OFFICE OF POLICY, PROCEDURES AND TRAINING



James K. Whelan Executive Deputy Commissioner

DHS-PB-2017-06

Policy Subject:	Applicable To:	Effective Date:
Desk Guide to Working With Clients Who Are Deaf or Hard-of-Hearing	All client-facing staff working at DHS Facilities, Including Directly-Operated and Provider- Operated Intake, Assessment, and Program Shelters Serving Homeless Adults and Families	DECEMBER 5, 2017

■ INTRODUCTION

The purpose of this policy bulletin is to introduce the Desk Guide to Working With Clients Who are Deaf or Hard-of-Hearing (**DHS-3**) to staff who work with DHS shelter applicants and clients in all DHS Facilities and Programs.

The **DHS-3** has been created to inform staff of the guidelines to utilize when serving clients who are deaf or hard-of-hearing. It is a practical guide to assist staff in serving these target populations, and is meant to supplement the DHS Auxiliary Aids Request Procedure (**17-210**).

Also attached are the Language Card (**W-194**) and the Auxiliary Aids and Services Request Form (**DHS-5 (E)**) and the Auxiliary Aids and Services Request Form (Spanish) (**DHS-5 (S)**), which are utilized in serving the deaf and hard-of-hearing.

Effective Immediately

RELATED ITEM:

Policy Number 17-210 DHS Auxiliary Aids Request Procedure

ATTACHMENTS:

DHS-3 - Desk Guide to Working With Clients Who Are Deaf Or Hard-of-Hearing
DHS-5 (E) - Auxiliary Aids and Services Request Form
DHS-5 (S) - Auxiliary Aids and Services Request Form (Spanish)
W-194 – Language Card



DESK GUIDE TO WORKING WITH CLIENTS WHO ARE DEAF OR HARD-OF-HEARING

This desk guide refers to processes outlined in DHS Auxiliary Aids Request Procedure Number 17-210, July 1, 2016

Clients who are deaf or hard-of-hearing cannot be denied shelter or services due to an inability to communicate.

By law, DHS and DHS Providers must do the following for clients who are deaf or hard-of-hearing:

- Provide ways for clients to effectively communicate with staff,
- Place clients in an accessible unit or dorm, and
- When **making referrals** to HRA, HPD, or NYCHA, inform these agencies that the client they will meet is deaf or hard-of-hearing, and specify their communication preferences.

Things to remember when working with clients who are deaf or hard-of-hearing:

- Staff cannot ask or allow any minor to act as an interpreter.
- An accompanying adult can act as an interpreter only at the request of the client.
- A release of information is not needed to request a sign language interpreter.
- A release of information is not needed for DHS to inform HRA, HPD, or NYCHA, of their hearing status and communication preference.
- If you are working with a client who is deaf or hard-of-hearing and is not placed in an accessible unit or dorm, talk to a supervisor.

All Intake and Shelter Facilities must do the following:

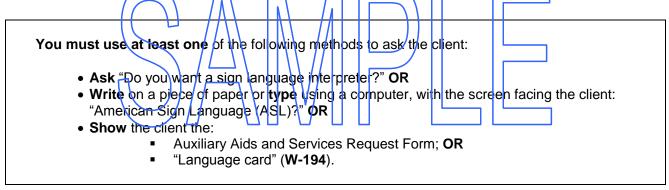
- **Post** the "Free Sign Language Interpreters, Auxiliary Aids, or Services" sign where clients will see it.
- Keep the "Language Card" (W-194) available for use.
- **Designate** at least one computer monitor that can be used to provide Video Remote Interpreting (VRI). This computer should have a good video connection that can show high-quality video images of the interpreter's and client's face, arms, hands, and fingers, and transmit audio clearly.

Section I. : Steps Staff Must Take to Effectively Communicate with Clients who are Deaf or Hard-of-Hearing

- 1) Look directly at the client, with nothing in or in front of your mouth, and do not yell or exaggerate your speech.
- 2) Ask, "Are you deaf or hard-of-hearing?" If the client says or indicates yes, you must notify the appropriate person at your location that a client is deaf or hard-of-hearing (see table below).

PATH	30 th Street	Franklin Women's Shelter	HELP Women's Center	All Other Shelters
Supervisor	Floor Manager, Supervisor	DSS, TL	ED, DSS, & the Director of Safety	Program or Facility Director

3) Find out if the client wants a sign language interpreter and which type of sign language the client uses.



If yes: the client wants a sign language interpreter, complete step 4 (below) and step 5 (page 3).

If no: the client does not want a sign language interpreter, skip to step 6 (page 4).

4) Ask the client to complete or help the client complete the "Auxiliary Aids and Services Request Form." The original completed form **must** then be:

- Scanned into the client's case file in CARES;
- Emailed to eoa@dhs.nyc.gov;
- Copied and placed in the client's hard copy file; and
- Given to the client.

Section I. : Steps Staff Must Take to Effective	ely Communicate with Clients who are Deaf or Hard-of-Hearing (continued)

- 5) If the client wants a sign language interpreter, you must arrange for an interpreter for all scheduled individual meetings, group meetings, and at any other time requested by the client.
 - If using Video Remote Interpreting (VRI), a good video connection must be available that can show high-quality video images of the interpreter's and client's face, arms, hands, and fingers and transmits audio clearly. Every site must have at least one designated computer equipped and available for use.
 - When working with a client and their interpreter, **speak to the client** not the interpreter.
 - Writing back and forth with clients who request sign language interpretation can only be used for short communications. For example, "Your locker combination is 12, 34, 15." or "Curfew is 10:00pm. You need to sign in before that time."

How to request an interpreter, based on where you are located:			
At PATH, 30th Street & DHS-Operated Shelters Complete and email the ASL-100 Form to Accurate Communication ASL REQUESTNYC @ accurate communication.net. Next, confirm the appointment by calling 646-873-4000, and ask for the interpreter's arrival time. You must email and call Accurate Communication for every request. An in-person Interpreter may be available within 2 hours. A Video Remote Interpretation session may be available within 30 minutes. If using Video Remote Interpretation, refer to "Using the Video Remote Interpretation (VRI) Application."			
 Contact ORIA (Office of Refugee and Immigrant Affairs) immediately at 212-331-4550 (business hours) or oria@hra.nyc.gov (off hours) if: You need help finding resources to communicate with a client; OR The client indicates that they do not want an ASL interpreter, but you think they are deaf or hard-of-hearing and may use a different type of sign language and require a Certified Deaf Interpreter (CDI). (See page 7, "About Sign Language and Sign Language Interpreters" for more information about CDIs). 			
At Provider-Operated Shelters, HELP Women's Center & Franklin Women's Shelter			
Contact the interpretation service your Provider has identified in its Compliance Plan. Each Provider organization must have a Compliance Plan that includes information on how the organization plans to provide an interpreter for a client who is deaf or hard-of-hearing. If you do not know what the Compliance Plan is for your Provider, ask a supervisor.			
The interpretation service name is:			
To schedule an interpreter, call: or email: or email:			
This company offers (check one): In person interpreting only Video remote interpreting only Both in-person interpreting and video remote interpreting			
Special directions:			

Section I. : Steps Staff Must Take to Effectively Communicate with Clients who are Deaf or Hard-of-Hearing (continued)

6) If the client says or indicates that they do not want a sign language interpreter ask, "Do you read lips?"

If yes: the client says or indicates that they read lips:

- Be aware that only about 30% of spoken English is understood by lip reading.
- Have the client repeat back to you important spoken information to indicate to you that they understand; and
- Write on a piece of paper, or type and print out important information from your conversation and give it to the client. Make sure to do this when telling the client about an event involving a date or time.

If no: the client says or indicates that they do not read lips, you may communicate by writing back and forth. Writing back and forth as a form of communication can only be offered to a client after they have indicated or said no to both sign language interpretation and to lip reading.

Remember: look directly at the client, with nothing in br in front of your mouth, and do not yell or exaggerate your speech.

Section II. : Staff Must Place Clients Who Are Deaf or Hard-of-Hearing in Accessible Dorms/Units

Clients who are deaf or hard-of-hearing must be placed in an accessible shelter.

Single Adults	Families with Children and Adult Families
of-hearing, it must have a smoke alarm that flashes lights.	For a unit to be accessible for a client who is deaf or hard-of-hearing, it must have a smoke alarm that flashes lights and a doorbell that flashes lights.

ou refer a client w	the is deaf or hard-of-hearing to HRA, HPD, or NYCHA, you must contact that agency and provide the following information:
The client's fir	st and last name;
	t is deaf or hard-of-hearing;
	it's preferred method of communication is; and U U U U
Any other rele	vant information, including, if applicable, date and time of appointment.
	In CARES, create a General Client Referral. In the "Reason for Referral" section, enter:
	 The client's preferred method of communication;
	• The client's preferred method of communication,
HRA	• Any other information about how the client communicates. For example: "client prefers to use an in-person interpreter"
HRA	• Any other information about how the client communicates. For example: "client prefers to use an in-person interpreter" or, if the client asks for a specific adult to act as an interpreter, that person's name and contact information.
HRA	
	or, if the client asks for a specific adult to act as an interpreter, that person's name and contact information.
HRA HPD	 or, if the client asks for a specific adult to act as an interpreter, that person's name and contact information. The reason for the referral. For example: "opening a public assistance case."
	 or, if the client asks for a specific adult to act as an interpreter, that person's name and contact information. The reason for the referral. For example: "opening a public assistance case." Indicate what program at HPD you are referring the client to and email:

Record Keeping

For each client who is deaf or hard-of-hearing, you must complete each screen noted below in CARES. This is to make sure all staff who may work with this client in the future knows their communication needs. If you notice that these sections are not completed, speak to your supervisor.

Managerial Flag & Client Case Notes

The Supervisor must create a **Managerial Flag**, select flag type as "Medical," and enter the below in the comment box. For the **first** Case Note, enter the below in the comment box.

And for each case note, enter how you communicated with the client.

- "The client is deaf or hard-of-hearing, must be allowed to communicate by their preferred method including for scheduled individual and group meetings, and any other times requested and must be placed in accessible shelter (for adults a dorm with a smoke alarm that flashes lights and for FWC and AF, in a unit with a smoke alarm that flashes lights and a doorbell that flashes lights)."
- Enter the client's preferred method of communication: American Sign Language (ASL), another sign language, lip-reading, or writing back and forth.
- Enter any other information about how the client communicates including, for example, if they prefer to use an in-person interpreter or if the client asks for a specific adult to act as an interpreter, that person's name and contact information

Demographic Information: Spoken and Written/Language

Client Home Page, Demographic Information section, both the "spoken language" and "written language" drop downs must be selected:

- Spoken Language: if the client uses any type of sign language to communicate, select "sign language."
- Written Language: If the client reads and writes, select that language from the drop down menu.

Placement Issues

Check the box that states: "Do you have any other medical condition that we should know about for placement purposes?" Then enter in comment box:

- "Client is deaf or hard-of-hearing and must be placed in accessible shelter (for adults a dorm with a smoke alarm that flashes lights and for FWC and AF, in a unit with a smoke alarm that flashes lights and a doorbell that flashes lights)."
- Health Screening Form

Check the "yes" box next to the question, "Are you deaf?"

About Sign Language and Sign Language Interpreters

Sign language is not universal. American Sign Language (ASL) is used by deaf and hard-of-hearing people in the United States and in some other regions. Not all people who use ASL are from English-speaking countries, for example in West and Central Africa. Spanish Sign Language is used by people who live in Spain, while Puerto Rico has its own sign language that is very similar to ASL.

Some people may use an informal sign language sometimes called Pidgin Sign. While others may use signs that are only used among family members called Home Signs. If an ASL interpreter is unable to communicate with a person who uses a sign language other than ASL, a second interpreter should be used who is trained to interpret other forms of sign language, into ASL. This second interpreter is usually deaf and called a Deaf Interpreter (DI) or a Certified Deaf Interpreter (CDI).

When talking about a person who is deaf and does not *speak* to communicate with hearing people, you can say that they are "deaf and do not use their voice." It is offensive to say that a person is "a deaf/mute" or "deaf and dumb." Remember to look at a person who is deaf or hard-of-hearing when you are speaking to them either with or without an interpreter.

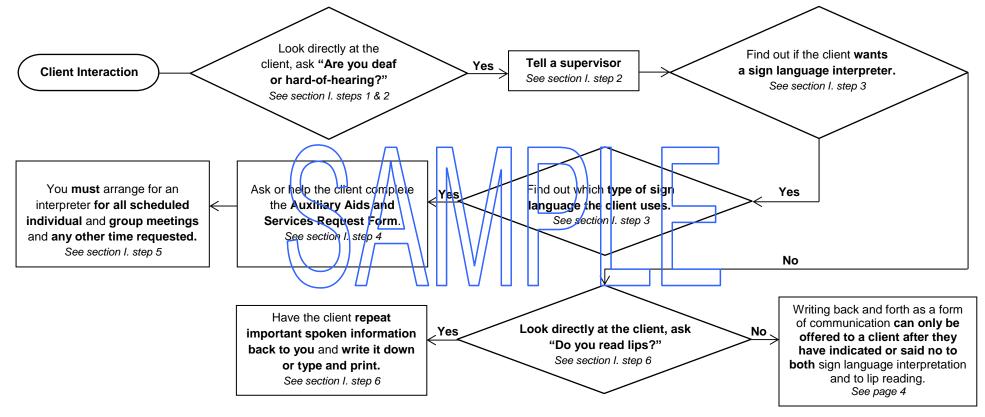
If you are interested in learning some American Sign Language, the New York City Public Library offers free in-person classes through their Public Programs, http://www.nypl.org/events/public programs and there are free on ine dictionaries such as www.handspeak.com. Please note that even if you learn *some* ASL, you must still order an interpreter when communicating with a client who uses sign language.



Desk Guide to Working with Clients who are Deaf or Hard-of-Hearing Decision Tree & Other Requirements

Reminders:

- Clients cannot be denied shelter or service due to an inability to communicate.
- When speaking to clients who are deaf or hard-of-hearing, look directly at the client, with nothing in or in front of your mouth, and do not yell or exaggerate your speech.



- Clients must be placed in an accessible shelter. (see Section II, page 5)
- Staff must contact HRA, HPD, and NYCHA when referring clients who are deaf or hard of hearing. (see Section III, page 5)
- At all sites, at all times: signs must be posted, client-facing staff must have a language card, and at least one computer must be identified and equipped for Video Remote Interpreting. (see page 1)
- Records in CARES must be completed in: Managerial Flag; Client Case Notes; Demographic Information: spoken and written language drop downs; placement issues; and health screening. (see page 6)

To arrange for a sign language Interpreter (see Section I, step 5, page 3)

PATH, 30th Street and DHS-Operated Shelters: Complete and email the ASL-100 Form to Accurate Communication ASLREQUESTNYC@accuratecommunication.net. Next, confirm the appointment by calling 646-873-4000, and ask for the interpreter's arrival time. You must email and call Accurate Communication for every request.

Provider-Operated Shelters, HELP Women's Center, and Franklin Women's Shelter: Contact the interpretation service your Provider has identified in its Compliance Plan. Each Provider must have a Compliance Plan that includes information on how the organization plans to provide an interpreter for a client who is deaf or hard-of-hearing. If you do not know what the Compliance Plan is for your Provider, ask a supervisor.



Auxiliary Aids and Services Request Form

If you are working with a client who may be deaf or hard-of-hearing:

- 1. Refer to the <u>Desk Guide to Working with Clients who are Deaf or Hard-of-Hearing</u> (DHS-3).
- 2. Contact your supervisor.
- 3. Give page 2 (<u>Auxiliary Aids and Services Request Form</u>) to the client and ask them to complete the form.
 - Some clients who are deaf or hard-of-hearing may not be able to read this form. If a client needs assistance with reading and/or filling out the form, please request a sign language interpreter immediately.
 - The <u>Auxiliary Aids and Services Request Form</u> is available in 11 languages. If the client reads or writes in a language other than English, please provide them with page 2 of the form in the language they prefer.
- 4. Fill out the section below on this page.
- 5. Once the form is completed by the client, please do the following:
 - Scan both pages into the client's case file in CARES;
 - Email both pages to eoa@dhs.nvc.gov;
 - Make a copy of the form and place it in the client's hard copy file; and
 - Give the original to the client to keep.

The <u>Auxiliary Aids and Services Request Form</u> is only for record keeping. To order an interpreter for this client, follow the steps outlined in the <u>Desk Guide to Working with Clients who are</u> <u>Deaf or Hard-of-Hearing</u> (DHS-3), or speak to your supervisor.

DHS and Provider Staff must complete this section:

Intake/Shelter Name:	
Staff Name and Title:	
Client Name:	CARES ID:
Type of Aid Provided:	
If requested aid could not be provided, explain why:	
Staff signature:	Date:

Instructions for DHS and Provider Staff are on this page.

Auxiliary Aids and Services Request Form

You have identified yourself as, or have been identified as, deaf or hard-of-hearing. By law, you have the right to request services and/or devices to help you communicate with DHS and Provider staff while you are applying for shelter and during your shelter stay.

In the sections below, you can request a sign language interpreter or any other aid to help you communicate with DHS staff. Please be aware that your first choice of aid may not be available immediately, but DHS will take steps to make sure an appropriate aid is provided to assist you.

Client Information			
Name: Signature:			
Client's Request			
 I prefer to communicate with DHS and Provider staff using: Sign Language Interpretation Type of Sign Language (For example, American Sign When available, I want my family member or friend to ac Family member or friend's contact information: 			
Name: Pr	none Number:		
Email:			
Other device or service:			
Comments:			

This page should be completed by the client.



Formulario de Petición de Ayuda y Servicios Auxiliarios

If you are working with a client who may be deaf or hard-of-hearing:

- 1. Refer to the Desk Guide to Working with Clients who are Deaf or Hard-of-Hearing (DHS-3).
- 2. Contact your supervisor.
- 3. Give page 2 (<u>Auxiliary Aids and Services Request Form</u>) to the client and ask them to complete the form.
 - Some clients who are deaf or hard-of-hearing may not be able to read this form. If a client needs assistance with reading and/or filling out the form, please request a sign language interpreter immediately.
 - The <u>Auxiliary Aids and Services Request Form</u> is available in 11 languages. If the client reads or writes in a language other than English, please provide them with page 2 of the form in the language they prefer.
- 4. Fill out the section below on this page.
- 5. Once the form is completed by the client, please do the following:
 - Scan both pages into the client's case file in CARES;
 - Email both pages to eoa@dhs.nvd.gov;
 - Make a copy of the form and place it in the client's hard copy file; and
 - Give the original to the client to keep.

The <u>Auxiliary Aids and Services Request Form</u> is only for record keeping. To order an interpreter for this client, follow the steps outlined in the <u>Desk Guide to Working with Clients who are</u> <u>Deaf or Hard-of-Hearing</u> (DHS-3), or speak to your supervisor.

DHS and Provider Staff must complete this section:

Intake/Shelter Name:	
Staff Name and Title:	
Client Name:	_CARES ID:
Type of Aid Provided:	
If requested aid could not be provided, explain why:	
Staff signature:	Date:

Las instrucciones para DHS y el personal proveedor se encuentran en esta página.

Formulario de Petición de Ayuda y Servicios Auxiliarios

Usted se ha identificado o ha sido identificado como sordo o impedido de la audición. Conforme a la ley, usted tiene el derecho de solicitar servicios y/o dispositivos que le ayuden a comunicarse con DHS y el personal proveedor, en lo que presenta su solicitud de albergue y durante su estadía en el albergue.

En las secciones más abajo, usted puede solicitar un intérprete de lenguaje de señas o cualquier dispositivo que le ayude a comunicarse con el personal de DHS. Favor de tener presente que su primera opción de ayuda puede no estar disponible de inmediato, no obstante DHS tomará los pasos necesarios para asegurarse de que se le provea a usted ayuda apropiada.

Información del cliente				
Nombre:	Fecha de nacimiento:///			
Firma:	Fecha de hoy:			
Prefiero comunicarme con DHS y el personal pro Interpretación de lenguaje de señas Tipo de lenguaje de señas (por ejemplo, Lenguaje de Señas Estadounidens				
 Cuando disponible, deseo que un familiar o amigo sirva de mi intérprete de lenguaje de señas. Información de contacto del familiar o amigo: 				
Nombre: Correo electrónico:	Número de Teléfono:			
Otro dispositivo o servicio:				
Comentarios:				



Human Resources Administration Department of Social Services

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IF YOU DO NOT KNOW THE LANGUAGE OF THE PERSON WHO WANTS YOUR HELP, USE THIS CARD. THE PERSON CAN POINT TO THE LANGUAGE NEEDED AND YOU CAN ARRANGE FOR AN INTERPRETER.

English	"Do you speak"	"Please be seated. I will call an interpreter for you."	Hindi	क्या आप हिन्दी बोलते हैं?	कृपया बैठ जाइए। मैं आपके लिए दुभाषिये की व्यवस्था करूंगा⁄करूंगी।
Albanian	Flisni shqip?	Uluni ju lutem. Po shkoj të thërras një përkthyes për ju.	Italian	Parla italiano?	Prego, si accomodi e attenda mentre Le chiamo un interprete.
Arabic	هل تتكلم اللغة العربية؟	تفضل بالجلوس. سأتصل بمترجم لك.	Khmer	តើអ្នកនិយាយភាសាខ្មែរឬទេ?	ស្ងមអញ្ជើញអង្គុយ ។ ខ្ញុំនឹងទូរស័ព្ទហៅអ្នកបកប្រែ ដើម្បីបកប្រែឲ្យអ្នក ។
Bengali	আপনি কি বাংলায় কথা বলেন?	অনুগ্রহ করে বসুন। আমি আগ্মনার জন্য একজন দোভাষী ডাকবো।	Kor ean	한국 어 를 사용하십니까?	앉으십시오. 통역사를 불러드리겠습니다.
Bosnian	Govorite li bosanski?	Molimo, sjednite. Poslaću prevodioca za Vas.	Polish	C zy P an/Pani mówi Po polsku?	Proszę siadać, podczas gdy wołam tłumacza.
Cantonese	您講廣東話嗎?	請坐。讓我為您叫一位翻譯員。	Russian	Вы говорите по-русски?	Присядьте, пожалуйста. Я сейчас позову переводчика, который вам поможет.
Mandarin	您講國語嗎?	請坐。讓我為您叫一位翻譯員。	Spanish	¿Habla español?	Tome asiento, por favor. Llamaré a un intérprete para que lo ayude.
Creole	Èske ou pale Kreyòl?	Tanpri chita. Mwen pral rele yon moun pou tradwi pou ou.	Ukrainian	Чи Ви розмовляєте українською мовою?	Будь ласка, посидьте, поки я викликаю перекладача для Вас.
French	Parlez-vous français?	Veuillez vous asseoir. Je vais vous appeler un interprète.	Urdu	کیا آپ اردو بولتے ہیں؟	کے لیے کسی ترجمان کو بلاتا ہوں/بلاتی ہوں . مہربانی کر کے بیٹھ جائیے . میں آپ
Greek	Μιλάτε Ελληνικά	Παρακαλώ καθίστε. Θα καλέσω ένα διερμηνέα για σας .	Vietnamese	Anh/chị nói tiếng Việt phải không?	Xin mời ngồi chờ. Tôi sẽ gọi người thông dịch cho anh/chị.
Hebrew	האם את/ה דובר/ת עברית?	נא לשבת. אני אזמין מתרגם/ת.	Yiddish	איר רעדט אידיש?	ביטע זעצט אייך. איך וועל רופן א דאלמעטשער פאר אייך.
69	Hearing Impaired	If you need an interpreter in sign language, please point here.			