

**Behavior Health on Deafness Sub-Committee Meeting**  
**June 18, 2008**  
**Independent Resources, Inc.**  
**Wilmington, DE**  
**10:30 am**

**Present:** Christy Hennessey (Chair); Cliff Rodman; Loretta Sarro; Lois Steele and Kyle Hodges, Staff

**Interpreter:** Pamela D'Occhio

**Additions or Deletions to the Agenda**

- None.

**Approval of the Meeting Minutes**

Motion was made, seconded and approved to accept the April 16, 2008 meeting minutes as submitted.

**Chair Report**

➤ Meeting with DPC Director/DPC Policy

In May, Christy had a meeting with the Consumer Recovery Coalition at DSAMH. Dr. Husam Abdallah, the Delaware Psychiatric Hospital Director, was invited to this meeting. Dr. Abdallah gave some comments on what DSAMH could do to make accommodations for all of the consumer mental health services. When Christy asked Dr. Abdallah how they handle mental health for deaf and hard of hearing clients, Dr. Abdallah said that they have a contract with a specific interpreting agency. Christy asked Dr. Abdallah if she could see their policy and procedures on how they contact an interpreter and conduct and communicate an intake on a deaf or hard of hearing client that seeks mental health services. To date, Christy has not received a copy of this policy or any other information that was requested (see e-mail in today's hand-outs). Christy will send a follow-up e-mail to Dr. Abdallah.

Christy would like to have all the divisions' policy and procedures on services for deaf and hard of hearing mental health clients. Kyle said for DSAAPD, contact Linda Heller; for DDDS contact Marianne Smith, Division Director; for Public Health contact Dr. Jamie Rivera. Christy will contact Loretta and Kyle for more state contacts.

**Agency Representation on BHDC (Connections; DSAMH; DSD)—Kyle Hodges**

Kyle sent an e-mail to Ed Bosso stating the following:

I write on behalf of the Behavioral Health on Deafness Committee (BHDC) which is under the Council on Deaf and Hard of Hearing Equality (CODHHE). The mission of the Council on Deaf and Hard of Hearing Equality Behavioral Health on Deafness Subcommittee is to promote and advocate for legislation, regulations, programs and policies to ensure that individuals who are Deaf and Hard of Hearing, Deaf-Blind Delawareans and their families receive quality mental health, substance abuse and addiction services which meet their individual needs.

To meet its stated mission, BHDC needs a representative from the Delaware School for the Deaf. Would you be able to designate a representative to this Committee? The Committee believes that a psychologist would appear to be the most logical person; however, we understand "staffing issues" and would be happy with other qualified persons that may be available.

I know this is short notice, but our next meeting is June 18 at 10:30 at Independent Resources, Inc. If possible, would you provide me with your predispositions in time to report back to the Committee. I have attached a meeting schedule.

Kyle said that if there is not response soon, Kyle could draft a letter to be sent by Christy. It was stated that Mr. Bosso is no longer working at DSD. Kyle should contact the secondary school leader principal--Mindy Rittenhouse who is now the acting principal at the high school. The elementary school leader is Debra Trapani.

In summary, Kyle will forward the e-mail to Mindy Rittenhouse; Debra Trapani and Rich Pelletier requesting a DSD representative on the BHDC.

Kirsten will be leaving Connections to work at another non-profit agency at the end of this month. So, at this time we have no representative from Connections.

In today's packet, there is an e-mail to and from Steve Dettwyler. Helen McDonnell may be out indefinitely or even permanently; however, it is critical that DSAMH has a representative on BHDC. Kyle let Steve know that DSAMH requested that this committee be developed about five years ago. Per Steve's e-mail, if there is an agenda item that he feels is appropriate for them to attend this meeting, then he will send someone. Steve suggested getting a representative on the Governor's Advisory Committee to DSAMH. Kyle contacted the chair—but there are no openings for voting members. There are other roles/levels of

membership—members are actively involved but have no voting roles. We could have someone attend those meetings.

Kyle asked Christy and Loretta if there is a Consumer Advocacy Committee under DSAMH and is Penny Chelucci the head of that Committee. Loretta reported that Penny is the Consumers Relations Administrator at DSAMH and Penny helped set up an advocacy group called the “Consumer Recovery Advocacy Coalition of DE” about one year ago. Penny and Melissa Smith, the Strategic Planning Director, are helping the consumers get organized. Two chosen members from this Coalition have gone to the DSAMH Advisory Committee meeting and brought back information. Loretta reiterated that Penny is the person to help this Committee set up their foundation—their goals are written and they are working on their Strategic Plan. Loretta and Christy are the members that represent the deaf community and attend the meetings that meet every six weeks. However, they are trying to find a deaf consumer to be the participating member. Christy said that Christine Zenorini, a deaf worker from Connections, would be a good representative on the BHDC. Kyle will contact Cathy McKay at Connections to recommend this person to be the representative on BHDC.

In conclusion, Kyle suggested asking Steve to attend our August 20 meeting to get his feedback on Committee redundancy. All agreed for Kyle to do so. At this time, it was agreed that the committee concentrate on getting representatives from Connections, DSAMH and DSD. Then we may work on getting representation from the Rockford Center; MeadowWood and Dover Behavioral Center.

Cliff added this is a good start. When we get the people at the table we need to establish an agenda/goals for the year. Cliff added that he agrees with Loretta that 1) our job is to help decide the needs of the deaf and hard of hearing; 2) educate agencies to accommodate for their needs, and 3) talk about policies. Cliff also added that the one thing that the Committee should do is inform or provide information—either through workshops or be a clearinghouse for information. Secondly, we could advocate by asking for monies, policies or procedures that do not yet exist—this could be done through legislation. Thirdly, does the Committee want to be a certification body by having the BHDC name saying we are doing something for the deaf and hard of hearing. Cliff sees these three things as major long term reasons for the BHDC existence. It would be good to work on strategies. Kyle suggested maybe having a half day meeting or retreat and to get a facilitator through the state to help develop a strategic plan and then make sure we use it. Cliff suggested contacting Delaware Quality Partnership—OMB has the training component. Cliff will e-mail the OMB contact information. This could possibly happen in the Fall.

## **Survey Ideas—Cliff Rodman**

- Cliff said the last time we met, he suggested that part of being an effective group is to have members take an assignment and have it completed by the next meeting. The e-mail assignments between meetings have been very effective. A draft survey was handed out to all.

Cliff gave the following overview of the draft survey—

- Get the survey distributed and let people know that their input is important. If we can identify and distribute to ten organizations and receive 25 responses from each organization, that will be a good data set of 250 responses.
- The first thing is to know how many deaf or hard of hearing people there are in the mental health population. How many people in your immediate family are diagnosed as deaf or hard of hearing? How many people in your extended family are diagnosed as deaf or hard of hearing?
- Of those people who are deaf or hard of hearing, how many have sought or have looked for mental health services.
- What prevents the people from getting mental health services; or what happens to make this service not a good experience?

Cliff wants input, in particular from a deaf or hard of hearing person's perspective. Also Cliff separated the questions into the two worlds—deaf or hard of hearing. Was the correct approach? Christy stated that this is a good start and there are different variations of approaching a deaf or hard of hearing person. Some individuals would prefer a one on one interview and would rather have someone interview them. Others are very private and would rather complete the survey without their name. Christy was a part of a schizophrenia survey we could possibly draw and tweak some of the questions from this survey. Christy suggested adding a question—do you know how to request an interpreter since this is an issue in Christy's job. Also, survey #s A5 and A.6 at the bottom of page one should be deleted since they are redundant. Christy said that the best way to disseminate the survey is to go to the places and meet the deaf or hard of hearing clients in person. Christy will identify the ten organizations by the next meeting. Christy suggested that Loretta, Hank and she will volunteer to go out to the organizations. Lois suggested having an incentive drawing (\$5 gift card) for surveys received.

In summary, Cliff will e-mail the survey to Kyle. Kyle will e-mail this survey after the fourth of July to all the Committee members (who can send to anyone else to edit) who will review and send comments back to Kyle in two weeks. The Committee thanked Cliff for the draft of the survey.

## **Reports/Announcements**

Cliff announced that today at 1:30 pm the Governor will be signing the hearing aid bill which will pay up to \$1,000/ear for the cost of hearing aids for persons up to age 24. Loretta added that the next step is to get a bill passed for hearing aid coverage for adults.

Respectfully Submitted,

Kyle Hodges  
CODHHE Administrator

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