P O L I C Y  N O .  5002.003

SUBJECT: DISABILITY ACCOMMODATIONS

POLICY: Care Resource shall comply with the Americans with Disabilities Act (ADA) and the ADA Amendment Act (ADAAA) of 2008. Therefore, Care Resource does not discriminate based on race, color, sex, sexual orientation, gender identity, religion, familial status, or disability of any kind.

PROCEDURE: The Americans with Disabilities Act of 1990, as amended, prohibits discrimination on the basis of disability. In addition, Care Resource is required to be sensitive and compliant with all ADA regulations, which includes but are not limited to deaf and hard of hearing, limited English proficiency. The law also requires that Care Resource provide qualified applicants, employees, volunteers and clients/patients with disabilities reasonable accommodations. Therefore, the health center makes information and services available in multiple languages either through printed literature, translation services (Braille, Foreign Language) or by hiring employees that are multi-lingual, which might include sign language interpretation.

Care Resource, through its Human Resources department and program management will ensure ADA coordination by facilitating assistance for disabled applicants, employees, volunteers and clients/patients. The Human Resources Manager will act as ADA Coordinator for any applicants, employees or volunteers requesting accommodation. Specific Program Managers or Directors will act as ADA Coordinator for any complaints or request for accommodations from clients or patients being provided services. All requests should include any specific needs, including the nature of any accommodations that may be necessary to enable them to perform essential functions and/or duties.

Care Resource will make every attempt to grant accommodation requests. However, if the current employee, volunteers and clients/patients request for accommodation is not feasible, due to the fact that it creates an undue hardship for Care Resource, Care Resource will initiate a dialogue with the employee to explore any and all alternative solutions. Refer to Auxiliary Aid Plan and Accessibility Plan.

Retaliation against any individual who requests reasonable accommodations is prohibited. Such behavior will be subject to disciplinary action up to and including termination.
ACCESSIBILITY PLAN

1. PURPOSE
The Americans with Disabilities Act of 1990 mandates, among other things, accessibility to services, goods, facilities, privileges, advantages, and accommodations for individuals with disabilities in the United States. It is the intention of Care Resource to comply with the Americans with Disabilities Act in the provision of an accessible facility and safe environment for persons served, staff, visitors and the community. This plan describes the measures that Care Resource has taken to identify, remove and prevent barriers for people with or without disabilities who work, use, or visit our facilities. In accordance with Care Resource Policy No. 5002.003 Disability Accommodations.

2. OBJECTIVES
- Describe initiatives that will remove and prevent barriers for people with or without disabilities
- Describe the process and methodology by which Care Resource will identify, remove, and prevent barriers.
- Identify barriers that have been successfully removed in the past
- Describe the measures to be taken in the coming year (2020) to identify, remove and prevent barriers
- Describes how Care Resource will communicate this accessibility plan to the public.

3. GOALS
The primary goal of Care Resource is to provide each client with the opportunity to obtain the highest level of appropriate accommodations through the guiding principles of Compassion, Competency, and Commitment with which each individual will be cared for in a safe and trusting environment.

4. DEFINITIONS
- **Accessibility**: The term accessibility means giving people of all abilities opportunities to participate fully in everyday life. It is used to describe how widely a service, product, device, or environment is available to as many people as possible. Accessibility can be seen as the ability to access and benefit from a system, service, product or environment.
- **Barrier**: Anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability - physical, architectural, information or communication, attitudinal, technological, a policy or practice, any condition that makes it difficult to make progress, or to achieve an objective.
• **Disability:**
  a) Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness – includes diabetes, epilepsy, brain injury, amputation, lack of physical coordination, blindness or visual impairment, deafness or hearing impairment, muteness or speech impairment.
  b) Mental impairment or development disability.
  c) Learning disability or a dysfunction in one or more process involved in understanding or using symbols of spoken language.
  d) Mental Disorder.
  e) The assessment of the disability of any person served or employee will be assessed and evaluated through applications for employment and development of Psychosocial assessments. As the need arises for reasonable accommodations, this will be immediately addressed by the Department Director. A disability may be a temporary or a permanent infirmity.

• **Service Animal:** An animal described in subsection 4(9) of the Accessibility Standards for Customer Service. An animal is a service animal for a person with a disability:
  a) if it is readily apparent that the animal is used by the person for reasons relating to his or her disability; or
  b) if the person provides a letter from a physician or nurse confirming that the person requires the animal for reasons relating to the disability.

• **Guide Dog:** Guide dog is defined in section 1 of the Blind Persons’ Rights Act and means a dog trained as a guide for a blind person and having the qualifications prescribed by the regulation.

• **Support Person:** In relation to a person with a disability, another person who accompanies him or her in order to help with communication, mobility, personal care or medical needs or with access to goods and services.

• **Accessible Formats** may include but are not limited to large print, recorded audio and electronic formats, Braille and other formats usable by persons with disabilities.

• **Communication Supports** may include but are not limited to captioning, alternative and augmentative communication supports, plain language, sign language and other supports that facilitate effective communications.

5. **COMMITMENT**

Care Resource is committed to:

• Consulting with people with disabilities and/or persons served and employees in the development and review of its annual accessibility plan.

• The Ensuring that policies and procedures are consistent with the principles of accessibility.

• Improving access to facilities, policies, programs, treatment, and services for persons served, parents/guardians and other members of the community.
6. PREVENTING NEW BARRIERS

• Care Resource is committed to creating an environment that is accessible to all people, regardless of ability. Through planning processes, Care Resource practices, policies, services and programs will be assessed to ensure continuous improvement in accessibility.

7. ACCESSIBILITY ACHIEVEMENTS

• Best practices are in place.
• Current policies that promote accessibility throughout the organization.
• Accessible Communication for the Deaf (ACD) and Coda Link available
• Florida Telecommunications Relay (FTR) services available.
• Translation services

8. BARRIERS AND SOLUTIONS

Architectural and Physical

Facility has wheelchair access, elevators and handicap parking.

Attitudinal

The Center is acutely sensitive to attitudinal barriers and their impact on persons accessing services. The organization strives to convey and promote value, respect, and empowerment for the persons it serves at every opportunity. In doing so, patient input into the organization is sought at many levels. The perspective of patients and families are represented among the governance, management and personnel. The Center Quality Assurance Team promote mechanisms for endorsing the input of patients and their families into the performance management and quality improvement processes. The Quality Assurance Team monitors the stream of patient input and directs such to the Board of Directors via its monthly minutes. Patients and families learn of the essential role they have in directing their treatment team from admission and continuously throughout the course of services. All employees are educated to the value of patient and family input, encouraged to solicit and receive this input, and trained in the value of patient input into the organization. The Quality Assurance Team and Board of Directors will remain committed to ensuring diverse mechanisms are available to elicit patient input, and that such input will be used in the evaluation, planning and development of the organization.

The reduction of stigma associated with mental illnesses and mental health services is key to the accessibility of mental health services. The Center participates in a diverse array of activities and roles to support education and awareness. The Quality Assurance Team continuously monitors and evaluates these efforts.
The organization values diversity in its community, patients, and personnel strives for an environment that continually enhances and supports such diversity. The QAS department promotes training and education to support this value.

**Policy, Practice and Procedures**

Improvements to our policies and procedures are continuously being reviewed to reflect specific changes pertaining to our organization and clients need.

**Communication**

Care Resource is committed to ensuring that its clients who are deaf, hard of hearing, deaf/blind, or speech impaired are provide easy access to all types of auxiliary aid or services, including on-site interpretation services through Accessible Communication for the Deaf (ACD) and Coda Link, or through the Florida Relay System to ensure effective communication between agency staff and clients seeking services. The following procedures are in place for such clients.

**Finance**

The financial barriers with the greatest potential to diminish access to services are:

a) **Center funding and revenue generation**

The leadership establishes the annual budget based on clinical and business performance targets to fulfill its mission in the relevant healthcare environment. The leadership and Board of Directors continuously monitor variations in funding and revenue generation throughout the fiscal year, adjusting operations based on new data.

b) **Patient incomes and entitlements**

As a publicly funded facility, Center does not deny services because of patient financial hardship. Its processes for considering patient account balances based on hardship are sensitive to the diverse and fluid economic circumstances of patients and families. The Center provides support for patients to apply for and renew entitlements to support their access to all types of health care providers. The annual allocation of Case Services funds in the Center budget assists patients with laboratory and medication expenses in support of mental health treatments.

**Employment**

The Center is committed to employing and retaining professional and skilled employees. The Board of Directors and Management support staff training, recognition, and growth. Annual review of human resources policies ensures Center policies and practices are nondiscriminatory, meet legal requirements and promote a culturally diverse environment. The Leadership and Board monitor the retention of the Center’s diverse workforce.
9. MONITORING PROCESS
The Accessibility and Accessibility Advisory Committees will continue to meet regularly to review the progress of the plan and to identify new initiatives. An annual update will be posted on our website.

10. COMMUNICATION OF THE PLAN
This accessibility plan will be available upon request and is posted on the organization’s website. Care Resource will explore other accessible formats and alternative communication strategies to distribute future accessibility plans.

AUXILIARY AID PLAN

1. INTRODUCTION
Auxiliary Aid Plan in accordance with Title I, Title II, Title III & Title VI Americans with Disability Act (ADA) of 1990 and the Florida Department of Children and Families (DCF) ADA Deaf and Hard of Hearing Settlement Agreement January 2010. It is the policy of Care Resource to ensure that persons who are deaf or hard-of-hearing are afforded equal opportunity in employment and in receiving services as stipulated by Section 504 of the Rehabilitation Act of 1973 (hereinafter referred to as ‘Section 504’).

2. PURPOSE
To comply with the requirements of the office of Civil Rights, the Office of Minority Health and the Joint Commission Care Resource outlines a plan for the implementation of procedures governing the use of auxiliary aids for persons with disabilities and the use of qualified foreign language interpreters for persons with Limited English Proficiency (LEP) and Care Resource Policy No. 5002.003 Disability Accommodations.

3. SCOPE
This plan applies to all programs and services within Care Resource. The plan provides for interpreters or readers to ensure accessibility of programs and services to clients, potential clients, companions, employees and potential employees.

4. NOTIFICATIONS
All agency locations will post the following in their main reception area:
- DCF Interpreter Services for the Deaf and Hard of Hearing notice
- DCF Non-discrimination notice
• DCF LEP notice
• Care Resource ADA/Single Point of Contact (SPOC) notice
• Care Resource Complaint/Grievance notice

The plan shall be posted on the agency website and copies may be distributed to persons with disabilities or LEP clients upon request. The plan shall also be made available in alternate formats upon request. Staff can access the plan via the agency’s intranet.

During the intake and orientation process, staff shall notify clients, potential clients and companions of the availability of auxiliary aids to persons with disabilities. Potential employees are notified of the availability of auxiliary aids to persons with disabilities during the application and interview processes. The availability of auxiliary aids to persons with disabilities is outlined for employees in the Care Resource Employee Handbook.

Agency publications, position advertisements, brochures, posters and pamphlets shall include the following statement:

• “No person shall, on the ground of age, color, disability, national origin, race, religion, sex, or sexual orientation, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving or benefiting from federal financial assistance.”

For space limitations on some marketing materials and supplies throughout the agency, the following statement may be used:

• “Services are provided without any discrimination in compliance with the Americans with Disabilities Act (ADA). We provide reasonable accommodations to those with a disability as defined under the ADA.”

Provision of Auxiliary Aids and Services

Care Resource will provide, at no cost to the individual, appropriate auxiliary aids to persons with disabilities and for persons with LEP where necessary to afford an equal opportunity to benefit from services and employment opportunities. The preference of the person with disabilities shall be the primary consideration in what auxiliary aid or service is provided. Auxiliary aids may include but are not limited to audio formats, large print, and interpreters. Care Resource staff can access interpreter services, for both LEP and deaf and hard of hearing clients, 24 hours a day, seven days a week.

Only certified sign language interpreters shall be utilized unless another form of communication has been requested by a deaf or hard of hearing client, companion, employee or potential employee. Minor children should never be used as voice or sign language interpreters or be allowed to interpret for a parent when the minor child is the client’s child. A family member or friend may be used as a voice interpreter, not a sign language interpreter, if this approach is requested by an LEP client and the use of such a person does not compromise the effectiveness of services nor violate the client’s confidentiality, and the client is advised that a free interpreter is available.

Staff will conduct an assessment, prior to services, to determine the client or companion’s preferred method of communication. Staff shall consult with the individual to determine his or her preferred
communication method. If an interpreter is needed, staff shall contact a certified interpreter from their listing of interpreter services. Each client or companion who are deaf and hard of hearing shall be provided a feedback form following their visit to determine the effectiveness and appropriateness of the auxiliary aid or service provided and the performance of the interpreter provided. Staff shall document in the client record that the form was provided. Staff will provide assistance, if requested, in completing the form.

Questions Relating to the Provision of an Auxiliary Aid or Service

In the event that a staff member is unfamiliar of a particular auxiliary aid or service or how to appropriately provide such aid or service to a customer or client, the staff member should contact Director of Human Resources and Executive Support Services, Care Resource designated SPOC:

Office: 305-576-1234
Email: HR@careresource.org

Resources

Additional resources utilized by staff to secure auxiliary aids shall include:

- Coda Link
  (954) 423-6893
  (954) 423-2315
  (954) 557-5166 24 Hour Emergency
  www.codalinkinc.com
  staff@codalinkinc.com

- Accessible Communication for the Deaf
  Lisa Gauntlett
  (954)578-3081; (954) 347-5749 (TTD/TTY)
  http://www.acdasl.com/
• Language Line

24/7 translation service in over 200 languages

(888) 808-9008

For Limited-English Proficiency (LEP) clients, language services shall include, as a first preference, the availability of bilingual staff who can communicate directly with clients in their preferred language. While Care Resource has in its employ several bi-lingual and tri-lingual employees, the agency utilizes the program Language Line program for language interpretation. Language Line allows the provision of interpreters in a multitude of languages so that we can adequately meet the needs of the client. Care Resource Policy No. 8011.002 – Linguistic Competency and Elimination of Barriers to Service Caused by Language.

Translation of Written Materials

Translating documents to ensure effective communication will depend upon the client, companion, employee and potential employee’s preferred method. An effective language assistance program ensures that written material that is routinely provided in English is also available in regularly encountered languages other than English. It is particularly important that vital documents be identified and translated into the non-English language of each regularly encountered Limited-English Proficiency group eligible to be served or to be directly affected. It is important to note that in some circumstances verbatim translation may not accurately or appropriately convey the substance of what is contained in materials written in English.

Care Resource will provide translation of written materials for LEP consumers and potential consumers consistent with the requirements of Title VI and Department of Health and Human Services regulations 45 C.F.R. Section 80.3(b)(2) using the following factors:

• The number or proportion of LEP persons eligible to be served or likely to be encountered by the program or grantee;
• The frequency with which LEP individuals come in contact with the program;
• The nature and importance of the program, activity, or service provided by the program to its clients; and
• The resources available to the grantee/recipient or agency, and the costs of interpretation/translation services.

Verification of a Sign Language Interpreter’s Certification

Staff should never assume the credentials of any given American Sign Language (ASL) interpreter, but are responsible for requesting appropriate credentials over the phone or via email prior to using the services of any given interpreter. Staff are likewise responsible for verifying those credentials prior
to contracting with that particular interpreter. In addition, staff should ask to visibly see the credentials involving in-person visits by an ASL interpreter.

**Competence of Interpreters**

Interpreters for persons who are deaf or hard of hearing must be certified through the Registry of Interpreters for the Deaf (RID) or the National Association of the Deaf (NAD). A copy of the interpreter’s registration card must be requested each time services are provided and included in the client record.

**Foreign Language Interpreters**

Please see Appendix A for a list of foreign language interpreter resources.

**List of Sign Language Interpreters**

Please see Appendix B for a list of foreign language interpreter resources.

**Provision of Interpreters in a Timely Manner**

Care Resource staff shall provide interpreters for clients and companions who are deaf or hard of hearing in a timely manner in accordance to the following standards:

- **Non-Scheduled Interpreter Requests:** For any emergency situation that is not a scheduled appointment, staff shall make an interpreter available as soon as possible. If the situation is not an emergency, staff shall offer to schedule an appointment (and provide an interpreter where necessary for effective communication) as convenient to the client or companion, but at least by the next business day.

- **Scheduled Interpreter Requests:** For scheduled events, staff shall make a certified interpreter available at the time of the scheduled appointment. If an interpreter fails to appear for the scheduled appointment, staff shall take whatever additional actions are necessary to make a certified interpreter available to the client or companion who is deaf or hard-of-hearing as soon as possible.

**Effectiveness of Communication**

In the event that communication is not effective or if the nature of the communication changes significantly after the initial communication assessment, staff shall reassess which appropriate auxiliary aids and services are necessary for effective communication. This shall be accomplished where possible in consultation with the person seeking the auxiliary aids or services.
Denial of Auxiliary Aid Requests, Complaints and Grievances

Upon receipt of a request for reasonable accommodations through the provision of auxiliary aid from an employee or applicant for employment the Director of Human Resources and Executive Support Services and the Director of Information & Quality Services, will determine if the request can be reasonably accommodated. Requests for accommodation will be reviewed on a case by case basis. If it is determined that the communication situation is not aid essential and does not warrant provision of the auxiliary aid or service requested, the Director of Human Resources and Executive Support Services shall advise the employee or applicant of the denial of the requested service. The Director of Human Resources and Executive Support Services shall document the date and time of the denial, the name and title of the staff who made the determination, and the basis for the determination in the employee’s personnel file. The employee or applicant shall be provided with a copy of the denial.

If staff determines after conducting an assessment with a client or companion that the communication situation is not aid essential and does not warrant provision of the auxiliary aid or service requested by the client or companion, staff shall advise the person of the denial of the requested service and shall document the date and time of the denial, the name and title of the staff member who made the determination, and the basis for the determination in the client record. The client or companion shall be provided with a copy of the denial.

Staff members in programs funded by the DCF, a Community Based Care organization and/or a managing entity shall record the denial of the requested auxiliary aid or service on the Customer or Companion Communication Assessment and Auxiliary Aid/Service Record (DCF Form CF 761, Appendix B). All staff shall record the denial of requested service in the client’s file. Notwithstanding the denial, staff shall nonetheless ensure effective communication with the client or companion by providing an alternate aid or service which must be documented. All denials of the provision of auxiliary aids or services requested by a client or companion shall be submitted to the Chief Executive Officer for final review.

If an individual declines the use of free voice or certified sign language interpretation, staff must document the declination of said service in the client and/or personnel file. Staff shall suggest that a trained interpreter be present during the encounters to assure that accurate interpretation occurs. Staff must document that every means necessary has been used to assure the individual that the service is available before documenting that the declination. This information must be placed in the client’s file. Documentation, with supporting justification, must also be made if any request was not honored.

Persons who believe they have been wrongfully denied access to services or have been discriminated against may file a grievance in accordance with Care Resource Policy No. 1032.002 - Grievance Procedure for Resolution of ADA complaints:

- Director of Human Resources and Executive Support Services
  3510 Biscayne Blvd
  Miami, FL 33137
  (305) 576-1234
External complaints are handled by several federal departments. Anyone wishing to file an external complaint should contact one of the resources listed below:

- Florida DCF
  Office of Civil Rights
  1317 Winewood Boulevard, Building 1, Room 110
  Tallahassee, FL 32399-0700
  (850) 487-1901; TDD (850) 922-9220; or Fax (850) 921-8470

- United States Department of Health and Human Services
  Attention: Office for Civil Rights
  Atlanta Federal Center, Suite 3B70
  61 Forsyth Street, SW
  Atlanta, Georgia 30303-8909
  (404) 562-7888; TDD/TTY (404) 331-2867; or Fax (404) 562-7881

- United States Department of Justice
  Civil Rights Division
  Office of the Assistant Attorney General
  950 Pennsylvania Avenue, N.W.
  Washington, D.C. 20531
  (202) 514-4609 (voice); TDD (202) 514-0711; or Fax (202) 307-2839

**Accountability**

The Director of Human Resources and Executive Support Services is responsible for the implementation of auxiliary aids and the Limited-English Proficiency LEP plan for employees and applicants for employment who require reasonable accommodations. The Director of Human Resources and Executive Support Services is the ADA 504 Deaf and Hard of Hearing Single Point of Contact (SPOC) for the agency. Any staff member may contact the agency SPOC for assistance in locating appropriate resources to ensure effective communication.

In addition, each program funded by the DCF, a Community Based Care agency and/or a managing entity shall designate a SPOC for the purpose of fulfilling DCF compliance and reporting requirements.
Auxiliary Aids Documentation and Records Retention

Care Resource staff shall document the client and/or companion’s preferred method of communication, and any requested auxiliary aids and services provided in the client’s record. Documentation of an employee or potential employee’s preferred method of communication, and any requested auxiliary aids and services provided shall be included in the employee’s personnel file.

All records regarding auxiliary aids and services provided to clients, companions, employees and potential employees shall be retained in accordance with Care Resource Policy No. 8012.008 Retention and Disposal of Medical/Dental Records.

Meeting, Training and Event Accommodations

When meetings, trainings or seminars are scheduled at Care Resource locations, information will be included in the advertisement that participants with mobility or sensory impairment will be provided with necessary auxiliary aids at no cost. The information will include the name of the contact person and a date by which the person must request assistance. If someone with sensory or mobility impairments or persons with LEP plan to attend, the following provisions must be in place:

- Agenda and other related materials translated into useable form for visually and hearing impaired participants.
- Parking spaces provided for handicapped persons clearly marked with appropriate ramps and curbs.
- Entrance ramps will be available for mobility impaired person(s).
- Meetings will be conducted on the first level or will be available by way of an elevator or ramps that can be independently managed by a person in a wheelchair.
- Seating arrangements for persons in wheelchairs will be adapted to integrate mobility-impaired persons rather than to isolate them on the group's perimeter.
- At least one unobstructed entrance to the facility.
- Restrooms available to mobility impaired.
- Telephones are wheelchair accessible.
- Accessible drinking fountains with cup dispensers.
- Certified interpreters for hearing impaired persons.

Staff Training

All Care Resource staff shall complete training on auxiliary aids within 30 days of hire and annual refresher training in accordance with the Care Resource Training Plan. This training shall include the needs of clients/applicants/employees with disabilities, community resource options, how to access auxiliary aids assistance technology, and Reasonable Accommodations requirements for disabled
employees, and equal opportunity employment. Staff members in programs funded by the DCF, a Community Based Care organization and/or a managing entity shall also sign the DCF Support to the Deaf and Hard of Hearing Attestation form upon completion of said training. All training certificates and attestation forms shall be maintained in personnel files.

All direct service staff are required to participate in an annual staff training on how to assist persons with disabilities, those who are deaf or hard of hearing, and those who are Limited English Proficient. This training is available online in the DCF website (DCF link, Appendix B). In addition, all directors, and all supervisors will undergo annual training as it relates to ADA compliance.

**Monitoring**

Complaints and/or grievances related to the provision of auxiliary aids shall be reviewed in accordance with Care Resource Policy No. 1032.002 - Grievance Procedure for Resolution of ADA complaints. The Care Resource Accessibility and Auxiliary Aid Plans shall be reviewed on at least an annual basis and updated as needed.

**Appendix A**

**List of Sign Language Interpreters**

- **Coda Link**
  (954) 423-6893
  (954) 423-2315
  (954) 557-5166 24 Hour Emergency
  www.codalinkinc.com
  staff@codalinkinc.com
  8963 Stirling Road, Suite 6
  Cooper City, FL 33328
  (No current contract)

- **Accessible Communication for the Deaf**
  Lisa Gauntlett
  (954)578-3081; (954) 347-5749 (TTD/TTY)
  http://www.acdasl.com/
Appendix B

Qualified Foreign Language Interpreters

- Language Line
  24/7 translation service in over 200 languages
  (888) 808-9008

DCF CF 761 Form

https://www.dcf.state.fl.us/admin/servicedelivery/docs/CCCAFomAndInstructionsRevised.pdf

https://www.dcf.state.fl.us/admin/servicedelivery/docs/CCCAFomAndInstructionsRevised_HC.pdf

DCF Service Providers Training

http://www.dcf.state.fl.us/service-programs/deaf-and-hard-hearing/providers/training.shtml

EFFECTIVE DATE: 07/01/1998
REWISED DATE: 03/20/2019
DATE OF DISTRIBUTION: 03/26/2019
LAST REVIEWED DATE: 03/20/2019