination in the delivery of services.
- Investigate complaints of discrimination covered by this policy.

DHMH POLICY

<http://www.dhmh.state.md.us/policies/inpolm.htm>

OFFICE OF DIVERSITY AND INCLUSION (ODI)/
EQUAL OPPORTUNITY PROGRAMS (EOP)

DHMH POLICY 01.02.01
Effective Date: March 7, 2011

SERVICE NONDISCRIMINATION POLICY

I. EXECUTIVE SUMMARY

Discrimination is prohibited in the delivery of all services provided by the Department of Health and Mental Hygiene (DHMH). Furthermore, no component or agent of DHMH shall do business on behalf of the Department with entities that engage in discrimination.

The Federal and State statutes providing the authority for this policy are discussed and the basis on which the statutes prohibit discrimination are stated.

The responsibilities of the Deputy Secretaries, the Fair Practices Officer and DHMH employees are explained, and the guidelines for compliance with this policy are stated. Links to relevant online documents are also provided.

II. BACKGROUND

The DHMH Service Nondiscrimination Policy establishes the guidelines for the nondiscriminatory delivery of services by the Department. This version 01.02.01 recodifies, supersedes and replaces DHMH 02.06.01 dated June 29, 2007. The changes to this version are administrative in nature and include changing the codification number, changing the office name and updating references and hyperlinks.

III. POLICY STATEMENTS

A. AUTHORITY

In accordance with Federal and State mandates, DHMH prohibits discrimination in the delivery of services on the basis of race, sex, age, color, national origin, religion or belief, marital status, sexual orientation, genetic testing, political opinion or affiliation, and mental and/or physical disability based on, but not limited to, the following:

- Title VI, Civil Rights Act of 1964, as amended;
- Section 504, Rehabilitation Act of 1973;
- Age Discrimination Act of 1975;

Department of Health & Mental Hygiene

OFFICE OF REGULATION AND POLICY COORDINATION (ORPC)
201 West Preston Street - Suite 512 - Baltimore Maryland 21201-2301
Phone 410 767-6499 FAX 410 767-6483

- Title II, Subtitle A of the Americans With Disabilities Act of 1990, as amended;
- Article 49B, Annotated Code of Maryland, as amended;
- COMAR 01.01.2007.16 Code of Fair Employment Practices;
- COMAR 01.01.2007.01 Standards of Conduct for Executive Branch Employees; and
- Other applicable Federal and State mandates that may include provisions on nondiscrimination in the delivery of services.

B. APPLICABILITY

1. This policy applies to all programs, activities and benefits operated or provided directly or indirectly by DHMH.

2. This policy also applies to all grant programs, health care providers, contractors and subcontractors that receive Federal or State Funds.

C. ROLES AND RESPONSIBILITIES

1. The Secretary hereby assigns each Deputy Secretary responsibility for ensuring the nondiscriminatory delivery of services by all programs directly or indirectly under his or her administration.

2. The Fair Practices Officer (or designee) shall have the following responsibilities:

- Monitor and enforce DHMH compliance efforts to avoid discrimination;
- Monitor policies and procedures necessary for compliance with applicable Federal and State mandates;
- Provide staff assistance to the Secretary and Deputy Secretaries for enforcement of this policy;
- Provide technical assistance and advice to staff in administrative and program units regarding the nondiscriminatory delivery of services;
- Act for the Secretary or Deputy Secretaries, when authorized, to carry out the provisions of this policy;
- Conduct on-site reviews, as necessary, to ensure nondiscrimination in the delivery of services;
- Provide compliance training for DHMH staff; and
- Prepare and submit relevant reports to the Secretary and appropriate State and Federal agencies;

- Investigate complaints of discrimination covered by this policy.
3. All employees (including volunteers), vendors, contractors, subcontractors, agents, grantees and health care providers that receive Federal or State funds are responsible for compliance with the requirements of this policy.

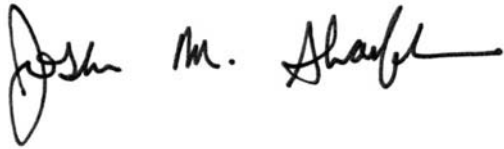
D. COMPLIANCE

1. Employees shall act impartially in the delivery of services and not give preferential treatment to any private organization or individual. (COMAR 01.01.2007.01).
2. No employee shall refuse, withhold or deny service to any person because of race, sex, age, color, national origin, religion or belief, marital status, genetic testing, sexual orientation, political opinion or affiliation, or physical and/or mental disability.
3. Employees shall provide reasonable accommodations to individuals with disabilities to ensure an equivalent level of delivery of service.
4. Violation of these requirements is unlawful and is subject to disciplinary action, penalties or fines, as appropriate.
5. Employees who observe actual or possible discrimination in the delivery of services are encouraged to report the occurrence to the Fair Practices Officer at 410 767-6600 or OEOP@dhmh.state.md.us.

IV. REFERENCES

- Title VI, Civil Rights Act of 1964, as amended
http://www.justice.gov/crt/grants_statutes/titlevi.txt
- Section 504, Rehabilitation Act of 1973
<http://www.hhs.gov/ocr/504.html>
- Age Discrimination Act of 1975
http://www.dol.gov/oasam/regs/statutes/age_act.htm
- Title II A, The Americans with Disabilities Act of 1990, as amended.
<http://www.ada.gov/adahom1.htm>
- Annotated Code of Maryland, Article 49B, as amended
<http://www.michie.com/maryland/lpext.dll/mdcode/298ed/292c8?fn=document-frame.htm&f=templates&2.0#>
- COMAR 01.01.2007.01 Standards of Conduct for Executive Branch Employees
<http://www.dsd.state.md.us/comar/comarhtml/01/01.01.2007.01.htm>
- COMAR 01.01.2007.16 Code of Fair Employment Practices
<http://www.dsd.state.md.us/comar/comarhtml/01/01.01.2007.16.htm>

APPROVED:

A handwritten signature in black ink that reads "Josh M. Sharfstein". The signature is written in a cursive style with a long horizontal stroke at the end.

Joshua M. Sharfstein, M.D., Secretary, DHMH

March 7, 2011
Effective Date



Public Health
Present. Promote. Protect.
Harford County Health Department

Harford County Health Department Services for Clients with Disabilities

This manual outlines accommodations for clients with disabilities including individuals who are: deaf, hard-of-hearing, deaf-blind, blind and visually impaired.

**HCHD
3/25/2014**





The purpose of this manual is to explain how to accommodate clients with sensory disabilities. The following are included in this manual:

- Communication services the Harford County Health Department can provide to clients who are Deaf and Hard of Hearing and how to access them when needed.
- Accommodations for clients who are blind and visually impaired.

This manual is also available on the HCHD Intranet if more copies are needed.

Table of Contents

- Section 1 - Accommodations for clients who are deaf and hard-of-hearing

Services and First Contact Providers.....	4
Roles and Responsibilities.....	5
On-line Video Remote Interpretation Services.....	6
On-line CART Services	10
Scheduled Services – In-person Interpretation and In-person and Remote CART.....	18
Terms and Definitions.....	21
Phone Calls	24
Guidance for Communication with Clients who are Deaf and Hard of Hearing	25

- Section 2 - Accommodations for clients who are blind, deaf-blind and visually impaired

ADA Checklist: Health Care Facilities and Service Providers - Ensuring Access to Services and Facilities by Patients Who Are Blind, Deaf-Blind, or Visually Impaired.....	27
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- Section 1 -

Accommodations for clients who are
deaf and hard-of-hearing

Services

Two Kinds of Service

- Interpreting – Visual Language Interpretation, including American Sign Language, Pidgin Signed English, Signed Exact English (I and II), Oral, Tactile and/or Cued Speech
- CART – Computer Assisted Real-Time Transcription, Instant verbatim translation of the spoken word into English text

Service Delivery

On-line – Accessed via the Internet

- **Video Remote Interpretation (VRI)** – Requires the interpreter to use video conferencing equipment to provide visual language interpreting services from an off-site location to the individual requiring the visual language interpretation service.
- **Remote CART** – The instant verbatim translation of the spoken word into English text by a remote CART provider using a computer and real-time software through an Internet or telephone connection from an off-site location.

In-person – Live interpreters or captioners

- **On-Site Visual Language Interpretation** – Real-time, in-person visual language interpretation, such as American Sign Language, Pidgin Signed English, Signed Exact English (I and II), Oral, Tactile and/or Cued Speech.
- **On-Site CART** – Computer Assisted Real-time Transcription performed on-site.

-1st Contact Service Providers-

On-line – Visual Remote Interpretation

Birnbaum Interpreting Services

On-line – Remote CART Services

Karasch Enterprises

On-Site Interpretation

Abacus N Bytes dba TCA Associates

On-Site CART

Karasch Enterprises

Roles and Responsibilities

Employees

- LEP Liaisons will also act as ADA Liaisons for Deaf and Hard of Hearing Services.
- Complete Forms for each service usage.
- **On-Line Services** will be accessed through computers (laptops or desktops) which have been previously set up by IT. For each program identified as having a need, one computer at reception and at least one computer in another location for use during confidential discussions will be allocated.

Human Resources – ADA Coordinator

- Training will be provided to LEP/ADA Liaisons and Division Directors. It is the responsibility of the LEP/ADA Liaisons and Division Directors to train all receptionists and individuals who engage with the public as part of their regular duties.
- **On-Site Services and Remote CART Service** should be booked through Human Resources, ADA Coordinator. At least 4 business days' notice is needed to process the request. Expedited services are available but at an additional cost. If you do not have the amount of time needed, please call the ADA Coordinator directly to discuss the circumstances.

IT

- Assist with initial coordination of information and set up of hardware and software. IT will be available for troubleshooting issues during usage of services.

Compliance Officer

- Assist with initial coordination of information and run spot checks with programs to see if the services are being used and the process established is running smoothly.

A client walks in and needs Sign Language
Interpretation.....

Visual Remote Interpretation

ON-LINE VISUAL REMOTE INTERPRETATION (VRI)

Birnbaum Interpreting Services -
Sign Language Interpretation via the
Internet.



Here is your VRI account information:

1. Click on icon -



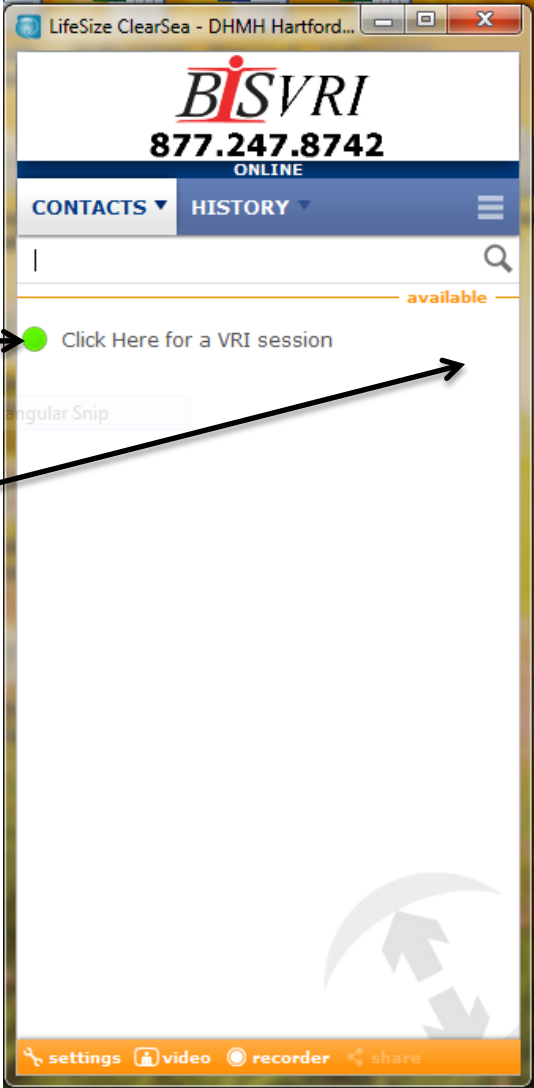
Log in

2. Username is: **DHMH**
3. Password: **bisvri**
4. Under ClearSea Server,
Enter: **call.clickvri.com**

A screenshot of the LifeSize ClearSea login interface. The window title is 'LifeSize ClearSea' and the version is '8.1.10'. The main heading is 'ClearSea'. There are three input fields: 'Username:' with the value 'DHMH', 'Password:' with the value 'bisvri', and 'ClearSea Server:' with the value 'call.clickvri.com'. There is a checkbox for 'Sign me in automatically' which is unchecked. Below the input fields is a blue 'Sign in' button and a link for 'Need a ClearSea account?'. At the bottom, there is the LifeSize logo, which consists of a blue circle with two arrows pointing up and down, and the text 'LifeSize® A division of Logitech'.

4. Arrow over the green dot.

Choices will show on the right, Click on **CALL**.





Harford County Health Department Walk-In VRI SERVICE USAGE FORM



This form must be completed for billing purposes. Keep a copy for your records, but return the original form to: ADA Coordinator.

Date - _____ Time of Service - _____

Division/Program - _____

PCA # - E801

Company Used – Check One

*****NOTE: It is critical that the first vendor listed in bold be used. Documentation is required if the highest-ranked vendor is unable to provide services.**

For Video Remote Interpretation

Q Birnbaum Interpreting Services – Video Remote Interpretation

q Purple Language Services Co. – *Explain below why you were unable to use Birnbaum Interpreting Services.

*Explanation if first vendor in the list was not used -

Name of person completing form _____

Phone number of person completing form _____

Program ADA Representative Signature - _____

Division Director Signature - _____

ADA Coordinator Signature - _____

A client walks in who is deaf or hard of hearing and doesn't use sign language, but they need CART.....

CART – Computer Assisted Real-Time Transcription
(Closed Captioning for conversation)

For Walk-Ins needing CART services

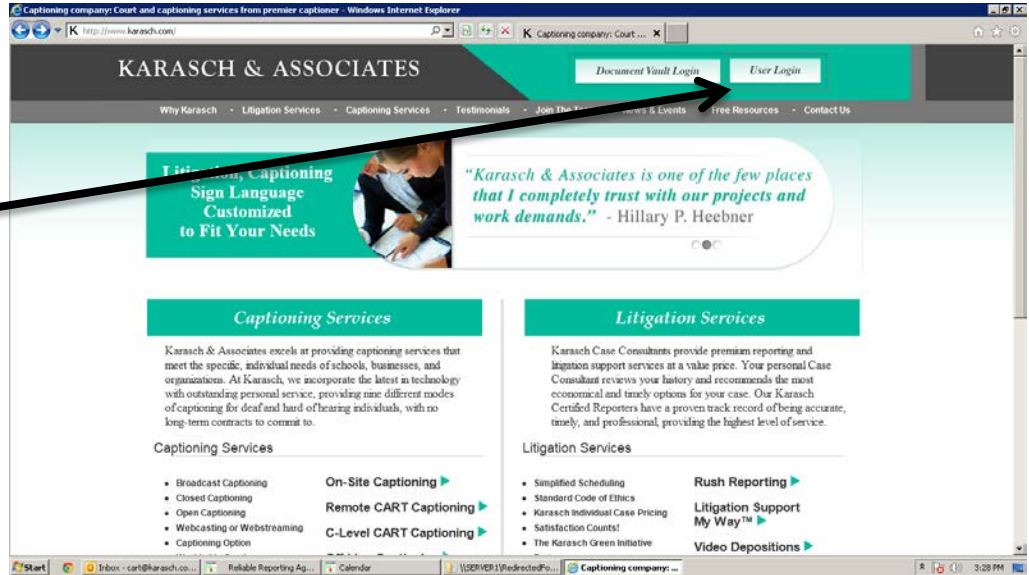
IF a CLIENT walks in and does not use sign language, you can write down your communication or type it on a screen on your computer by following the process below:

- Open a new Microsoft Word document.
- Change the font to at least size 48 and bold.
- Begin typing in the document.

How to Access Scheduled CART services

1. Go to: www.karasch.com

2. Click on the **User Login** button at the top right of the screen

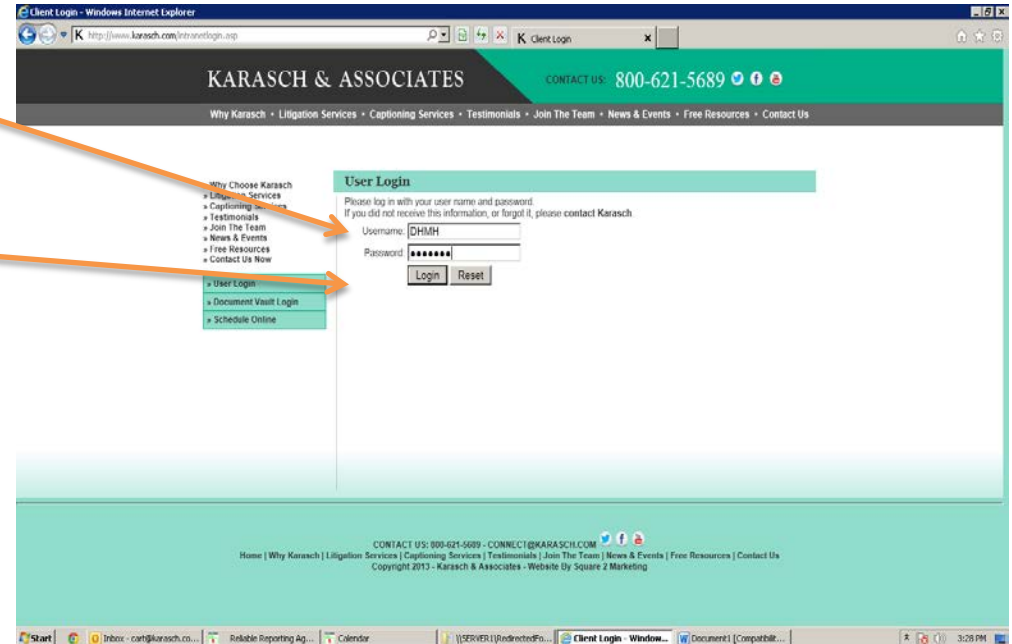


3. Enter username:

DHMH

4. Enter password:

Harford



5. Click on **Join Session** next to Remote CART Meeting.

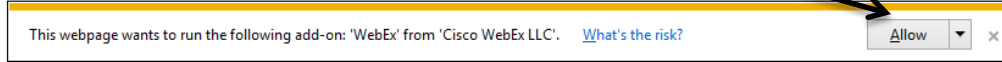
The screenshot shows a web browser window titled "Client Login - Windows Internet Explorer" with the URL "http://www.karasch.com/intranetuser.asp". The page header for "KARASCH & ASSOCIATES" includes the contact number "800-621-5689" and social media icons. A navigation menu lists various services and resources. The main content area is titled "Client Login" and includes a "Log out" link. A welcome message reads "Welcome DHMH Harford County Health Department". Below this is a table with the following content:

Meeting Name	
Remote CART Meeting	Join Session

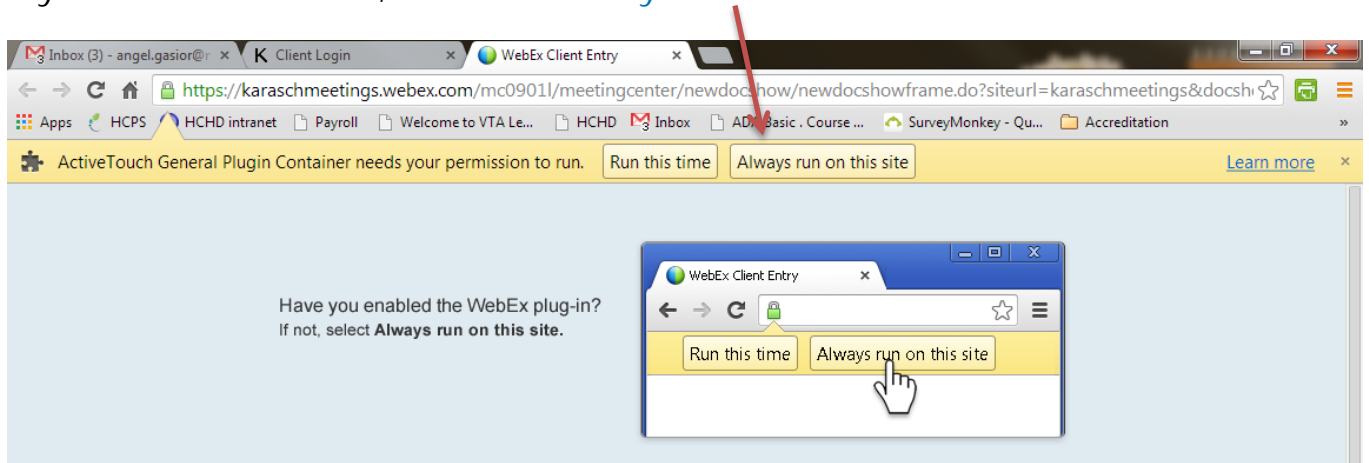
Below the table, there is a "Documents:" section which currently displays "No Documents". The footer of the page contains contact information: "CONTACT US: 800-621-5689 - CONNECT@KARASCH.COM" and a list of navigation links. The Windows taskbar at the bottom shows the Start button and several open applications, including an email inbox, a calendar, and the current Client Login window.

If you are using Internet Explorer, you may see this message:

NOTE: IF you see this message, please click **ALLOW**.



If you see this screen, click on **Always run on this site**.

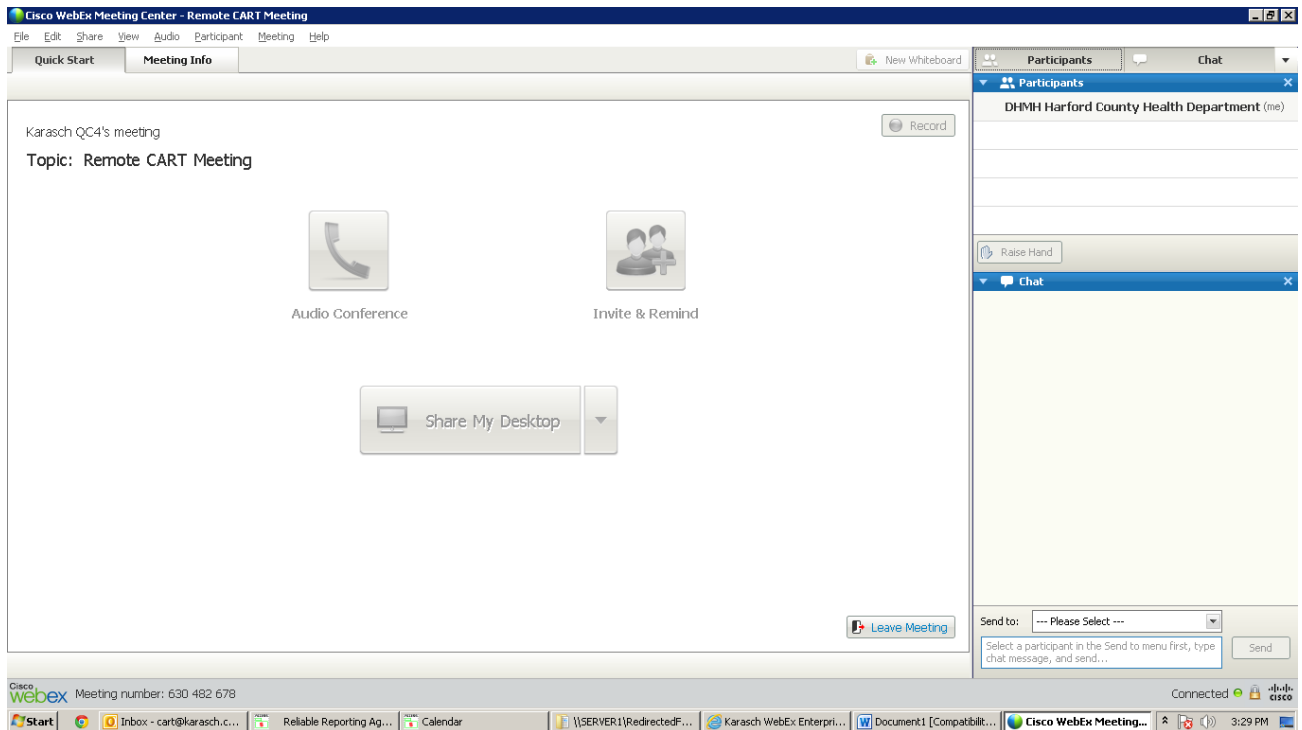


We're setting up your meeting...

If you close this window or navigate to another page, you will not connect to the meeting.

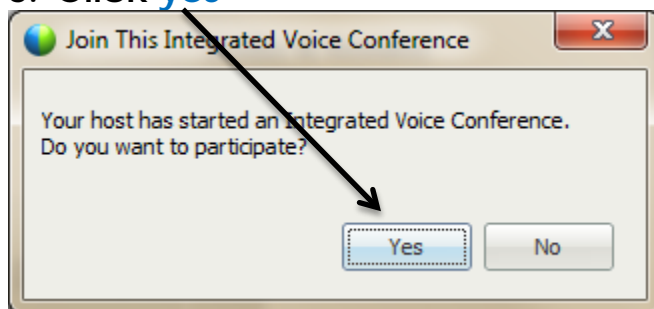
Having problems? [Install the meeting application](#) and join again.
Still having trouble? [Run a temporary application](#) to join this meeting immediately.

You will be placed into a meeting center, and once the captioner is logged in and has audio, you will be able to view captioning.

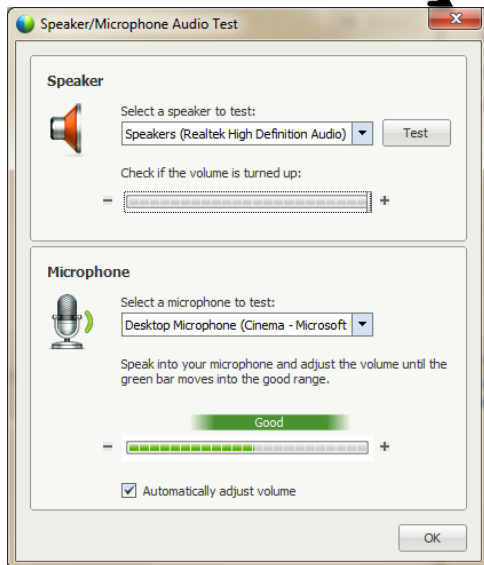


A pop-up box will appear asking you to join the audio conference.

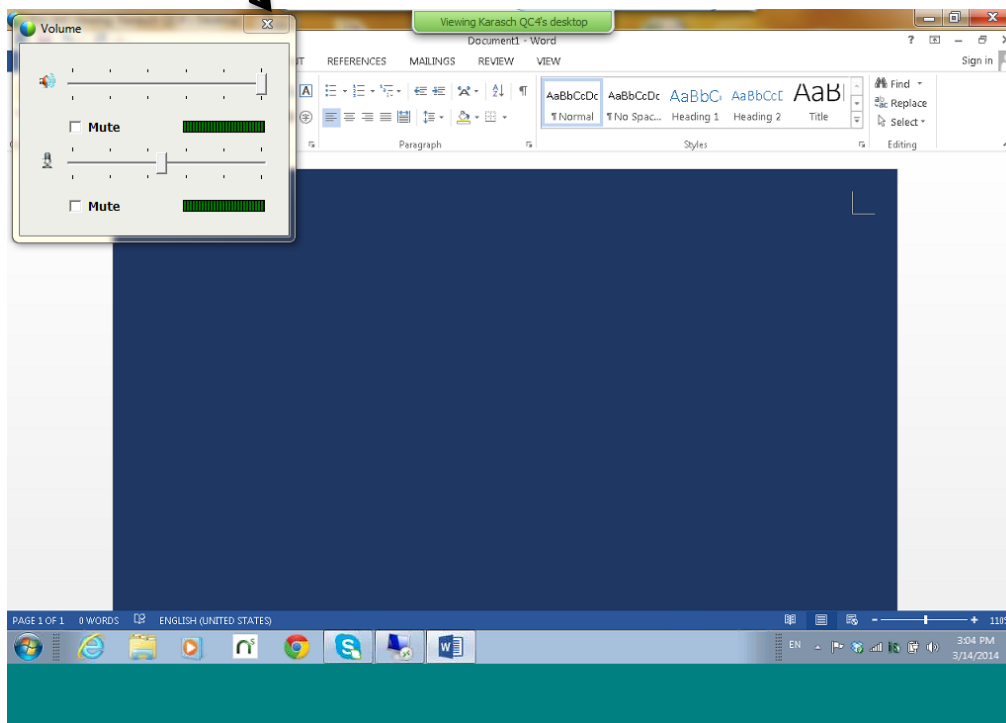
6. Click **yes**



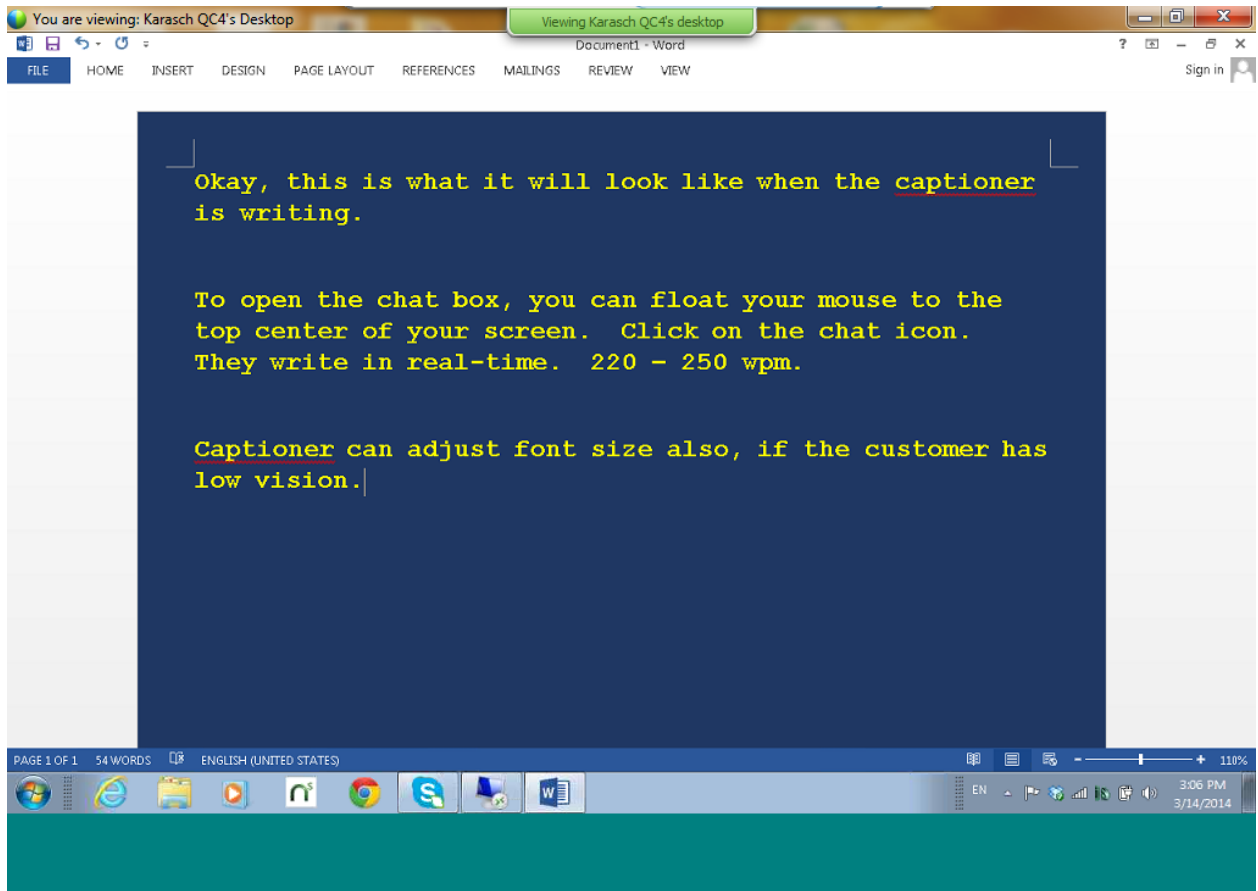
7. Just click on the **X** to close this box.



8. Click on **X** to close the volume box.



Your screen will look similar to this...



In-Person Services and Remote CART

If you have a scheduled appointment with a client or have a planned event/meeting that needs live on-site interpretation, live on-site CART services or remote CART services, complete the Scheduled Services form on the next page and email it to the ADA Coordinator.

Scheduled Services Form

Please submit this form at least 4 business days in advance of the needed service. Extra fees will be incurred for requests less than 3 business days in advance. Email to the ADA Coordinator.

Division/Program - _____

PCA # - E801 _____

Contact Person - _____

Date(s) service is needed - _____

Start Time - _____

End Time - _____

Location (full address)- _____

Building/Floor/Room - _____

***Ask permission to give this information to the vendor/company providing services. Just leave blank if client does not give permission.

Client's Name - _____

Client's Phone - _____ **Client's Email** - _____

Contact person - _____ **Phone number** - _____

Service Needed – Check one

On-Site Interpretation -

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> ASL | <input type="checkbox"/> Signed English | <input type="checkbox"/> Pidgin | <input type="checkbox"/> Oral |
| <input type="checkbox"/> Tactile (Deaf-Blind) | <input type="checkbox"/> Cued Speech | <input type="checkbox"/> Signed Exact English I | <input type="checkbox"/> Signed Exact English II |

- On-Site CART – in person service
- Remote CART services via Internet

Program ADA Representative Signature - _____

Division Director - _____

ADA Coordinator Signature - _____

Once services have been ordered and confirmed, the ADA Coordinator will send you a form that needs to be completed once services are rendered.

THIS IS ONLY A SAMPLE.

The ADA coordinator will send you the official form with SECTION A completed.

ON-SITE INTERPRETER ASSIGNMENT SHEET(For On-Site Interpretation and On-Site CART)

CONTRACTOR NAME
ADDRESS
CITY/STATE/ZIP
PHONE
FAX

SECTION A [to be completed by Contractor]

NAME OF DEAF/HARD OF HEARING CLIENT: _____ **DATE OF SERVICE:** _____
 NAME: _____
 ADDRESS: _____
 CITY/STATE/ZIP: _____

COMMUNICATION PREFERENCE: _____ below _____ (please indicate 1st and 2nd choices)
 ASL PSE SEE TACTILE CUELED SPEECH CDI

REQUESTING AGENCY / ENTITY CONTACT NAME: _____ **CONTACT PHONE:** _____
 AGENCY / ENTITY PURCHASE ORDER # _____

DATE OF ASSIGNMENT: _____ **LANGUAGE:** _____

SCHEDULED START / ARRIVAL TIME: _____ (whichever is later)
 SCHEDULED / ACTUAL END TIME: _____

LOCATION OF ASSIGNMENT:
 OFFICE / BUILDING NAME: _____
 ADDRESS: _____
 CITY/STATE/ZIP: _____

SECTION B [to be completed by Assigned Interpreter/Translator]

INTERPRETER/TRANSLATOR NAME: _____ **CONTACT #:** _____
BASE OF OPERATIONS: _____

ARRIVAL TIME: _____ DEPARTURE TIME: _____
 START MILEAGE: _____ END MILEAGE: _____
 Non-Routine Travel > 30 miles one way **TOTAL MILEAGE:** _____ (attach mapquest/google map)

WAS SERVICE COMPLETE: _____ YES _____ NO *(Please check one)*
 IF NO, STATE REASON: _____

INTERPRETER SIGNATURE: _____ **DATE:** _____
PRINT YOUR NAME: _____

Above information validated by: _____
 Signature and Date of
 On-Site Agency/Entity Representative

After services are rendered, complete the form, make a copy for your records and return the form to the ADA Coordinator.

Terms and Definitions

ASL – American Sign Language.

Base of Operations – Location from which an interpreter will be traveling to reach a destination of on-site language translation, e.g., the interpreter’s home, or business.

Computer Assisted Real-Time Transcription (CART) – The instant verbatim translation of the spoken word into English text by a CART provider using a stenotype machine, notebook computer and real-time software. This service is also known in the industry as Communication Access Real-time Translation.

Continuously Available – Provision of translation services on a 24-hours per day, 7 days per week, 365 days per year basis (366 days in a leap year).

Emergency Request – Requests for services for Categories I and II that are sent by the Requesting Agency/Entity within twenty-four (24) hours notice. Verbal requests shall be permitted due to the short timeframe. Requesters will make every effort to request services within the Region where the Assignment will take place (see RFP § 1.1.3.2).

Expedited Request – Requests for services for Categories I and II that are sent by the Requesting Agency/Entity with fewer than seventy-two (72) hours but greater than, or equal to twenty-four (24) hours notice. Verbal requests shall be permitted due to the short timeframe. Requesters will make every effort to request services within the Region where the Assignment will take place (see RFP § 1.1.3.2).

Non-Routine Travel – Travel to the location of an on-site Assignment beyond the thirty (30)-mile radius of the Base of Operations for which the Contractor will be reimbursed mileage (see RFP § 2.7.2 (8)). The first thirty (30) miles of Non-Routine travel conducted by automobile will be treated as Routine Travel and, as described in this definition, will not be reimbursed.

Non-Standard Hours – All hours not specified as Standard Hours.

Observed Holidays or Holidays – The following are the Observed Holidays for this RFP. Each Holiday will start at 12:00 a.m. and end at 11:59 p.m. on that day: New Year’s Day; Memorial Day; Independence Day; Labor Day; Thanksgiving Day; and Christmas Day.

Offeror – An entity that submits a proposal in response to this RFP.

On-Site – Means that the vendor must provide a Transcriber/Interpreter at the assigned location.

On-Site Agency/Entity Representative – An individual authorized by the State to validate the information contained in Section B of the On-site Interpreter Assignment Sheet, See Attachment M.

On-Site CART – Computer Assisted Real-time Transcription performed on-site.

On-Site Visual Language Interpretation – Real-time, in-person visual language interpretation, such as American Sign Language, Pidgin Signed English, Signed Exact English (I and II), Oral, Tactile and/or Cued Speech.

Remote CART – A closed caption of the conversation that allows individuals who are deaf or hard of hearing to understand what is being said. CART is the instant verbatim translation of the spoken word into English text by a remote CART provider using a computer and real-time software through an Internet or telephone connection from an off-site location.

Requesting Agency/Entity – The specific Maryland State government agency, or non-State of Maryland government entity, or Maryland not-for-profit entity (see RFP § 1.27) requesting services pursuant to the Contract(s) awarded through this RFP.

Requesting Agency/Entity Representative – A Representative of the specific Maryland State government agency, non-State of Maryland government entity, or Maryland not-for-profit entity (see RFP § 1.27) serving as the contact person for billing and all other purposes related to the request of services pursuant to the Contract(s) awarded through this RFP. A Requesting Agency/Entity may designate more than one individual authorized to initiate requests.

Routine Request – Requests for services that are sent by the Requesting Agency/Entity with greater than or equal to three (3) calendar days notice.

Routine Travel – Travel within a thirty (30)-mile radius of the interpreter's Base of Operations to the location of an on-site Assignment. There will be no payment for hourly/minute rates for travel time or reimbursement for any travel expenses for work performed within this radius.

Standard Hours – Standard Hours are weekdays (Monday through Friday) from 8:00 a.m. to 11:00 p.m. Local Time, excluding Observed Holidays.

User ID – The identification code assigned by the Contractor to the Requesting Agency/Entity for billing and contact purposes for services requested pursuant to the Contract(s) awarded through this RFP.

Video Remote Interpretation (VRI) – Requires the interpreter to use video conferencing equipment to provide visual language interpreting services from an off-site location to the individual requiring the visual language interpretation service.

Phone Calls

Making Telecommunications Relay Service (TRS) Calls

If you want to call someone who has a TTY/TDD, dial 9-7-1-1 on your telephone, and you will automatically be connected to a TRS operator. All relay calls are confidential.

Maryland Relay is not just for use by persons with disabilities. Both voice and TRS users can initiate a call from any telephone, anywhere in the United States, without having to remember and dial a seven or ten-digit access number.



To make a call to a person who has a TTY/TDD...

To reach someone through Maryland Relay, dial 9-7-1-1

- 1. Press 1 for Voice Relay**
- 2. Press 1 to place a call**

-or-

- 1. Press 2 for instructions**
- 2. Enter the phone number on your phone keypad**

RECEIVING TRS calls

Maryland Relay may call you. They may sound like a telemarketer because they introduce themselves as XXXX from the Maryland Relay Service.

The person on the other end may communicate verbally and just need your part of the conversation translated into text.

This is called:

VCO – Voice Carry Over

HCO – Hearing Carry Over

Guidance for Communication

By following the suggestions below, you can communicate much better with someone who has hearing loss.

Speaking clearly and naturally

- Speak in a normal tone of voice. Shouting makes many words hard to understand.
- Don't slow your speech. Speak at a pace that allows words to be clearly distinguished from one another, but not so slowly that you lose the natural rhythm.

Attracting the listener's attention

- Before you begin to speak, be sure the listener knows you want to communicate.

Facing the listener

- When speaking to someone with hearing loss, make sure they can clearly see your mouth – especially in noisy environments. Most people have a natural ability to lip read.
- Maintain eye contact while speaking.
- Keep your hands away from your face.
- Make sure you have good lighting. Light should be on your face and not behind you.

Staying close

- Stay within 4-6 feet of your listener.
- If the listener can hear better on one side, try to stay on that side.

Using body language to emphasize your feelings

- We communicate a lot more than we realize through facial expressions, gestures and tone of voice.

Rephrasing if you are misunderstood

- If you need to repeat a sentence, try using different words that may be easier to understand.
- If someone with a hearing loss walks in during the middle of a conversation, bring him/her up to speed on the subject.

Eliminating or reducing room noise

- Reduce background noise as much as possible before starting a conversation. TVs, radios, air conditioners and even other people talking can greatly affect a listener's understanding.

Use these simple suggestions and you'll soon find that good communications doesn't have to be difficult.

- Section 2 -

Accommodations for clients who are blind,
deaf-blind and visually impaired

Excerpt adapted from:

ADA Checklist: Health Care Facilities and Service Providers

Ensuring Access to Services and Facilities by Patients Who Are Blind, Deaf-Blind, or Visually Impaired

The Americans with Disabilities Act Communications Accommodations Project

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Vision involves many factors that determine the client's visual acuity. Don't make assumptions about your client's visual acuity or the functional effects associated with his or her vision loss. The same person may have perfectly adequate travel vision during the day but may find mobility to be much more difficult at night under low lighting conditions. Respond to your client's needs on an individual basis. As a general matter, be guided by his or her request for assistance. Thus, you may be asked by a client who is visually impaired for guide assistance or for assistance in reading her bill, even though she may not use a dog or a cane. Similarly, a person who is visually impaired may request an additional lamp in the room. A client who is blind may ask for assistance in completing menu choices or may ask the volunteer from the library to read a list of books available on cassette. If, on the other hand, it appears that the client's limited experience with vision loss, illness, multiple disabilities, emotional stability, or intelligence is such that self-direction is difficult, explore options for providing accommodations while maintaining the individual's personal control and dignity.

Identifying personnel

Staff should initiate an introduction to an individual who is blind, deaf-blind, or visually impaired by addressing the client by name. They should always identify themselves by name and function and the reason they are there. ("Good morning, Mrs. Green. I'm Mr. Upshaw from the Physical Therapy Department. I'm here to show you some exercises your doctor ordered for you.") Name badges or uniforms may not be seen by a client who is visually impaired.

Reviewing documents

Staff should read fully, upon request, and provide assistance, if necessary, in completing consent forms, financial responsibility forms, advance directive forms, bills, and other documents. You may find it more helpful to your client to provide frequently used or important documents such as advance directive forms, consent forms, and financial responsibility forms in braille, large print, or on tape. The ADA requires that the contents of written material must be effectively communicated to a person who cannot read printed material. In many situations, this requirement can be satisfied by providing a staff person to read the document while maintaining the client's right to privacy (e.g., assistance in completing medical histories or financial forms should not be provided in the waiting room or other public area). The ADA requires that any mode of communication chosen be effective, which is determined on a case by case basis.

Counting and identifying currency; credit cards; signatures

When handing currency to a client, bills should be individually identified and counted. A person who is blind or visually impaired usually identifies currency by folding it in different ways and/or by placing different denominations in separate locations in a wallet or purse. Identifying coins is usually not a problem because of their varying sizes and milled edges.

Credit cards should be handed to clients after imprint, not simply laid on a counter or table. A piece of cardboard, a plastic ruler or metal signature template can be used to indicate where a signature is required. Place the cardboard edge horizontally below a signature line or orient the opening of signature template where signature is required.

Sighted guide technique and mobility aids

Staff should NOT touch or remove mobility canes (such as the long white cane) unless requested to do so and should not interfere with dog guides.

Identify yourself and offer guide assistance if it appears to be needed. If assistance is accepted, offer your arm to the client. The client will lightly hold your arm directly above the elbow. Don't pull or push the client or hold his or her arm. Relax and walk at a comfortable, normal pace. Allow the client to walk a

step or two behind you, and indicate changes in terrain, such as stairs, narrow spaces, and escalators, by hesitating briefly as you approach them and explaining what you are about to do. This standard form of sighted guide technique should be modified, however, if the client's other disabilities require him/her to be supported by the guide. When seating the client, ask if you may show him/her the back of the chair. If the response is yes, simply place the client's hand on the chair back. When it is time for you to leave, indicate that you are leaving his or her presence. If it is necessary to take an individual's cane, tell the person you are removing it and where it can be retrieved.

Verbalizing directions

Be specific. Be sure to use right and left as they apply to the person who is blind. What is on your right is on the left of a person facing you.

Indicate number of blocks to the bus stop and whether one proceeds right or left when exiting the building. Provide the name of the street corner at which the stop can be found. Simply saying, "The bus stop is about six blocks down in that direction" is ineffective. Similarly, be specific about directions to rooms within your facility, e.g., "To find the cardiac rehabilitation unit, go to the end of this corridor, turn left, and it is the fifth room on your right."

Using disability-sensitive language and etiquette

Using words such as "blind, visually impaired, seeing, looking, and watching television" is acceptable in conversation. Similarly, using descriptive language, including references to color, patterns, and the like is appropriate. When referring to clients with disabilities, refer to the person first, then the disability, e.g., refer to the client in 439 who is blind rather than the blind man in 439. Talk directly to the person you are addressing, not through a companion. Speak in normal conversational tones. It is not necessary to raise your voice.

Dog guides

The ADA requires admission of service animals to hospitals, offices of health care providers, and similar facilities unless a fundamental alteration would result or safe operation would be jeopardized. The presence of a "direct threat" to health or safety must be determined by competent personnel, based upon medical or other evidence. The exclusion of the animal cannot be based on stereotype or

conjecture as to the health or safety threat involved. The dog guide should always remain under control by its owner. In addition, care and supervision of the animal is the responsibility of the client or visitor. Staff should not pet, feed, or otherwise distract dog guides from their work. Although the ADA does not require you to provide a dog guide relief area, it would be helpful to your clients or visitors who use dog guides if you can provide some suggestions in this regard.

Verbalizing or demonstrating procedures before they are performed. – Clinical Staff

This is absolutely essential and will help to put your client at ease. Talk to your patient. Describe the procedure before you perform it and-or permit the patient to inspect the equipment being used. "Mr. Jones, I'm Pete Walters, an EKG technician. Have you ever had this procedure done before? No? Well, I'll first be placing an EKG lead on your chest. Would you like to see what the instrument looks like?"

Identifying medication – Clinical staff

Names of medications and their dosages can be recorded on audiocassette tape for the patient. In addition, advice can be given to the patient about labeling of prescription bottles or containers. Some methods of labeling include: the use of an inexpensive device that produces self-adhesive Dymo-type labels for affixing to bottles or containers; use of different size bottles or containers with notes kept about the contents of each size package; use of rubber bands and paper flag-type labels that can be brailled or printed in large print using a wide point felt tip pen, or brailled and raised character pill sorters.

Communicating with persons who are deaf-blind

Most persons who are deaf-blind communicate using finger spelling, printing letters in the palm, or tactile American Sign Language. The client who is deaf-blind may also use braille or large print if he or she has some residual vision. Remember to ask how your client prefers to receive information from you and how you can recognize that your message has been understood by your client. Subject to the undue burden defense, the ADA requires the provision of interpreters only if the communication is particularly complicated.

Interpreters should be present in situations to provide effective communication for lengthy or complex information, such as discussing a client's medical history; obtaining informed consent; obtaining permission for treatment; discussing the diagnosis, course of treatment, or outcome; counseling; or discussing cost of treatment. If a tactile interpreter is required, you may request one through the ADA Coordinator. For more routine communication, printing in the patient's palm may be all that is necessary. If this does not effectively communicate the procedure to be performed and an interpreter is unavailable, allow your deaf-blind client to touch the equipment involved, such as a blood pressure cuff or empty syringe, by gently placing his or her hand on it. Never perform a procedure without some advance warning. In addition, staff should be aware of the universal sign for an emergency situation, i.e., drawing the letter X on the back of the person who is deaf-blind with the fingertips. Some persons who are deaf-blind may use combination braille and print "help cards" containing basic messages.