User's Guide: Communicating with Individuals Who Have Hearing Loss During an Emergency/Disaster Event





Disclaimer: This guidance is intended as a resource for emergency responders serving individuals who are Deaf, Hard of Hearing, or DeafBlind. Using alternative or untested communication methods may result in delayed understanding between parties.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF SERVICES FOR THE DEAF AND HARD OF HEARING

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Introduction

This reference guide provides tips to emergency responders on serving and communicating with Deaf, Hard of Hearing, DeafBlind, and Late-Deafened individuals, as well as how to find appropriate resources to assist those populations in a shelter, or in any emergency situation.

The Division of Services for the Deaf and Hard of Hearing (DSDHH) under the North Carolina Department of Health and Human Services (DHHS) provides direct services to individuals with hearing loss as well as to the agencies and businesses that serve them. DSDHH's specially trained staff are housed at its seven regional centers located throughout the state serving all 100 counties and the Eastern Band of Cherokee Indians in North Carolina.

How can DSDHH provide support during an emergency/disaster event?

Each of DSDHH's seven regional centers has a Community Accessibility Specialist (CAS). The CAS is the point of contact for collaborating with emergency responders. The CAS will assist or refer you to appropriate staff within the Regional Center based on the type of request.

Communication access to emergency alerts, information and services is critical. When individuals who have a hearing loss have limited or no access, a significant barrier to effective communication is imposed. Such barriers can cause communication misunderstandings, overlooked health needs and lives may be endangered. The CAS provides support, resources and consultation to city and county emergency responders as well as other agencies involved in emergency response by collaborating to ensure that communication access is provided for people who are Deaf, Hard of Hearing and DeafBlind before, during and after disaster and emergency events. The CAS may also share resources internally with their own staff and externally with community members, providing advocacy as appropriate. See <u>Appendix A</u> for the list of Regional Centers. Please note that each regional center serves specific counties. A map is included to assist in finding the appropriate agency.

Examples of how a CAS may support emergency responders on-site or remotely include:

- Consultation on providing effective communication access to individuals with hearing loss
- Assistance in acquiring interpreting and captioning services for press conferences, town hall meetings, shelters, medical facilities, Disaster Recovery Centers, Long-Term Recovery Groups and other needs
- Assessments of the communication needs of individuals with hearing loss

 Communication equipment loans such as assistive listening devices, TTY, amplified phones or captioned phones

It is important to note there are many causes and types of hearing loss and Deafness, which vary for each person and for each ear. The answers to the following questions provide solutions and suggestions for addressing the concerns and issues impacting communication access that can vary from person to person. There is no "one size fits all" solution, therefore it is essential to ask the person with hearing loss which accommodations work best for them in each particular setting.

1) How can I recognize a person with hearing loss?

There are different types of hearing loss, which range from mild to profound.

Signs of hearing loss that you may notice are:

- Pointing to their ears and shaking their head to indicate they can't hear
- Writing notes
- Hearing aid or cochlear implant
- May have unclear speech
- Loud speech
- No response, inappropriate response or asking for repetition
- Puzzled expression while listening
- May not react to some sounds
- Frustrated with lack of communication
- Focusing on speaker's lips
- Gestures/sign language
- 2) How can I make communication with a Deaf or Hard of Hearing person easier for both of us?

Some individuals will tell you their preferred methods of communication. If they do not share, please ask them, and follow their request.

Examples of communication strategies:

- Speak clearly at a normal pace
- Face the person directly so a person with residual hearing can lipread
- Avoid covering your mouth and face. <u>See Question 29 regarding clear face</u> <u>masks</u>
- When able, eliminate background noise or move to a quieter area
- Be aware of what is behind you, avoid bright light such as a window
- Repeat what you said
- Rephrase the word, sentence or question

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- Do not assume that the person understands you
- Give visual cues or gestures
- Use mime, sign language or fingerspelling for simple communication
- Use an Assistive Listening Device (ALD) (amplifiers that deliver sound directly to the ear. See <u>Questions 9 & 10</u> for more information)
- Write notes back and forth
- Type on smartphone, computer or tablet
- Use pictograms or communication board/book
- Use an American Sign Language (ASL) interpreter (on-site or remote)
- Use applications for smartphones, tablets and computers to assist in communication. (See <u>Questions 11, 12 & 13</u>)

3) The person appears not to respond when I call or talk to them. What is appropriate way to get their attention?

The appropriate way to get the person's attention is to tap on their shoulder/arm or wave to get their attention. With a person who is DeafBlind, put your hand on their shoulder or back until they face you.

4) A person has clear speech but tells me that they have hearing loss, what should I do?

Believe them. Many people who develop hearing loss or deafness later in life still have clear speech.

5) Which tools can I use to communicate effectively with a DeafBlind person?

Each DeafBlind individual has varying degrees of both hearing and vision loss; therefore, their communication needs and preferences vary. Sometimes their communication modes are the same as individuals who are Deaf and Hard of Hearing. Ask this person how you can best communicate with them. This may involve gesturing, speaking or writing back and forth to see which method is best understood. Look for cues such as the individual offering to write or to use a communication device. Heed their request.

Additional assistance and communication strategies for DeafBlind individuals may include:

- Writing notes back and forth with a thick black marker
- Using your finger to write letters on hand or arm (capital letters should used)
- Typing on the individual's communication device
- Typing on a smartphone, computer or tablet
 - change font to larger size including bold

- change background and text color (e.g., black background, white or yellow letters)
- Some people who are DeafBlind have devices which use braille with their mobile or other device. Contact the local DSDHH regional center if you need assistance communicating with an individual utilizing this equipment.
- Using an American Sign Language (ASL) interpreter. When requesting an interpreter, indicate that the person is DeafBlind so that an interpreter with specialized DeafBlind interpreting skills can be found. Depending on the need, remote interpreting may not be viable.
- To get the attention of the person who is DeafBlind, tap on their shoulder/arm. You may need to keep your hand on her/his shoulder or arm until they face you.

If a DeafBlind person appears to be in danger, draw an "X" with your finger on their arm or back (to indicate an emergency), and then lead the person to a safe area. Upon arrival at a safe place, explain what is happening.

Please keep in mind that not all DeafBlind individuals will be familiar with the "X" technique. It depends on when the onset of hearing and/or vision loss occurred, as well as whether they have had Orientation and Mobility training. When you need to remove a DeafBlind person from danger, gently take their hand and put it into the crook of your elbow and guide them out. Only, as a last resort, should you physically force them out by pushing or pulling them. After arriving at a safe place, explain what is happening.

6) What are the best practices for guiding an individual who is DeafBlind?

- Use your hand to guide their hand to your elbow or shoulder so they may walk in-pace with you
- You should always stay one step ahead of the person so that you can guide them safely and allow more time to react to changes in the environment. For example, if you approach a step, you will step up or down first, then they will follow.
- You should always pause before starting up or down steps.
- If you need to walk in single file, move your arm (the one they are gripping) behind your back to signal for single file. If the person is not familiar with the technique, you can gently push them back behind you.

- Make sure your arm and posture stay relaxed and at ease. The DeafBlind person receives more tactile information from your arm when it is moving naturally. Avoid stiff arms/posture.
- When leaving an individual who is DeafBlind at a location, "anchor" them to a secure place (for example, guide their hand to the wall, cot or chair). Do not leave them standing in the middle of a space.
- When giving directions (print on palm, dry erase board with thick black marker or whatever communication mode is preferable for that individual), be specific. For example, you can say, "The elevator is six feet in front of you" instead of, "The elevator is over there."

7) What is a Support Service Provider (SSP)?

A companion acting as a sighted human guide may be with the DeafBlind person. They are not a substitute for a licensed, qualified American Sign Language interpreter. However, allow the companion to remain with the DeafBlind individual to provide environmental access support.

8) Does amplification equipment help?

In some situations, amplification equipment may help some people with hearing loss. Several factors may be involved: the individual's type and degree of hearing loss, the type of equipment used and its location. A poorly tuned public address (PA) system with low quality speakers in a space with bad acoustics can make it more difficult to understand what is being said. It is always important to ask the individuals relying on the amplification whether it is working properly or needs adjustment.

There are also portable amplification systems designed for smaller settings such as classrooms.

For direct delivery of sound to the individual there are Assistive Listening Devices (ALD) and Assistive Listening Systems (ALS).

Clarification: Though hearing aids and cochlear implants amplify sound, they are in a different category of equipment due to their being programable to amplify sound frequencies to more closely meet the specific needs of each individual user.

9) What is an Assistive Listening Device?

An Assistive Listening Device (ALD) is a self-contained microphone and amplifier used by an individual to deliver sound directly to the ear via a wired or wireless headset: headphones, an earphone, or earbuds. The user controls the volume, and some ALDs allow for tuning of the sound delivered similar to adjusting bass and treble. ALDs can also be used in conjunction with a compatible hearing aid. This may require replacing the headset with a neck loop.

10) What is an Assistive Listening System?

An Assistive Listening System (ALS) is usually two components consisting of a microphone and transmitter, and a receiver with a wired or wireless headset: headphones, an earphone or earbuds. The speaker uses the microphone and transmitter. The person needing amplification uses the receiver and headset and can control the volume to their preference.

Most of these systems can be expanded by adding receivers and headsets. The receivers can also be used in conjunction with a compatible hearing aid.

These systems transmit in a variety of ways: FM, digital, infrared, WiFi or inductive loop. They can also be configured based on the need for capacity, range and security.

11) What about Amplification Applications (apps) for smartphones, tablets, and computers?

Amplification or assistive listening applications enhance the audio from the built-in microphone of the device, amplifying and delivering to the listener via a wired or Bluetooth headset and can also work with compatible hearing aids and cochlear implants. Utilizing this type of app may be a quick solution to assist a person with hearing loss until an Assistive Listening Device is available.

Clarification: Headsets designed for hands free communication, such as earbuds which may come with a smartphone, have a built-in microphone which overrides the microphone on the phone, tablet or computer when in use. For this reason, a simple headset for "listening only" may be a better choice as it allows for placing the microphone of the phone, tablet or computer closer to the source of sound.

12) How can I find amplification apps?

Key words to aid in searching for apps in the Store on your device are:

- Sound amplifier
- Sound amplification
- Amplification

Apps are constantly changing and over time some will become inactive. Some apps are free, others charge a fee, while some offer both a free version and a premium version. Apps can be designed for iPhone, Android, or both.

There are usually reviews posted, which may be helpful in your search.

13) My mobile phone has Speech-to-Text program. Can I use it to communicate with individuals who are Deaf, Hard of Hearing and DeafBlind?

Yes, you can, however it is best to know who you are working with first. Are they Deaf or Hard of Hearing? If they are Deaf and primarily use American Sign Language (ASL) to communicate, they may struggle to understand English in text, because ASL is not English. If they are Hard of Hearing and appreciate captioning, whether on television or in other places, they may appreciate speech-to-text. Some people cannot read and in that case speech to text would not be helpful for communication.

American Sign Language (ASL) which is the native language for many Deaf people, is different from English in that it doesn't go word-for-word with English. Like most spoken languages, English is a linear language where thoughts and ideas "sound right" when communicated. ASL is a visual language where thoughts and ideas "look right" when communicated. This often makes it difficult for native ASL users to understand complex information written to them in English. What "sounds right" to a hearing person, will likely not "look right" to a Deaf person and vice versa. Therefore, it is best is to keep English short and simple, but it is recommended to use an American Sign Language interpreter (on-site or remote) for smooth and seamless conversation.

When communicating with those who are Deaf or Hard of Hearing who also have low vision, ask their preference for font, font size and color, and background color. There are some free apps that provide voice-to-text with apps that provide larger font and better color contrast.

There are apps for speech-to-text such as Live Transcribe (Google), Microsoft Translator, and Otter.ai. Keep in mind that automatic speech recognition technology is not perfect, but it is continuing to improve. DSDHH does not imply a preference for, or endorsement of any products.

14) What is Communication Access Real-time Translation (CART)?

Communication Access Real-time Translation (CART), is word-for-word real-time captioning that can be used in a variety of settings, including during appointments, during intakes and interviews and presentations. A stenographer uses a stenotype machine with a phonetic keyboard and special software to create fast and accurate captions of what is said. Typically, the stenographer/CART writer is in a remote location and the captions are relayed through broadband to a laptop or tablet to be read or projected onto a large screen if multiple people need it. On-site CART can also be used when a stenographer/CART writer is at the event.

15) Why are videophones commonly used by people with hearing loss?

Video technology (such as videophone) is popular among people with hearing loss because it allows them to see the person with whom they are communicating. For those who communicate via ASL it is a great benefit.

16) I know fingerspelling and/or a few signs. Will that be useful to communicate with Deaf, Hard of Hearing and DeafBlind individuals who depend on sign language?

Each individual has their own communication style and preference. Fingerspelling and minimal sign language skills may be okay for basic communication, such as: wait, eat, drink and sleep. It is strongly recommended to get a qualified licensed American Sign Language (ASL) interpreter for more in-depth and important conversations to avoid any misunderstanding between both parties, especially during intake or registration, medication discussion, treatment consent, questioning, interviews and public announcements. However, it is also important that critical information be delivered promptly.

For urgent/critical time-sensitive communication needs, especially with medical treatment, use a remote American Sign Language interpreter. (See <u>Question #20</u> for more information about Video Remote Interpreters and how to use them.)

17) How can I get an American Sign Language (ASL) interpreter?

Contact your local Shelter Manager, Incident Commander or Emergency Manager for instructions on acquiring an interpreter. The local Emergency Management Office often coordinates resources such as equipment and staffing for emergencies and can place a request to NC Emergency Management if no local interpreters are available.

If the person needing interpretation is DeafBlind, be sure that whoever will be contacting potential interpreters or interpreter agencies shares this detail

immediately. This will help to expedite finding an interpreter with the specialized skills needed for interpreting for a DeafBlind person.

Please be prepared to meet the communication needs of individuals who are Deaf, Hard of Hearing and DeafBlind PRIOR to a disaster event by having local resources ready. This may include: a list of accommodations, such as interpreters (on-site and remote contracts in place); assistive listening devices, pictograms, tablets, etc. on hand and available for use. A list of sign language interpreters can be found on the DSDHH website: <u>https://www.ncdhhs.gov/documents/sign-language-</u> <u>interpretertransliterator-directory</u>. For assistance as your team prepares, please contact the DSDHH Regional Center Community Accessibility Specialist for consultation and training – see <u>Appendix A</u>.

18) Do I have to use a licensed American Sign Language (ASL) interpreter?

Yes. According to North Carolina law [G.S. 90D], no person shall practice or offer to practice as an interpreter for a fee or other consideration without a NC interpreter license unless they are interpreting in a religious setting or are an educational interpreter working in a K-12 or a college setting. Therefore, confirm that an interpreter has an interpreter license before using them in non-religious and non-educational settings. However, an unlicensed interpreter may be used temporarily in an emergency, defined as a situation where the Deaf or Hard of Hearing person is in substantial danger of death or irreparable harm if interpreting services are not provided immediately.

Interpreters from other states, who do not hold an NC interpreter license, may work in NC if they are nationally certified with the Registry of Interpreters for the Deaf Inc. (RID) and registered with the NC Licensure Board. They are limited to 20 days per year of work in NC.

A State of Emergency is not an exception for working without NC interpreter license.

To learn more about legal requirements of ASL interpreters, please contact the DSDHH Regional Center Community Accessibility Specialist for consultation and training – see <u>Appendix A</u>.

19) What is the appropriate way to work with an American Sign Language (ASL) interpreter?

The role of an ASL interpreter is to facilitate communication between parties who use sign language and those who do not. The interpreter will stand beside you as you speak, so the sign language user can see the interpreter and you. Face the sign language user and talk to them as you would talk to anyone. Do not say, "Ask them how I can help?" Simply say, "How can I help you?" The interpreter will interpret your message into ASL as well as voicing into English what the individual signs to you. Watch the sign language user, even though you hear the voice of the interpreter.

The interpreter's responsibility is to ensure communication occurs. If an individual needs assistance with filling out a form for reasons such as limited English skills or vision loss, the interpreter is available to interpret while you assist the person, but should not be asked to fill out forms, fetch materials or assist in any way other than interpreting.

20) What is a Video Remote Interpreter?

In some instances, Video Remote Interpreting (VRI) services can be accessed via the internet using a computer, laptop or tablet with a webcam and microphone, or a smartphone.

Typically, Deaf individuals prefer an on-site interpreter. Reasons for this may include previous negative experiences where communication via VRI was not effective, staff did not understand how to use the equipment and service properly, or issues with non-dedicated broadband or WiFi (freezing or pixilating).

VRI may not be viable for an individual who is DeafBlind.

The VRI service provider should be contracted prior to a disaster since there will be a fee for this service. Some VRI agencies will provide the necessary equipment. Also, some spoken language interpreting services are available via VRI.

Check with your Shelter Manager or the Incident Commander (Emergency Manager) to see if VRI service has been established and if instructions are available.

21) Can I use Video Remote Interpreter (VRI) instead of an on-site ASL interpreter?

Ask the Deaf person which they prefer. When an on-site interpreter is not readily available, VRI can be a viable short-term solution until an on-site interpreter is available or when on-site interpreting is not viable due to safety concerns. To learn more about VRI services, please contact the DSDHH Regional Center Community Accessibility Specialist for consultation and training – see <u>Appendix A</u>.

22) What is the difference between VRI and VRS?

VRI (Video Remote Interpreting) is not a telephone service. This internet-based video conferencing technology allows face-to-face conversation between hearing people and people using American Sign Language (ASL) via an off-site (remote) interpreter.

VRS (Video Relay Service) is a telephone relay agent who interprets between callers using ASL and hearing individuals via a combination of telephone and video equipment. Keep in mind, when you talk to a person with a hearing loss via either VRI or VRS, speak directly to them, do not tell the interpreter, "Tell them" or "Ask them."

23) What is a communication kit?

A communication kit is a collection of items to aid in providing effective communication to individuals with hearing loss.

It is strongly recommended that a communication kit be assembled for each shelter, Point of Dispensing and Disaster Recovery Center prior to a disaster event.

The communication kit enables workers to communicate with individuals who are Deaf, Hard of Hearing or DeafBlind in one-to-one or group settings. Below is a list of items that may be included in a communication kit.

- One-on-one communication
 - A box (minimum) of clear face masks for interacting with people who depend on lipreading
 - Paper and black markers
 - Small dry erase boards
 - Pictogram charts, booklets, or communication boards (e.g., Show Me booklet)
 - List of resources <u>https://www.ncdhhs.gov/dsdhh/emergencyresponders</u>
 - Information on:
 - ASL interpreters and/or ASL interpreting agencies (see <u>Questions 17 – 19</u>)
 - Video Remote Interpreting agencies (see <u>Questions 20 &</u> <u>21</u>)
 - Remote Communication Access Realtime Translation (CART) services (see <u>Question 14</u>)
 - Fact sheets are available at https://www.ncdhhs.gov/dsdhh/emergencyresponders
 - User's Guide: Communicating with Individuals Who Have Hearing Loss During an Emergency/Disaster Event

- Tips for Communicating with Deaf, Hard of Hearing and DeafBlind Individuals During Emergency Response and Recovery
- Mobile Apps to Aid Communication Access with Individuals who are Deaf, Hard of Hearing and DeafBlind
- How to Talk on the Phone to a Caller who is Hard of Hearing
- Handling Relay Service Phone Calls with Patients that have Hearing Loss
- Magnifying devices including those with lights for people with low vision
- Flashlight or small lamp for low light vision needs

• Factors for Consideration

- Access to electric outlets for recharging smartphones, and some hearing aids/cochlear implants that have rechargeable batteries
- Laptop/tablet/TV for viewing:
 - Video Remote Interpreting (VRI)
 - Remote captioning services
 - Video Relay Services (VRS)
 - Streaming instructions in ASL with captions or playing same on a DVD
- Telephone access (check with shelter, disaster recovery center, or other setting to find out what type of phone service is available)
 - TTY (works with analog phone service only and is rarely used due to video technologies that are more popular)
 - Amplification (phone or attachment, digital is recommended due to the decline of analog phone service)
 - Captioned phone (digital is recommended due to the decline of analog phone service)
- Contact the DSDHH State or Regional Center (<u>Appendix A</u>) for more information about accessible equipment such as assistive listening device, TTY, amplified phone, captioned phones which can be purchased or acquired through the loan program

Group settings/announcements

- $\circ \quad \text{Electronic reader board} \\$
- Projection screens or monitors
- Large chalk or dry erase boards
- o Bulletin Board
- Signage (list of languages, station names, directional arrows)
- Portable Public Address (PA) system (may not be effective for people with hearing loss)

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o Assistive Listening System

Clarification: Yes, everyone wants to charge their smartphone, but for Deaf, Hard of Hearing and DeafBlind individuals a smartphone is often a vital component of their communication access and may aid you in communicating with them.

24) Are there low-cost options for compiling a communication kit?

Yes, there are several options to consider when preparing a communication kit:

- Use devices for multiple purposes (For example: a reader board can be used for everyone, regardless of hearing status. A tablet can be used for video chat, large print or attached to Braille keyboard.)
- Meet with several emergency responders and/or local government officials to discuss which items to share and the appropriate place to stockpile them.

25) If an evacuee requests a videophone, what should I do?

Videophone technology must have internet services to work. Factors for considerations include:

- Is internet service available (ethernet, WiFi or cellular data)?
- Does this internet service have a minimum speed of 256 kbps? (512 kbps is preferred.)
- Does the evacuee have a smart phone, tablet or laptop? If so, can they have access to the shelter's internet services?
- Does the tablet or laptop have a built-in or attached webcam available for evacuees' use?

26) If an evacuee comes to the shelter and has lost, forgotten, or has a damaged hearing aid or cochlear processor, where can I find a replacement?

The loss of such equipment can be extremely stressful and cause isolation and for some individuals. It can even impact their balance.

- Contact their hearing healthcare professional.
- Contact the Community Accessibility Specialist at the nearest DSDHH Regional Center. (Look in <u>Appendix A</u> for contact information.)

27) Where can I find batteries for hearing aids and cochlear processors?

Most stores that sell prescriptions and over the counter medicines also sell hearing aid batteries. Batteries for cochlear processors can be rechargeable or disposable. It is recommended that the person with hearing loss talks with their hearing healthcare provider about getting disposable batteries for cochlear implants because some brands can damage the implant. Rechargeable batteries are purchased directly from the cochlear implant manufacturer.

- Did the evacuee bring their cochlear implant battery charger? If so, it needs to be plugged into an electric outlet in order to recharge its batteries.
- Ask the person for the size of the hearing aid batteries needed so you can inform your staff in charge of logistics.
- Contact the Community Accessibility Specialist at the nearest DSDHH Regional Center (look in the <u>Appendix A</u> for contact information) for resources.

28) Do some people who are Deaf, Hard of Hearing or DeafBlind have service animals?

Service animals, such as hearing dogs or guide dogs, may be used by people who are Deaf, Hard of Hearing, or DeafBlind. For more information, see <u>Appendix B</u> or visit <u>http://www.ada.gov/service_animals_2010.htm.</u>

29) How can I provide effective communication access to individuals with hearing loss in a pandemic environment?

Though not as effective as on-site face-to-face communication, the phone and virtual platforms are the best option to safely provide communication access.

Use best practices following the communication tools listed in <u>Question 2</u> (Deaf and Hard of Hearing) and <u>Question 5</u> (DeafBlind). However, in a pandemic environment the following extra precautions should be taken:

On-site:

- Use a <u>clear face mask</u> so that individuals with hearing loss can lipread.
- Provide PPE, gloves and masks to ASL interpreters and Support Service Providers providing services.
- Follow guidelines for cleaning devices and objects after each use.

Telephone or video chat:

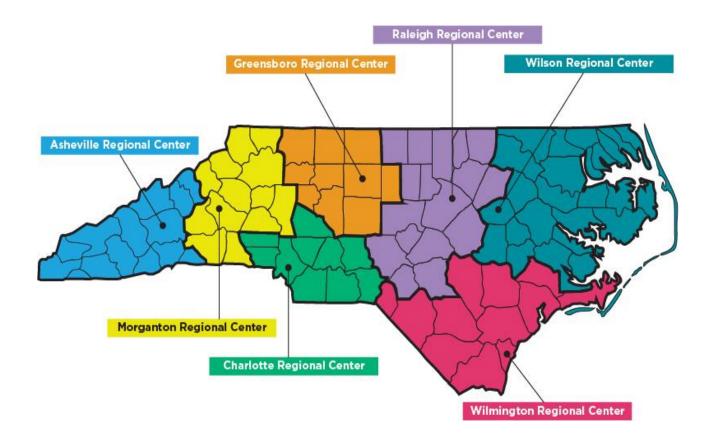
- Ask the individual for the best way to be contacted.
- If they prefer phone,
 - With Hard of Hearing, the call may be direct or via relay service
 - With Deaf or DeafBlind, the call will be via relay service which is a communication bridge via third party. (It is a similar concept as language services with non-English speaking individuals.)
- If they prefer a video platform, several factors for consideration are as follows:
 - Does the device have chat box capabilities?

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- Does it include multi-conferencing? If so, include:
 - ASL interpreter (See <u>Question 17</u> on hiring interpreters or <u>Question 20</u> to learn about Video Remote Interpreting.)
 - Or remote captioning (See <u>Question 14</u> to learn about Communication Access Realtime Translation (CART))

Contact the Community Accessibility Specialist from the nearest DSDHH regional centers for best tips on effective, safe communication with individuals who have hearing loss.

APPENDIX A: Contact Information for the Division of Services for the Deaf and Hard of Hearing Regional Centers



http://www.ncdhhs.gov/dsdhh/

(In Quick Links, select Regional Centers to find the one that serves your area)

Contact Information for the Division of Services for the Deaf and Hard of Hearing Regional Centers (CONTACT NAMES ARE SUBJECT TO CHANGE)

V - Voice

TTY - Teletypewriter, device for people with hearing loss to communicate via landline phone
VP - Videophone
CAS - Community Accessibility Specialist

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Asheville Regional Center

12 Barbetta Drive, Asheville, NC 28806

Counties Served: Buncombe, Cherokee, Clay, Graham, Haywood, Henderson, Jackson, Macon, Madison, Mitchell, Polk, Swain, Transylvania and Yancey

(800) 681-7998 V (828) 665-8733 V (828) 670-5054 Fax	(800) 681-8035 TTY (828) 665-8737 TTY (828) 333-5830 V/VP	
Regional Manager: CAS:	Susan Sacco Vacant	Susan.Sacco@dhhs.nc.gov

Charlotte Regional Center

5501 Executive Ctr. Drive, Suite 200, Charlotte, NC 28212

Counties Served: Anson, Cabarrus, Gaston, Lincoln, Mecklenburg, Montgomery, Richmond, Rowan, Stanly and Union

(800) 835-5302 V (704) 568-8558 V (704) 568-9615 Fax	(800) 835-5306 TTY (704) 568-8505 TTY (704) 918-1554 V/VP	
Regional Manager:	David Fitzsimmons	David.Fitzsimmons@dhhs.nc.gov
CAS:	Tiffany Cummins	Tiffany.Cummins@dhhs.nc.gov

Greensboro Regional Center

415 N. Edgeworth Street, Suite 175, Greensboro, NC 27401

Counties Served: Alamance, Davie, Davidson, Forsyth, Guilford, Randolph, Rockingham, Stokes, Surry and Yadkin

(888) 467-3413 V/TTY (336) 256-0689 FAX	(336) 273-9692 V/TTY (336) 429-5644 V/VP	
Regional Manager:	Jennifer Cook	<u>Jennifer.Cook@dhhs.nc.gov</u>
CAS:	Jessica Register	<u>Jessica.Register@dhhs.nc.gov</u>

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Morganton Regional Center

107 Foothills Drive, Morganton, NC 28655-3704

Counties Served: Alexander, Alleghany, Ashe, Avery, Burke, Caldwell, Catawba, Cleveland, Iredell, McDowell, Rutherford, Watauga and Wilkes

(800) 999-8915 V/TTY	(800) 205-9920 TTY
(828) 430-7185 V/TTY	(828) 475-6606 V/VP
(828) 430-7193 FAX	

Regional Manager: CAS:

Heather Foster Kay Smith Heather.Foster@dhhs.nc.gov Kay.S.Smith@dhhs.nc.gov

Raleigh Regional Center

3060 Hammond Business Place, Suite #141, Raleigh, NC 27603

Counties Served: Caswell, Chatham, Cumberland, Durham, Franklin, Granville, Harnett, Hoke, Johnston, Lee, Moore, Nash, Orange, Person, Vance, Wake and Warren

(800) 999-5737 V	(919) 859-8526 V	(800) 233-7082 TTY
(919) 233-7083 FAX	(919) 890-0858 V/VP	(919) 233-7082 TTY
Regional Manager:	Veronica Hunter	<u>Veronica.Hunter@dhhs.nc.gov</u>
CAS:	Martina Moore-Reid	Martina.Moore-Reid@dhhs.nc.gov

Wilmington Regional Center

3240 Burnt Mill Drive, Suite 5, Wilmington, NC 28403

Counties Served: Bladen, Brunswick, Carteret, Columbus, Duplin, Jones, New Hanover, Onslow, Pender, Robeson, Sampson and Scotland

(800) 205-9915 V	(800) 205-9916 TTY	
(910) 251-5702 V	(910) 251-5767 TTY	
(910) 251-2677 Fax	(910) 777-5770 V/VP	
Regional Manager:	David Schultz	David.Schultz@dhhs.nc.gov
CAS:	Herbie Aguilar	Herbie.Aguilar@dhhs.nc.gov

Wilson Regional Center

2705 Wooten Blvd., Wilson, NC 27893

Counties Served: Beaufort, Bertie, Camden, Chowan, Craven, Currituck, Dare, Edgecombe, Gates, Greene, Halifax, Hertford, Hyde, Lenoir, Martin, Northampton, Pamlico, Pasquotank, Perquimans, Pitt, Tyrell, Washington, Wayne and Wilson

(800) 999-6828 V (252) 243-3104 V (252) 243-7634 FAX	(800) 205-9925 TTY (252) 243-1951 TTY (252) 674-1141 V/VP	
Regional Manager:	Meredith DeNaples	Meredith.DeNaples@dhhs.nc.gov
CAS:	Merri Schermerhorn	Merri.Schermerhorn@dhhs.nc.gov

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State Office: Division of Services for the Deaf and Hard of Hearing McBryde Building, 820 S. Boylan Ave., Raleigh, NC 27699

(800) 851-6099 V/TTY (919) 890-0859 V/VP (919) 855-6872 FAX

Emergency Preparedness Coordinator:Donna PlattCommunication Access Manager:David Payne

Donna.Platt@dhhs.nc.gov David.T.Payne@dhhs.nc.gov

APPENDIX B: Service animals

Excerpted from <u>https://www.ada.gov/resources/service-animals-2010-requirements/</u> Service animals are defined as dogs that are individually trained to do work or perform tasks for people with disabilities. Examples of such work or tasks include guiding people who are blind, alerting people who are Deaf, pulling a wheelchair, alerting and protecting a person who is having a seizure, reminding a person with mental illness to take prescribed medications, calming a person with Post Traumatic Stress Disorder (PTSD) during an anxiety attack, or other duties. Service animals are working animals, not pets. The work or task a dog has been trained to provide must be directly related to the person's disability. Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the Americans with Disabilities Act (ADA).

Are service animals permitted in the shelters?

Yes, Title II and Title III entities must permit service animals to accompany people with disabilities in all areas where members of the public are allowed to go.

Under the ADA, service animals must be harnessed, leashed, or tethered, unless these devices interfere with the service animal's work, or the individual's disability prevents using these devices. In that case, the individual must maintain control of the animal through voice, signal or other controls.

What are and are not appropriate questions to ask?

Staff **cannot** ask about the person's disability, require medical documentation, require a special identification card or training documentation for the dog, or ask that the dog demonstrate its ability to perform the work or task.

Staff may ask two questions:

- 1) Is the dog a service animal required because of a disability?
- 2) What work or task has the dog been trained to perform?

How can I handle this situation if other people in the shelters are allergic and/or afraid of dogs?

Allergies and fear of dogs are not valid reasons for denying access or refusing service to people using service animals. When a person who is allergic to dog dander and a person who uses a service animal must spend time in the same room or facility, for example, in a school classroom or at a homeless shelter, you should attempt to accommodate them by assigning them, if possible, to different locations within the room, or to different rooms in the facility.

When is an appropriate time to remove service animals from the shelter?

A person with a disability cannot be asked to remove his service animal from the premises unless: (1) the dog is out of control and the handler does not take effective action to control it, or (2) the dog is not housebroken. When there is a legitimate reason to ask that a service animal be removed, staff must offer the person with the disability the opportunity to obtain goods or services without the animal's presence.