

FLORIDA COORDINATING COUNCIL
FOR THE DEAF AND HARD OF HEARING
Quarterly Meeting
St. Augustine, Florida
Thursday, November 4, 2021
9:00 a.m. - 5:00 p.m.

Onsite CART Captioning provided by
Brandi Kent, RPR, CRC, CRR, RSA

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- >> GLENNA: Good morning, apologies for slight delay due to technical difficulties. Now 9:08 we'll start the meeting of the Florida Coordinating Council for the Deaf and Hard of Hearing in St. Augustine, on November 4. Remember to identify yourself before speaking and remember to be recognized to by either me or Debbe. We'll start with Gina.
- >> GINA: This is Gina Halliburton representing Florida Registry of Interpreters for Deaf.
- >> CHRIS: This is Chris Littlewood for the Association of Late- Deafened Adults, St. Petersburg College.
- >> This is Glenna Ashton, representing Florida Association of the Deaf.
- >> This is Debbe Hagner, I represent HLAA Florida State and I'm from Port Richey, Florida.
- >> SEAN: And good morning, this is Sean Issac and I represent the Florida Department of Health.
- >> DEBBE: Do we have anybody on the chat? Mary are you on the call?
- >> MARY: This is Mary Hodges, Department of Elder affairs.
- >> GLENNA: Good morning. We are supposed to have John Jackson from the Department of Children and Families. He was supposed to come. Hopefully he will show up soon. We have five people out of 9 so we have to have a quorum for the meeting.
- I want to recognize our providers. We have Lashay, providing the AV. We have Brandi Kent providing CART and we have Chris Costa, George Costa, Donna Flanders and Carrie Moore providing interpreting. Thank you.
- Next will be the August minutes. Hopefully you read over it. There is already one change. I need to add Debbe's name as being present at the meeting. Were there any other changes or anything for the August meeting that was on Zoom?
- >> DEBBE: I make a motion to accept the minutes as corrected.
- >> GINA: I second the motion.
- >> GLENNA: Minutes have been accepted. It doesn't require a vote, it just requires approval, that's all.

And the agenda, has everybody seen the agenda? It's a little bit different today.

Three things I want to mention before we go on. First, FCC rules says if you are already vaccinated, it's not required to wear a mask. Instead it's an option if you want to wear a mask. However, if there is a need for clarity both in the room and for the conference call, I would ask that you remove the mask when you are talking or signing to maintain the clarity. During normal times, we have technical difficulties anyway. So keep that in mind if we need additional clarity with mask.

>> CHRIS: This is Chris. I appreciate that, but you can't ask people if they have been vaccinated or not, right?

>> GLENNA: I want to take the time, I know you saw in the e-mail, I want to take the time to recognize Debbe. She is with the National HLAA meeting and she was given the Cheryl Hapner Award, and Debbe got that award, so I want to congratulate her and recognize that. They mentioned this council in the awards description.

We are in the news.

>> CHRIS: That was an award from ALDA, though, not HLAA.

>> GLENNA: ALDA. I'm sorry. She was with ALDA and HLAA and anybody that needs advocacy. So congratulations.

>> DEBBE: Thank you. I also received an award for Hear Strong for Advocacy. So I received that award, too, as well.

>> GLENNA: Your name is becoming known.

This morning, we have just the update from Sean and then we prepare to go to visit the School for the Deaf and Blind, which I'm very excited about. We have actually been to FSDB many, many times. The tour is being made by the President. And as you remember, the President, Tracie Snow, presented at our council in August or May, I don't remember which one - - May. So that's nice.

We need to stop at 9:45, regardless of where we are, to carpool, go to the school, which is 207 San Marco Avenue, right up there. We have to go through a security so make sure you have some photo ID, like a driver's license, and we have to go through and be checked and then we will start the - - we have to be there by 10:00. We are a good-sized group so we have to get the security finished and start the tour at 10:30. It seems we'll have two golf carts to drive around in. And at the end, we'll see the museum, which is really cool. The school was established in 1885 and stayed at the same location. So they have a lot of things there. Okay, Sean?

>> SEAN: Good morning, this is Sean. And I would like to say that I'm excited to take the tour as well. So I will be brief. But I'll answer any questions that you all have regarding the update. First, let's start with the Biennial Report. If you may recall, the 2021 Biennial Report has already been completed and has been posted to the Council's website. It is available for the public and also you may recall that the Council submitted a copy of the report to each of the Florida legislators. That has been completed.

I'm not sure exactly what else we need to do to consider the 2021 report. I will say that you may want to consider the next one, which is due 2023. And 2022 is right around the corner. So if you have any ideas that you would like for me to consider as we go about this process, please let me know. At this point, I don't have any further updates.

I do have copies of the 2021 Biennial Report if you all would like to see it. And perhaps that might refresh your memories of what that looks like. And then you can provide some suggestions for how to move forward in 2023. Would you like me to pass those out now or later on?

>> CHRIS: Do you have it to share now?

>> SEAN: I do. One second.

Do we want to take a moment to look at it and talk about refreshers or ideas for 2023 or keep moving? Glenna is shaking her head, keep moving, so I'm going to keep moving.

Next up, the job position. And this has been referenced to the vacant position for the support of the Council. We call it the DOH- FCCDHH Liaison Position. The update we have is that the position has been advertised.

We had selected several candidates to interview and then at the last moment, our top two candidates, we went to interview and only one was able to follow- through. And that is kind of our status that the point. I think it's fair to say we are still in the process of selecting candidates. So that is the only update I have unless there are questions about the process.

I know there was questions last meeting. As you recall, the Department said it was okay for the Chair and the Vice- Chair to participate in that process and they have been.

Of course they would like to process quicker, as would I, but we are here where we are at and hopefully, with COVID slowing down, we will be able to move a little bit quicker. Any questions about that?

>> GLENNA: Can you advertise the position again?

>> SEAN: That is definitely within The Department of Health's ability to advertise again, yes.

>> CHRIS: This is Chris. Typically, whomever the final two candidates are, the entire council is at least made aware of names or resumes or something like that. Will that continue?

>> SEAN: If that's the typical course, I would say, yes. With the only reservation, please let me ask that question of my supervisors to make should nothing changed in the past. In the past, for the Department, within the Department, we have had a need to know policy, meaning if you're in the interviews itself, then you can have that information. But I'm new here and so I appreciate any patience that you will have with me to just verify that is still the case.

>> CHRIS: This is Chris again. We don't need to know anything about the entire process.

Historically, I will tell you that whatever the short list becomes, like if it's Bete and Bob that are the final two candidates, those names are given to the entire council. That way people are just a little more aware of what we are going before a final decision is made.

>> SEAN: Totally understand. And it should not take me long. I should know within today to be able to report back to the Council that the policy hasn't changed.

>> GINA: This is Gina. Just to clarify for me because I was not at the last meeting. I thought I saw that Glenna and Sean were interviewing the candidates? They are not? I thought Glenna and Sean were interviewing the candidates. Glenna representing the Council and Sean representing the Department. But if I'm wrong, that's what I want clarity on.

>> SEAN: The Department has, myself was included in the interview as well as our Bureau Chief, Anna Simmons, and then we also invited Glenna at the point that we did the interview. She was not available and she stated it would be okay for Debbe to participate, and she did.

>> GINA: Thank you.

>> SEAN: Any other questions?

>> CHRIS: Just if you could let us know the status of letting us know those top two candidates by e- mail or whatever when you find out. Thank you.

>> SEAN: Like I said, it should be by today, I can share that information and let you know. Thank you for those questions.

>> CHRIS: And thank you for everything that you have done, stepping in while we are waiting. We appreciate everything you're doing.

>> SEAN: And you're welcome and I appreciate your patience and the help and assistance. You guys have been great.

>> DEBBE: One thing I would like to share is that the biennial report to be given to all the ADA coordinators in every county just so that they are aware of us. The name, the Florida Coordinating Council. I think it would be good so they get familiar with our name and the group. The ADA coordinators. I hope you have a list of that.

>> SEAN: I'm sure I do somewhere, and I will make sure that that happens.

>> GLENNA: How many copies do we have left?

>> SEAN: So if I'm looking in my magic box next to me, it looks like about 100.

>> GLENNA: So we have 67 counties, which will be enough. Did you give one directly to the Governor's office?

>> SEAN: Let me check on that. I recall every legislator, I just can't recall follow we sent one to the Governor's office. If we did not, we will do that on behalf of the Council.

>> CHRIS: Also historically, we have always given them to every legislator in the State of Florida too. So, I mean, if that hasn't been done already, we need to look at having many copies made.

>> SEAN: We did send it to every single legislator, and we sent several versions to each of the Council Members, so you should have received one in the mail. If you did not, please let me know.

>> DEBBE: And also to the Attorney General.
Attorney General gets one.

>> GLENNA: The Surgeon General gets one.

>> SEAN: We'll make sure it is sent on behalf of the Council. Any further questions? On that topic?

Okay, I have another topic here that has received some life and some comments previously. Appointments. So as you all know and have let me know, there has been somewhat of a delay in some of the appointments for this Council. I was able to contact one of the representatives for the Department in the Office of Legislative Planning, and that office currently now has an individual who is working on appointments for the Governor's office.

He gave me an update so I want to share those right quick. First, he stated that the position to make those appointments, and I guess to facilitate that action, inside The Department of Health, has been vacant since early 2017.

From his understanding, the middle of 2020, that position was filled but again that was in the middle of the year of a Pandemic and in some aspects it seems like a lost year for some of the things that the Department routinely was able to handle. As you may recall, all activities were focused on handling the COVID Pandemic.

So at this point, it seems like they are getting back up to speed when it comes to appointments. He asked me for some information regarding the vacant positions. I submitted that information.

So I asked him would he be available today? It's probably not the best opportunity to speak because it's a public meeting, and so it might not be the perfect venue but he did say he would make himself available to the Chair and vase Chair for questions. So that can happen as soon as next week.

He didn't want to wait too long, because when the session starts, the Legislative Session starts, his calendar will be a little bit more full, as you can imagine.

In your meeting packs, there are questionnaires for every member here because more than likely if you're not a state appointee, then your appointment has expired. However, that does not mean that you can not participate on the Council. It just means we need to get back up and current our appointments.

So what I'm asking all members to do, is to please complete that if you're interested in being a member. According to your procedure. If you have questions about the questionnaire, please let me know. There is a hard copy questionnaire in your meeting packet. There is also a way to apply on line where the packet can be sent automatically to the office.

So if there is any questions about the packet, please let me know. - - the questionnaire, I'm sorry, please let me know.

>> CHRIS: I don't know if - - I haven't looked at the questionnaire yet but in addition to that, I'm one of the people in the situation that you spoke of where my appointment is complete and I have applied for re- appointment and it's been quite sometime, at least two years. I have submitted my packet of information at least twice. So I need to make sure that there is no question. So I don't have to submit anything again, a third time. I also will say that there is only going to be so long that I'm going to be able to continue unappointed, but I would certainly be honored and privileged to see that happen. Also, I'm a strong believer in the fact that the Council does need new blood, myself included, I will be happy to step down as soon as, in our small organization for the Association of Late- Deafened Adults, I'm able to recruit somebody that will take my place.

One of my concerns is, we have a council that is supposed to be 17 members and here we are with a handful of people. So I would certainly like to see expansion on that. A big concern is, the Governor's office - - and we are not the only council in the state that is having difficulties with appointments.

I also will tell you that I have been appointed to another council for the State of Florida. I'm on the Independent Living Council now for the State of Florida. So it took a long time to get appointments taken care of for that as well.

So, hopefully those things get taken care of in the near future. But if you could absolutely let us know the status of any applications we put in for membership for reappointments, I would appreciate that.

>> SEAN: Thank you for the question and the comment. I did forget to mention that many councils are going through the same thing as this council when it comes to appointments being somewhat delayed. So you're correct in that. That is also a message the office wanted me to share.

Also, it is important for y'all to understand that I think it's best to re- submit your applications regarding any appointments that you have submitted for in the past. I think it's fair to say that this can be looked at as a fresh start for these appointments to get back on track as to where we were before the Pandemic.

I know that may be disappointing but I think that's the best case scenario for us to resubmit - - for you all to resubmit because in that case, there can be no question as to what the status of the application is.

I have asked for an update on a different application, not yours, Chris. And that was the suggestion and recommendation. Again, the packet that you have today includes the questionnaire. So please take some time to review that and if you have any questions about that, I will certainly be able to work with The Office of Legislative Planning to help. And then there is also an application on line. I want to make sure that you understand that as well. When it comes to how long it may take for the applications and appointments, I will still like to leave that to the Office of Legislative Planning. It was somewhat hopeful the information that was shared to me, and so I would like for that information to be shared to the Chair and the Vice- Chair directly so that it doesn't come from me, but comes directly from them. But it was not years. It was more like weeks that they were saying that they are going to get back on track. That was the information that was shared with me.

But certainly I would encourage the Chair and Vice- Chair to follow- up.

>> GLENNA: I want to take a moment to recognize that John Jackson is here from the Department of Children and Families. Chris?

>> CHRIS: Thank you for that additional update. I will pull my file and resubmit the application again with the question, can you please find out why they can't at least hold old applications or do they have them? Are they getting lost? What is going on? If we are looking at baseball, you know what happens after three strikes. So I'm submitting it a third time.

Like I said, I'm very happy to serve. Really something I would like to see, but I feel like, in all due respect, a little communication from the other side is appreciated as well. And I certainly know it's not you and it's not one individual, I know. But if we can streamline the process it would certainly be a good thing. So if things boil down to weeks instead of months, that would be awesome.

>> SEAN: Like I said, I will share that information just because it's coming from the source directly. I am hopeful that that is what the case is and that is what was communicated to me. I will share that even though other councils are going through this, I know it has been a challenge and a challenging situation for some members here and maybe even some that are not. I would encourage everyone to continue to try to be patient and serve the best you can and Chris, I will definitely follow- up to see if that application can be located. I'm not sure what happened to it.

>> GLENNA: You'll send me and Debbe the name of the person and contact information? So we're allowed to contact him? We don't have to go through you?

>> SEAN: You don't have to go through me. I was just offering to be there to answer any questions. But certainly I'll send you the contact information for this gentleman. He is a public entity that works with the Department of Health. So you can contact him.

>> GLEN: So that means that Debbe and I can be a tag team in working with them - - contacting them.

>> SEAN: Wrestling terms - - I think we want want to be nice as possible to all state employees, but certainly this gentleman, like I said, he has already asked for information to help to fill and recognize the vacancies that are existing here. So I think we want to stay on good terms, all right?

Any questions regarding appointments at this point?

>> GLENNA: Thank you, Sean, for bringing us up- to- date and thank you for the good work and trying to get things done during this time. I want to make you aware of something that was new that we didn't know about.

When they did the contract with the interpreters and CART, they added something new that we need to take advantage of, and they added that they not only do the quarterly meetings, but also will provide on line meetings up to 12 times a year for the committee to meet. So that means that we have four committees, so each committee could meet three times, technically.

So think about that to take advantage of that. Because that is included in the contract to have interpreters and CART for on- line meetings - - we do the same way we did before. Provided by AQI and conference call. So think about that when we are discussing the committee work to try to plan for actual committee work with the on- line meetings. So this is a God opportunity to be able to move things - - a good opportunity to be able to move things along. Chris?

>> CHRIS: For clarification, that is not new. We have always had that.

>> GLENNA: I didn't know about that.

I didn't know about that.

>> DEBBE: I had no idea.

>> GLENNA: Debbe didn't know about that.

Lisa Schaefermeyer was saying that was new that they didn't have it in the contract before. And now they have it in the contract.

>> DEBBE: Chris, go ahead.

>> CHRIS: This is Chris. Possibly it's been added for interpreters or possibly it's been added where it's in the contract for the providers, but we have always had at least captioning for any Committee Meeting that we wanted to have. Like I said, I have been on the Council for many years, more than 10, and any Committee Meetings we have always wanted to have, we have always been able to have accommodations or communications access. I believe people calling in that wanted to use a video interpreter have used VRS. But if they have the ability to have a video interpreter through a Zoom conference call or something like that, that is terrific.

But, we have always had accommodations through any Committee Meeting, is the point.

>> DEBBE: Gina.

>> GINA: So that would be corrugated with Sean. Like if we set up the EMOT meeting, then Sean would automatically provide the interpreters and the CART? So is it something we ask for specifically depending on who is involved in the meeting?

>> GLENNA: Like with all Committee Meetings, you have to inform Sean because it has to be set up more than two weeks later for public notice. So the same time to notify the service provider to serve that day for the Committee Meeting. Chris, you're right, we did have Committee Meetings but it was limited in how we were able to have the Committee Meetings. Now it's expanded in more ways that we never had the Committee Meetings. And that's what is different.

>> DEBBE: Anybody on the phone?

>> GLENNA: It's now 9:42. John? You arrived after I mentioned we had to leave at 9:45 to carpool to the School for the Deaf. We have to go through security. You need photo ID. We will be riding in golf carts and looking around the school and the museum. Now I would suggest for the carpool, depending on how you want to do lunch afterwards, because I'm going to come back here for lunch because Jenny Locy wants to be in the room early to set up for her

presentation at 1:00. And if you want to go out to lunch and carpool together -- you can carpool together.

>> DEBBE: Mary says, I'm having a meeting. And the Council has a tour. I will join the Council again at 1:00.

>> GLEN: Thank you, Mary. I'm sorry you will miss the tour.

>> CHRIS: I think it's important to say, and I'm assuming the tour will not be captioned for anybody that is on line?

>> GLENNA: No. Conference call and CART will not be included on an in- person tour.

I can do a summary of the tour afterwards to include in the minutes. I mean we can talk about the tour afterwards in that way we have it put in the record and we can talk about the tour afterwards.

>> CHRIS: My point was just from 9:45 until after lunch, there is not going to be any activity on the phone line for anybody that is joining.

>> GLENNA: Okay. So let's take the time to clean up and get ready, decide who is riding with who and go. 207 San Marco -- oh, when you go to the school, you will see the front of the school. There is two streets. You want to go to the one that is south of the campus, that's where the security entrance is there. North of it is Moore street. Don't go there. South -- I can't remember does. Anybody remember the name of that street? I'm assuming we are going north from here. So the first street before the campus you'll see. Go down the street and you'll see a big gate there.

That's the security and you're in the right place for that. That is where you have to go.

>> DEBBE: Will this room be locked? Because I'm going to leave my laptop.

>> SEAN: It will be.

>> GLENNA: Let's go.

You probably have to wear a mask there.

[Break]

Welcome back.

The meeting will begin shortly.

>> GLENNA: Florida Coordinating Council for the Deaf and Hard of Hearing meeting. This is Glenna Ashton, representing Florida Association of the Deaf.

>> DEBBE: Debbie Hagner representing HLAA, Florida.

>> SEAN: Sean Issac representing the Florida Department of Health.

>> GINA: Gina Halliburton representing FRID.

>> John Jackson, representing the Department of Children and Families.

>> CHRIS: Chris Littlewood, Association of Late- Deafened Adults.

>> GINA: We have now Jenny Locy who will present on Community Emergency Response Training and to explain what the whole program is about. Take it away, Jenny.

>> JENNY: Thank you, everyone for inviting me to be here today. I am pleased to present on the CERT training or community emergency response team. I'm privileged to be providing this type of training to the Deaf community and so thank you, it's great to be back here.

So we'll start with, who is CERT for? Who can take this training or participate in any kind of CERT training? Anyone can, actually. Anyone in the State of Florida. CERT is also used in other states as well. Some other questions I will help answer is, what is this training for? If you

think of any kind of disaster response, whether it is hurricane, flood, we want to make sure our community is prepared and can respond appropriately with a plan in place.

We also find that just awareness of what kind of tools you can have for your own household or your own person, so you do have a plan in the event there is a disaster, whether you're helping yourself, your family or your neighbors.

The CERT training is also beneficial for everyone. In the wake of a disaster, this training is very beneficial. It is free of charge, and we do look to volunteers that are CERT trained to work closely with the community. Now the EOC or the Emergency Operations Center in your local community, can offer this training at no cost again to anyone.

The average time commitment is about 21 hours and it does include 8 units of intense information and materials. This is what my binder of training information looks like.

A very in- depth training that can be conducted over a weekend. About 8 hours over three days. I know that some counties typically offer it on a Thursday evening from 6- 9 p.m. for three hours for a certain number of weeks. But 21 hours are necessary to be completed to be deemed CERT trained or certified.

So why is this important to Florida Deaf and Hard of Hearing community? Obviously, we want to make sure this information is available to everyone and there are many in our communities that aren't able to access this training due to communication needs. They might need Sign Language interpreters. However, we know in Pinellas County, I checked it out myself, whenever you do sign up with your local EOC, usually there is a point of contact who is responsible for the training. I know personally, I reached out to them to express interest in the coming CERT training. They took down my contact information and of course knowing this training comes at no cost, they ended up canceling the training for me because they didn't have the monies to pay for the interpreters.

So once I found this out, I realized there is a huge need for the Deaf and Hard of Hearing community. And I'm going to give you some examples, not just my own, of how this is a training that needs to be accessible to our community.

Now, AQI, abs absolute quality interpreting has made a commitment to this CERT training. Our CEO, David Scott, who is owner, is also CERT trained and he is able to co- present with another trainer or EMT or anyone from an EOC, Emergency Operations Center, for example the county's fire department; to provide the right tools and training for anyone in the community that wants to be certified in CERT training.

If you think about it, it's also a great opportunity to provide that access to our community residents for any kind of fire and safety training that is also included. So, we might also have someone from a hospital, maybe a local nurse come in. So maybe other experts, if you will, or providers, can come in and teach during this 21- hour training; and those who want to become CERT teachers or trainers, can do this as well.

There are prerequisites prior to becoming a trainer, but David and myself are both certified trainers. And again, as I mentioned, AQI does support Florida training and national CERT training. Now Lisa Schaefermeyer, the owner of AQI, as former President of the Florida Registry of Interpreters for the Deaf, in 2004, it was when she first realized that First Responders or emergency operation centers response to providing information in the wake of a disaster realized that we needed that training in Florida, not just for residents but for our interpreters as they are often called to interpret at these emergency information centers.

So move forward to 2017. AQI decided to be an exhibitor at an annual conference, an emergency management conference, where many providers are there to exchange information on how they can serve the community in the wake of a disaster. So as you can imagine, local fire departments, different county, law enforcement officers, EMT, Emergency Management services providers, were there. However, at this conference, AQI was the only agency that was able to provide tools and information for how to provide that access to Deaf and Hard of Hearing people.

We have 3.5 million deaf people that are Deaf or Hard of Hearing in the State of Florida, not counting tourists so you can see this is a huge need.

Of course, we live where they like to vacation, so often we do have a lot of tourists and people that decide to move here. We are a melting pot of many different languages and cultures and backgrounds.

So AQI decided to partner with Pasco county Emergency Operations Center in 2019 to provide a hybrid training that included both deaf and hearing participants. Now the CERT program is open to the public. Anyone can take this training and I know often CERT trainers aren't accustomed to teaching to a deaf audience. So this training was allowing us to provide a more visual presentation because we had a mixed audience. So if you think about a disaster such as a hurricane or a flood, or tropical storm, oftentimes when you go to tents and you are there to receive some assistance such as food, maybe shelter, oftentimes those announcements are heard over loud speakers. So any Deaf or Hard of Hearing resident may not have access to the information being shared widely.

As a result, we have seen that lack of access leads to lack of information and can be very frustrating for our residents. AQI has been involved at the state level in terms of CERT training. I went to the Florida CERT Community Emergency Response Team conference back in 2019. That was a conference in the Fall of 2019 where I took the Train the Trainer course so I could become a FEMA certified CERT trainer.

That certification, the Train the Trainer to become certified to teach CERT training is provided through FEMA and I must add that all the materials, all the training materials, are from FEMA. And here is a copy of my certificate.

I want to give you a little background or history about CERT. And remember, I just mentioned the Pasco training that we had with the Pasco county EOC. They worked alongside with AQI to host our first CERT training with a mixed audience of deaf and hearing participants. These are some photos from that training.

I remember when we assigned group activities, some of the trainers that were not accustomed to working with Deaf or Hard of Hearing individuals found themselves having to kind of tweak their presentation a little bit, not really knowing how communication would work but working alongside them, AQI was able to help them use more visual communication.

Now I'm going to go back to the history. In 1986, the HLAA fire department implemented a CERT program as a result of a terrible earthquake and there were many volunteers that came out to help the fire department because there were not enough personnel on hand. As a result, they had 100 volunteers that perished in this disaster. It was a very unfortunate incident, but it was because many of these Los Angeles residents that came out were not properly trained. So they started this program and now there are more than 2,700 programs in the U.S.

There are about 600,000 Americans who have completed the CERT training as well.

So community preparedness, there are various roles that volunteers can have. I know in the training, we were often broken into different activities and - -

[Technical difficulties]

-- my apologies. Give me one moment. Okay, hopefully I'm back up and running and it won't happen again. My apologies.

So, they found that with volunteers from the community, there are different roles they can play. And during the training we were broken up into different activities. So, in the event, let's say a hurricane -- you always are partnered with a buddy. And during these hands on activities, you are delegated tasks, like you're going to take care of food. You're going to take care of supplies. And everyone works together, the volunteers that is, to create their own community of safety with they are going out to assist and help others.

[Technical difficulties]

>> DEBBE: Could it be the time sharing -- for people who are on the call, we're having some technical issues with the presentation. So please bear with us.

>> GLENNA: I also want to note that marry Hodges and Karen Goldberg were on the conference call and chat.

>> JENNY: Yes! Say a little prayer. So the community leaders, whenever they are CERT trained, it's good to have leaders in your local community be a part of it. For example, in St. Augustine, after I took the training, I went back to my community and informed all the leaders to let them know that there are roles they can play, other leaders that are CERT trained as well. So we do delegate tasks. We might have two be designated for the shelters. There is always one designated as a point of contact or POC. Someone is going to be designated or delegated the task of making sure that food and drink is available. Once the Sheriff or fire department arrives, then we are able to hand those responsibilities back over to the emergency response or Emergency Management teams. You might think this can be overwhelming. It is in the event of a disaster, but that's why we are very careful in delegating tasks so that everyone is just responsible for one thing and that all of the leaders are on the same page. Again, I can't tell you how important it is to be CERT trained and that needs to happen prior to a disaster.

Okay, team building activity. Now there is two parts. We are going to -- or two goals or outcomes. Team work, working as a team, and then also communication. So, I want you to get out of your seats. We're going to play a game where we are stacking cups. We are going to do it here on this table. I know we have 8 of you so we'll split into two teams of 4 or two teams of 3 -- if you want to pair up, you can. I'll let you decide. All right, let me take 4 right here. I need 4 volunteers at my station.

So we have 4. I can take one of these away. So what we're going to do, have you ever played the cup stacking game? Okay, I'll explain how it works. There are 10 cups total. You have to start with the bottom level with 4 cups and you're going to build a pyramid. 4 on the first level then 3, two and then one. You'll be using not your hands but strings.

[Team building exercise]

Okay come in a little closer. All right. Now you see the circle in the middle? It will fit over the base of the cup but your hands may not touch the cup. You're going to use the string and it's teamwork, right? To pick up each cup and put them into the rows and stack them on to each level. Got it? You have five minutes to complete this task.

Go! By letting go of the cup, pull back, let it fall through but you don't want it to fall. I'll give you a pas on this one. Let's do this one.

Easy - - all right!

[Cups fall]

Keep trying. You can leave that one on the floor.

Awesome! Give yourself a hand great job! Thank you for participating.

>> DEBBE: It was hard.

>> She said the women were doing all the work.

>> DEBBE: Karen says, I love the cup stacking game. Karen said she loves the cup- stacking game. And also, she says she would like a copy of your PowerPoint.

>> JENNY: Of course. Happy to share that with you. Now this was a fun little challenge. Now I want to ask you, how did you feel? How did it feel when you were working together trying to get those cups moved and stacked just right? Were you feeling stressed? Did you feel a little anxious? Nervous? Did you feel rushed? Pressed for time? The purpose of this activity is to understand that in response to a disaster, stress, anxiety and nerves are a part of it.

Now, within FEMA, as well as CERT training, we don't like to use the word victims, we like to use the word survivors. In the event someone has a injury or broken bone or they are bleeding, your response is to be calm. You're there to help. You're there to assist. Being calm will help you really take control of the situation. I know in the training unit 7 is called, disaster psychology, and they take an even closer look at the human emotion and what you are experiencing exactly in those type of disasters or emergencies. Every unit is rich with information but the training is definitely beneficial to help you learn about yourself.

We noticed, too, that disaster supply links have even changed. I have some examples over here of some of the tools and supplies that you might want to have on hand should you want to be involved with your community emergency response.

All right, perfect timing. We should prepare for a disaster before disaster happens because we do know that emotions can get in the way. So with emergencies, whether it's weather-related, hurricanes, floods, fire, even your own home whenever the fire alarm goes off, over a simple fire or smoke in the kitchen, you need to have emergency supplies, a kit, something on hand. Not only in your home but in your car.

You need to have it with you wherever you go, especially if you're going on a trip. What if you're going camping? You might think about those things to have when you're camping but any time you go on vacation or on a trip. You might not think it's necessary but it's always good to have it on hand and be prepared. You never know when you might need it.

When we're talking about your home and you have been alerted that a hurricane is coming and as you know, category 1, 2, 3, Cat 4 is when we know we need to begin our evacuation plan. Oftentimes that leads to long lines of cars in traffic. There are things you can do to be prepared. There is the 511 App that actually is a satellite linked to all the traffic cams in your area. So you can know what the traffic looks like before you decide to get on the road. I often use the 511 App. If my main route is jam- packed then I can take a different route.

There is also another App called Gas Buddy. I use that one often. I'll tell you from my own personal experience, in 2017, during hurricane Irma, I chose not to evacuate. I remember looking at the news and all of the warnings but also seeing the traffic. So I decided no the to leave during the day. I decided I would leave and drive through the night. I left my house at

10:30 at night and as I got on to the highway, it looked like it was rush- hour traffic. It looked like it was 7:00 a.m. all I could see was red taillights for miles. It was a true traffic jam. All my planning was for not. However, all of the side roads were blocked off. You think oh, I'll just take this back road, a shortcut, but on the other side of the highway, I saw a lot of the emergency trucks and electricians out there because there were power outages.

It was a good thing I had an extra tank of gas in the trunk of my car. I was prepared. Because so long it took me to get through traffic, as well as the distance I was planning, I mean it looked like a Woodstock concert for miles there were people waiting in line! And at every exit, many of the hotels were already sold out and the gas stations were out of gas. So I remember as I made my way north, I got about as far to Macon, Georgia, I pulled over to a gas station that was open and I assumed they would be out of gas as well. Fortunately, for me, they were not. Filled up my gas tank, toned my way north, made it to Atlanta. So that was my evacuation experience in 2017.

What a learning experience it was for me to be prepared. So I share that with you as well.

Supply kits. Now, some of you might want to put your own little kit together. They come in all shapes and sizes. Maybe you want a bag with wheels that's easy to role. Some of you might want a see through backpack so you know what is in there because at some places there might be security and clearance or bags aren't allowed through in certain situations. And you can see all the variety of supplies, tape - - I'll show you one of mine.

So the green bag I got free from the CERT training that I had attended. Everyone that participated in the CERT training got a green bag, including a hard hat and reflective vest. Also included gloves and markers, which is a really nice addition to my kit. I actually leave it in my car and it's there at the ready at all times. This blue bag is my own personal emergency disaster kit. But it's for my outdoor activities whenever I go hiking, biking, Jiu- Jitsu - - those are one of my side hobbies as well. I have everything I need. Like a knife, having a knife on hand. A fire starter kit. I have a whistle. If I were to call out for help, you know, if I'm injured, might not really have it in me to yell. I have got a whistle. Flashlight. I also have my own personal flotation device for whenever I'm out on my paddle board. You never know. A storm could come along and carry me out to sea. I have a flotation device on hand to keep me safe. So it's always better to be safe than sorry.

I have two disaster supply kits.

Okay, let's talk about bleeding. There are different types of bleeding and arterial bleed is the most serious and will have the most loss of blood. You want to apply immediate pressure and I'll take any volunteers that would want to try it with the pool noodle. I won't ask anyone of you to volunteer your arms so no humans will be injured in this activity. We'll use a pool noodle. Who wants to give it a shot? What that kind of pressure is to stop the bleeding feels like. Come on up.

You might wonder when this PVC pipe is. This is the bone. This is the arm - - come on over. The noodle is the tissue surrounding the bone. So let's just pretend that there is blood. This is an open wound. Blood gushing out. You need a clean cloth and you would apply direct pressure with both hands, one on top of the other. Do not remove your hands until EMS, your Emergency Management Services medical team arrives.

So go ahead, apply pressure. More! Now keep holding that pressure on to that artery until your emergency medical team arrives. They will take over and it will look something like this.

They'll give you a nod. You can remove your hands. Their hands will replace yours in that same place.

Let them take over again an arterial bleed is a very deep wound that punctured the artery. You want to keep your hands and that pressure consistent until help arrives -- let's look at venous pressure. Those are the veins. We have a capillary bleed. Those are more superficial wounds but the arterial you have to keep an eye on, because your survivor if they are bleeding out and there is no pressure applied, they could go into shock due to loss of blood and you certainly want to avoid that if you can.

I don't know if you ever noticed a life-threatening wound such as these on this slide. Oftentimes you might see that clean cloth or dressing that you began with becomes soaked with blood. You continue to apply more on top of that. Sometimes you might even want to use the gauze for packing. But you don't want to get the blood on your skin so it's very important to wear gloves if you have them. Again, as a volunteer, if you're the first to arrive on the scene, that's fine but don't do anything further other than apply pressure until a professional arrives.

So as you just saw in the activity, apply direct pressure.

Now I want to talk about tourniquets. I have one I can show you. In the CERT training, this was given as an option to use as a turn kit tool but it's a last resort. You want to wait until your emergency medical team arrives on site because turn kits must be used properly. You want to make sure they are taught correctly, nice and tight to control the bleeding. This one is blue but they do come in different colors, black and orange as well. Black is often used for tactical, police or S.W.A.T. teams. Blue is for training. Orange has a separate purpose as well.

So if you do become a trainer, use the blue so people are not confused. The blue color denotes it's for training purposes only.

So for those of you that are ready to sign up, this is how you can register for CERT training. I have taken a screenshot of the website here. The link will take to you this page. You have to create a new account. When you do, make sure that you use your primary e-mail address because these CERT trainers will use that as their primary source to contact you.

This will then open up to a demographic page where you'll include your name, address, they want to know what county that you live in because not every county offers CERT training or has CERT trainers. For example, I know Pinellas County, Pasco county, maybe even Volusia, but I'm not sure about St. Johns County. I did look into St. Johns County but I wasn't able to find any training there. So look at the neighboring counties such as have Lushia county. That's where you can go on site -- Volusia -- and register in another county if it's not offered in yours. And yes, other EOC, Emergency Operations Center providers, the local fire departments, Schafer, you'll have a chance to meet those leaders in your community.

Schafer --

This other link is a PDF and I'll show it to you. I have got my own notes that I put together. That can be very helpful as well.

Now there are a total of 34 slides here. I'm not going to go through all of them. But this is simply to help guide you through the website and the process of registering for this training. So first, you'll see different training dates that are available and they are divided by region and county. And again they are free of charge. You can't pass up free, right? Free is free.

Resources. More links. These are resources that you would also find helpful. This one is 270 pages. And this is it in print. The training manual. This is the link to it digitally. It is a PDF.

Once you register for the CERT training, I strongly recommend that you download this link, the training manual, because then you can bring your own laptop or a tablet and use that in class for each unit. That way, you can also peruse it before the training and know what is to be expected of those three days.

Get ready. I love ready.gov. They provide a nice checklist for you to have the supplies on hand or even a kit. And what to do in case of an emergency, not just for yourself, your human family members and also your pets. And then the FEMA website, there are other emergency training courses provided through FEMA.

So please, I share these resources with you because they are excellent sources of information. That closes my presentation. I'm open for questions. Chris?

>> CHRIS: Can you explain again what happened to you with - -

>> JENNY: Go ahead and talk, Chris, I have interpreters. Thank you.

>> CHRIS: Explain what happened to you when you tried to register and they canceled because you did not have - - provide an interpreter for you.

>> JENNY: That's right. Yes, I did mention that earlier in my presentation. When I did register for Pinellas county's CERT training, it was in the City of Seminole. I was thrilled that training would be provided there. It was listed on the CERT website. I did get in touch with the POC there and told them I was deaf. But when they found out the cost of interpreters for me to have access to this training, they canceled the training.

>> CHRIS: Okay. I just wanted to explain what supposed to happen. The state, they receive money to provide accommodations. So if the City of Seminole - - and I live in Seminole - - if they just contacted the state CERT, they will be given money to pay for accommodations for you.

>> JENNY: And that is actually happened just recently in the last two or three years. Yes.

>> CHRIS: I'm certified also but my training was like probably 10 years ago and I don't know. Maybe now I'm timed out. I don't know. But, they are supposed to get money from FEMA.

>> JENNY: You're right. Thank you for sharing that, Chris.

>> DEBBE: Karen Goldberg says, does Hillsborough have it?

>> JENNY: Yes. Hillsborough county does have several CERT trainings and courses offered throughout the county. They do.

>> Public comment question: The disaster focus, hurricane, floods, things like that, are those going to be conducted - - or Pandemic- related issues, is that also involved in some of the training courses? I suspect there will be more of those upcoming through Zoom and those things - - other types of pandemics we might experience in the future. I know it's only beginning now and there is a search for vaccines and would that all be handled?

>> JENNY: That is an excellent question. Since the Pandemic, they have been able to still provide that 21- hour CERT training and probably have made the modifications on how they are providing the training since it was likely not on site. But that's a good question.

>> GLENNA: Do the CERT and SERT, is that county- based or city- based? Who can request training?

>> JENNY: Again, excellent question. Florida SERT CERT is the state emergency response team. And they are responsible for the entire State of Florida. Once you go into SERT's website, you can find the CERT community Emergency Response Training broken down by county.

>> GLENNA: So there is a city in Palm Beach County that has been working with deaf people, a lot of deaf people live in that town or outside of that town. I wondered if the city could ask for a combined training or it has to be at the county level?

>> JENNY: Good question. I would check with the city and see what they offer. The county, for sure would offer training but check with your city. Chris?

>> CHRIS: If you're talking about Boynton Beach.

>> GLENNA: Yes.

>> CHRIS: They have CERT. I know that. But also when I did the training a long time ago like 10 years ago, one of the first goals was to train interpreters. And at the college, we trained 75 interpreters around the State of Florida. So that was supposed to start and kick off. People were working with the Deaf and Hard of Hearing community. But that was just a one- year contract with the state. So, hopefully, it's going to continue and what Jenny and Aqi is doing is awesome. So thank you.

>> JENNY: Thank you, Chris.

>> DEBBE: Lisa Schaefermeyer says, yes, all 67 counties have these programs and their PowerPoint slides will have share and link theirs to find a local program.

>> JENNY: Yes, it does, thank you.

>> GINA: Is there a minimum number of participants to set up a CERT training?

>> JENNY: Excellent question. I recall when I took the training in Pasco county through the EOC, Emergency Operations Center, there were about 50 people there and 35 showed up out of the 50 that had registered. I don't know if well other counties put a cap on that. But that was my experience.

Okay. Anything else? Thank you so much. I really do appreciate it.

>> GLENNA: Any more hints on activities?

>> JENNY: More hands on activities in you want to do more cup stacking challenges?

>> On the call: Can we set up CERT training at the next council meeting or does it have to be county- specific?

>> JENNY: Well, you can. You can work with us - - I'm happy to work with you - -

>> On the call: Nevermind, I can't hear you.

>> DEBBE: We can hear you, Mary, you just have to talk a little louder.

So repeat your question, Mary.

I'll type it in the chat. Mary, repeat your question.

>> CHRIS: This is Chris. To answer the question, I think that she was asking. She was asking if the council could do the full training. And just remember, the full training is 21 hours. So, it would be more than a full council meeting.

>> DEBBE: I'm sorry, Mary, I thought it was you who asked the question.

>> On the call: I was asking the question. So my question is, because I have never done the CERT training. Is it 21 hours of live in- person training or are there 21 hours of some self- study and live?

>> JENNY: It is 21 hours in- person face- to- face training on site. 21 hours. 3 days, 8 hours per day. Some counties offer two weeks with three hours every evening 6- 9 p.m. Monday- Thursday for a two- week time period. The three days is typically over a weekend with the 8 hours per day. Or it can be split up into three Saturdays, an 8 hour day on 3 consecutive studies but the 21 hours must be completed hands on.

>> GLENNA: Caller, can you identify yourself, please.

>> On the phone - - at a council meeting. Thank you very much.

>> GLENNA: Caller, can you identify yourself please.

>> KAREN: I have identified myself three times but I don't know if you can hear me. This is Karen Goldberg.

>> GLENNA: We got your question but didn't get your name it's all clear now. Thank you.

>> DEBBE: One person asked, lease Schaefermeyer said AQI has intended to set up a 3, 3 day training for interpreters to be involved to get the continuing education credit. And then Lisa said, all live 21 hours, 7- hour days.

>> JENNY: That's right. Thank you, Lisa.

>> GLENNA: Stow seems what we should do is go back home to our counties and see if we can get something going with our county CERT program and encourage the Deaf and Hard of Hearing people to sign up for it. So I guess it would be a good thing to do, for us to make the first move to contact the CERT and see what we can do to work with them at home.

>> JENNY: Yes. And if you need any assistance in doing that, please feel free to reach out to me. I'm happy to answer any questions, provide any advice, tools to support you. But, yes, I'm glad you feel motivated to look in your own community.

>> GINA: Does the county have a database for deaf residents so they can contact them? Or do we have to individually contact each deaf community and get their interest?

>> JENNY: Great question. I work for AQI as their Marketing and Training Director and what we did in Pasco county, again, AQI partnered with them and out of all of the registrants we could see also their demographics, where they were located. So using that Registration link, I had it on the flyer - - I sent it out to our signing community, including the Deaf and Hard of Hearing community and our ASL interpreters. I advertised widely. I used social media, Facebook, because it was open to the public. So that was the way I was able to get the word out. And then you can see on the SERT website who all has been trained.

>> GLENNA: Once you get - - he mentioned that he was trained 10 years ago, training 10 years ago and you got your training a few years ago. How long - - is the training good for? Like for the - -

>> JENNY: I'm assuming I'm good for life. That's a great question.

>> GLENNA: Training refresher training?

>> JENNY: I thought I needed the refresher training. It's impossible to remember everything. And the content - - the training is quite intense. So it's always good to get a refresher. You could go back and talk with other in your community, ask questions as well. But good question.

>> CHRIS: I believe it is still active. I just have not currently been using it for the last several years so I'm not really sure. So that's why I said, it could be timed out. I'm not sure for myself personally. Jenny has been trained more recently. I would also definitely recommend, and I know AQI does this, where they partner with somebody that is a public safety professional, either a police officer or firefighter or EMT or something; because there is a lot of things that is involved in it. First- aid training, CPR training and things like that it's very important to get people that do it every day working with you. When I taught it, I taught it with a firefighter and of course my own public safety background in law enforcement.

>> JENNY: Thank you, Chris. Absolutely.

>> GINA: I'm in Jacksonville so if we were to set that up with our Duvall County, would you come and do the training? You would?

>> JENNY: Absolutely! I would be thrilled to work with you. I would love the opportunity! And I truly envision here in the State of Florida traveling to those communities because we want to see even personal growth. A Deaf person can become the trainer, like myself, in every county and community. So I'd love to see that happen here in the State of Florida. We desperately need more Deaf CERT trainers.

>> From the Public: Maybe you could talk a little bit more about AQI service. Is that interpreting referral service?

>> JENNY: Yes, we are a Sign Language interpreting referral agency for the Tampa Bay area. We do provide in- person community interpreting as well as VRI.

>> From the Public: Thank you.

>> GLENNA: AQI has the contract for council interpreting.

>> DEBBE: Any other questions on the chat or on the phone? Karen Goldberg says, great, I'm in Tampa.

>> GLENNA: Thank you very much Jenny, you might have some future trainers here, maybe. So we'll take a few minutes to look at the table?

>> JENNY: Please, help yourself.

>> GLENNA: And then we'll start the next session. But thank you!

>> JENNY: And please feel free to touch anything, open it up, pull it out of the bag. I'm here until 5:00. So yes, check out the table.

Thank you all so much.

[Break]

>> GLENNA: Okay.

We are back what was not supposed to be a break. We are going to go with the committee updates until 2:35. We'll start with the web committee, Debbie?

>> DEBBE: The web committee. We have 899 people liked our Facebook page. We also have 967 people following the FCC council Facebook page, which I think is a good number. We need to post all of the vacancy positions that are open. We need to do a better job of that. We also need to allow people to post announcements on what is happening in the different communities. So I think that would be good.

>> GLENNA: You also - - it's not official but you also manage a Facebook page?

>> DEBBE: Yes.

>> GLENNA: Any questions? EMOT is just education, medical, outreach and technology committee. Gina is here.

>> GINA: We have - - there is not new updates. We tried to schedule a couple of meetings but do to lack of participation or family, it did not happen. I contacted sinned tow ask for coming dates for this coming year so we can plan earlier and perhaps get better response.

>> GLENNA: We want to make use of that availability with CART and interpreters for the virtual meeting.

>> DEBBE: Karen Goldberg has her hand up. Go ahead and ask your question.

>> KAREN: Can you hear me? This is Karen Goldberg.

>> DEBBE: Talk a little louder. We have the mic over the phone.

>> KAREN: Okay, can you hear me right now?

>> DEBBE: Better.

>> KAREN: Okay. So I wanted to bring up an issue that came in the beginning of October, 2021. Florida Medicaid has passed a ruling that if a physician or prescriber is not a registered Medicaid provider --

[Someone else has joined the conference]

>> KAREN: Should I just type my question? Can you hear me.

>> DEBBE: We hear you.

>> KAREN: So if the physician is not a Medicaid provider, then Medicaid will not cover the medication prescribed by that physician or even a referral by that physician. The reason I bring this up is that -- and it may not impact this committee or council, but I think we ought to be at least be aware of it. I am a physician who specializes in treating Deaf, hard of hearing and blind- low vision but I'm not a Medicaid provider, that the point. I used to be when I was at the University but in my small, private practice, I am not.

So where it becomes an issue is that I get referrals to see Deaf and hard of hearing kids because I sign and because that is my area of expertise, but medications I order may not be covered. And so that becomes an issue about accessibility. So the kids would have to find another psychiatrist who would use an interpreter as opposed to going directly with me. That's just something I wanted the Council to be aware of, that it may impact people who have Medicaid who want to see a private physician for any specialty or any reason, that there is a new mandate. I can send it into the council for review but it may impact the Deaf and Hard of Hearing community in many ways.

>> GLENNA: Thank you, Karen. That is a concern that could affect the Deaf and Hard of Hearing community. Can you become a Medicaid provider?

>> KAREN: It would be a conflict of interest for me to be a Medicaid provider because of my other position with Medicaid. So that is kind of where the challenge is. But I will send this notice -- because it's not just about me. It's about other providers in the community. And I don't know if the Deaf and Hard of Hearing community is aware of the new change. It literally went into effect October 1 of 2021. So I'm going to send an e-mail right now to Issac -- I mean Sean. And he can send it to everyone so we can have it -- that link, so you can tread for yourself.

>> DEBBE: Thank you, Karen.

>> KAREN: I think the EMOT (?) Committee at least talk about this and see if there is anything that can be done. It may be that it's not a huge issue. I don't know how big an issue it will be for the Deaf and Hard of Hearing community in Florida. But I do want to put it out there, okay?

>> GLENNA: Thank you, Karen. But do send the information to Sean and that way we can share with the council and have all the background information. Imagine that people who are -- correct me if I'm wrong -- people who are on SSDI automatically -- and Medicaid -- so that would effect a number of deaf people like that. Thank you, Karen.

Next is Legislative Committee. You have in your packet a list of bills that are going through the committees now. Only one Bill is related to the Deaf and Hard of Hearing. That's the coverage for hearing aids for children. I think it's the third time they brought up this Bill. And I know that often a Bill has 3- 5- 7 times before they pass. We'll see what happens with this Bill.

The other Bills are not directly related - - well, the other one is HB55 or SB418 Assistive Technology Advisory Council. Changing things with the council including appointments and they are changing things to allow the Council to fundraising activities. So I thought it was interesting to see how they are making changes to the Council, which means that maybe we can make changes to our council. That's something to investigate.

The other bill is HB2109 and it's to donate money, again, for the auditory, oral intervention for children with hearing loss. This seems to be the same amount they gotten last year and the year before.

SB292 I thought was interesting because newborn screening law focuses mainly on screening for hearing. And they had added one more genetic condition to check for. Now this bill is trying to add another one. I'm concerned because does it mean they will continue adding things to be screened for and then it would dilute the importance of screening for hearing? Which is supposed to be the primary purpose of the screening. So that's something to watch.

HB221, SB388 Office of Diversity Equity and Inclusion and there is something else we want to watch to see if diversity equity inclusion, does that mean including people with disabilities, including the Deaf and Hard of Hearing and how they would go about doing that. That's another one to watch. I did notice that the sponsor for the SB is Berman, who is from my area. So I could contact her. Those are the Bills I was able to find so far. There is like about 3000 Bills. Any questions before I move on?

>> DEBBE: Any questions from the chat or the phone?

>> KAREN: No questions from me.

>> DEBBE: Great.

>> GLENNA: Now the other part of legislative outreach when we talked about this the last council meeting about writing letters on specific issues which was something to work with EMOT committee to try to move on, I made a list of every issue I could think of that we could write on to remember each letter be focused on one issue and I had to adjust that each council person take one issue to write a letter on it. I already wrote a letter and you saw the sample through the e-mail and wrote a letter introducing FCCDHH. So I'm wondering if you would like to pick an issue and focus on that one issue to gather information and develop the best way to contain in a one-page letter. Then when you're finished typing up the letter, you can go ahead and do it yourself or if you want feedback, share through the e-mail. Then go on line to my Florida health, or the Florida Senate, and start with your own home area you click on each representative, each Senator and click on the e-mail and then type in your information and then your letter. You just copy and paste into the e-mail and send it. You'll get an automatic response. Thank you we got the letter. We have so many, blah, blah, blah.

Maybe one day you'll get a real answer. All we can do is try.

Gina?

>> GINA: Glenna, will these letters be personal from each of us or from the council? And the reason I'm asking is because in the past, the Council had to approve letters sent out and then Chris said at one time that takes too long. Let's just - - whatever they do is okay. So these letters, how are they processed? Do they go through the committee or directly from the individual?

>> GLENNA: What does the Council think? I did a sample letter with the first paragraph was explaining about the Council in the second practical it would be the issue and then the third

paragraph is suggesting how to resolve the issue. And my sample letter was a little bit long and maybe needed moving around, but I know that some people on the Council have pet issues. So I thought instead of us trying to do it all, if one person does one issue, we can maybe get something done, get it moving. Trying different ways to try move forward.

>> GINA: Glenna, would it work if each individual who took their pet issue, wrote the letter, and then sent it to the EMOT for review to be disbursed to the database that Mary is establishing. Would that work?

>> GLENNA: What I'm thinking is each person takes one issue and writes it and then we just stick that paragraph in our format letter. Because we should have like a template letter and just change it for each issue and that's all. That way, we know how to do it from scratch every time. Is that clear to everyone?

>> GINA: That's a good idea.

>> GLENNA: Does anybody have a favorite issue they would like to volunteer to write a paragraph on? So we have the list in the folder.

>> SEAN: Glenna, where is that list in the packet?

>> GINA: It was e- mailed. It was e- mailed out to us earlier.

>> SEAN: It must not be in the packet. It must be in the e- mail then.
I could have left that out.

>> GLENNA: Okay, it wasn't included. All right, mask - - the list is not a complete list, there is many more. Mask communication issue availability of clear mask for usage. Interpreters and medical settings. Interpreters in government agency settings. Interpreters in educational settings. Interpreters in broadcasting and T.V. screen. Captioning on television. Captioning on Internet video. Captioning on videoconferencing Zoom. Captioning in telehealth. CART in educational settings. CART in conferences and meetings and 11 texting. Ensuring coverage for hearing aids. Interactions for police officers. Communication Access in prison. Employment opportunities access. Loop system in public audience places. SSP for deafblind. Communication assessed in FEMA activities and services. We have more to add or - -

>> DEBBE: Gina.

>> GINA: Glenna, I will take the interaction with police officers or the communication in prison.

>> GLENNA: Two? Great.

>> GINA: You said just a paragraph and stick it in yours. I can do that.

>> GLENNA: Those of you not confident in their writing paragraph, you can just start a draft and we'll help working on it with feedback.

Or if you have another issue with related to children and families.

>> JOHN: I just want to make sure I understand what you're saying. So everyone is just writing and inserting it into a letter that will be coming from the council and not from the person who is writing that paragraph?

>> GLENNA: Yes; because if you read the statute, we are supposed to have the responsibility of advising in connection with other agencies and government. So we are supposed to be sharing information. So we do that with the biennial report but we need do do it in a more different way.

>> GINA: Glenna, I had sent to Sean to ask nim we could get- together on December 9. So that might be a target date for everybody to get their paragraph in and then we could have a quick review to see how it worked out.

>> GLENNA: So you want to set up -- a Committee Meeting on December 9 for EMOT committee and then that would be coming out a deadline for people to volunteer to write one paragraph on what the issue is and one paragraph on suggestions for solutions and send it to Sean.

>> GINA: Correct.

>> GLENNA: To share. Okay, so we'll make this -- I make this homework from the last meeting and it's homework again. Okay. So we'll send out the list of issues and you can add other issues and I would like to see -- we only have 6 or 7 people on the Council so if each person takes one or two issues, just write one paragraph T doesn't even have to be a beautiful written paragraph. Just get that information in there. We can pretty it up. We will pretty it up later.

>> JOHN: I will take the interpreters in government and agency settings.

>> GLENNA: Okay. Thank you.

>> GINA: Send to Sean. Do you have the template?

>> JOHN: Did you send out the template.

>> SEAN: The template was sent out, but I can resend it.

>> JOHN: Date?

>> GINA: Before December 9.

>> JOHN: One sentence a week?

>> GINA: He said he is going to write one sentence a week?

[Laughs]

>> DEBBE: I can probably talk about the loop system in public places. I can probably write something about that. I think it's important for all of us to make sure we write to our representatives about the text to 911. I think that's the most important. I know that all of it is not covered. Have you been following up on that? Because the last time we heard that only 37% - - 37 counties out of 67 have been completed with text to 911, unless the number has changed -- Chris do you know what the number is?

>> CHRIS: I'm not sure what the exact number is for the counties at this point. I do have a website that shows the most updated. I'll try to share that with Sean sometime in the near future.

>> GLENNA: The letter would not only go to legislative but it would also go to different organizations like, for example, captioning on broadcast and T.V. screens. It would go to the state organization of broadcasters. ABA or something like that. So hopefully the state organization or the state association would encourage the members to improve so not only legislators but also state organizations too. Agencies, and whatever. Like interpreters in medical settings. That would go to AHA -- no -- FH -- the Florida Hospital association, whatever that is. We would send a letter to them too.

It's 2:40 so we need to stop and take a break and get ready for our panel, who should be showing up soon. So it's your break time. There is kit- kats and water bottles over there.

[Break]

>> GLENNA: Okay, we are back from our break. Andy and Kelly Lange will explain how they set up their own business and the challenges they face in being successful in their business. Andy?

>> ANDY: Should I speak from here? Good afternoon, everyone. My name is Andy Lange. I live here in St. Augustine, Florida. I was born elsewhere and moved here at the age of 8. And I had good jobs before starting my own business but my company required me to move to California and I did not want to leave Florida, so I decided to stay instead.

So what is it? I found myself wondering what to do next. And I decided to set up a travel business specializing in cruises. And I learned that that was not a very easy thing to do and that's because people who run the cruise lines, like Royal Caribbean, for example, Norwegian, carnival, while they are willing to provide interpreters for cruises that leave from the United States ports, they are not very willing to provide interpreters for their trainings or for anything else for that matter. It has to be related to the ship itself and the people on the ship. They will provide interpreters only for those itineraries leaving from the United States ports.

So as a travel agent, I took their training programs from the various cruise lines. All these were provided on line but there were no captions. There was also no signing option. And so I was just trying to pay as much attention as I could reading the lips of the people who were talking and when it came time take the test, I was guessing. I thought I did pretty good. I'm a pretty good guesser, I managed to pass the test so I guess so.

I mean some of the answers were pretty obvious, but I did struggle and especially on some of the tests, I remember some would take me 5- 10 minutes and others 2- 3 hours because I had to keep going back and trying to catch the answers from the videos.

So I reached out to the cruise lines and I said, you need to improve your accessibility. You need captioning. And they said, we will. We will. We'll take care of that. And they kept kicking the can down the road. Luckily for them, I took a look on Google and used Google Chrome as my browser and found a video with automatic captions. That really saved me because now instead of taking 3 hours to answer a test question or to fill out a test, it took me maybe 30 minutes.

So overall, I think it comes down to the attitude of the people running the cruise lines. One person in particular told me hey, Andy, if this is what you're facing, this was somebody from carnival cruise line -- and carnival was the Business Development Manager I was speaking to at the time -- they said, Andy, you know at carnival we have to sell 68,000 rooms every week. 68,000! How many of those are sold to Deaf people, I wonder? A small fraction.

And I said, well, regardless, you still have an obligation to provide these services. If only one person were going, you're obligated to provide accessibility and services. And so I fought that fight almost every day with these cruise lines. But again, it comes down to their attitude.

So, the reason why I'm here today is to share with you my experience of what it is that I faced. And again, I have done pretty well with the business that I have established. Things are going well. Except for the last two years, of course. With no business, basically. But things are starting to pick up once again. People are starting to book cruises and starting to go on with these itineraries so things are looking better.

You folks are the Florida Coordinating Council. You report to the Governor and I feel that the more exposure to Deaf people, the more exposure of what it is that we need in terms of effective communication, participation, being a part of the group. Often we are an unseen people. And I try to make known to people, look, I'm Deaf. I use my Cochlear implant all the time. And sometimes people see that and they recognize that I'm Deaf and sure, that can help.

It's a visible signal but I want to see things improve. So I'm talking about exposure, education to businesses at large, which is why I'm here. We need that access.

It was about a month or two ago when I attended a conference in Washington, D.C. and it was the - - what was it called? It was the M enabling. M as in Michael, enabling. It was a large conference. Several company representatives went. And we listened to presentations and what came about was the Number 1 issue facing Deaf people are or really anyone who has a disability, the Number 1 issue is accessibility.

Many companies today are willing to hire a person who is Deaf or a person with disabilities so that they can meet a quota when it comes to diversity. However, they are not really providing access once they hire these people. So at this M enabling conference, that message came across loud and clear. Again, we found ourselves talking about access. And I realized how true that is.

So, I will continue to fight the fight by exposing these cruise line representatives to fight for Interpreting Services, for captioning. I find myself often talking to people about making things more accessible on the ship itself like the shows, for example. Where are they putting the interpreter? Off in a corner somewhere while the main show is up on the stage so you have to play tennis match looking back- and- forth? They often say we can't put them any closer.

It's a matter of educating these people about proper interpretation. So thank you, members of this council for being on this council. I hope to help in any way that I can and letting you know I'm here, available and ready to take any questions you may have.

>> GLENNA: Thank you for presenting. You mentioned that your full- time job caused you to go into the travel business. Why did you pick travel business, not some other business?

>> ANDY: Well, dimy homework. I did research - - I did my homework. This was about 12 years ago on the cruise line industry. And at the time, the fastest- growing industry was cruise vacations. So I picked that because it was an easy thing to do as well. I communicate with the clients often about what trips are available, help them to book, get them on to the ships and on their way, which is relatively easy for me compared to escorted tours, for example, trying to set up land tours and things like that. That's a lot more leg work. It takes a lot more effort. And so often you find yourself going with them. But with cruises, it's a lot more set it and forget it.

>> GLENNA: You mentioned the challenge you had working with people in the cruise business. What about working with the Deaf customers? Was there some misunderstanding or education you had to do with the Deaf customers?

>> ANDY: Yes. Cruises can be very simple if you know what to expect. If you have never been on a cruise before, then yes, it takes a certain amount of education, training people, teaching them about what cruises are like. What you can and can't do onboard, things like that. So most of the time it's not really a problem. Most people, you know, they know me. They see me every day. So the people who call me I deal with them and other people who have never heard of us, I tell them as much as I can. I share my knowledge with them. But honestly, that's true for hearing people as well. Not everyone who has been on a cruise before - - a lot of first- timers. So there is a bit of education and explanation. I tell them it's basically a floating hotel.

>> GINA: Andy, you said something really important when you said you hope the Council gives more exposure to the Deaf community. In my experience, Deaf people have more respect for Deaf people and giving information. So I'm wondering from Glenna and from Sean, I don't know if it's okay to videotape these presentations, becauseige they are very important in terms of

exposing the Deaf community to what other Deaf people are doing and the successes they are having and I don't know how that would work - - but if they don't mind and if we don't mind, can we do that? Glenna is going to kill me.

>> GLENNA: I don't know. Maybe this will be a good topic for the futt tower set up some kind of expo or something to show Deaf people different opportunities if they become entrepreneurs or something like that.

>> CHRIS: This is awesome and we should always invite Deaf people to come that work or that own Deaf businesses. And I think this could be a new idea or concept for us to bring into every council meeting. Even if it's for a half hour.

>> GINA: I'm not trying to like be fancy, I'm thinking of just putting like the presentation on Facebook. Like if we just - - like take what they are presenting and just post it on Facebook and then Deaf people can see and they become interested in the council. They say, wow! Successful Deaf people! So I wasn't trying to be like fancy but just - - I did it on my phone. I wasn't going to post because I didn't want John to get me but - - but if it's okay, then I will just post it.

If we can, John, I don't know if that is legal - -

>> JOHN: I'll have to get back to you.

>> SEAN: I'm not an expert in that type of law. I do know that if someone is being video recorded more than likely they need to sign a release. So it would be, if the video of the individual presenting may be only they would need to sign the release. If someone else is captured in that video, then you might want to get a release for everybody who attends the meeting.

>> GINA: Do you have any releases in your pocket?

>> SEAN: No, I don't.

>> ANDY: How about at the next meeting then?

>> CHRIS: Again, when we finally got approval to have a Facebook page, it was of the understanding that it was not owned by The Department of Health or the State of Florida and we could post on there pretty much whatever we wanted. So as long as we have Andy's permission or other people's permission, I don't see a reason why we could not. In addition to that, we do have a disclaimer on our Facebook page that says that this does not necessarily reflect the thoughts of the State of Florida. So it should be fine.

>> GINA: So do we have your permission?

>> ANDY: Yes. Absolutely.

>> GINA: Thank you.

>> ANDY: And you know, I think there are a lot of Deaf business owners. I can certainly try to encourage more to attend. You know, people who do cell phone repair, for example. You know, why not get them to come here and talk about it? We can certainly get more people, especially if you have a meeting on a Saturday.

>> GLENNA: Government doesn't work on Saturdays.

>> DEBBE: I was thinking that maybe we could have a spotlight of the day or spotlight of Deaf businesses or something on Facebook page, what we call spotlight of the month and then we keep you on there for a while and then change it to other people.

>> GLENNA: Maybe we could work with the Deaf business owners to work on making a home video, short 3- 5 minutes, whatever, as a video project. And we could post it on Facebook. I think that is something we could do.

>> ANDY: Actually, you know what you could do, if you have a Facebook page, you can make a post and encourage Deaf business owners to videotape themselves and then they can post it on your page.

>> GLENNA: We have another project.

>> ANDY: Add it to the list.

>> CHRIS: Andy, if you know other people that would want to do this, you could always ask them to just e- mail the Council and just give us the video and we could post it on our Facebook page.

>> ANDY: Sure.

>> GLENNA: And we could also start a directory of businesses owned by deaf hard of hearing, Late- Deafened, deafblind people and start a directory of Florida. We can try that and see how much we can gather, people we know who own their own businesses, whether it's full- time or on the sideline.

>> ANDY: That sounds like a good idea.

>> DEBBE: Anybody on the chat?

>> ANDY: Thank you very much.

>> DEBBE: Anybody on the chat or phone have any questions?

>> KAREN: That was an excellent presentation. Thank you very much.

>> ANDY: You're very welcome.

>> GLENNA: Then we have another one. Kelly? Welcome, Kelly. Kelly has done different jobs and now she's doing real estate. So explain how you got into real estate and the challenges you face.

>> KELLY: Yes, hello, everyone. My name is Kelly. I'm from here in Saint Augustine, Florida. I'm originally from Iowa so I'm a transplant. I lived here for about 13 years. I have had several different jobs. At one point I worked for ATT relay. I did that for about 15 years in New Jersey. And then I moved into communication services for the Deaf in South Dakota in the marketing department and the communications Director. Then I moved to Florida and I was working as an independent contractor with several different telecommunications companies. Mostly in relay services but all of it had to do with accessibility through relay services, which I'm sure all of you are familiar with. Now I made the switch over to real estate. And to be honest, it just kind of happened.

I had a friend who was a broker, worked for a small brokerage company and real estate business. So this was just a friend of mine and oftentimes I would refer friends of mine to her when they were in the market for a new home. And she would ask if I would help by interpreting or just providing some kind of lip reading assistance with these clients. And through that process, I became fascinated with real estate as a business and took some on line courses and initially just did it for fun. It was just an on line course. So no big deal.

And I noticed with these on line courses they would often have videos with lots of talking heads and no captioning. The content would still be listed in a PowerPoint slide so I could read that and get what I needed from it. It was just a lot of reading. Just going through tons of these PowerPoint slides and I eventually just ignored the videos because they were just restating what

was already in the PowerPoint. But it did make me think, okay, yes, if I were a hearing person, though, I would be listening to this person speak about what was in these PowerPoints and enhancing it. And I noticed that it would take me longer because I was trying to get all the information just from reading it. And it seemed to elongate the process.

I did pass my real estate exams. I went through the course, which surprised me at first. And then I moved on to take the State Board exams. You just go into a testing center and take the test and if you pass it, which I did, you can move on to working in real estate. So I went back to my friend and joined her as a realtor in her business.

And the vest history. It's been a wonderful three years so far. I have been fairly successful selling and buying homes to buyers and sellers. I would say the most challenging aspects, though, Number 1, by far the largest challenge is functional equivalent services. What is that phrase mean? Let's say I meet a buyer and we agree to close with the title company. Now, I'm there to facilitate that closing. But someone involved in the situation might say, you know what? I can sign. I don't need an interpreter. I'll take care of it myself. That makes me very nervous because it's not fair to the seller or buyer. They may not be getting all the information they should be getting they would normally get through an interpreter. They might just be getting the bear bones. And someone is thinking that they can save money by providing or trying to communicate themselves. But they are not really providing the right information. And now you created a separation between yourself and the client.

So functionally equivalent means it's one opinioned% access to communication, not just quote/unquote -- good enough -- 100% -- not just an effort to save money because you're not really providing the right kind of service. And that's why it makes me very nervous and that's why I educate people not to try to do that, no the to take it there own hands. I recently went to my eye doctor appointment and what happened was things didn't go as well as they should because the physician's assistant was sitting there, who is a CODA and had deaf parents and knew how to sign. But what this person kept doing was telling me that their parents were deaf, they were going to sign and at first I thought, well, that's nice. They introduced themselves. So nice to meet somebody who can communicate with me directly. But I said, that's well and good. I would still like to use a professional interpreter who is here with me during this appointment. I want to let her do her job.

And I was shocked by the fact that this person went along with it. This coda was willing -- coda was willing to let this interpreter do their job. Why aren't we advocating for interpreters to provide the services that they, as professionals can provide, that functionally equivalent experience? It's a matter of protecting your business and protecting your livelihood and your reputation by doing things the right way. It really covers both parties.

So my role as a realtor has very much been challenged by educating people, that's the challenge I see is educating people about providing equivalent services, by a certified qualified interpreter, not just quote/unquote good enough. I mean real estate is a weighty transaction. You're talking about a huge investment and this person who is getting into a situation with a title company, for example, they have a responsibility as a company to provide services. So when it comes to providing those services, it needs to be taken seriously. And sometimes they will say that they want to pass the cost on to the buyer or the seller and I have to tell them, absolutely not. You, as the entity, as the organization, are responsible. NAD has a practice paper that outlines the responsibilities. So in real estate courses, and I saw one in Jacksonville, where

they educate people on the requirements. You have to, as a realtor, reeducate and re- up your license every two years. It's important for them to cover these things.

The interpreter is just trying to get clarification, one moment. We are talking about a real estate course. And I know that there are other Deaf realtors within the State of Florida so I said, why don't we try and put together a course where all of us can attend at the same time, receive services simultaneously? The interpreter needs to clarify. The Board wanted to get all the - - [Clarification]

So those providing the exam wanted to try to arrange for other Deaf realtors to re- take their education at the same time. That meets their interests and their goals but of course this very individual - - you choose electives within this re- education course that suit your particular business and rather than lumping us together as if we all shared the same interests, I wanted to have the same functional equivalent experience that a hearing person would in terms of choosing my own coursework, and not being lumped in with others simply besides a disability. So it's about having a competitive advantage. So my education gives me that competitive advantage and I wanted to be successful on my own matters and choices.

So those are some of the challenges I face as a deaf real estate professional.

>> GLENNA: Thank you, Kelly. I had a question - - so your biggest challenge is other businesses, not directly involved with you. Like the title business and the training providing interpreters. You have not had a problem in working with other real estate agents? I mean did you run into anybody who went, you are Deaf? I can't work with you. It has happened?

>> KELLY: Yes, it happened today. Something like that happened today. I recently listed two homes on the market just yesterday. And so, I had to put it in the MLS, multiple listing service, along with instructions that said, please testicley only testicley only. It's just easier if they contact me on text.

I did have an agent who had a buyer who was interested in one of those properties call me on my Video Phone number, calling me through the relay service, who didn't know that there was an interpreter on the call. So when this person called me, and I answered and said hi, this is Kelly Lange, how can I help you? This person had a buyer who was interested in a property I listed. And so of course there were naturally some questions that came out of that.

Suddenly, things changed and this person said wait a minute, I'm so confused. Who is this person I'm talking to? Am I talking to Kelly? Am I talking to an interpreter? What is going on here? And so of course I had to educate them on what it means to work through an interpreter through the relay service and not to worry. And they said, I wish you would have put that down in your MLS notes. To which I had to say, okay, and I explained my side of things. But most people don't have a problem with it. They manage to assimilate. So it's just, you educate people as needed.

There are a lot of people out there who will say they don't want to work with someone because I'm Deaf. So you do encounter some of that prejudice and you work your way through it as you encounter these situations. I will say one of the other challenges would be hearing buyers or agents who don't want to work with me simply because I'm Deaf. Well, I mean, that's their preference. Most of my clients are either Deaf or hard of hearing. I have had a few hearing clients who are very open to working with me. We communicate through text back- and- forth or e- mail and it worked out just fine.

>> GLENNA: Way back in the 1980s, I did real estate part- time.

>> KELLY: Really?

>> GLENNA: For three years, part- time. And I was teaching full- time. One of the things that scared me about real estate is the other people would not following doing everything correctly because Florida is a very strict about real estate. You have to make sure you cross your T and dot your I and everything. And the other real estate was just messing things up. Are you still seeing that?

>> KELLY: Oh, yes.

>> DEBBE: Gina.

>> GINA: First of all, Kelly, great presentation. Do I have your permission to post a video? For the record?

>> KELLY: Sure.

>> GINA: And the second thing is, I appreciate what you said about the coda respecting professional interpreters. I'm a Late- Deafened adult and my experience for 30 years is trying to get my deaf friends not to use their children to interpret legal matters. It would be so helpful if - - I don't know how you do it if Deaf people could educate other Deaf people, that yes your children are wonderful and yes they sign and yes you trust them, but there is a certain emotional aspect that is inherent in medical situations and legal situations that a non- related person should be the one to interpret. That would be really helpful. And the last thing is, you dance when you talk!

[Laughs]

>> KELLY: Thank you.

>> GINA: It's like my camera was doing like this!

>> KELLY: Sorry about that.

>> GINA: It's wonderful. I got your signs.

>> DEBBE: One person on the call, Karen gold ber says it's illegal for families to interpret. That's correct, Karen.

>> GLENNA: What would you like to see to improve in the field of real estate either from the businesses you deal with or other real estate agents or the Deaf people that you work with?

>> KELLY: Videos. Anyone can post videos. That would be much nicer to have those videos captioned. That's one thing for sure. I'd also say be okay with hiring a professional, certified - - I reiterate, certified, interpreter. Those are the first two things that come to mind.

>> DEBBE: Are you aware of other Deaf people that are involved in real estate?

>> KELLY: Yes, I know about five in the State of Florida.

>> DEBBE: Okay. Great. I know two.

>> KELLY: I mean specifically talking about Deaf realtors, right? I'm not talking about ASL friendly realtors. Those are people who can sign but who are hearing. I'm dancing again, aren't I?

>> DEBBE: There is one whose name is - - they are twin brothers.

>> GLENNA: Sherry Cohen.

>> KELLY: Yes, she deaf - - Jerry Cohen.

>> GLENNA: I'm assuming that there is a difference in what Deaf and hard of hearing people look for in a house or a home compared to hearing people, like Deaf space kind of thing.

>> KELLY: Oh, yes. Oftentimes they like homes that have a very open, spacious kitchen. A lot of sight lines so that you don't want that sort of standard boxy room arrangement. It's really

important where the walls are located. Oftentimes they'll say can I take this wall out? Is this a load bearing wall? Can I create a bigger wider space here? So visibility is key. Angles, sight lines. Of course electricity so they can have appropriate smoke alarms and other devices that will have plenty of power. Especially with these new building and construction codes. Sometimes I will go with someone and while they are building a new home they'll say, what can we install providing alarms like a strobe light? Can you provide this special kind of alarm? One builder said absolutely, we'll take out all the standard ones and put in lights. Others say, this is considered an enhancement. So you have to pay extra for that. Now is that fair? No, of course not.

I would love for the state, for the leaders within our state, to think about Deaf and hard of hearing visual fire alarms and provide those as an equal standard as opposed to for-pay enhancement.

>> DEBBE: Eloise said that it is called a universal code and all builders know about it.

>> KELLY: Not all of them do.

>> GLENNA: Any other questions? Thank you. Thank you. Andy and Kelly you did a great job in explaining your businesses and the challenges. And it has shown us there are many Deaf and hard of hearing and Late- Deafened and deafblind people who have their own businesses and it would be good to find out more about them in the State of Florida.

>> DEBBE: Eloise said they should. That's their book.

>> KELLY: You're talking about the universal codes? I'll have to look into that. Good terminology to know.

>> GLENNA: Thank you. I'm happy to see we have a crowd there. Yes! Sean, we have a little bit of time to go back before the public comments. We need to finish the committee, the budget. We need to know about the budget, please.

>> SEAN: Okay, I just have two updates regarding the budget. As of September, the expense budget was 62,125 dollars. And the contractual services budget was 66,3\$87. That's it - - any questions regarding that? 66,387.

>> DEBBE: The HLAA Florida has created a communication card, one side says I'm Deaf, I'm hard of hearing. Communication tips. This was set up by the Wisconsin Health Department and I made some copies to give us some ideas as something we could do in Florida. So I have 10 of these. So I'd like one for each of the Council Members to have one.

Also, HLAA wanted to have something so that in case you have a stroke or something or can't communicate with the ambulance, this one is for the hospitals to indicate whether you don't feel good, you lip read, you need an interpreter. Yes, no. I have one for each different symbol. Council Members please take one of these.

And then this is for EMS. It has all the different pain levels. EMS for the pain levels and if you have allergies or any weapons or pain and each Council Member can have one of these. This is something that HLAA is doing as a project that we received a doe nation and that - - so this is something that I feel strongly that all of Deaf people should have in their car or their home or something or all the police, ambulance, fire departments should have one of these kind of cards for communication. So if you have any questions, you can feel free to contact me.

>> GLENNA: Thank you, Debbe. These were all created by HLAA? Or different organizations?

>> DEBBE: We made copies just as an example of something that HLAA liked to create to provide for all the Deaf and hard of hearing people.

>> GLENNA: I know that there is a lot of different examples on line. The question of copyright or permission to pass them out. We have to check on that.

>> GINA: What about HLA- FL are they going to send this to like the hospitals and things like that?

>> DEBBE: That was one the possibilities, yes.

>> GINA: Thank you.

>> DEBBE: I hope this was helpful. I hope this will be useful and good.

Eloise said the card for the ambulance and the fire department and the EMS.

Make sure you have a set.

You can take them to Karen Goldberg and the others.

>> GLENNA: This is something we haven't talked about before and at home, the Deaf club at home talked about this also and FAD, the organization had talked about this too. I guess it's a matter of finding money to print out a lot so we can really pass them all out. And then getting into the hands of all of these different places that would use them.

>> DEBBE: Gina?

>> GINA: Can The Department of Health budget that? Sean, don't you have enough money?

>> SEAN: - -

>> GINA: Print these up and send them out?

>> SEAN: The Council has a budget for is that, depending on the cost of that, of course.

>> GINA: Especially when you go to the presentations like tomorrow, you'll have enough?

>> DEBBE: Yes.

>> GINA: Good.

>> GLENNA: So you brought a bunch for Saturday, for the DeafNation Expo to pass out?

Okay.

Is there anything else with the committee? Anybody want to ask questions or get a comment card?

>> GLENNA: Anybody on chat or on the phone want to add comments on have a question.

>> DEBBE: CART stopped but now it is going. Eloise, go ahead.

>> Eloise: Regarding the communication cards, I have near my chapter a speaker that provided those cards and we were allowed to make copies of them to distribute to each of the different emergency preparedness departments. So I made some and went to the fire, police, EMS, and asked them how many they wanted. They looked at them, made their request and then I gave them the amount of cards they wanted. They put them on their - - in their ambulances and fire trucks so that when they make their emergency responses, they have these cards available for any of the Deaf and hard of hearing people. They are used so that when people are unable to communicate, they have the cards available. So the police and the emergency personnel are very familiar with these cards because they have been in existence for some 20 years. They are easy to clean because they have the plastic on the outside of them. And so you don't need to give them many. It's just enough for them to use. And my plan was that they would be distributed throughout the state. So you have a copy from Debbe and you can take them to any of the different copy stores and make as many as you can and distribute them to your fire departments, your ambulance services, the police departments, EMS. They will gladly take them. And then have them use them. They will know what they are. You can write a little letter and say that the State of Florida is using them for the Deaf and Hard of Hearing. And I had

gotten thank you notes for their use. It's a plan that comes from your council but can come from the HLAA as well. It's a nationwide campaign.

I want to do that here as it's being done in South Carolina. That's where it's coming from. So that's one of my public comments. And I would appreciate it if you would follow- up on that. Thank you.

>> DEBBE: Thank you,el Weis.

>> GLENNA: Thank you,el Weis. This is something we can follow- up on. I want to make sure that we have permission to do this because I see the one is from Wisconsin. And this one is - -

>> Eloise: You have my permission because I was in Wisconsin and I was on the Council. And that is the card that we came up with. Now, we can create a new one if you want that is endorsed by your council instead of the Wisconsin council. So you can take this one because I was on the Council and that's my card. So I'm giving permission to use it. But if you want to make a facsimile of the same card, you can create a new one that has the Florida Council on it. And that is why I'm presenting it to you so you can make a new one that is like the Wisconsin one.

>> GLENNA: Thank you. Gina.

>> GINA: Eloise, do you have an editable template you can give to the Council?

>> Eloise: Yes, I have one that is like that. Yes, I had given it to our Deputy Mayor here but I have a regular one that is not - -

[Inaudible]

I can give it to Debbe.

>> GLENNA: Thank you, Eloise. Now it's time for a public comment and I want to call on Donna first to make her comment because she has to leave soon.

>> Donna: Hello, everyone. It's good to see some familiar faces again. I served on FCC's Florida Council years ago. Here I am again. I know some of you are probably rolling your eyes, not again, VRI? No. It's not about that. I'm here on behalf of the Deaf community, yes, VRI is new technology that we have to live with. We are seeing it more and more. Admittedly there are more and more VRI companies that are hiring better interpreters and have enhanced their programs. And what we have seen, though, is many individuals who are forced to use VRI don't know their rights. And I want to talk about their rights to communication when using VRI.

For example, let's say I go to the doctor's office and my doctor says, well, we are going to have to use VRI today, even though they know I prefer an in- person interpreter. Okay. We're going to use the technology. The interpreter comes up on the screen and it's a male. I have a trite ask for a female because I am a female and I'm going to talk about some issues that I don't feel comfortable discussing in front of another male. I have had instances where the male interpreter has argued with me about my request for a different gender. In response I said I'm not questioning your certification. I just prefer a female. And in those instances, when I have asked for a female interpreter, it ended up that instead of honoring my request, I had to reschedule my appointment.

Fortunately, though, it did work successfully. We hung up, we called back, two or three minutes later and I got a female interpreter. Statements it's a non- issue. However - - sometimes it's a non- issue. In talking with other Deaf and Hard of Hearing people like myself and asking about their experiences with VRI, they are still willing to tolerate the technology but I think what is missing in this education is our right to control the communication. And sometimes

VRI is not always the best fit. And maybe the interpreter that pops up on the screen isn't the best fit. I'll give you another example. Let's say you go to the bank and the teller that you get when you waited in line, just, we don't seem to click. I have a trite ask for another teller. It's a business transaction. Again, it goes back to what Kelly was talking about. Functional equivalent.

So I don't know if it's going to take a policy change or create something in writing that people do have rights to communication and it is within their control. Thank you very much. And yes, I do have to leave for another appointment.

>> GLENNA: Thank you, Donna.

Thank you.

Next person that wants to do public comment.

>> Were there any questions from the council?

>> GLENNA: Trisha.

>> Trisha: Hello. Most of your faces are new to me. I'll introduce myself. I'm going to dance like Kelly now. I'm going to plant my feet in one place.

>> GINA: Let me get you on camera, hold on.

>> Trisha: Let me fix my hair. I need to freshen my makeup. Kidding. My name is Trisha kid. KIDD.

I have been here since 1973 in St. Augustine, Florida. I worked at the Florida School for the Deaf and Blind and Flagler College. I taught ASL there. I have taught for 41 years total at both of those institutions. And I am a world traveler. So, today my comment is about access to communication and modern technology. I have to admit, CART, as we are seeing it today, is very new to me. But as far as accessibility, there is a business, Wally park, that I was with for a couple of years before COVID. Let me collect my thoughts.

I put down a depos bit a month ago -- a deposit about a month ago with Wally park, including my name and contact information and information about my car because I was traveling by plane. When I got to the airport, it was about 11:00 at night. The lot was empty and I was the only person there and the gate was closed. And there was no one working in the booth or in the office. There was a kiosk I had to use instead. So I used the confirmation that I had but it did not recognize it. So, I really had no other options. There was no one else on the premises and I couldn't even get my car out because the arm of the gate was down. So I had to use my credit card to leave the lot and I was charged again. Now I am Deaf. I'm female. It was 11:00 at night. And I didn't think about making a phone call. I have VRS available on my smartphone but at that moment, I was thinking about of how I was going to get out.

So I think it's the technology that we're using needs to catch- up to us in this day and age. I called my bank. I called Wally park to educate them. And I'm here to educate you and share my experiences as well. Thank you for your time.

>> GLENNA: Thank you. Thank you, Trish. I've had several experiences where I go into parking garage and it's not working right and I freak- out because I have hearing aids. I can hear and voice to talk but I have no idea what it's saying and with a Deaf person you have no idea if there is somebody talking out of the machine -- it's freaky. And plus not having to be able to get out. Next time, who knows. Come look for me.

You're right. With modern technology, using more and more voice recognition, more and more built- in and can become more of an issue for us. You're right.

Do we have more public comment?

>> On the call: Why were they closed at that time?

>> DEBBE: Who is talking, please?

>> Eloise: Why were they closed at that time?

>> DEBBE: The gate was down and there was nobody in the office.

It was late at night at 11:00 at night.

>> And there was no one on the premises. It was a machine talking to me.

>> Trisha: That was the only thing in operation. There were no people there. To provide service.

>> DEBBE: Okay, Eloise?

>> Eloise: That's fine. And you couldn't hear them? It just seemed kind of corny to me.

>> Trisha: The barcode on my confirmation did not work. I tried scanning it with that kiosk machine 3- 4 times and it wasn't working. So maybe it was the machine?

>> Eloise: That has happened to us too. And usually, the kiosk will have a telephone number or buzzer or some kind of device that tells you that you can contact somebody because any kind of parking facility will have an emergency or some way of contacting somebody. They can't leave you by yourself. And that needs to be reported to the county that they can't leave you there. Because you could have been attacked. That's poor Customer Service. And that needs to be reported to higher ups because you have been vacated - - or you have been left behind. I mean that happened to my husband and I too but we don't want to be left behind either because you're being held hostage to a system that is not appropriate. And your car, your self and the system has left you behind. And the system is not working for you.

And I make big noise when anything like that happens. And my husband does the same. So, I would write letters. I would let whomever know that you have been taken and robbed of your time, of your money, of the situation, and you could have been assaulted. I mean, there were a lot of particulars about this. And any other parking facility would have been better service if they had had somebody there, even if they closed at a certain time. But that seems kind of iffy as far as I'm concerned.

>> DEBBE: Thank you, Eloise. Please.

>> Sorry, I was waiting for the captions to catch- up. My name is marry an ANTAL.

I live in St. Augustine and I have been here for over 10 years. Not 10 consecutive years, but over the last 10 years, and you all know St. Augustine has the School for the Deaf and Blind. A large number of deaf children as well as deaf employees that work there and live in this area.

We also have non- FSDB population as well that live in this community and I'm not including Jacksonville in that number. I'm speaking of here. And since I moved back, over a year ago, litudes have my parents living with me. My parents are Deaf as well. And one thing that I noticed just in this last year is there aren't many Deaf senior services available. Where are they? There are none. I don't know about any hearing senior citizen groups or organizations welcoming Deaf senior citizens.

We do have small gatherings, dingo - - that meets once a month and it's a opportunity to socialize with each other, but really that is it.

And this having a community, a large number of Deaf seniors, 50, 55 and older and those of us that are up coming, almost of that same generation, I would like to see some kind of change.

Maybe a Deaf social center. Some kind of place where Deaf residents of this community can go

from time to time to gather. I would also like to see a place for our older Deaf people where they could have their own assisted living facility. Apartment building. I'd also like to see a nursing home. An accessible nursing home for Deaf seniors. I know the one in Ohio has done very well and in England too, but nothing here.

So my question for the council is, where do I as a citizen, start looking for those resources? And is it possible for you to take the ball and run with it? Can you recommend who I should go to to seek help? Will it require a petition? Many of those thoughts cross my mind but I don't really know where to start. Of course we need to start with one thing at a time. But that's why I'm here. I'm asking for your assistance.

>> GLEN: Thank you. I'm hoping that Mary is on the conference call. We have a representative on the Council. She is from The Department of Elderly affairs and the whole focus is on senior citizens and they have a big website with all the different services they provide, the State of Florida. Mary, are you on the conference call?

>> MARY: Yes, I am on. And I am going to send the information in the chat. It is for elder source, which is the area agency on aging of Northeast Florida.

And they are aware that the Council is meeting in St. Augustine today. So, hopefully I can get that information over. In fact, if you would like to give some information, contact information, I can have somebody contact you as well. But I'm going to send this in the chat.

>> GLENNA: Thank you, Mary. I'm starting the same project - - thinking about that - - we have a lot of senior citizens in South Florida also. And the senior citizens are a group that is getting older and older. And my first thought was the elderly affairs group and I plan to contact Mary to ask about where we can start too. I know they have a little bit of grant money that they could give to help start programs and things like that. Just a little bit. For example, I found one grant from Home Depot that would help with South Florida - - we have two Deaf clubhouse BCAD - - Broward County Association of the Deaf and PPCAD, Palm Beach County Association of the Deaf. They have their own clubhouse and they both need repairs. So Home Depot, apparently, has small grants where you can - - they can get the money and do some repairs. That is one example.

There is a lot of information on the website. And the elderly affairs does a lot of direct services. So I'm thinking about getting the Deaf senior citizen's name to register so they can get involved in services and at the same time, work on accessibility too.

>> Mary Ann: Great. Thank you.

>> DEBBE: Mary wrote down the elder source. The area agency on aging of Northwest Florida. 10688 old St. Augustine Road, Jacksonville, Florida, with the zip code and phone number. I will write that down for you and send it to you. And also the website.

>> GLENNA: She didn't see.

Mary from that department, she wrote in the chat. She is giving you the address of the local group here. Okay?

>> DEBBE: I think it's important that all of us Deaf people, hard of hearing deafblind, be a part of some kind of an organization called Deaf seniors of America. Be a part of HLAA. Be a part of ALDA. Be a part of something. And that way you'll be a more stronger voice to have some kind of action to be done. I know that Deaf seniors of America has been thinking about having setting up assisted living place. We were also talking about some of the people who will be willing to donate some monies to have a building be set up.

>> Mary Ann: Where would that be?

>> DEBBE: There is not one in Florida yet. But we had talked about possibly setting one up. I know that FAD had planned something.

>> GLENNA: A long time ago, FAD had a committee working hard, and I'm trying to have a contract with a company, management company, to build a building that could be ALF, assisted living facility, and part of it be a nursing home. But more of assisted living and everything. And they worked on it for many, many years. And it just fell through. That management company chose to do other things. Instead they did it in Arizona, New Jersey and they kept putting off Florida.

So instead in South Florida, again, this was one woman, a one- woman Army that worked on that. She started contacting local nursing homes as we had a lot of really elderly Deaf neme their 80's and 90s. She was contacting different nursing homes because she would bring them around to visit and right now, we have one called, Brooke Dale in Boynton Beach, that had a number of Deaf senior citizens. The numbers go up and down. The highest its been is nine and then they are back down to like four now. And it was something. They were not isolated.

That's the progress western able to make so far. It takes a lot of local effort - - that's the progress we were able to make so far. And contacting different places and trying to get them to pay attention and then working from there. Debbe mention the DSA. I don't know if you're aware. But DSA will have their National Conference in Fort Lauderdale in 2023 at the hard rock hotel. It's the hotel in the shape of a guitar.

That's the last week of June. I'm sure that's going to be one of the issues they'll discuss. But that is something that with the State of Florida, we have all of these different groups of really - - the biggest group are the senior citizens. They are a really big group. Thank you.

>> DEBBE: Eloise said perhaps a little house villages would work too.

Mary said the statewide website for the Department of Elder affairs and the website - - blah, blah, blah, and then so I'll give that all to Sean and we can put it on the website.

>> GLENNA: So, Mary Ann, you have a starting point. To look at the website and contact the local area and just start developing contacts and go from there. Because when you start doing contacts, you know that in the future, the number is only going to grow because as more and more get older and join. Thank you.

Other people want to make comments? Eddie?

>> Trisha: By the way, I wanted to add that I'm - - this is Trish. Sorry to just jump back in. I wanted to say that I'm a DSA for the south area, the southern region. So, I can also share some contact information with Mary Ann.

>> DEBBE: Yes, go ahead.

>> GLENNA: You're welcome to make all the comments you want all the way until 5:00.

>> Do I have one comment. This is Kelly Lange again. Speaking on behalf of the elderly, a sweet old woman living alone trying to help her out and trying to make contact with Meals on Wheels hoping that maybe they would provide food for her. It just seemed like they weren't providing anything for her. And I want wanted to make the call, waiting to get on the list and getting postponed month after month and still making calls, trying to get her on the listing. Identical again and it didn't seem that they were really caring - - I made the call again - - or they wanted to do anything for this person who was Deaf. There was no support. There was no

follow- up, no call back. Nothing. The second thing, there was another person who had come to visit her place and wanted to be sure she was safe and that was great. The case manager came and met with her. I wasn't part of that conversation to observe it, but she said the person came and they chatted and took notes and they were going to order some things for her shower to be safer, things - - just around in the place. And then the person writing back- and- forth didn't bring an interpreter. Never came back. Didn't bring an interpreter back with them. Just release for her to sign that everything was great but she was like no, I'm not comfortable signing this yet. You haven't really given me anything and she just felt that she needed an interpreter to be provided or someone who knows and specializes in working with Deaf to identify their specific needs. But there was nothing. And she just felt really worn out by the process and I'm concerned that is going on for our senior citizens throughout the community. That they are relying on these services that are not being directed or there is not resources available for them.

>> GLENNA: Thank you. I know that with the State of Florida is having a large number of senior citizens all over and I have heard that there are waiting list for a lot of different services. Not just because they are Deaf, there is just too many senior citizens. How many Deaf people are here in St. Augustine, would you guess?

>> KELLY: I don't know. 800, 1000, maybe.

>> GLENNA: I can't see.

>> KELLY: I'm guessing I heard people say just in chitchat, they are guessing maybe 700, 800. Could be as many as 1000.

>> GLENNA: Just in St. Augustine? Including the School of the Deaf?

>> KELLY: Nearby. What do you think? A lot. There are a lot of retirees as well. And still more moving in. That do want to live here, if you ask me. We have got the resources now - - the Deaf senior citizen, we need to make them available to save them.

>> GLENNA: So it's interesting that the State of Florida is always famous for a lot of people moving to Florida and since the COVID, even more are moving to Florida and it seems that we have just a few Deaf community centers. There is St. Augustine - - you consider yourself separate from Jacksonville, right?

>> Yes.

>> GLENNA: Because Jacksonville has a good number of Deaf people there too. We are talking about Jacksonville, St. Augustine - - Palm Coast has increasing numbers. Daytona Beach.

>> KELLY: Yes.

>> GLENNA: Then we have Tampa. Tampa Bay area. Orlando. Kissimmee. And then we have all of Palm Beach county and Broward County.

>> DEBBE: Lakeland.

>> GLENNA: So there is more and more Deaf community yarrs.

>> DEBBE: Sarasota, manatee.

>> GLENNA: So we have been saying for many years that we have 3.5 million Deaf and hard of hearing here. We need to revise that number, maybe. 3 million Deaf senior citizens and then there is everybody else. No, no. Interesting.

June? Eddie? Do you have anything you want to share?

>> No thank you. It's a very interesting meeting.

>> DEBBE: Eloise says that self- reporting numbers, the figure is 1% of 3.1 million of the people who are hard of hearing.

>> On the phone: Always consider that for every 10 people that are hard of hearing, one is Deaf. And that is cross the world.

Those are the statistics by the W.H.O. So if you want to figure your percentage, you can check that out. For my comment, for today, I have done a lot of writing. I have done a lot of writing to the Governor of this state since I came from Wisconsin. I'm waiting for my audience with the Governor. But in the meantime, I have sent him and called his office for dialogue regarding the hard of hearing here in the State of Florida. I have been addressing to him many issues regarding everything you have been speaking of. Representation, accessibility, specialization of the services required for all of us.

We need state representation by the legislators to help us in pursuing what we need. Key focuses have been on all the issues that you would discuss today and tomorrow. I will continue to advocate for those who have little to no voice in issues that relate to what our needs are. In the commonplace that we have today, there are many issues. And I will continue to write, speak and stand for those issues. I am always available at your disposal. I will not take any position, as I am very busy with my Sun City Center chapter. I'm on the Council - - I'm on the Chamber of Commerce and the Ambassadors and I'm also working on issues around the house here. But I enjoy listening in on your council issues and if there is it any questions you know how to get ahold of me. Thank you for your time.

>> DEBBE: Thank you, Eloise.

>> GLENNA: Thank you. You have provided a good amount of information. Thank you for sharing information with us.

We library here tomorrow morning. - - we will be here tomorrow morning. Anyone going to DeafNation Expo?

>> Yes, ma'am, I'm going.

>> GLENNA: Kelly is going. FCCDHH will have a booth at DeafNation Expo on Saturday. So we - - Glenna and Debbe will be there on Saturday, DeafNation Expo. We have a booth near the stage.

>> We'll stop and see you.

Says Andy.

>> GLENNA: One of the issues that many of the board and council around the State of Florida had, we had a lot of vacancies on the Council and the board because they didn't have a person in an office to pay attention to appointments since 2017 and now we have a new person in the office and we are looking for applications to fill all the positions on the Council. There is supposed to be 17 people on the Council.

There is like 9 of us left and there is 6 that are here - - 7 that are he. To give you an idea of the different positions that are vacant, I represent the Florida Association of the Deaf. There is supposed to be two of us. We need one more. Well, maybe two more. I'd be happy to retire if I can.

HAAA Hearing Loss Association of America is supposed to have two. We have one - -
[Someone left the conference]

>> GLENNA: Then we have the Association of Late- Deafened Adults, that's Chris. And then we have the deafblind association, the Florida Deaf- Blind Association. It's been vacant. Vicky?

No, Vicky cooler - - blah, blah, blah seems like she might be interested. I'm hoping she will do the application. FRID, we have Gina. We have Alexander Graham Bell Association of the Deaf. That's been vacant. And sometimes that was a parent, sometimes it was a speech therapist. We have a parent of a child with hearing loss, vacant. And she, June, will be applying again for that. We have the Deaf Service Center Association. Now we don't really formerly have Deaf Service Centers anymore, or that association. And we're going to be discussing by laws tomorrow to see what changes we should make. What we have instead are CILs, 9 Center for Independent Living - - The Center for Independent living. And Cris is on the Council for that. And licensed hearing aid specialists. I asked someone to apply for that. I'm going ask her to apply again for that. The Florida Department of Education, that is Cecil bridally. Some of you might know him. He just retired - - Cecil Bradley. - - I don't know who is replacing him. We need to follow- up on that, Sean, to find out who is replacing him. And Cecil works - - the Florida Department of Elder Affairs, that was Mary you heard from. And the Florida Department of Children and Families is John. And then we have the - - it's not Shay anymore, right? That's Anne?

>> SEAN: You're correct. It was Shay. They are considering someone for that position. So you should be hearing about someone soon.

>> GLEN: So we don't have anybody there?

>> SEAN: Not technically right now.

>> GLENNA: Another vacancies? Then we have Sean is our temporary person until we get a permanent person. If any of you want to apply for that job, you can.

Do they have to live in Tallahassee for that job?

>> SEAN: I think the answer is yes, on that one.

>> GLENNA: Not much of a Deaf community or hard of hearing community in Tallahassee.

I know you had some formal public comment that you wanted to make or do you have any hot issues that the Deaf community is buzzing about?

>> ANDY: This is Andy Lange. I'm looking around - - let me move.

I think as I represent the buzz - - I think senior services, I think that I would agree that that is the Number 1 hot topic among us. It's very poor in the State of Florida. And yet we have such a high number of Deaf senior citizens and access. Access. Did you have a question?

>> GINA: Would it help - - I have a friend in Michigan who runs - - I'm sorry, I forget about these things. A friend who runs the senior citizen group in Michigan. They always have been very successful. It would it be helpful if I give you his contact information? He is deaf and he runs it himself.

>> ANDY: Absolutely, sure. Yes, please. Sure.

>> GINA: Thank you.

>> ANDY: And I can write on this card as well.

His name is Dale Martin - - Andy says I know him. I know him, sure. Yes, I would be happy to contact him.

Okay, thanks.

>> GLENNA: Eddie?

>> Eddie: This is Eddie. Hi, I'm new in the St. Augustine area. My name is Eddie LAIRD, and I don't have information so to speak from these guys who are long timers. But, I would like to see interpreting agencies represented on the Council. There are so many issues related to the

provision of Interpreting Services. I believe it would be nice to have someone on this council who could listen to the concerns of the people regarding Interpreting Services in general.

>> GLENNA: Thank you, Eddie. That's a good suggestion. We can discuss that tomorrow for the by laws. I'm not sure if I want to expand the Council. We have a hard time keeping the positions full.

>> KELLY: How often do you guys meet?

>> GLENNA: We are required to meet four times a year. Meet around the state. And we try have public comment time. And we are supposed to gather the information and report to the government. And we use that in - - you got the extra copies of the biennial report. You want to give them snout we do a biennial report every 2 years where we mention the top issues and make suggestions on what to do. And it seems like maybe for 2023, you might want to do something connected with the senior citizens because that is a growing issue.

>> DEBBE: Eloise says networking is the best.

>> GLENNA: And by networking, that would mean to start writing letters, calling your local government people - - whatever government setup you have. The Mayor or the Council people, the agency. Your house representatives, your Senate - - Senators. Get-together and create one letter that introduces them to the idea that there is a growing Deaf community and especially a growing Deaf senior citizen community. Write a short and sweet one- page letter saying, hey, we're here. And then maybe follow- up with a visit with an interpreter so they can see what a good interpreter looks like. And discuss the concerns. And you want to be very, very specific with the issue, not cover a whole bunch of everything in one letter. It should be very specific. And like with the senior citizens, you would talk about like getting - - I love that phrase that Kelly said - - what was that phrase? Functional equivalent access. It's a great phrase you used. Functional equivalent access. To the existing senior citizen services, they don't have to create anything new, they just have to add access. So if you could do a letter and visit to that one small very specific thing, you could maybe start the ball rolling.

It's the same thing we are trying to do with Palm Beach County. We found people in the City of Boynton Beach, we are trying to expand to other places too.

And I believe Sarasota has been doing things like that, HLAA in Sarasota has been doing that too.

>> GINA: I want to ask Eddie a question. Is the problem with the interpreters - -

[Inaudible]

>> Is the biggest problem with the Interpreting Services the quality of the services or the availability of services?

>> Eddie: I'm speaking more in Jen alts. The common concerns from the Deaf community. I suspect it does have to do with the growing numbers of interpreters produced by the local interpreter training programs. The quality is often not there when it comes to experience with the field. So that's a certain concern. There is also the concern of agencies that may refer out. So agencies often send in an interpreter that is not really prepared for a particular interpreting scenario. And we, as the Deaf community, don't really have teeth. We can speak to one another and complain about a particular interpreter or an agency but that doesn't really cause change - - or an agency - - I also noticed that many places need some feedback system so consumer back to agency. So, perhaps that would include a interpreter presenting a card to the consumer as a feedback, postage- paid card that would go back to the agency. Currently there

is just really no system of monitoring for the interpreting service provision. But again, I realize these are very general concerns. Did that answer the question?

>> GINA: Yes, you did. That answers it but I'm still -- a year ago we talked about improving the quality of interpreters and having a requirement for certification. And that failed miserably all the time. And that is why you get almost anything. So that was my question. The quality or the availability? Thank you.

>> DEBBE: Eloise says, your local newspaper also can go -- why not invite members of the legislature to the meeting in February formerly so they can hear firsthand.

>> On the phone:

[Someone's mic is on]

>> DEBBE: Person on the phone, are you muted or talking?

>> ANDY: This is Andy. I just wanted to make a brief comment about FAD. Florida Association of the Deaf. We went out to Tallahassee, about 10 or 15 years trying to get ledge similarities to pass a licensure and that never took hold. It failed year after year. And I simply don't know how much more we could possibly do at this point. It's been a tough battle. Very, very tough to get that passed. So I just wanted to put that out on the table.

>> Eddie: Glenna, you motioned something previously about setting meetings with local people, local representatives, and I think that one possible idea would be -- oftentimes if we could get hearing people to be open to us, we could cause change. And if they were open to us, we could cause change for them. So that's how we feel, right? And we don't know what accessibility looks like oftentimes. We don't have an idea, a concept of what true accessibility is. So maybe we can start with a common understanding about what accessibility looks like.

>> GINA: The Deaf population communities willing to get involved with the legislators and go to like the rally on tally? Most of them have never even seen a Deaf person. They don't even know it's a fear factor in there. And I think Eddie is very right that if -- or maybe it was Andy, whomever said that -- that if hearing people would become more comfortable and more open to the fact that people who are Deaf are people to and there is nothing to be afraid of, that happens when people who are Deaf get involved with the things that are going on in the hearing world as well.

>> ANDY: I have. I have been to the legislatures. I have been 5 or 6 times. I have sat in their offices. I have explained the needs. I have explained what interpreting licensure is. I have seen once again the smiles and the nods and the dismissals. Time and time again, I spent days with legislators, meeting after meeting after meeting, all saying boy, we sure agree! We should! We should! We should! Does it ever make it to committee? If it does, it gets turned down. And also, I would add what might help would be if there was an understanding of the difference between a certified interpreter and interpreter licensure. These are different things. A certification for an interpreter, meaning they have been to school and they have got a certificate, right? But that is not exactly making a person a trained, certified interpreter.

Licensure would require certification in their background, it would require training. For example, University of North Florida, UNF has an interpreter training program, as you know. Interpreters who train from that program come out really professional, ready to roll. They are ready to be licensed. But it's not happening here in Florida. It's not available in Florida. You can get a pet grooming license in Florida. But an interpreter cannot get a license? That to me,

is weird and strange. Maybe you can put that word- for- word in your report somewhere, how about that?

>> DEBBE: We have Eloise saying that I have that in Wisconsin. We fought hard in Wisconsin and won for the interpreters and Karen Goldberg wants to know why is that so hard?

>> On the phone: We fought for three years and I was on the Council in Wisconsin. We fought for three years to get the licensure passed with the legislatures. And like you had said, sitting down with them and showing them what was necessary. What had to go in the education. What were the differences. What had to be done in order to show them why we needed to have the licensure done. To show the differences between the different kinds of licensure and what was at stake. Between those that were in the hospital, those that were in the courtrooms, those that were done between families and all the different types of licensure that were there. And we have the perfect storm here in Florida. And this is a crisis. We have the momentum right now to actually take this forward for our legislators in to 2022 licensing. This is a perfect time to take this forward and tell them this has to be done now. And it can be done. I mean, you can take the template from Wisconsin and other states who have licensure for licensure for any of them. I mean, any perfect person can see that if you have - - you have to have licenses for doing the things you do. Not anybody can do this. Hairdressers have to have it. Nurse vs. To do it. Doctors have to do it. You have a special technique that has to be done through education. You have to have a certificate to do that. And we have to show him and them how that this needs to be done under their licensure. And it can be said very simply how it's done. And you can show the different states that they have done the same thing. It's just a matter of putting your heads forward. And the Council can say, we can do it and we can - - if nothing else, we can take one of your positions and put a licensure person in that plagues. It can be done and it was done. And it takes a little bit of work but I think if we have enough people behind it, and I certainly can write about it as well. Thank you.

>> DEBBE: Karen Goldberg wants to know why is that? And no license in Florida? And then she says, hairdressers need licenses.

>> GLENNA: There is at least three people, maybe more, that were involved in that fight for the licensing. We went to Tallahassee three times three years in a row trying to get that license.

>> On the phone: They need more.

>> GLENNA: Three things I know about that. Two things - - there were a small group of interpreters that were opposed to the licensing. So that did not help. Second, there was already a movement that the Department of Professional regulation was already trying to cut down how many licenses there were and they didn't want to add more. So we had some negative things that were influencing that. Andy?

>> ANDY: A couple of things in response to that. You might remember - - when Obama was President, he went to South Africa and there they had an interpreter standing next to him at the podium. Who was not an actual interpreter. It was someone who was investing gestures calling it Sign Language and called himself an interpreter. That became big news, right? So when I met with the legislators, I explained that, because they all heard that story. They all new, right, I remember that. That was important that that happened. But I guess in the end, actually they didn't care. Another thing that might help, is if there is some kind of law, rule, statute, if I go to a doctor's office and an interpreter walks in and interprets incorrectly information to me, which leads to a crisis, medical crisis or some other kind of emergency for me, I would typically hold

the doctor liable, correct? For that. Because the doctor was the one who brought in that interpreter. Well, I want to see some teeth somewhere. If the interpreter doesn't do a good job, who is really truly liable? The doctor! And I think that that kind of argument could really cause change. It could certainly cause change in the interpreters they choose because right now it's horrible. I went to the doctor a couple of weeks ago and there was a interpreter quote/unquote that was there that couldn't even sign. I said, are you certified? And the answer was, sort of. Sort of? Sort of? Who hired you? Well, you know, somebody in the front office called and - - we need teeth in this state. We need to hold somebody accountable. That's just my philosophy.

>> On the phone: Standards of practice - -

>> DEBBE: Karen Goldberg said, yes, I agree. You have your hand up Karen, go ahead.

>> KAREN: Can you hear me?

>> DEBBE: Yes.

>> KAREN: I hope I'm not screaming. My dog just ran under the bed so he thinks I'm screaming. Okay. I can say for sure as a physician, I am appalled that there is not a licensure in the state. And the issue of liability is very good question. I have worked with Deaf and Hard of Hearing patients for many years. Early on, my signing skills and even times now my signing skills are not enough for what that patient may need. When I have an interpreter there, I want to know for darn sure that what is being conveyed to me is accurate and what I am conveying is accurate. It's critical that the patient understands what I am saying about a medication, and it's critical for me to understand what is happening with the health condition. Several years ago, I did an evaluation on a youngster that I wasn't sure if this could be an Autism Spectrum along with deafness. It is critical that - - and I had a nationally- certified interpreter with me. It took 2-3 sessions to really get a clear understanding of what was going on. But that interpreter was critical in helping me to understand that this is idiosyncratic language, even for Sign Language. And to understand the language levels. And that was so critical, but still, I mean, I lucked out. I had a fantastic interpreter. But there is still no licensure.

And if I make a diagnosis, that could have lasting impacts on the medications I may prescribe or whether where the patient goes next. And I'm not sure as a physician if I can do anything to support licensure but it certainly is important. As a physician, I'm upheld to a state licensure as well as a national board certification. But the state doesn't board certify me. That's a national organization. The state licensed me and supervises or - - that's not the right word. They don't supervise me. They oversee. I have to meet certain standards to keep my licensure. So, I don't know. I think enough is enough. Having somebody who can sign is not the way to go in these medical situations. Sorry, I got on a soapbox. I'll get off.

>> GLENNA: Thank you, Karen. I think we all really understand where you're coming from. We heard either the experience or have heard stories like that. The quality of interpreting makes a big difference. Another issue I would like to mention is that one of the reasons we have problems of business or agencies or medical or whatever getting interpreters, they never think about the cost of getting interpreter and my favorite things to say is that, it's not a line item in a budget. They don't plan for it. If they did plan for a interpreter or accessible services, whatever that covers, then that becomes another business expense but because so many don't plan for that, they don't have the money and they don't - - think to include it. And I think that is one thing that we need to help them change their thinking about that when we talk about getting

interpreter and talking about getting access. Maybe at the same time to talk about yes, you have to pay the interpreters. They are not saint volunteers. They are making a living and they need to think about building in the budget money for interpreters and money for other accessible services. And I think that is one of the problems that a lot of businesses and medical places don't think about that. They think okay, building with ramps and buzzers on the doors. They don't think about ongoing services that goes on and on like interpreters or CART. And that's another thing that we have to educate them. You need to include budgeting for that. The Council here, we have budgeting for interpreting CART. That was set up from the beginning.

>> DEBBE: We have one person. Go ahead.

>> Trisha: Hello again. With all of this discussion, I had a thought. Maybe -- repeat what you said, please. Maybe where we're at fault -- I think that the fatality is that we keep blaming the Deaf people -- people are blaming and blaming but have no evidence to back up.

>> GLENNA: You mean they are putting the problem on the Deaf person not on themselves?

>> Trisha: That's what I meant.

>> GINA: Can Trish clarify that? Blame the Deaf people. What does that 17 I know when Andy was talking about the teeth. That's from the Deaf community. That's where the teeth come from.

>> JOHN: I think it's two different things.

>> Trisha. F what I understand, and let me make sure everyone can see me here.

Deaf people go to the doctor. The doctor provides an interpreter. The patient dies. The blame lies on whom? The Deaf person? The interpreter? The doctor? Who is to blame? Maybe the interpreter did interpret the information incorrectly. Maybe the doctor misdiagnosed or gave misinformation. But the Deaf patient ends up being the fatality and we are blaming the Deaf person and not the interpreter or the doctor who were the source of communication. I don't know. It's just hypothetical but anything is possible. Is that clear?

>> GLENNA: Are you saying that the business in medical are trying to blame the Deaf person?

>> Eddie: This is Eddie. I believe it's a scenario based on what she said, I could maybe give you other instances. Oftentimes I may understand the interaction but then whatever the situation is, something doesn't happen like it should and I get blamed. But I was pretty clear with my communication from the beginning, but then the responsibility still lies on me because I'm told, well, you misunderstood or oh, it was a miscommunication. But thinking to myself, no, I was pretty clear from the beginning, but I end up being the victim of the misunderstanding when it wasn't me that wasn't clear.

It was someone else in the room.

[Someone left the conference from the call]

>> GLENNA: Sort of like the blame game kind of thing. The blame game where they try to get away or get away with it.

>> DEBBE: Karen said I never seen that.

>> ANDY: Okay, I am going to change the subject. Okay, maybe not change the subject, interpreter, but I'm going to lighten it up a bit. Not all interpreters are bad. We have many, many excellent interpreters out there. And it's not those interpreters that we're talking about. It's those that should not be practicing or need more training. And licensure would certainly help ensure that.

>> DEBBE: Karen gold ber has a question. Go ahead, Karen.

>> KAREN: Okay, thank you, can everyone hear me? This is Karen.

>> JOHN: Yes!

>> KAREN: Okay, so I want to make sure I'm coming clear through to the speaker. First I want to thank everyone for everything they shared. I do support licensure. I think that hospitals and medical facilities are better at making sure that accessibility is addressed. It may not always match with the patient's wishes. And I'm reminded of a situation where all that was available was VRI, and it happened to be a friend of mine who was contacting me saying we don't want VRI. Call the hospital for us. And because I had privileges at that the hospital. I did call and I understood the situation much better that they had called like multiple agencies and there was no live interpreter available so they were utilizing VRI as an interim, not as the mainstay. But I think the hospitals are better at making those efforts and understanding the concerns. So we have to continue to get the message across. Okay. So having said that, I have never encountered a situation where a physician blamed the patient. Now I may be naive, but as a physician, I Neil it is my responsibility - - I feel it is my responsibility 100% to ensure accessibility and Communication Access to me as their doctor. And if there is - - I think if there is licensure - - it's at least easier on my part to be able to ensure I picked a good interpreter. I don't want know all the time, when you're on the phone you're saying, send a good interpreter. And who shows up may not be good. But I'm very clear. I want nationally certified. I want this and someone who has expertise in medical and mental health and that kind of thing. There is some subspecialties or additional certification to the best of my knowledge but that licensure would certainly help.

I would never blame the patient that I didn't get the information correctly from the patient T is always the physician's responsibility to make sure that we are ensuring accessibility and open and communication in the language that is the preferred language for that patient. And this goes for other languages too. I don't want to have somebody who is predominately Spanish speaking relying on me with three words of Spanish that I know. Or their child having to tell me. It's my responsibility to make sure I'm contacting an adequate - - I don't finish they are licensed, these - - I don't know if they are licensed, translation services. Every hospital has access to it and they are proud to say they have access. I would like to see them have a seal of approval, some kind of seal that they have, Sign Language interpreting, ASL certified. I would love it to be like that.

And that finishes my statement. And I hate to do this, but I have a patient coming in at 5:00 so I need to log off.

But I thank you so much.

>> DEBBE: Thank you very much, Karen.

>> GLENNA: Thank you, Karen.

>> KAREN: Thank you and I'll see you guys tomorrow morning.

[Karen left the conference]

>> GLENNA: It's almost 5:00 and I want to really say thank you to all of you that come to the public comment, especially Andy for pulling all the people here. Thank you.

In connection with the interpreters and doctors, I have noticed the last few times, not every time, but enough for me to go wow, is that I will call through VP to get an appointment with a doctor

and a few never thought ask me if I need an interpreter. -- or a few did think to ask me if I need an interpreter. What a change. That was nice.

>> DEBBE: I want to make sure that everyone signed the yellow paper from Sean. Make sure you all signed. We will greatly appreciate it.

>> GLENNA: You local people here, where is a good restaurant to eat out tonight? We meet tomorrow morning.

>> Casa Rihanna.

I say, the green papaya.

Kas Rihanna is a brand new authentic Mexican. Just opened. You said highway 1 what highway?

>> ANDY: The bridge of lions. If you go to town, it's right there on the right. It's a big white building, waterfront.

Waterfront building right there. Super nice place. Authentic Mexican, beautiful, brand new. The parking is not great.

A little challenging when it comes parking.

And someone sells saying, I always park on the other side of the bridge and walk it.

But the place is beautiful.

If you're in the mood for a burger or something like that, 1, 2, 3 burgers. Pretty good place. Walking distance. It's just across the way. You're sleeping in this hotel, right? It is literally footsteps away to a good burger.

If you were to go past -- is it now ho's? MOJO? So it's mojo's --

>> JOHN: Barbecue or tacos?

>> ANDY: It's a barb queue joint. So mojoings. If you walk towards Flagler College -- you can see Flagler. If you go across that street, it's just on the left across from the big cemetery. It's a big Catholic cemetery right across the street there.

Mojos. So go towards Flagler.

That's what we've got.

>> GLEN: Thank you for suggestions. I'm getting hungry now --

>> GLENNA: Council is adjourned. We will meet again tomorrow morning at 8:30.

[Concludes at 5:00 p.m.]

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