

<b>STATE OF IOWA DEPARTMENT OF CORRECTIONS</b>		Policy Number	Applicability
		HSP-631	<input checked="" type="checkbox"/> DOC <input type="checkbox"/> CBC
<b>POLICY AND PROCEDURES</b>		Policy Code	Iowa Code Reference
		Public Access	N/A
Chapter 6	Sub Chapter	Related DOC Policies	Administrative Code Reference
HEALTH SERVICES	ACUTE/SPECIALTY SERVICES	HSP-608	N/A
Subject		ACA Standards	Responsibility
HEARING DISABILITIES - AUDIOLOGY SERVICES		4-4375, 4-4398	Dr. Jerome Greenfield
		Effective Date	Authority
		September 2018	Jerry Bartruff Director Signature on file at Iowa DOC

## I. PURPOSE

To provide access for patients within the Iowa Department of Corrections (IDOC) to hearing screening.

## II. POLICY

It is the policy of the Iowa Department of Corrections to provide hearing screening and services for patients that are hearing impaired.

## III. DEFINITIONS

- A. Hearing Screening - an audio test to assess a patient's hearing.
- B. Hearing Aides - a small device that fits in the ear to amplify sound, worn by a partially hearing impaired person to amplify sound.
- C. Hearing Amplifiers - device designed to improve hearing by making sound audible to a person with hearing loss.

- D. Video Telephones - Video Relay Service (VRS) facilitates telephone communication between a deaf and a hearing individual in different locations through the use of videoconferencing technology. The deaf person connects with an interpreter via a videophone and a high-speed internet connection. The hearing person connects to the interpreter using a regular voice telephone.
- E. Qualified Interpreter - an interpreter who is able to interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.
- F. On-demand Video Remote Interpreting - Video Remote Interpreting (VRI) facilitates communication between deaf and hearing individuals who are in the same room with a video interpreter taking the place of an in-person interpreter.

#### **IV. PROCEDURES**

- A. As part of the initial and periodic health appraisal, if there are clinical findings suggesting hearing loss, the medical practitioner may refer a patient to the Nurse Manager to conduct on-site hearing screening.
- B. Results of the on-site hearing screening will be reviewed by the medical practitioner. If the results of this screening demonstrate clinically significant hearing loss, the practitioner will take steps to mitigate the hearing loss. Patients may be provided assistance in ADL's, hearing amplifiers, hearing aids or be referred to University of Iowa Hospital and Clinics as indicated.
- C. Hearing Amplifiers may be provided for less severe hearing loss. Hearing Aids may be required for patients with severe hearing loss. All practitioner recommendations for Hearing Aids require prior approval by an IDOC committee. This committee will consist of the IDOC Health Administrator, IDOC Medical Director, IDOC Nursing Administrator, and one additional IDOC licensed medical practitioner. All such requests should include all pertinent history and physical findings, the results of all hearing tests, any specialty consultations and any other relevant documentation from the medical record.
- D. TTY device or videophone system must be available and accessible to patients with hearing disabilities with the same ease as nondisabled patient's use of the traditional telephones.

- E. Institutions will develop a procedure to ensure that those patients who cannot speak or are hearing impaired are provided interpreting services with a qualified in person interpreter or a contracted on-demand video remote interpreting service provider. Interpreting services will be provided at all of the following: Orientation, Health Services evaluations/appointments, disciplinary proceedings, classification meetings, Board of Parole hearing, and during all rehabilitative, educational, or transitional programs.