

# Auxiliary Aids Plan

**Purpose:**

This plan will support existing Gracepoint procedures to ensure that all individuals receiving services also receive proper assessment and free auxiliary aid services in the event that such are required. This plan also details how Gracepoint will ensure compliance with Title VI of the Civil Rights Act (1964), the Americans with Disabilities Act (1990) and the Americans with Disabilities Act Amendments Act (2008).

**Definitions:**

- a. **504/ADA Coordinators or Civil Rights Officer:** This is an individual charged with implementing the requirements of Titles I and II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act; ensuring the provision of auxiliary aids and services for customers with disabilities that require auxiliary aids and services to ensure effective access to services offered by the Department of Children and Families (*see Attachment A*).
- b. **Aid Essential Communication Situation:** Any circumstance in which the importance, length, and complexity of the information being conveyed is such that the exchange of information between parties should be considered as an aid essential communication situation, meaning that the requested auxiliary aid or service is always provided.
- c. **Assistive Listening Devices and Systems (ALDS).** Amplification systems used to improve hearing ability in large areas and in interpersonal communications systems. These systems deliver the desired signal directly to the ears or hearing aids of the listener, thus overcoming the negative effects of noise, distance and echo. Three main types are available: hardwire loop, infrared, and FM radio.
- d. **Auxiliary Aids and Services:** Includes certified interpreters or other effective methods of making aurally delivered materials available to individuals who are deaf or hard of hearing; qualified readers, taped texts, or other effective methods of making visually delivered materials available to individuals with visual limitations; acquisition or modification of equipment or devices; and other similar services and actions. These auxiliary aids and services will enable clients to fully benefit from and participate in all Gracepoint programs and services.
- e. **Blind:** See Visual Limitations.
- f. **Captioning (Closed):** This is a process of displaying text on a television, video screen or other visual display to provide additional or interpretive information to individuals who wish to access it. Closed captions typically show a transcription of the audio portion of a program as it occurs (either verbatim or in edited form), sometimes including non-

speech elements. The term "closed" in closed captioning indicates that not all viewers see the captions—only those who choose to decode or activate them.

- g. Captioning (Open):** Refers to converting the spoken word to text displayed in the visual media (videos, television, etc.) so that it is seen by everyone who watches the film (i.e., it cannot be turned off).
- h. Captioning (Real Time):** This is the simultaneous conversion of spoken words to text, through computer-assisted transcription or court reporting, and displaying that text on a video screen. This communication service is beneficial to individuals who are deaf or hard-of-hearing that do not use sign language or for whom assistive listening devices and systems are ineffective.
- i. Certified Interpreter:** A person who is certified by the National Registry of Interpreters for the Deaf (RID) or other national or state interpreter assessment and certification program.
- j. Client:** As used in this plan, this term includes anyone applying for or participating in the services provided by Gracepoint. It includes persons in any way seeking access to or receiving information from Gracepoint. This may also be referred to as “customer or customers”.
- k. Companion:** As defined in the HHS Settlement Agreement, is any individual who is deaf or hard of hearing (including a Limited English Proficient (LEP) individual who has low vision or blind, deaf or hard of hearing) and is one of the following:

  - i. A person whom the customer indicates should communicate with Gracepoint staff about the customer, such as a person who participates in any treatment decision, a person who plays a role in communicating the customer’s needs, condition, history, or symptoms to Gracepoint staff, or a person who helps the customer act on the information, advice, or instructions provided by Gracepoint staff;
  - ii. A person legally authorized to make healthcare or legal decisions on behalf of the customer
  - iii. Such other person with who staff would ordinarily and regularly communicate about the customer
- l. Customer or Customers:** This is any individual who is seeking or receiving services from Gracepoint. This may also be referred to as “client or clients”.
- m. Deaf:** A term used to describe a person having a permanent hearing loss and being unable to discriminate speech sounds in verbal communication, with or without the assistance of amplification devices.

- n. **Disability:** A condition that substantially limits a major life activity, such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, lifting, sleeping, and working.
- o. **Discrimination:** The failure to treat persons equally because of their race, sex, color, age, religion, marital status, national origin, political beliefs, or disability.
- p. **Dual Sensory:** A term used to describe a person having both a visual disability and a hearing disability. The term includes all ranges of loss, which would necessitate the use of auxiliary aids and services for communication.
- q. **Employee:** This refers to all persons working for Gracepoint.
- r. **Florida Relay Service (FRS):** A service offered to all persons in the state that enables a hearing person to communicate with a person who has a hearing or speech disability and must use a TDD/TTY, through a specially trained operator called a communications assistant.
- s. **Hard of Hearing:** A term used to describe a person having permanent hearing limitations, which is severe enough to necessitate the use of auxiliary aids or services to discriminate speech sounds in verbal communication.
- t. **Hearing Disability:** An all inclusive term used to describe any hearing loss. A person with a hearing disability could be either deaf or hard-of-hearing.
- u. **Interpreters for Persons who are Deaf or Hard of Hearing:**
  - i. **Certified Deaf Interpreter (CDI):** An individual who is deaf or hard of hearing and has been certified by the Registry of Interpreters for the Deaf as an interpreter.
  - ii. **Certified Interpreter:** A qualified interpreter who is certified by the National Registry of Interpreters for the Deaf, or other national or state interpreter assessment and certification program.
  - iii. **Intermediary Interpreter:** A Certified Deaf Interpreter or Deaf Interpreter, also known as a relay or intermediary interpreter, can be used in tandem with a qualified sign language interpreter.
  - iv. **Oral Transliterations/Oral Interpreters:** Individuals who have knowledge and abilities in the process of speech reading, speech production and the communication needs of speech readers.
  - v. **Qualified Interpreter:** An individual who is able to interpret competently, accurately, impartially and effectively, both receptively and expressively, using any specialized terminology necessary for effective communication with a Customer or Companion who is deaf or hard of hearing.
  - vi. **Sign Language Interpreter:** A person who engages in the practice of interpreting using sign language.

- vii. **Tactile or Close Vision Interpreter** (For Individuals who are Deaf-blind): An individual who accurately facilitates communication between individuals who are deaf and blind.
- v. **Interpreters for Persons who are Limited English Proficient:** There are two (2) types of language assistance services:
  - i. **Interpretation:** Interpretation is an oral language assistance service. Oral language assistance service may come in the form of “in-language” communication (a demonstrably qualified staff member communicating directly in an LEP person’s language) or interpreting.
  - ii. **Translation:** Translation is a written communication service. *Translators* convert written materials from one language into another. They must have excellent writing and analytical ability, and materials from one language into another. They must have excellent writing and analytical ability, and because the translations that they produce must be accurate, they also need good editing skills.
- w. **Limited English Proficient (LEP):** Individuals who do not speak English as their primary language and who have a limited ability to read, write, speak or understand English.
- x. **Manual Disability:** A term used to describe a condition, which limits or prevents the use of a person’s upper extremities (arms, hands).
- y. **Mental Disability:** Any mental or psychological disorders such as developmentally disabled, organic brain syndrome, emotional or mental illness, and specific learning disabilities.
- z. **Non-Aid Essential Communication Situation:** A situation where Gracepoint is provided the flexibility in its choice of an appropriate auxiliary aids or services for customers or companions to ensure effective communication.
- aa. **Physical Disability:** A broad term, which includes physiological disorders or conditions, cosmetic disfigurement and anatomical loss. It includes orthopedic, visual, speech, and hearing disability, cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, HIV disease (symptomatic or asymptomatic), tuberculosis, drug addiction and alcoholism.
- bb. **Program Accessibility:** An American with Disabilities Act standard, which means a public entity’s programs, services, or activities, when viewed in their entirety, must be readily accessible to and usable by individuals with disabilities. The concept of program accessibility is intended to make the contents of the program, service or activity equally available and accessible to persons with disabilities without excessive renovations of facilities. (See also: “Undue Burden”.)

- cc. *Sensory*:** This is a general term, which is used to describe vision or hearing limitations. For the purpose of this document, it also includes speech limitations.
- dd. *Single Point of Contact*:** An individual charged with implementing the terms of the HHS Settlement Agreement for Gracepoint as an agency and shall also mean the individuals charged with coordinating services to customers and companions who are deaf or hard-of-hearing according to their obligations under Section 504 and/or the ADA for each location within Gracepoint.
- ee. *Translator*:** An individual who is able to interpret the meaning of a text in one language (the "source text") and the production, in another language (the "target language") of an equivalent text (the "target text," or "translation") that communicates the same message.
- ff. *TTY/TDD*:** TTY (Teletypewriter) or TDD (Telecommunications Device for Deaf) devices that are used with a telephone to communicate with persons who are deaf or hard of hearing or who have speech limitations by typing and reading communications.
- gg. *Undue Burden*:** This term, used in conjunction with programs and services (ADA Title II), means an unreasonably excessive financial cost or administrative inconvenience in altering building or means an unreasonably excessive financial cost or administrative inconvenience in altering building or facilities in which programs, services or activities are conducted, in order to ensure equal benefits to persons with disabilities.

## **Required Documentation for Deaf or Hard of Hearing Clients**

### **The Customer or Companion Communication Assessment and Auxiliary Aid and Service Record**

- This must always be completed first and prior to the completion of the Waiver form
- This shall be completed at the first visit and all subsequent visits thereafter

### **The Communication Plan**

- This may be completed as part of the Assessment Form or as an addendum to the Assessment
- This shall be completed at the first visit only and updated when changes occur

### **The Customer or Companion Request for Free Communication Assistance or Waiver of Free Communication Assistance**

- This must be completed to indicate the client's preferred auxiliary aid or service
- This must also be completed if the client/companion does not wish to receive any communication assistance
- When determining what type of auxiliary aid or service to provide client/companion with as communication assistance, client and/or companion preference is always the primary consideration
- This shall be completed at the first visit and all subsequent visits thereafter

### **Customer/Companion Feedback Form**

- This form should always be provided to client and/or companion. He/she may choose to complete this form on a voluntary basis/
- It is the client and/or companions responsibility to forward the form to DCF.

**Instructions for Customer/Companion Communication Assessment and Auxiliary Aid and Service Record**

The purpose of the Customer Companion Communication Assessment and Auxiliary Aid and Service Record is to facilitate the collection and coordination of auxiliary aids and services provided to Customers or Companions who are deaf or hard-of-hearing. It is recommended that the person or persons that have been designated to complete the form become familiar with its contents so we can readily identify the needs of our Customers Companions.

**HEADER:**

The form must be completed for each Service Date. All information must be legible. All requested information must be included on the form.

**Indicate your Region/Circuit/Institution:** Suncoast/6/Gracepoint

**Program:** Mental Health

**You must identify if the individual being served is a Customer or a Companion.**

- A **Customer** is any individual seeking or receiving services from Gracepoint
- A **Companion** is any individual who is deaf and hard-of-hearing and communicates with Gracepoint on the behalf of the Customer.

**Include their name, date and time of contact, and their case number or other identifier:**

Exclude social security number, date of birth, driver's license, etc.

**Indicate if the individual is (Check one box only):**

- **Deaf or Hard-of-Hearing:** This is a person with a low or permanent hearing loss requiring the use of auxiliary aids or services.
- **Deaf and Low Vision or Blind:** This is a person with any loss of vision. Hard-of-Hearing and Low Vision or Blind, as described above.
- **Deaf and Limited English Proficient:** This is a person who does not speak English, or has the limited ability to read, speak, write, or understand English.
- **Hard-of-Hearing and Limited English Proficient,** as described above.

**Identify if it is a scheduled appointment or if it is a non-scheduled appointment:**

- **Scheduled Appointment** – Must have a certified interpreter available at the time of the schedule appointment. If interpreter fails to appear, staff shall take whatever



additional actions are necessary to make a certified interpreter available to the Customer or Companion as soon as possible, but in no case later than **two (2) hours** after the scheduled appointment.

- **Non-Scheduled Appointment – In emergency situations** an interpreter shall be made available as soon as possible, but in no case **later than two (2) hours** from the time the Customer or Companion or staff requests an interpreter, whichever is earlier. If the situation is not an emergency, staff shall offer to schedule an appointment (and provide an interpreter when necessary for effective communication) as convenient to the Customer or Companion, **at least by the next business day.**
- **No Show** – Check this box if the customer or companion failed to show for their appointment

**Date/Time** – Indicate the date and time of the scheduled appointment, even if they were a no show for the appointment

**It is very important to include the name of the staff member completing this assessment.**

Please print or ensure your handwriting is legible.

#### **SECTION 1: COMMUNICATION ASSESSMENT:**

##### **Initial assessment:**

- Check the box if this is an initial assessment.
  - Initial assessments are done upon first contact with the customer or companion.

##### **Reassessment:**

- Check the box if this is a reassessment.
- In the event communication is not effective, or if the nature of the communication changes significantly after the initial assessment, staff shall conduct a reassessment to determine which appropriate auxiliary aid or service is necessary.
- This shall be accomplished, when possible, in consultation with the Customer or Companion.

##### **Subsequent Appointment:**

- Check the box if this is a subsequent appointment.

### **Individual Communication Ability:**

- Always consult with the Customer or Companion when possible to determine which appropriate auxiliary aids and services are needed to ensure effective communication. In cases when communication is determined to be ineffective after the initial assessment, staff members should re-assess which auxiliary aid and/or service is necessary for effective communication. This should be done in consultation with the deaf or hard of hearing client/companion. Gracepoint does not deny a requested auxiliary aid or service as Gracepoint should make every effort to reasonably accommodate the client or companion to ensure effective communication is attained.

### **Nature, Length, and Importance of Anticipated Communication Situation (s):**

- The assessment shall take into account the nature, length, and importance of the communication at issue and anticipated communication situations.
- This section should be completed with much detail, as this will assist in determining whether the communication is aid essential or non-aid essential.
- Consult with the customer or companion where possible to determine what type of auxiliary aid or service is needed to ensure effective communication.
- Use this information to assist in determining whether a communication plan is necessary.
- You may attach additional sheets detailing this information.

#### **\*\*\*Complete a Communication Plan for Ongoing or Multiple Visit Services\*\*\***

- The term **Aid-Essential Communication Situation** shall mean any circumstance in which the importance, length, and complexity of the information being conveyed is such that the exchange of information between parties should be considered as **Aid-Essential**, meaning that the requested auxiliary aid or service is always provided.
- Communication situations will differ from program to program, therefore you will need to identify all situations where you will have contact with a Customer or Companion and develop the plan on how you will communicate with them.
- During follow-up visits or long term care, subsequent requests for the appropriate auxiliary aids and services by the Customer or Companion is not required because this is already captured in their communication plan.
- In each situation requiring an Auxiliary Aid (**whether Aid-Essential or Non-Aid Essential**), you **must** identify in the plan **the name and title of the person responsible for ensuring the auxiliary aid is provided**.
- You must also provide a description of the information being communicated to the customer or companion.

**\*\*\*When there is any question of whether a situation is Aid-Essential or Non-Aid Essential, contact the specific Single Point of Contact for the program at which the Communication Assessment is being completed and from which the client is accessing services. (see Attachment E)**

- In the next table, you will see a list of communication situations that are included in a communication plan. This list is not exhaustive and does not imply there are not other communication situations that may be **Aid-Essential** in a residential setting or during long-term visits. Also, the list does not imply that each communication situation listed is **Aid-Essential**. Some communication situations may be of a **Non-Aid Essential Communication Situation**, meaning it is the decision of the program as long as the client's request and the appropriate effective communication means are given proper consideration.

## **SECTION 2: AUXILIARY AID/SERVICE REQUESTED AND PROVIDED:**

- Document all auxiliary aids and services requested and provided to the customer
- Indicate the date and time service was provided.
- When an interpreter is a no show, staff will check the box accordingly, and document in section 3 what additional steps were taken to secure an interpreter as required. This may require attaching an additional sheet/s to the form, documenting this process.

### **Alternative Auxiliary Aids or Services Provided:**

- Staff may use alternative auxiliary aids or services, in the following situations, which is not an all inclusive list of examples:
  - While waiting for the interpreter to arrive;
  - During non-scheduled appointments or emergency situations;
  - During non-aid essential communication situations;
  - During situations that may constitute a threat to the customer or companions medical status;
  - When requested by the customer or companion.

## **SECTION 3: ADDITIONAL SERVICES REQUIRED:**

- When it is determined that the auxiliary aid and service provided was not effective, staff shall conduct a reassessment of the communication need to determine the appropriate alternative auxiliary aid.

- When staff have determined that the interpreter did not meet their or the customer or companion's expectations, they will document in this section and indicate what additional steps were taken by staff.

**SECTION 4: REFERRAL AGENCY NOTIFICATION:**

- Provide advance notice to referral agencies of the Customer or Companion's requested auxiliary aid or service.
- This section must be documented with a statement indicating that staff notified the referral agency of the Customer or Companion's requested auxiliary aid or service.

**SECTION 5: DENIAL OF AUXILIARY AID/SERVICE:**

- A denial of an auxiliary aid and service should only be done when it is a **non-aid essential** communication
- Staff must still ensure that effective communication is achieved through whatever alternative means are provided. Staff must note what specific alternative means are approved.
- Gracepoint Single Point of Contact must provide a reason for denial of service. Denials can only be made by Gracepoint Agency Single Points of Contact and/or Senior Management.
- Provide the name and title of person that made the denial determination, along with the time and date.

**Waiver for Free Interpreter Services**

- If the Customer or Companion declines DCF or DCF Contracted Client Services Provider's offer to provide free auxiliary aids and services, staff shall complete and explain the appropriate form indicating the customer or companion's preferred method of communication.
- Gracepoint staff must be prepared to secure the appropriate auxiliary aid or service in Aid-Essential Communication Situations; and observe and ensure that the Customer's or Companion's preferred auxiliary aid or service is effective.

**If there is any question regarding an auxiliary aid or service or if you are not familiar with a particular auxiliary aid or service requested, contact your designated Single Point of Contact.**



### **Record Maintenance/Reporting**

#### ***If the forms are completed on paper:***

- Completed forms must be submitted to the Medical Records Department to ensure that they are made accessible in the client's Electronic Medical Record.
- All records for Deaf and Hard-of-Hearing services shall be maintained for the duration of the HHS Settlement Agreement and 5 years thereafter, until January 31<sup>st</sup>, 2020 as required by the HHS Settlement Agreement.


#### ***If the forms are completed and submitted electronically via the Electronic Medical Record/Avatar:***

- Completed forms must be submitted and finalized
- The program Single Point of Contact must be notified that they were completed.
- The forms will automatically be accessible in the client's medical record.
- The Performance Improvement Program/Agency Single Point of Contact will review records in Avatar for compliance.

The Performance Improvement Program/Agency Single Point of Contact will also be responsible for completing the Auxiliary Aid and Service Record Monthly Report and submitting to the Department of Children and Families via the website [https://fs16.formsite.com/dcfuser/form3/secure\\_index.html](https://fs16.formsite.com/dcfuser/form3/secure_index.html)

### Auxiliary Aid Information

#### Accessing Certified Sign Language Interpreters:

- Gracepoint is contracted with more than one certified interpreter service and with the preferred method of communication and auxiliary aid services.
- Requesting interpreters may be done via phone or video remote (see below)
- Services are available 24/7 at no cost to the customer/companions and the customer or companion's preference should be the primary consideration in what auxiliary aid or service they wish provided.
- Notices near the location where clients and companions enter facilities provide information about the availability of auxiliary aids and services at no cost.
- Requests for on-site services within 48 hours of the request MUST be done via telephone for in-person interpreters. All other requests may be done via telephone or internet.
- Certified Interpreter agencies provide a statement indicating all those providing interpreters services to the deaf or hard of hearing are certified interpreters.
- If a staff member is unfamiliar with an auxiliary aid or services requested by the client or companion, staff should contact his/her site single point of contact (SPOC) or agency SPOC. Refer to the intranet for the most recent staff SPOC listing.
- Accessibility at meetings, conferences, and seminars to persons with disabilities or limited English proficient or deaf or hard of hearing, including providing necessary aids and services for those individuals who are in attendance can be made available by contacting the agency in advance according to the invite?
- Instructions are located on the Gracepoint intranet within the "Interpreter" icon: 

#### **Jessica Harris Interpreting (on site in-person only)**

Website: [JHinterpretingservices.com](http://JHinterpretingservices.com)

Address: 9113 Ridge Rd # 40 727-271-0160 Phone New Port Richey, FL 34654

Phone: 727-271-0160

Fax: 1-888-228-7575

Email: [JHarris@JHinterpretingservices.com](mailto:JHarris@JHinterpretingservices.com)

**Cyracom (on site in-person and video remote interpreting-VRI)**

Website: Cyracom.com

To access VRI go to: cyracom.com.

Log on:

**Username:** GPDH0H@gracepointwellness.org

**Password:** gpdhoh1?

Click “Video Interpretation”

Click “Start Session”

Click “Allow” - When asked for permission to access the mic and camera.

Once the person comes on the screen you should be able to clearly see and hear them.

**Customer Support:** (800) 481-3289 or [support@cyracom.com](mailto:support@cyracom.com)

**ACD (on site in-person only)**

Website: [www.acdasl.com](http://www.acdasl.com)

**Click:** Services > On-Site Interpreting > Book an Appointment

Address: 4846 North University Drive, #354 Lauderhill, Florida 33351

Phone: 954-578-3081

Fax: 954-241-5033

**Purple (on site in-person only)**

Website: [www.signlanguage.com](http://www.signlanguage.com)

**Click:** On-Site Interpreting > Select a Region (Tampa) > Schedule Now > Complete Form (Account # 73395) and Submit Form or you can call **866-669-7707**

Address: 4010 West Boy Scout Road, Suite 375 Tampa, Florida 33607

Phone: 7813-793-4034

Email: [purpletampa@purple.us](mailto:purpletampa@purple.us)

**Accessing Qualified Foreign Language Interpreters:**

- Gracepoint is contracted with CyraCom, who will only provide Gracepoint with qualified interpreters.
- Interpreters certification must be verified when services are provided.
- Requesting interpreters may be done via phone by contacting CyraCom, via email or via website (contact information below)

### **CyraCom**

Website: [www.cyacom.com](http://www.cyacom.com)

To reach an interpreter: **1-800-481-3293**

Gracepoint Account No. **501013641**

If you require further assistance, please feel free to contact Client Services at:  
[support@cyacom.com](mailto:support@cyacom.com)

### **Text Telephone/Telecommunication Device for the Deaf (TTY/TDD)**

- Gracepoint maintains a TTY device in the CSU. Contact this sites point of contact or the Agency Single Point of Contact to make arrangements for use. Instructions for use on located on the intranet. The TTY phone is 1-800-955-8770.

### **Florida Relay Service**

- Florida Relay is the communications link for people who are Deaf, Hard of Hearing, Deaf/Blind, or Speech Limited. Through the Florida Relay, people who use specialized telephone equipment can communicate with people who use standard telephone equipment.

To call Florida Relay, dial 7-1-1, or use the following toll free numbers:

- 1-800-955-8771 (TTY)
- 1-800-955-8770 (Voice)
- 1-800-955-3771 (ASCII)
- 1-877-955-8260 (VCO-Direct)
- 1-800-955-5334 (STS)
- 1-877-955-8773 (Spanish)
- 1-877-955-8707 (French Cr)

### **Assistive Listening Devices - Pocket Talkers**

- An assistive listening device (ALD) is any type of amplification device that can help you and your client communicate more effectively. ALDs can be used with or without hearing aids and can improve hearing in the presence of background noise, or listening on the phone or to television.
  - Gracepoint has **Pocket Talker Assistive Listening Devices** available – used for one-on-one communications.



- To access a pocket talker, contact the Adult Outpatient Manager, the TCM Manager, the Adult Emergency Services Manager, or the Agency Single Point of Contact (PI Director.)

### **Captioning in Real Time Services (CART)**

- This is also called Communication Access Real Time Translation. This is the general name of the system that court reporters, closed captioners, and others use to convert speech to text. A trained operator uses keyboard or stenography methods to transcribe spoken speech into written text. While real time speech to text serves many with hearing loss and deafness, it is also useful for people whose first language is different from the language being used, to understand speakers with different voices and accents in many group situations (at work, in education, community events), to have a "transcript", and for learning languages. CART professionals have qualifications for added expertise (speed and accuracy) as compared to court reporters and other stenographers.

#### **Communication Access, Inc.**

Theresa (Tess) Marie Crowder

Address: 2424 West Tampa Bay Boulevard Unit K101 Tampa, Florida 33607

Cell: 813-843-6279

Email: [ExecutiveDirector@communicationaccess.org](mailto:ExecutiveDirector@communicationaccess.org)

### **Video Relay Services-VRS (differs from Video Remote Interpreting Services)**

- Gracepoint does not contract with a VRS vendor. Contact your site point of contact or the Agency Single Point of Contact to make alternative arrangements.
- VRS allows persons who are deaf or hard-of-hearing to communicate through the telephone system with hearing persons. The VRS deaf caller contacts a VRS Communications Assistance (CA.) They communicate with each other in sign language through a video link. The VRS CA then places a telephone call to the party the VRS user wishes to call (AKA Gracepoint.) The VRS CA relays the conversation back and forth between the parties -- in sign language with the VRS user, and by voice with Gracepoint. No typing or text is involved.

#### **Employee Training**

- All direct service employees attend orientation training within 30 days of hire, where they receive training on providing services to clients with disabilities, including Deaf and Hard-of-Hearing clients, and clients with limited English proficiency.
- All direct service employees also complete the online training by the Department of Children and Families, "Serving Our Customers who are Deaf or Hard of Hearing,



Modules 1, 2 and 3 upon hire or within 60 days of hire. Site specific and agency single point of contacts must complete Module 4.

- All direct service employees will also receive additional refresher training on providing services to persons with disabilities and who are limited English proficient. This will be done at the annual Inpatient Recertification Training and the annual Outpatient Recertification Training.
- All direct service employees will sign a Support to the Deaf and Hard of Hearing Attestation Form upon completion of required trainings.