



Office of Deaf Services

Missouri Department of Mental Health

dmh.mo.gov/deafservices

Deaf Consumers ♦ **Providers** ♦ **DMH System**

THE DMH DEAF SERVICES SYSTEM: ACCESS AND STANDARDS OF CARE



Overview/Types of Deaf Services

Culturally Appropriate, Linguistically Accessible Care:

DMH's Expectation for All Providers

- ▶ Effective communication access based on individual needs and preferences. May be mediated, e.g. through an interpreter or real-time captioning.
- ▶ Providers meet/exceed minimum standards of cultural competence.

Deaf Services Advocates support this type of services.

❖ Culturally and Linguistically Affirmative Care:

DMH's Specialized Services for Deaf and Hard of Hearing Consumers

- ▶ Direct communication with ASL-fluent providers whenever possible.
- ▶ Providers have specialized training in Deaf culture and deaf mental health care.

Deaf Services Advocates facilitate access to this type of services.



Specialized Deaf Services Delivery Options

Specialized Outpatient Centers (SOCs)

ReDiscover Deaf Services

Brandy Haddock, MS, LPC

1535 NE Rice Road

Lee's Summit, MO 64086

Voice: 816-966-0900

bhaddock@rediscovermh.org

BJC Behavioral Health Deaf Services

Laura Shapiro, MSW, ACSW, LCSW

3165 McKelvey Road, Suite 200

Bridgeton, MO 63044

Voice: 314-206-3499

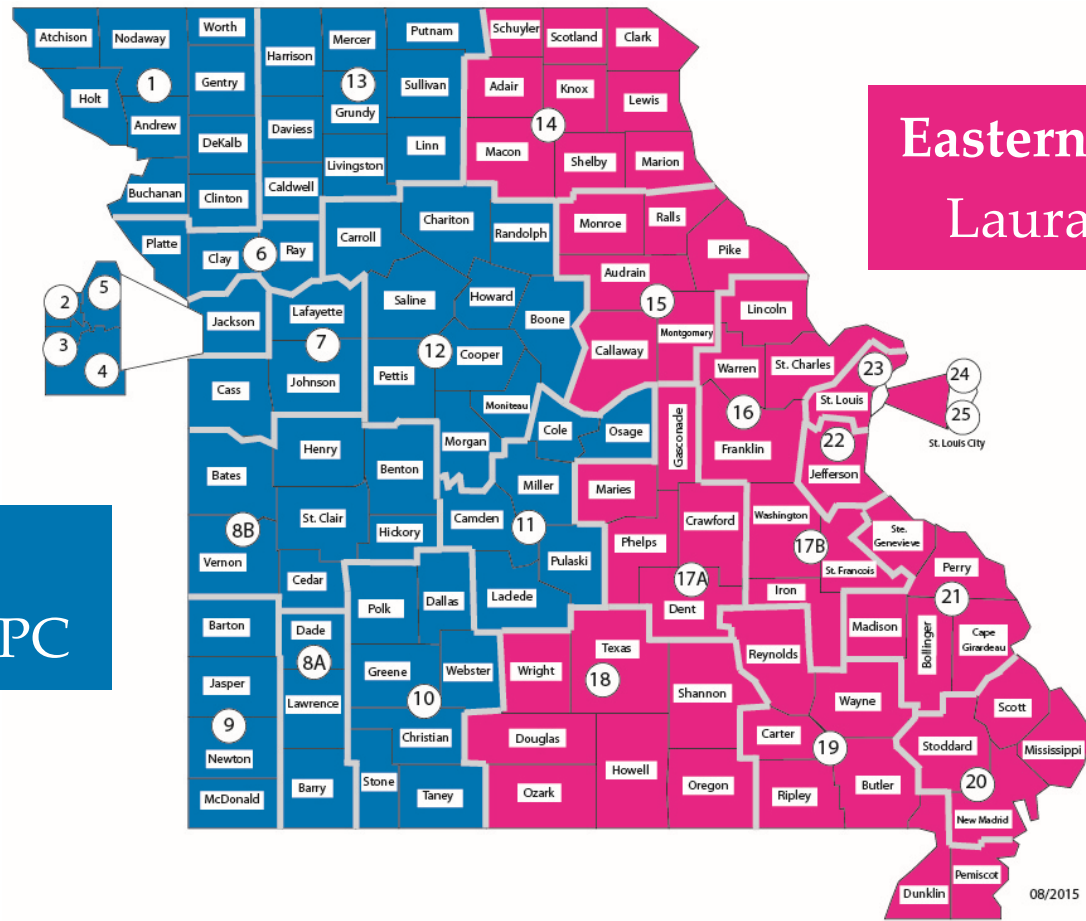
VP: 314-266-2636

laura.shapiro@bjc.org

- Core CPR services provided by staff who are ASL fluent and/or have specialized training in Deaf culture and Deaf mental health care.
- ASL-fluent QMHPs and Community Support Specialists.
- Regular CMHC service area boundaries do not apply.
- Individual counseling available statewide through telehealth.



Deaf Services SOC Telehealth Regions



Eastern: BJC Behavioral Health
Laura Shapiro, MSW, LCSW

Western: ReDiscover
Brandy Haddock, MS, LPC



Specialized Deaf Services Delivery Options

Specialized Inpatient Units (SIUs)

**Truman Medical Center
Behavioral Health (Acute)**
Robert Ellis, Program Director
1000 E. 24th St.
Kansas City, MO 64108
Voice: 816-404-3800
robert.ellis@tmcmed.org

- Provides adult acute inpatient services with an interpreter. Staff are trained in Deaf culture and Deaf mental health care.
- Admissions are through Truman's emergency room or by transfer from another hospital.

**St. Louis Psychiatric Rehabilitation
Center Deaf Services Unit
(Intermediate/Long-Term)**
Peter Scheers, MS, Program Director
5300 Arsenal St.
St. Louis, MO 63139
Voice: 314-877-5945
peter.scheers@dmh.mo.gov

- Provides intermediate and long-term inpatient services. Some services are provided with an interpreter, and some services are available directly in American Sign Language.
- Admissions are through CMHCs.



DEAFline MISSOURI Crisis Hotline

DEAFline MISSOURI

WHAT IS DEAFline?

Deafline Missouri is a 24-hour crisis hotline which provides free and confidential assistance for Deaf and Hard of Hearing individuals statewide.



Deafline Missouri is provided by The L.E.A.D. Institute and Department of Mental Health

HOW DOES DEAFline WORK?

Individuals may call or text for support with family troubles, homelessness, loneliness and depression, and a wide variety of other problems. Deafline is also for mental health agencies and hospitals to utilize when serving Deaf individuals.



800-380-3323 Toll Free (Voice / TTY)

573-445-5059 Local (Voice / TTY)

573-303-5604 Videophone (9:00 a.m. - 5:00 p.m.)

- OR -

Text **HAND** to 839863

(Standard Message and Data Rates Apply; Text **STOP** to Opt Out)

IF THERE IS A LIFE THREATENING EMERGENCY, CALL 911

- ✚ Statewide 24-Hour crisis hotline for deaf and hard of hearing individuals.
 - ▶ Text **HAND** to 839863
 - ▶ TTY or voice call to 800-380-3323
 - ▶ Videophone call to 573-303-5604
- ✚ CMHCs must post two posters in their main facility and at least one poster in each additional facility.



Requirements for All CMHCs and SUDT Providers

- ❖ DMH's human rights requirements:
 - ▶ Establish a system that allows consumers to present grievances.
 - ▶ Maintain a file of all DMH consumer grievances alleging a rights violation.
 - ▶ Comply with ADA requirements.
 - ▶ Notify DMH of any allegations of ADA rights violations.



Requirements for All CMHCs

- ▶ Deaf consumers must be given choices:
 - ▶ Access all services from SOC or all services from local CMHC;
 - ▶ Access specialized services from SOC and other services from local CMHC.
 - ▶ Access specialized counseling via telehealth or regular counseling at local CMHC;
 - ▶ Other services (e.g. assessments) may be arranged by telehealth on a case-by-case basis.
 - ▶ Unless a choice is clinically contraindicated.



Requirements for All CMHCs and SUDT Providers

- ❖ For deaf consumers who use ASL, unless the consumer requests an alternative communication method, a “category of mental health service” must be delivered in ASL:
 - ▶ Preferably by an ASL fluent staff member;
 - ▶ Alternately with an interpreter who is qualified and appropriately certified;
 - ▶ VRI may not be used unless an interpreter cannot be physically present in a timely manner.
- ❖ For deaf consumers who do not use ASL, reasonable, good faith efforts must be made to provide alternative communication methods.
- ❖ A requested accommodation cannot be denied due to undue burden or fundamental alteration unless the decision has been made in writing by the DMH director or his/her designee.



Requirements for All CMHCs and SUDT Providers

- ❖ “Category of mental health service” means one of the following services funded by DMH:
- ▶ An initial assessment, including diagnosis;
 - ▶ A periodic reassessment;
 - ▶ A treatment or discharge planning meeting with the client present;
 - ▶ A visit with a contract or employee physician;
 - ▶ An individual psychotherapy/psychoeducational session; or
 - ▶ A group psychotherapy/psychoeducational session.



Requirements for All CMHCs and SUDT Providers

❖ How do I know if a staff member is ASL fluent?

▶ “For clinicians:

- Advanced or higher rating on the Sign Language Proficiency Interview (SLPI), or
- Advanced or Master Missouri interpreter certification;

▶ For non-clinicians:

- Intermediate or higher rating on the SLPI, or
- Basic or higher Missouri interpreter certification;

▶ For clinicians and non-clinicians:

- Graduation from any post-secondary education program that uses ASL as a primary language of instruction, or
- Being prelingually deaf and using ASL as their primary language; or
- Obtain two written attestations (contact the Office of Deaf Services for details).



Requirements for All CMHCs and SUDT Providers

- ❖ How do I know if a staff member is ASL fluent?
 - ▶ Fluency must be documented with the Office of Deaf Services.

Under the Prospective Payment System (PPS), Certified Community Behavioral Health Organizations can include enhanced pay for bilingual/multilingual providers in their cost reports to increase their overall daily reimbursement rate.

Under Fee-for-Service (FFS), enhanced billing rates are available for certain services when provided by ASL-fluent staff.



Requirements for All CMHCs and SUDT Providers

- ❖ What is a “qualified interpreter?”
 - ▶ Impartial (not family, friend, or companion);
 - ▶ Can interpret effectively and accurately, both receptively and expressively, using any necessary specialized vocabulary, **terminology, or phraseology;**
 - ▶ **Adheres to generally accepted interpreter ethics principles, including confidentiality.**
- ❖ What is an “appropriately certified interpreter?”
 - ▶ Advanced or Master Missouri certification (not Basic).



Requirements for All CMHCs and SUDT Providers

- ❖ What if the consumer wants a family member, friend, or companion to interpret (ad hoc interpreter)?
 - ▶ Except in an emergency, Federal law permits this only if all the following conditions are met:
 - The deaf person specifically requests it;
 - The family member/friend/companion is an adult and agrees to interpret; and
 - Using such assistance is appropriate under the circumstances.
 - ▶ Missouri law requires that anyone interpreting sign language be licensed, appropriately certified, and impartial. Violation is a class A misdemeanor.
 - ▶ If you are unable to reasonably determine whether an interpreter is qualified (including impartiality), then anything you do with information obtained through the interpreter is not legally defensible.

It is almost never appropriate to use an ad hoc interpreter in a mental health setting.



Requirements for All CMHCs and SUDT Providers

- ❖ How do we get reimbursed for interpreting services?
 - ▶ **Under PPS**, interpreting is entered in CIMOR as a cost-only service that does not trigger a payment. Associated costs should be included in cost reports so that they are built into the daily rate.
 - ▶ **Under FFS**, interpreting is billed in CIMOR when provided in conjunction with a “category of mental health service” funded by DMH.
 - ▶ In Medicaid managed care and private pay, interpreting costs are not reimbursable and are generally considered overhead.
- ❖ Interpreters who have completed DMH’s *Introduction to Mental Health Interpreting* course receive preferential hiring.



Requirements for All CMHCs and SUDT Providers

- What about services other than a “category of mental health service?”
 - ▶ Section 1557 effective communication requirements apply.
 - ▶ For DMH services, both Title II and Title III apply.
 - ▶ For non-DMH services, Title III applies.
 - ▶ The appropriate auxiliary aid or service should be determined using the USDOJ’s ADA Guide to Effective Communication.
 - ▶ DMH typically does not reimburse interpreting costs.



Strongly Encouraged for All CMHCs and SUDT Providers

- ❖ Staff providing services to a deaf consumer should take DMH's Deaf Services Training.
- ❖ Staff providing services to a hard of hearing consumer should take MN DHS, DHHSD's Working with People with Hearing Loss training.
- ❖ Any staff whose responsibilities include interacting with consumers should have one hour of training on deaf services annually.



Resources in the DSA Manual

dmh.mo.gov/deafservices/dsamannual



Questions?

