Deaf and/or Hard of Hearing Survey
of Providers
October 2007 to May 2008
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Survey Overview

The Deaf and Hard of Hearing Survey of Behavioral Health Providers was developed by with the Arizona Commission for the Deaf and Hard of Hearing (ACDHH) in partnership with Division of Behavioral Health Services (DBHS). ACDHH will use the survey results to develop a listing of services in the public behavioral health system for Arizona’s deaf and hard of hearing population. The survey requested that Regional Behavioral Health Authority (RBHA) contracted providers give general contact information for this purpose. They were also asked to answer questions related to 1) perception of needed clinical services, 2) current language services provided to members that are deaf or hard of hearing and 3) the quality of language services (the proficiency of sign language interpretation and how they ensure the quality) provided for the deaf and/or hard of hearing population.

In 2007, the Deaf and Hard of Hearing Survey of Providers (Attachment A) was conducted for the first time. Regional Behavioral Health Authorities (RBHAs) required their providers that conduct intake and enrollment to participate and complete the survey. CPSA had all six, Cenpatico eighteen and NARBHA included seven of its providers. Magellan took a broader approach and included enrollment providers as well as others providers for a total of eighty five. A total of 125 participating providers completed the survey via internet between October 2007 and May 2008.

Each provider was asked to complete one survey per agency even if the agency managed multiple sites. Some independent practitioners who subcontract with a RBHA or provider also completed the survey. Not all providers indicated the RBHA they contracted with, of the 85 providers who indicated they contract with a RBHA, 73 with Magellan, 5 with CPSA, 3 with Cenpatico, 3 with NARBHA, and 1 with both Magellan and NARBHA. The survey contained 19 questions; however, not all providers answered every question.

Findings:

Perception of Needed Clinical Services

Providers were asked to identify the percent of behavioral health recipients receiving services from their agency who are deaf and/or hard of hearing. The response was a self-report, and no guidelines were made available regarding how to determine the percentage. The “percent of members who are Deaf or Heard of Hearing” identified by behavioral health providers is summarized as follows:

- 42 providers had 1% or less of members who were Deaf or Hard of Hearing.
- 9 providers had between 2% and 8% members that were Deaf or Hard of Hearing.
- 3 providers had between 10% and 60% members that were Deaf or Hard of Hearing.
**Question 6:** Which of the following services are most needed in your organization (agency) to serve Deaf and/or Hard of Hearing people?

Providers were asked to give their perceptions regarding the most needed behavioral health services for the deaf and/or hard of hearing population. They ranked 1) outpatient treatment as the most important service needed, followed by 2) counseling and 3) peer support.

**Current Language Services**

Providers were asked to identify what type of sign languages were used in their agencies. They identified American Sign Language as the most common language used at the agency or provider sites followed by Oral, Signed Exact English, Certified Deaf Interpreter and Pidgin Signed English.

They identified the most commonly used device available to Deaf or Hard of Hearing members at the agency or provider site as (in order of rank):

- TDD/TTY, flashing signal – Visual signal device for emergency
- Flashing signal – on telephone
- Amplified phone – for hard of hearing
- Closed captioning
**Question 10: Type of Sign language provided**

Providers were asked to identify what types of sign language are used in their agencies. Providers identified 1) American Sign Language as the most common language, followed by 2) Oral, Signed Exact English, 3) Certified Deaf Interpreter and 4) Pidgin Signed English.
**Question 11: Devices available to Deaf or Hard of Hearing members at your agency/site**

<table>
<thead>
<tr>
<th>Device</th>
<th>Percent with All or Some Locations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flashing Signal - Alarm Clock</td>
<td>10</td>
</tr>
<tr>
<td>Flashing Signal - Doorbell/Knocker</td>
<td>20</td>
</tr>
<tr>
<td>Video Relay Service (VRS)</td>
<td>30</td>
</tr>
<tr>
<td>Closed Captioning</td>
<td>40</td>
</tr>
<tr>
<td>Amplified phone</td>
<td>50</td>
</tr>
<tr>
<td>Flashing Signal - Phone</td>
<td>60</td>
</tr>
<tr>
<td>Flashing Signal - Visual for emergency</td>
<td>70</td>
</tr>
<tr>
<td>TDD/TTY</td>
<td>80</td>
</tr>
</tbody>
</table>

The telecommunications device for the deaf (TDD) was the most commonly used.

**Quality of Language Services**

Most providers stated they do not test for fluency or proficiency in sign language interpretation.

Fifty-five (55) respondents answered the question regarding fluency:

- 89.1% respondents do not test for fluency
- 10.9% respondents do test for fluency

The providers were also asked to determine the level of proficiency of their staff that are skilled in Sign language in their agency or sites and 40 respondents answered this question. The providers ranked most of their staff that knew sign language at the “Beginner Level.” The second highest levels were both at the “Intermediate and Advanced Level”. Two of the staff were identified as having a proficiency level of “Native Signer”.

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Cultural Competence 4
Question number 9a: Does your agency test for fluency in signing (or have you as an independent private practitioner been tested for fluency)?

Questions 9d-9g: How many staff sign at Beginner Level, Intermediate Level, Advanced Level, Native Signer Level?

Cultural Competence 5
Recommendations:

The overall perception of Providers was that the percentage of Deaf and Hard of Hearing members was small and estimated at as less than 1%.

Recommendation:
Improved tracking and identification of the deaf and hard of hearing, with the data point that is now contained in demographic information forms can assist providers to accurately determine the number of individuals receiving services across the state. RBHAs and contracted providers can use the data to assist with the planning and developing of services for the deaf and/or hard of hearing.

The most needed services identified by the survey are Outpatient Treatment, “Counseling” and “Peer Support”.

Recommendations:
The clinical services indentified are the most commonly available for the general population. The providers will need additional training or technical assistance from the RBHAs specific to the needs of the deaf and hard of hearing cultures, how to engage them and provide effective treatment that fits their individualized needs. RBHAs may need to explore the use of content expert organizations, such as the Arizona Commission for the Deaf and Hard of Hearing, and other organizations and professionals that have experience and knowledge with deaf and hard of hearing to help in the development of their staff skills to provide services and increase providers capacity to provide services.

Most of the providers do not test for proficiency of their staff on skills in Sign Language Interpretation to ensure the quality of the interpretation. Additionally, they rated their staff that do have skills in Sign language at the “Beginner level”.

Recommendation:
RBHA/Providers must ensure the quality of the sign language interpretation being provided by staff and comply with licensing requirement for sign language. DBHS monitors the RBHAs to ensure that the language services are provided and to ensure the quality. The ARS §§ 36-1946 and 36-1947 requires the licensing of sign language interpreters as well.

RBHA/Providers have estimated that most of their staff at the “Beginner level”. This limits the ability of the clinical person to conduct counseling or other therapeutic or complex communication with deaf members. RBHAs will need to explore ways to enhance their capacity to respond to needs of members by providing additional language access services and possibly use contracted licensed interpreters to meet the current and future needs. They will also need to explore how they will provide opportunities for their staff to improve their sign language skills.
Appendix A - Survey Instrument

1. Name of RHBA

2. 1. Please provide the following information for the agency:
   1a. Name of Agency
   1b. Number of Sites
   1c. Street Address
   1d. City
   1e. State
   1f. Zip
   1g. County
   1h. Phone #
   1k. Web Page (URL)

3. 2. Name of the Director of the mental health/behavioral health agency or the independent practitioner
   subcontracting with RBHA or RBHA network serving Deaf or Hard of Hearing consumers:
   2a. Name
   2b. Title
   2c. Discipline
   2d. Degree
   2e. Certification

4. 3. Percent of total consumers served by your agency and include all sites if applicable who are Deaf or Hard
   of Hearing:

5. 4. Check ALL categories below which best describe your mental health services for Deaf and/or Hard of
   Hearing people.
   Private Practice
   Psychiatric Hospital
   General Mental Health
   School/University Program
   Alcohol/Substance Abuse Counseling
   Community Mental Health Center or other Multi-service Mental Health Facility
   Mental Health Day/Night Facility (e.g., Group Home)
   Residential Treatment Center for Emotionally Disturbed Children
   Vocational/Rehabilitation/ILS Program
   Outpatient Mental Health Clinic/Agency
   Alcohol/Substance Abuse Treatment Program
   Other (please specify)

6. 5. Which of the following services are most needed in your organization (agency) to serve Deaf and/or Hard
   of Hearing people? Please read the definitions below, and then rank the services from 1 to 11 in order of need (1
   being most important and 11 being least important).
   [Rank from 1 to 11]
   Inpatient Treatment
   Outpatient Treatment
   Other Partial Hospitalization Services
   Day Treatment
   Halfway House
Supported Independent Living
Day Program/Vocational Program
Emergency Services
Counseling
12 Step Program
Peer Support Services

7. 6a. Is your agency accredited?

8. 6b. Please list any accreditations

9. 7a. Are you licensed or board certified?

10. 7b. Please list your degree(s), if any.

11. 7c. What types of insurance do you accept, if any?

12. 8a. Please check the areas your agency (or you as an independent private practitioner) are certified in or have had training in or experience in treating the Deaf and/or Hard of Hearing:
[Certification  Training  Experience]
   General Mental Health
   Sexual Abuse
   Personality Disorders
   Depression
   Eating Disorders
   Prevention
   Marriage/Family Counseling
   Relationship Counseling
   Substance Abuse
   Neurological
   Trauma
   Grief and Loss
   Language Assessment
   Crisis Intervention
   Children/Youth
   HIV/AIDS/STD
   Serious Mental Illness
   Post Traumatic Stress Disorder
   Anxiety Disorders
   Training Specialist
   Psychological Testing/Evaluations
   Gay, Lesbian, Bisexual, or Transgender
   Court Ordered (please describe below)
   Criminal Justice (please describe below)
   Other Specialization (please describe below)

13. 8b. If you checked "Court Ordered", "Criminal Justice", and/or "Other Specialization", please describe your certification/training/experience in these areas.
14. 9a. Does your agency test for fluency in signing (or have you as an independent private practitioner been tested for fluency)?

15. 9b. Not including interpreters, how many staff members sign fluently?

16. 9c. How many staff members do you have (total)?

17. How many staff sign at:
   9d. the Beginner level?
   9e. the Intermediate level?
   9f. the Advanced level?
   9g. the Native Signer level?

18. 10. Please check all services provided:
[All Sites Some Sites No Sites]
   American Sign Language (A.S.L.)
   Pidgin Signed English (P.S.E.)
   Signed Exact English (S.E.E.)
   Oral
   Cued Speech
   Tactile
   Low vision
   Certified Deaf Interpreter (CDI)
   Captioning Assisted Real Time (CART)
   Comments:

19. 11. Please indicate which of the following devices are available to Deaf and/or Hard of Hearing consumers at your agency/site by checking ALL that apply:
[All Sites Some Sites No Sites]
   TDD/TTY
   Amplified phone
   Video Relay Service (VRS)
   Closed Captioning
   Flashing Signal - Doorbell/Knocker
   Flashing Signal - Phone
   Flashing Signal - Alarm Clock
   Flashing Signal - Visual signal device for emergency (i.e., fire alarm)
   Auxiliary Aids - FM System
   Auxiliary Aids - Pocket Talker
   Auxiliary Aids - Loop Systems
   Auxiliary Aids - Infrared Systems
   Comments:

20. 12. Are your facilities accessible by wheelchair?
   All are accessible
   Some are accessible
   None are accessible

21. 13a. Is there a fee for services for Deaf and/or Hard of Hearing consumers?
22. 13b. If there are fees for services, can the fees be partially or fully covered by a third party?

23. 13c. If there are fees for services, are the fees based on the client's ability to pay bills (i.e., sliding scale, medical assistance)?

24. 14. ADDITIONAL INFORMATION Please provide your contact information below. This will facilitate contacting you for follow-up, if necessary.
   14a. Name
   14b. Position
   14c. Phone
   14d. Fax
   14e. Email

25. 15. Any other information you would like to share regarding your services to the Deaf and Hard of Hearing: