

Overview of DSDHH Implemented and Proposed Actions for Improving Communication Access and Serving Older Adults

	Communication Access in Health Care Settings	Serving Older Adults
I M P L E M E N T E D	Partnering with the UNC-CH Sheps Center and Gallaudet University to conduct research on communication access in health care for Deaf North Carolinians who use American Sign Language (ASL)	
	Assisted the Division of Health Benefits (DHB) on ensuring NC Medicaid contracts addressed accessibility for persons with hearing loss.	
	Working with the DHB to explore how best to provide communication access to Medicaid recipients with hearing loss	Two-hour training curriculum developed for long term care facility workers that is endorsed by The Association for Home & Hospice Care of North Carolina (AHC of NC) and the Division of Aging and Adult Services (DAAS) Ombudsmen and has Continuing Education Units (CEUs) approved by the Division of Health Service Regulation
	Trainings, including, “Different, Different World,” provided to a variety of health care providers at different venues, including hospitals and AHECs.	Partner with DAAS Ombudsmen to share with Ombudsmen regional staff, the resources DSDHH has available to assist with improving hearing health among long term care facility residents
P R O P O S E D	Variety of training and mentoring planned to increase the pool of interpreters qualified to work in health care settings.	Partner with NCALTCF to share with the NCALTCF members, the resources DSDHH has available to assist with improving hearing health among long term care facility residents
	Develop several training videos and webinars that target various health care personnel and educate consumers on self-advocacy	Partner with CapTel NC to offer CapTel and other tools for effective communication in retirement communities
	Partner with NCHCA to use their statewide training system to train hospital administrators and other health care providers on effective communication. The rationale is the training will increase participants’ (1) awareness of communication barriers; (2) make them receptive to participating in activities that effectively address those barriers; (3) increase their knowledge about the resources to address those barriers, health care providers will (4) and cause them to engage in activities to address those barriers.	
	Given recent research on links between hearing loss and various health concerns, such as diabetes, risk of falls, and dementia, DSDHH will work to include hearing loss as an area of concern in Healthy Carolinians 2030.	