

RICDHH's 7-Point Strategic Plan for FY 2015 and FY2016

Population in RI*: 213,671 people who have hearing loss in at least one ear in Rhode Island.

Vision Statement -To ensure that all Deaf and Hard of Hearing citizens appreciate the communication equivalent, opportunities, and human rights in all walks of their lives in Rhode Island.

Mission Statement - To provide innovative leadership in public policy, advocacy, service delivery and accessibility throughout the Ocean State, RI CDHH ensures opportunities for every deaf and hard of hearing person to become an empowered and contributing citizen.

Strategic Goals:

- 1. Create 4th FTE – Staff Interpreter**
- 2. Improve Efficiency of Interpreter Referral Database Management System**
- 3. Expand Access to the Arts and Entertainment Community**
 - a. *Access to Performing Arts Theaters*
 - b. *Movie Access*
- 4. Provide the Highest Level of Service Possible to Our Customers**
 - a. *Develop better navigation on RICDHH Website, using both English and American Sign Language formats.*
 - b. *Create Video Remote Interpreting services throughout state agencies.*
 - c. *Create Clearinghouse Information on Communication Access Resources in RI*
- 5. Improve Outreach to Community, Partners, and Customers**
 - a. *Host at least 2 community forums*
- 6. Lead by Example to Advocate for Access to Healthcare Services**
 - a. *Hospitals' Policies and Procedures*
 - b. *Expand Insurance Benefits*
 - c. *Provide two trainings on Deaf and Hard of Hearing issues per hospital annually*
- 7. Implement Training Series for Community Partners, Stakeholders, Providers, and Constituents**
 - a. *Interpreters – Legal, Emergency, and Medical settings*
 - b. *Emergency Preparedness and Responses*
 - c. *Deaf and Hard of Hearing Self Advocacy*
 - d. *General Deaf and Hard of Hearing Topics*

*20.3% is according to a new study led by Johns Hopkins researchers and published in the Nov. 14, 2011, *Archives of Internal Medicine*, Frank Lin, M.D., Ph.D, an assistant professor with dual appointments in both the Department of Otolaryngology-Head & Neck Surgery at the Johns Hopkins School of Medicine and in the Department of Epidemiology at the Johns Hopkins Bloomberg School of Public Health, John Niparko, M.D. of the Johns Hopkins University School of Medicine, and Luigi Ferrucci, M.D., Ph.D, of the National Institute of Aging