**Section 111.20 Services to individuals who are deaf, hard-of-hearing, deaf-blind, or deafened hearing impaired) and/or who use manual/visual communication**

All individuals receiving services shall be provided with adequate and humane care and services pursuant to an individualized service (treatment or habilitation) plan in accordance with Sections 2-102(a), 3-209 and 4-309 of the Code [405 ILCS 5/2-102(a), 3-209 and 4-309]. In accordance with Sections 2-102(a), 3-204, 3-205 and 4-205 of the Code [405 ILCS 5/2-102(a), 3-204, 3-205, and 4-205] no individual shall, on the basis of being deaf, hard-of-hearing, deaf-blind, or deafened (hearing impaired) and/or using manual or visual communication to communicate, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination by a facility.

a) Definitions

For the purposes of this Section, the following terms are defined:

"CART (Computer Aided Realtime Translation) reporting services." The verbatim translation of the spoken word into a visually enhanced format from a stenotype machine to a computer.

"CART reporter." A certified shorthand reporter licensed by the Department of Professional Regulation under the Illinois Certified Shorthand Reporters Act of 1984 [225 ILCS 415] or a registered professional reporter licensed by the National Association of Court Reporters, 8224 Old Courthouse Road, Vienna, Virginia 22182-3808, telephone (800) 272-6272, with experience in CART reporting.

"Code." The Mental Health and Developmental Disabilities Code [405 ILCS 5].

"Communication facilitation." The means provided to overcome a barrier in communication created because an individual is hearing impaired and/or uses manual or visual communication, e.g., interpreter, CART reporting services or mental health or developmental disability and deafness professional services.

"Deaf." Any loss of hearing, occurring prior to the acquisition of normal spoken language, that precludes processing of linguistic information through audition, with or without a hearing aid. An individual may be considered "deaf" based on language use, cultural affiliation, social preferences, or self-determination.

"Deaf-blind." Any loss of hearing, occurring at any age prior to or post acquisition of normal spoken language, that precludes processing of linguistic information through audition, with or without a hearing aid, and visual impairment of 20/70 in the better eye corrected or a visual field of 20 degrees or less.

"Deafened." Any loss of hearing, occurring at any age after normal spoken language was acquired, that precludes processing of linguistic information through audition, with or without a hearing aid.

"Department." The Department of Mental Health and Developmental Disabilities or successor agency.

"Facility." Any mental health or developmental disability facility, as defined by Sections 1-107 and 1-114 of the Code [405 ILCS 5/1-107 and 1-114].

"Hard-of-hearing." Any loss of hearing that allows, generally with the use of a hearing aid, the processing of linguistic information through audition.

"Hearing impaired." Deaf, deaf-blind, hard-of-hearing, or deafened.

"Individual." A recipient of mental health or developmental disabilities services, as defined by Sections 1-111 and 1-128 of the Code [405 ILCS 5/1-111 and 1-128].

"Interpreter/Transliterator." A qualified professional who provides communication facilitation services between any persons using different modes (spoken or manual) and/or languages (English/American Sign Language) to communicate. This person shall be certified by the Registry of Interpreters for the Deaf, 8719 Colesville Road, Suite 310, Silver Spring, MD 20910-3919, telephone (301) 608-0050, or shall be assessed by the interpreter skills assessment screening (ISAS) attaining a level IV or level V certification or shall be approved by the Statewide Coordinator.

"Manual or visual communication." Using the hands, body, or facial expressions as the primary modalities for communication, but may also include and not be limited to American Sign Language, signed English, fingerspelling, pantomime, gestures, lip or speech reading, tactile fingerspelling or signs, CART, paper and pencil (writing or reading), flash cards, telecommunication (telephone) devices for the deaf (TTY), hearing aids, and other methods of manual or visual communication.

"Mental health or developmental disability and deafness professionals." Mental health or developmental disability professionals, e.g., psychiatrists, psychologists, social workers, psychiatric nurses, speech and language pathologists and other mental health or developmental disability professionals with intermediate or advanced expertise in manual or visual communication modes and languages and knowledge of culture and psychosocial aspects of individuals who have hearing impairments.

"Preferred mode of communication." Any visual and/or auditory communication mode and/or language used by an individual who is hearing impaired to express him or herself and to understand the communication of others, e.g., American Sign Language, writing.

"Statewide Coordinator." The Department's Statewide Coordinator of Services for People who are Deaf, Hard of Hearing or Deaf-Blind.

b) Services for individuals who are hearing impaired

1) Intake and admission

A) Intake staff shall determine through initial assessment, input, and consultation that an individual presenting for admission has a hearing impairment or other communication deficit, what type and degree of hearing loss the individual has (based on information available at the time of intake), and whether he or she requires manual or visual communication. This information shall be documented on form DMHDD-142a, "Clinical Record Face Sheet" or on the community agency's intake form.

B) Each facility shall maintain a list of interpreters, CART reporters and mental health or developmental disability deafness professionals employed by, or under contract to, the facility. The list shall have each interpreter's mode of communication and level of certification. The facility director shall be responsible for distributing the list to the appropriate facility staff and updating it at least annually. These lists shall be submitted to the Statewide Coordinator.

C) Facility staff, with the assistance, if necessary, of family members or friends of the individual who use the individual's preferred mode of communication, shall inform the individual that an interpreter, CART reporters (to facilitate communication) and/or mental health or developmental disability and deafness professional (to consult) has been contacted and the expected time of arrival. Facility staff (unless qualified), family members, or friends of the individual shall not interpret. A qualified interpreter, CART reporter and/or mental health or developmental disability and deafness professional shall be used during the individual's intake, assessment and evaluation, when information is being conveyed to the individual regarding admission, discharge, transfer, or the right to object thereto, the explanation of the individual's rights, when being examined for involuntary admission or certification, while being interviewed or tested by a psychologist, psychiatrist or physician, during therapy, or whenever necessary to provide effective treatment or habilitation services to the individual. Writing is not an acceptable substitute for an interpreter, CART reporter and/or mental health or developmental disability and deafness professional during the intake, admission and therapy process.

D) If communication facilitation is necessary in order to determine whether the individual meets the admission criteria, or to complete the admission, discharge, or transfer process, it shall be obtained preferably within 12 hours, but not later than the time limits prescribed by Sections 3-503, 3-504(f), 3-604, 3-607, 3-610, 3-704(a), 4-300, 4-402(a) and 4-405 [405 ILCS 5/3-503, 3-504(f), 3-604, 3-607, 3-610, 3-704(a), 4-300, 4-402(a) and 4-405]. The services of an interpreter, CART reporter and/or mental health or developmental disability and deafness professional shall be available to the facility 24 hours per day, seven days per week. This requirement may be met by contracting with a person for services as needed. The facility shall pay for the cost of the interpreter or CART reporter.

E) The Statewide Coordinator shall assist any facility on request in obtaining the services of an interpreter, a CART reporter or a mental health or developmental disability and deafness professional.

2) Treatment or habilitation services

A) Interpreter services, CART reporting services and/or the services of mental health or developmental disability and deafness professionals as determined by the interdisciplinary team, shall be made available to any person(s) using different modes (spoken or manual) and/or languages (signed English or American Sign Language) to communicate in order to provide appropriate services to individuals or staff who are hearing impaired and/or use manual or visual communication.

B) Facilities shall provide appropriate services and/or treatment to individuals who are hearing impaired and/or use manual or visual communication and the appropriate auxiliary aids to allow such individuals to benefit from the services and/or treatment. The Statewide Coordinator shall be contacted to provide assistance to facilities to develop and provide appropriate services for these individuals. Treatment or habilitation programs for individuals who are hearing impaired and/or use manual or visual communication may include arrangements made by the facility with other facilities, private clinicians, or other community providers (e.g., hospitals, clinics, Department-funded agencies) that can meet the individual's treatment or habilitation needs.

C) Individuals who are hearing impaired and/or use manual or visual communication shall be provided with telecommunication devices for the deaf (TTY) and/or phone amplifiers and/or telebraille devices, whichever is appropriate, to insure their right to private telephone communication as provided by Section 2-103 of the Code [405 ILCS 5/2-103]. Telecaption decoders shall be provided and placed, as needed, for television access. Visual and tactile life-safety alerting devices including but not limited to wake-up alarms (lights and/or vibrators) and fire alarms (lights and/or vibrators) shall be installed or available, where necessary.

D) As a part of the quality assessment and improvement program, facilities shall have a written compliance plan for individuals who are hearing impaired and/or use manual or visual communication. This plan shall include but not be limited to:

i) Designated staff responsible for implementing, monitoring and evaluating the plan;

ii) A list of interpreters, CART reporters and mental health or developmental disability and deafness professionals employed by, or contracted to, the facility, their skill level in American Sign Language, and any certification they hold; and

iii) Training for staff on the unique aspects of providing services to individuals who are hearing impaired and/or use manual or visual communication and procedures to assist the individual in filling out a complaint form.

3) Clinical records documentation. Provision of interpreters, CART reporters, mental health or developmental disability and deafness professionals, special equipment, and other support services shall be documented in the intake and treatment summaries.

(Source: Amended at 21 Ill. Reg. 15579, effective November 25, 1997)