

Division for the Visually Impaired

General Administration Policies & Procedures

Contents

Accessible Communication	2
Accessing Interpretation Services	4
Case Documentation	6
Case Record Review	8
Confidentiality, Informed Consent & Release of Information	9
Grievances	11
Participant Record Maintenance & Review	15

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Division for the Visually Impaired

General Administration Policies & Procedures

Accessible Communication

Policy: The Division for the Visually Impaired (DVI) strives to ensure staff can effectively communicate with consumers and employees.

Purpose: The purpose of this policy is to affirm DVI's commitment to barrier removal when communicating with people with disabilities.

Guidelines and Processes:

1. All job accommodation determinations must be developed and approved by the Department of Human Resources; however, the chart will assist with general communication when communicating with co-workers and consumers.
2. The best method of communication is determined on an individual basis and depends on how the person typically communicates. The first thing employees should do is ask about personal preferences; however, staff can also reference the chart below for ideas.
3. If communication barriers persist after the personal preference is identified and the solutions in the chart have been implemented, staff are to seek additional guidance from their supervisor.
4. The ideas and solutions in the chart will be reviewed annually during the accessibility planning process.

Communication Barrier	Need/Barrier	Accommodations
Deaf/Hard of Hearing	Face-to-face	<ul style="list-style-type: none">• Sign language interpreter• Text messaging• Video interpreter• Exchange of written notes• Contracted interpreting system**
Deaf/Hard of Hearing	Phone call to consumer	<ul style="list-style-type: none">• Dial 711 for National Telecommunications Relay system
Deaf/Hard of Hearing	Consumer making phone call from DVI office	<ul style="list-style-type: none">• Sprint Internet Relay http://www.sprintrelay.com/sprint_relay_services/sprint_ip_relay_service.php
Blind/Visually Impaired	Written Material	<ul style="list-style-type: none">• Description of materials presented• Large print materials (18 pt. font or larger)• Documents converted to Braille• Audio file• Audio file on flash drive• Computer screen reader (Windows and IOS have built in free screen readers)

Division for the Visually Impaired

General Administration Policies & Procedures

Communication Barrier	Need/Barrier	Accommodations
Non-English	Face-to-face Phone	<ul style="list-style-type: none">Contracted interpreting system**
Non-English	Written Material	<ul style="list-style-type: none">https://translate.google.com/ (not the best source)
Intellectual Disabilities	Written Material	<ul style="list-style-type: none">Description of materials presentedSimplify languageAsk questions to ensure message is understood

**** Refer to the policy Accessing Interpretation**

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Division for the Visually Impaired

General Administration Policies & Procedures

Accessing Interpretation Services

Policy: The Division for the Visually Impaired (DVI) will effectively serve people who are deaf, as well as those whose first language is not English through easy to access interpretation services.

Purpose: To establish protocols for staff who are requesting spoken, sign or written interpretation.

Guidelines and Processes:

Sign Language: DVI utilizes 2 sources for access to sign language interpreters.

- 1. State vendor for face-to-face interpreting (preferred method):**
 - **Determine if vendor is statewide or just contracted with DVR.**
 - Arrange for the interpreter to attend meetings and/or functions.
 - **Is billing hourly and what restrictions apply?**
- 2. Third party contractor (secondary method):**
 - DVI maintains a contract with **ABC Company** for sign language interpretation either on-site or through video remote interpreting.
 - Arrangements must be made in advance.
 - Billing is hourly but restrictions may apply.
 - Call **xxx-xxx-xxxx** or visit the website at **www.sss.com** to arrange for sign language interpreting service.

Spoken language

- DVI maintains a contract with **XYZ Company** for quick access to interpreters of over 100 languages.
- **Attachment A** contains the preferred provider information and a list of available languages.
- Follow the procedures below to access services:
 - ✓ Arrange for meetings to take place in a place that has a phone with speaker
 - ✓ Dial **555-555-5555**
 - ✓ Enter access code: **12345** and confirm
 - ✓ Request the desired language and confirm
 - ✓ Introduce yourself and briefly explain the situation to the interpreter.
 - ✓ Instruct the interpreter to proceed.
 - ✓ If at any time you experience difficulties, please call **111-111-1111** for assistance.
 - ✓ Document the call.
 - ✓ Inform manager that service was used so billing can be reconciled.

Payment for Interpreting Services

Division for the Visually Impaired

General Administration Policies & Procedures

All interpreting services above requires a payment. It is the responsibility of DVI to ensure payment; however, when interpretation is needed to provide a funded service, managers should inquire to determine the source of payment.

Document Translation

- DVI utilizes **WXW Company** when preparing documents in multiple languages.
- **Write steps to obtain translation.**

Documents	
	<p>Attachment A – Language list</p> <p>ABC Company Information XYZ Company Information WXW Company Information</p>

<https://www.language.com/interpreting/on-demand>

https://deafservicesunlimited.com/?gclid=EAlaIqobChMIuuvrirOl6wIVj5OzCh0A5QleEAAYASAAEgLve_D_BwE

<https://www.genevaworldwide.com/>

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Division for the Visually Impaired

General Administration Policies & Procedures

Case Documentation

Policy: The Division for the Visually Impaired (DVI) clearly and comprehensively documents the services and supports provided to people served.

Purpose: To track, plan, evaluate, justify, and otherwise ensure quality service delivery.

Guidelines and Processes:

The written record of persons served by DVI are factual documents, from which one can clearly discern the sequence, service methodology, outcome and timeframe of service delivery. While the case record is not a repository of everything that happens in an individual's life while they are receiving services, it must capture the service related events in their life, including events outside the direct realm of, that have an impact on service delivery.

To fulfill its purpose, the case record must be based on factual information. The record will not contain staff impressions or opinions unless these are substantiated by supportive documentation. At the same time, they must include information on events that both directly and indirectly impact a person's services; i.e. situations at home, interpersonal issues, etc. While recording these events, staff will ensure they are objectively documenting events and not inserting their opinions and/or the conjecture of others.

DVI requires a range of service documentation, some applying to all services provided while others are service specific. The documentation guidelines and procedures required by the agency are clearly stated in the procedures for each stage and component of DVI service provision.

The overarching document that captures the totality of services provided is each individual VICR record. Service notes are completed regularly, recording day to day interactions, events and happenings about services provided, or as noted above, that impact on services. The frequency at which case notes are completed is to some extent dependent upon what is happening in the person's life, the services they are receiving, etc. Staff will document in the service notes any significant event or work performed on behalf of a participant. Technology has enabled staff to communicate quickly and effectively through email. In addition to VICR notes, staff should print emails and add them to the case record.

Document
VICR
Email Correspondence (as necessary)

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Division for the Visually Impaired
General Administration Policies & Procedures

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Division for the Visually Impaired

General Administration Policies & Procedures

Case Record Review

Policy: The Division for the Visually Impaired (DVI) is committed to maintaining current, complete participant program records.

Purpose: To ensure compliance with program participant policies regarding record keeping and documentation procedures.

Guidelines and Processes

1. Participant case records will be regularly reviewed by staff members, led by the Program Manager or designee, with advisement from the Division Administration, in accordance with the State policies by which records are maintained.
2. Participant record keeping policies are reviewed, and if necessary, revised annually.
3. Record keeping policies will protect the confidentiality of those receiving services, while complying with customer expectations, legal requirements, and regulations.
4. Program Managers will review participant files on a quarterly basis to ensure compliance with record keeping policies. The records will be reviewed for accuracy and thoroughness. The sample of files reviewed will be proportional to the current utilization of each DVI service.
5. Staff and/or program managers will report deficiencies to the Division Director or designee in the predetermined format and content along with a corrective action plan that includes person responsible and correction attempt deadlines.
6. Deficiencies will be referred to the key staff member to correct the problem(s) and return the file to the program manager for final review. In the event the key staff member is unavailable, the program manager is responsible for file corrections attempts. The Division Director or designee will ensure a deficiency log is maintained and reviewed for patterns of omissions and/or errors. Repeated offenders will receive additional training and a timeline to correct their documentation errors. If unable to correct, disciplinary action may be initiated.
7. Once a satisfactory review is completed, the program manager updates the corrective action plan and presents it to the Division Director or designee.
8. The Division Director or designee will review file audit results and make note of trends or patterns in documentation errors for analysis of significant or unusual trends that may necessitate procedural changes, additional oversight, and disciplinary action.

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Division for the Visually Impaired

General Administration Policies & Procedures

Confidentiality, Informed Consent & Release of Information

Policy: The Division for the Visually Impaired (DVI) agrees to uphold the DHSS client confidentiality policy PM #5 by adhering to Division guidelines and processes.

Purpose: To ensure consumer information is protected.

Guidelines and Processes

1. All DVI staff will read the DHSS client confidentiality policy PM #5 and attest to uphold by signing the DHSS Client Confidentiality Form.
2. An individual's signature is considered valid by DVI for the purposes acknowledging an explanation of rights and authorizing release of information when the person:
 - a) is 18 years of age or older and
 - b) has not been adjudicated as incompetent and/or
 - c) Includes the signature of a witness if their signature is not legible.
3. A legal representative is defined as one who has been court-ordered to act on a person's behalf or have been granted power of attorney by the person served. The representative must furnish a copy of the legal document(s) for the case record.
4. For the purpose of this document, all references to the person receiving services includes the person and/or their legal representative (if applicable).
5. Consumer rights include the right to confidential services. During orientation to DVI, participants are informed of their rights as recipients of services. Rights are explained in such a way as to ensure their understanding of these rights and the mechanisms available to them when they feel their rights have been violated.
6. Consumers indicate that rights have been reviewed and discussed with them through their signature on a handbook acknowledgement page.
7. During the intake process, participants are asked to sign a **Release of Information** that is effective for one year following the date the individual signs the release. The authorization allows DVI to release or obtain information that is essential for the provision of services. The entities included on the release depend on the information being sought or given. Examples include referral source(s), Social Security Administration, Department of Education, regulatory surveyors, doctors, parents, and spouses. Multiple forms can be utilized if the individual wants to limit access to some team members that is available to others.
8. Once the Release of Information is signed it cannot be altered or changed. Should it become necessary to obtain or release information, by an agency or organization not listed on the original Release of Information, the request for information will be discussed with the individual. If the person agrees, a new release must be signed by the person specifically stating the organization requesting the information and authorizing its release by DVI.
9. Consumers have the right to revoke their authorization to release information at any time. Revocation request should be submitted in writing to program staff. The revocation request will be attached to the initial Release of Information and take effect immediately.
10. A consumer may review their program file or designate another person to review their file for them, at any time. A designation requires the participant sign a release of information.
11. A participant or their designee may copy file documents with approval by the authorized staff and/or program management.

Division for the Visually Impaired

General Administration Policies & Procedures

- 12. DVI will only release documentation and records the agency generated through the provision of services, (i.e. program plans, pay records).
- 13. Requests for records by subpoena or court order will be forwarded to the Department of Justice, Deputy Attorney General for the Division for guidance.
- 14. If DVI must release records for law enforcement, staff will attempt to contact (phone, letter) the individual to inform them that information has been requested and the agency is legally obligated to release the information. Official documentation regarding release of records for law enforcement will be maintained in the individual case record.

Documents

Release of Information Form
Media Release Form
DHSS Client Confidentiality Form

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Division for the Visually Impaired

General Administration Policies & Procedures

Grievances

Policy: The Division for the Visually Impaired (DVI) committed to ensuring complaints are resolved in a fair, timely and consistent manner.

Purpose: To ensure methods are available and communicated that assures the effective resolution of conflicts and complaints.

Guidelines:

DVI is committed to a win – win – win approach to solving problems. Each party in a disagreement needs to be heard and have their needs met, which benefits DVI and its services.

Disagreements are not unusual in conducting day to day business. No formal process is necessary to resolve disagreements. Parties in disagreement must actively listen to each other, seek to understand the other person's viewpoint, and mutually devise a resolution that meets each other's needs and concerns. Program Participants, employees, and staff are encouraged to assist each other in resolving issues that bring two parties into conflict, with an emphasis on open, honest communication. Frequently a third party is asked to help two people to understand what the other one is saying and what they need. Once these ideas are clearly expressed, the third party will assist in identifying a solution that closely meets both parties' needs.

A. Rights of the person filing a grievance

1. To have the grievance processed in the timelines stated
2. To be informed of the progress of the grievance
3. To be given a written report of the results at resolution
4. Not to be discriminated against for filing a grievance
5. Not to suffer retaliation or any barriers to services for filing a grievance
6. To have the grievance process explained at an understandable manner
7. To request an advocate

B. Responsibilities of the person filing a grievance

1. To report any possible wrongdoing within a reasonable amount of time
2. To report truthfully with full disclosure of the situation
3. To cooperate with any investigation of the grievance

Division for the Visually Impaired

General Administration Policies & Procedures

4. To follow the steps of the grievance process

C. Rights of the organization receiving a formal grievance

1. To get full disclosure from all involved
2. To expect full cooperation from all parties involved

D. Responsibilities of the organization receiving a formal grievance

1. To follow the steps towards resolution within the timeframes stated
2. To protect those involved in the grievance until it is resolved
3. To assure fair and equitable treatment of anyone filing a grievance
4. To assure information regarding the resolution is shared confidentially with the person filing a grievance

Should a conflict between individuals in the organization, participants or those acting on behalf of participants, not be resolved informally, either party may request resolution through DVI formal problem resolution procedure. The formal procedure is as follows:

Step 1: File a written grievance with Program Manager within 5 days of the incident

Step 2: The Program Manager will respond within 5 days of receipt of grievance.

If grievance is not resolved, continue to next step 3

Step 3: File grievance with the Regional Manager within 5 days of receiving response from supervisor

Step 4: The Regional Manager will respond within 5 days of receipt of grievance.

If grievance is not resolved, continue to step 5

Step 5: File grievance with the Program Manager within 5 days of receiving response from next level manager.

Step 6: The Program Manager will respond within 5 days of receipt of grievance.

These steps will continue up the chain of command. All program participants are free to file grievances. Program participation will not be jeopardized in any way by filing a grievance nor will any harassment or retaliation be tolerated. Program participants are encouraged to obtain assistance from an advocate of their choice, VR counselor, or key staff member if desired to assist with handling a grievance. Additionally, program participants are encouraged to turn to their VR counselor for advocacy and support throughout the entire process of the grievance procedure. A grievance may

Division for the Visually Impaired

General Administration Policies & Procedures

be withdrawn at any time by the employee or program participant originating the complaint, by submitting a written request for withdrawal of the complaint to the Program Manager.

For answers to any questions about the grievance process or for help completing the steps of the process, please contact the Division Director 302-255-9800. If all parties cannot arrive at an amicable solution, the following external resources are available:

Delaware Client Assistance Program

United Cerebral Palsy, www.ucpde.org

Statewide: (800) 640-9336

NCC: (302)764-6216

K/S: (302) 335-3739

Community Legal Aid Society

Disabilities Law Program

NCC: (800) 292-7980, **TTY/TDD:** (302) 575-0696

Kent: (800) 537-8383, **TTY/TDD:** (302) 674-8503

Sussex: (800) 462-7070, **TTY/TDD:** (302) 856-3742

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Division for the Visually Impaired

General Administration Policies & Procedures

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Division for the Visually Impaired

General Administration Policies & Procedures

Participant Record Maintenance & Review

Policy: The Division for the Visually Impaired (DVI) ensures all participant records accurately reflect services, are properly secured, and regularly reviewed.

Purpose: To document and justify the services provided, while ensuring confidentiality and program integrity.

Guidelines and Processes – Maintaining Printed Record

1. Once a person is referred, DVI creates an electronic (VICR) record and ###-section paper file.
2. Participant demographic and emergency information is readily available on the inside, first page of the record. This document includes contact information, emergency contacts, medications, disability and services received through DVI.
3. Each section of the record is outlined in the Participant Record Index to ensure records are maintained in a consistent and well-organized manner.
4. Maintaining, updating, and ensuring completeness of the file rests with the staff member(s) assigned to work with each participant. Services offered by DVI have corresponding Record Checklist to ensure crucial documents are included. Record Checklists are to be kept in the file for easy auditing and updating.
5. Participant files are maintained in a secure, centralized area at each DVI site.
6. Authorized personnel are those staff members who are working directly with the individual or who have the responsibility for maintaining or conducting quality reviews of participant records.
7. Authorized personnel removing a participant file from the designated area must sign the file out and back in when returned.
 - a. Staff must keep the file secure when it is in their possession.
 - b. Staff may not keep the record in their office for extended periods of time or remove it from the DVI site.
 - c. Staff may maintain 'working files' of day-to-day records in their office, provided the door is locked when unattended.
 - d. 'Working files' documents should be filed in the main record at least weekly.
 - e. Failure to follow all participant record protocols may result in disciplinary action.

Division for the Visually Impaired

General Administration Policies & Procedures

Guidelines and Processes – Maintaining Electronic Record

Staff will follow procedures designed for VICR

Guidelines and Processes – Removing Client Files from DVI

1. When/if it becomes necessary for Division staff to physically remove consumer files from the secured building/location to conduct business off-premises, the following protocols shall be followed and adhered to for all Division staff. All staff will sign the Consumer File Protocol prior to removing files from DVI offices.
2. Please note that the decision to remove records from DVI offices will be made by leadership and requires supervisory approval.
 - a. Complete training related to confidentiality and the Health Insurance Portability and Accountability Act (HIPAA). Provide supervisor with certificate of completion.
 - b. Review the DVI Confidentiality Policy.
 - c. Review the protocols and sign the Statement of Assurance and submit to supervisor for approval.
 - d. Once authorized, each folder must be signed out of the secure file area.
 - e. Folders should be signed out for no longer than seven business days without extended supervisor approval.
 - f. Staff and their supervisors will discuss the number of folders that may be removed by one employee at each time.
 - g. When folders are brought back to the office, staff must record the date on the Client File Tracking Log and sign to verify the return.
 - h. The Client File Tracking Log is to be legible and all spaces are to be completed including the name of the consumer(s), the staff name printed, the date removed, date returned, and the staff legal signature. All fields are to be repeated and for each consumer file.
 - i. Staff agree to ensure all files are maintained in a secure manner. Staff must maintain the files in their possession when off-premises and keep in a secured area, locked when possible.
 - j. Duration of time for client files and other hard-copy documentation to be off-premises, if greater than 7 days, shall be agreed upon in writing (E-mail) between the staff member and their supervisor and shall be noted on the required Client File Tracking Log.
 - k. In the event the staff member vacates their employment with the Division, the staff member shall be responsible for returning the consumer file to their Supervisor or Unit Manager within the time-period specified by their management. Failure to do so shall result in the issue being referred to the Division Director, Division Deputy Director, and the Division-assigned Deputy Attorney General for further disposition.
 - l. Staff shall update, scan, and E-mail the Client File Tracking Log to both their Supervisor and Unit Manager each time it is updated, while maintaining all updated log history at their remote location.

Division for the Visually Impaired

General Administration Policies & Procedures

Guidelines and Processes – General Recordkeeping Information and Tools

9. A participant may review their program file or designate another person to review their file for them, at any time. A designation requires the participant sign a release of information (See Confidentiality & Informed Consent Policy).
10. A participant or their designee may copy file documents with approval by the authorized staff and/or program management.
11. Staff are to utilize file tools as they prepare and maintain files to ensure service protocols are met and files are in compliance with procedures. File tools include an index guide outlining file structure and checklists to ensure all required documentation is included in record.
12. Staff are to be mindful of the following important record-keeping points:
 - When completing forms, all lines requesting information, should have something written in the designated space. N/A should be entered on spaces that do not apply to participant.
 - Any space that has a signature space must have the proper signatures or an explanation why signature is absent.
 - Staff are responsible for ensuring files are maintained accurately and thoroughly or possibly face disciplinary action.

Documents

Participant Demographic Data
Participate Record Index
Record Checklists
Consumer File Protocol
Client File Tracking Log

Division for the Visually Impaired

General Administration Policies & Procedures

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