

Conventional smoke alarms can't fully address the needs of people who are deaf or hard of hearing and who can't rely on the sound of a conventional alarm to alert them to smoke or fire. Today, safety device manufacturers and vendors offer visual smoke alarms that use sound and strobe lights to alert people to fires in the home. These specialized alarms are more expensive than regular smoke alarms.

The Office of Deaf Services within the Department of Human Rights has a long term goal to develop a visual smoke alarm distribution program for deaf and hard of hearing lowans. In November 2001, 30 participants who were either deaf or hard of hearing or had a family member who couldn't hear volunteered and did a needs assessment survey. As a result, the outcome shows that 63% don't have visual smoke alarms and 17 families had at least two deaf members per household.

The Office of Deaf Services encourages families with deaf or hard of hearing children and hearing children of deaf parents to fill out the Smoke Detector Project Survey. According to the Department of Education's report, "Data on Iowa Students who are Deaf or Hard of Hearing," November, 2008, shows 3320 students in Iowa. It is recommended when filling out the survey to add how many people are deaf or hard of hearing in your home.

Status Form for Deaf/Hard of Hearing

The Office of Deaf Services and State Fire Marshal are working together on the needs of visual smoke alarms for the families with deaf or hard of hearing members. This voluntary status form will help get the funding for these specialized alarms.

This will also help local fire departments to follow up with these families and help collect the optional surveys. This is a voluntary form which deaf and hard of hearing community members can send to the local fire department in their community. It is important to let the firefighters know if you move and/or this information changes.

Name _____

Phone: (check all that apply)

Voice___ TTY___ CapTel ___ VP (video phone) ___ Number: _____

Address: _____

City: _____

State _____

Zip Code _____

Number deaf in household: _____

Number hearing in household: _____

Please check if appropriate:

_____ Knows sign language

_____ Doesn't know sign language

I give permission for firefighters to provide this information to help with installing the visual smoke alarms in our house.

Signature: _____ Date: _____

Please mail form to your local fire department.

Notify fire department in the event of moving from this residence.