

**FLORIDA COORDINATING COUNCIL
FOR THE DEAF AND HARD OF HEARING
Quarterly Meeting
West Palm Beach, Florida
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9:00 a.m.**

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>> KAREN GOLDBERG: Good morning. And welcome to the quarterly meeting of the Florida Coordinating Council for the Deaf and Hard of Hearing. I will restart. Good morning and welcome to the quarterly meeting for the Florida Coordinating Council for the Deaf and Hard of Hearing. I am Karen Goldberg, Chair of the Council. I would like to welcome everybody here and start with roll call. Okay. We'll start with roll call.

>> SHAY CHAPMAN: Shay Chapman representing the Florida Department of Health.

>> MEGAN CALLAHAN: Good morning, Megan Callahan representing the Florida Department of Health.

>> CINDY SIMON: Good morning, Cindy -- is that on now? One two -- good morning, Cindy Simon representing audiologists. And believe it or not, for living in the area, it took me three hours to get here from my office yesterday!

>> CHRIS LITTLEWOOD: Good morning, this is Chris Littlewood representing the Association of Late-Deafened Adults of the Suncoast chapter. I live in Seminole, Florida and work for St. Petersburg College.

>> GLENNA ASHTON: Good morning, Glenna Ashton from Boca Raton representing the National Association of the Deaf.

>> KAREN GOLDBERG: Good morning, this is Karen Goldberg representing Hearing Loss Association of America from Brandon, Florida.

>> DEBBE HAGNER: Good morning, this is Debbe Hagner, I'm representing HLAA and also HLAA Tampa and also HLAA Gulf Coast.

>> MARY HODGES: Good morning, this is Mary Hodges, I'm from the Florida Department of Elder Affairs in Tallahassee.

>> SHAYLA KELLY: Good morning, this is Shayla Kelly representing the Florida Department of Health.

>> DARLENE LAIBL-CROWE: Good morning, this is Darlene Laibl-Crowe and I represent -- I am on the Council as an individual who is deaf-blind and also represent Florida Deaf-Blind Association.

>> KAREN GOLDBERG: Good morning and welcome to you all. I would also like to recognize the support staff. We have Lisa Johnston from CART services; LaShay as our AV technician; we have four interpreters today, Elaine, Earline, Vladimir, and Dale.

I also wanted to recognize that there may be people who are joining us online and on the phone. Is there anybody on the phone that wants to introduce themselves?

[No response].

>> KAREN GOLDBERG: Okay. Somebody may join in a bit later. I wanted to also recognize that there are emergency exits. We have -- I feel like a flight attendant right now.

[Laughter].

>> KAREN GOLDBERG: We have two -- okay, so you have two emergency exits directly to the outside on our far wall here. One at the front of the building -- of the room and one at the far end of the room. We also have two exits that go into the hallway of the Hilton.

I also want to remind everyone where the bathrooms are. When you walk out of this room, you go past the elevators on the far hallway and I believe on the right. Okay.

[Pause].

>> KAREN GOLDBERG: Okay. So, welcome to everybody. We also have a few members in our public comments section, so we're -- and from the public, we welcome them as well to this meeting.

All right. A couple of little housekeeping notes to keep in mind. Please wait to be recognized by either myself or the Vice Chair, Gina, who unfortunately is unable to be here today, and sitting in for her is Debbe Hagner, so be recognized by one of us.

Please remember to state your name before speaking so that the CART Provider can include that in the record.

Okay. So, any other questions or thoughts? Yes, Darlene?

>> DARLENE LAIBL-CROWE: The CART isn't working; this is Darlene.

>> GLENNA ASHTON: I bought some baggies of chocolate bars that I made last night, and you're welcome to have them over there. They're good.

>> KAREN GOLDBERG: This is Karen Goldberg, I wanted to go back to the issue of the CART. I have it up on mine; other people have it up. So, Darlene, what are you noticing is the issue for you? We want to make sure that there's good access to communication.

[Pause].

>> DARLENE LAIBL-CROWE: I'm not sure....

>> SHAYLA KELLY: The only thing --

>> DARLENE LAIBL-CROWE: The last thing that is -- this is Darlene -- the last thing that is mentioned -- that you can read on the screen is where Karen was talking about the emergency exits, about the hallway, and that's it.

>> KAREN GOLDBERG: Okay. This is Karen. So Megan's going to come around and take a look at that and will help you out.

>> DEBBE HAGNER: Lisa, did you want to say something?

>> LISA (CART CAPTIONER): This is Lisa, the Captioner. I think Darlene mentioned earlier she had an upgrade; perhaps that is slowing something down? I don't know. But I am monitoring the CART as well and it is working.

>> KAREN GOLDBERG: This is Karen. I have CART working as well.

>> DARLENE LAIBL-CROWE: I'm trying to go down and it won't go any further.

[Pause].

>> DEBBE HAGNER: We have Cindy -- okay. Nobody -- anything new?

>> MEGAN CALLAHAN: It's going now.

>> DARLENE LAIBL-CROWE: Okay. Thank you.

>> KAREN GOLDBERG: Darlene, how's that looking?

>> MEGAN CALLAHAN: It's going now.

>> DARLENE LAIBL-CROWE: It's working.

>> KAREN GOLDBERG: All right. Success! I'm happy to see that.

Debbe, you were mentioning you had something you were looking at?

>> DEBBE HAGNER: No.

>> KAREN GOLDBERG: Okay. You were checking the online? Okay.
This is Karen Goldberg. The next step that I'd like to address is the approval of the minutes from May meeting, May 10-11. You can find this in your binders, Section 7. I would like everyone to take a moment to review the minutes.

[Pause].

>> KAREN GOLDBERG: Does anybody have any questions about the minutes from the last meeting?

>> MARY HODGES: This is Mary. I participated by phone.

>> KAREN GOLDBERG: That was not documented in the meeting minutes?

>> MARY HODGES: No.

>> KAREN GOLDBERG: So noted. Megan?

>> MEGAN CALLAHAN: This is Megan. I apologize, I'll go in and fix that and I'll re-upload it to the website to show the correct participation.

>> KAREN GOLDBERG: Thank you. Any other comments, questions, or concerns as noted in the last minutes?

[No response].

>> KAREN GOLDBERG: I make a motion that we postpone the approval of the minutes.

>> DEBBE HAGNER: You can't.

>> KAREN GOLDBERG: I can't?

>> GLENNA ASHTON: You're not allowed to make a motion.

>> KAREN GOLDBERG: Okay, thank you. See, I'm learning.
I would like to ask for a motion to postpone the approval of the minutes until tomorrow when the minutes are updated.

>> DEBBE HAGNER: This is Debbe, I would like to make a motion that we accept the minutes as read and corrected.

>> KAREN GOLDBERG: Okay. The minutes are -- have been accepted -- all in favor, I'm sorry, all in favor of accepting the minutes?

[Hands raised].

>> KAREN GOLDBERG: Okay. So noted.
Has everyone had an opportunity to review the agenda for this meeting today?

[Pause].

>> KAREN GOLDBERG: Anyone have any questions, concerns, or comments about the agenda as it is noted?

[No response].

>> KAREN GOLDBERG: Anyone online or on the phone? Anyone?

[No response].

>> KAREN GOLDBERG: Okay. Does anyone want to make a motion to accept the agenda?

>> CINDY SIMON: I move to accept the agenda.

>> DARLENE LAIBL-CROWE: This is Darlene, and I second it.

[Pause].

>> SHAYLA KELLY: Did you have something you wanted to say?

>> DARLENE LAIBL-CROWE: I said I seconded it.

>> KAREN GOLDBERG: Terrific. Before we move on to the next area of interest on our agenda, I'm going to open it up and see if anybody has any questions about the meeting? Anything that was not put in the agenda and would like to address? Yes?

>> CHRIS LITTLEWOOD: I was just going to say, I think we got a motion and a second, but did we vote on approval of the agenda?

>> KAREN GOLDBERG: No, we did not.

>> GLENNA ASHTON: I told her we normally don't do a motion on the agenda, we just check and see if it's correct.

>> CHRIS LITTLEWOOD: It's sent as a draft -- this is Chris -- it's sent as a draft before the meeting, as we walk in and look at it, we're supposed to approve it as it is to continue and proceed with the meeting.

So that's what we're making the motion for and the second and then we should approve it moving forward. That's Robert's Rules of Order.

>> KAREN GOLDBERG: This is Karen. This is the opportunity that if there is something on the agenda that you want to address as far as a question or it needs more time or if there's something that was left off of the agenda that you want to be

addressed.
So please take a look at the agenda and let me know.

[Pause].

>> DEBBE HAGNER: This is Debbe. I think we need to mention something about the TASA, of the appointment for the TASA.

>> KAREN GOLDBERG: Okay. So Debbe, where would you put that? Where do you suggest it? Hold on one second.

>> SHAY CHAPMAN: I'm not sure of Debbe's specific question, but I did put a call in to our appointment liaison at the Department of Health before I left and I give that as part of the DOH update.

>> KAREN GOLDBERG: Excellent. So I'm going to make a note of that.

[Pause].

>> KAREN GOLDBERG: Okay. So at this time any other questions, concerns, or thoughts about the current agenda?

[No response].

>> KAREN GOLDBERG: Okay. And we had a motion and a second to accept the agenda, and I'm going to put it out for a vote.
Would everybody -- all in favor of accepting this agenda for this meeting?

[Hands raised].

>> KAREN GOLDBERG: So noted.
We're a bit ahead of schedule.
Yes, Chris?

>> CHRIS LITTLEWOOD: This is Chris, I just wanted to say, because Glenna wasn't here when we did the voting and everything, I know from being a past Chair of this Council, and I'm sure other people that have been the Chairs can say this as well, it can be very busy and at times a thankless position and I just want to say what a wonderful job Glenna did as the Chair of the Council.

And in kicking it off, you're already doing a great job yourself, Karen, and we're all here to help and support you.
So, I just wanted to make mention of that and give kudos to Glenna.

>> GLENNA ASHTON: Thank you.

>> KAREN GOLDBERG: This is Karen. Thank you very much, Chris, for saying that.

I cannot say enough about the leadership from both Glenna and Debbe in these roles, and I'm surrounded by them right now so they can literally guide me on how to step into

this position.

And I'm very grateful as well. So kudos to them as well.

And I brought TooJay's cookies as a thank you.

[Laughter].

>> KAREN GOLDBERG: I'm going to check and see if anyone is on the phone?

[No response].

>> KAREN GOLDBERG: We do not have any participants on the phone at this time.

>> DEBBE HAGNER: Do we need a quorum, Megan?

>> MEGAN CALLAHAN: Um....

>> CINDY SIMON: That's an interesting question....

>> MEGAN CALLAHAN: This is Megan. I want to say that because we have less active members, that I think we should have a quorum, right? I mean, even though it was 9 in the past, that was when we had, what, 16 members active? No?

>> CHRIS LITTLEWOOD: This is Chris. We do not have a quorum. And we have one, two, three, four active members that are not present and nobody on the phone. So that's a little problematic for proceeding with the meeting.

However, we're here, so what I would just say is we just don't do anything that we're voting as a Council and it's more like a workshop of the Council.

But when it's also open to the public and everything on the phone and hopefully some people will join us a little bit later.

But we don't have a quorum for our voting on anything. Because by bylaws, there has to be a simple majority, and with four absent members, that's not the case.

>> KAREN GOLDBERG: This is Karen. Can you clarify? That it has to be a simple majority? We have four absent members; we have seven active members in attendance.

I'll recognize Shay.

>> SHAY CHAPMAN: This is Shay Chapman. I'm referring to tab 3 in your binder, the bylaws, page 6, under Article 3 Section 4, quorum: A quorum of the Council shall consist of a simple majority, and then in parenthesis nine members of the council members. The active majority of those members present shall be active of the council. No member may vote by proxy.

[Pause].

>> DEBBE HAGNER: Repeat where the location is.

>> SHAY CHAPMAN: It's under Section 3 of your binder of the bylaws, page 6, under Article 3, meetings, Section 4, quorum.
But as Chris said, we can proceed with the meeting, as long as we don't vote on any substance business.

>> KAREN GOLDBERG: This is Karen. What happens if there are less than nine members serving on the Council?

>> SHAY CHAPMAN: Then I think it would go to the majority of how many are serving, but we would have to get clarification on that from someone in Legal for certainty.

>> GLENNA ASHTON: This is Glenna. It's my understanding that we can still do all the business and everything; it's just that when we vote on the motions, those would have to be carried over to the next meeting when we have a quorum.
The quorum counts for the voting part. But for the discussion things, it's okay.

>> KAREN GOLDBERG: This is Karen. So that calls into question the acceptance of the minutes and the agenda or does it not?

>> SHAY CHAPMAN: I think it's fine to adopt the agenda and the minutes and move forward.

>> KAREN GOLDBERG: Okay. Let's move forward then. So we're a little bit ahead of schedule and I would like to go ahead and keep going.
Let's hear from the Department of Health, the updates.

>> SHAY CHAPMAN: Hi, good morning, Shay Chapman, Florida Department of Health. I'm happy to be here. I think this is starting my third year working with the Council, and so I'm looking forward to another great year as we begin our work.

Thank you again to Glenna and Debbe for your hard work last year in serving the Council and we look forward to Karen and Gina's leadership this year.

My first update is regarding the travel difficulties we had last time, so we apologize for those difficulties.

As anyone who's worked in Government is aware, sometimes staff changes, rules change, and we had been told we had to go back into using the Go Travel system to process travel.

We know that that presented great difficulty for some of you, and so I did a pleading request to not make that happen, so we're back to paper travel. We apologize for the delay that you all had in getting your payments, but Shayla has the paper travel with her today, so we should be back to a speedy processing.

I will tell you, that sometime in the future, this travel system is changing altogether and there's going to be a new travel system for all state agencies [chuckles], and we're told at that time that paper will not be an option.

But what we have found out is that we can make proxies in the system, so, therefore,

someone in our office will be the proxy and they will process all the travel for you, so you will not have to go into the system.

So, just letting you know that's in the future. But for right now, we will stay on the paper version, and Shayla will get with each of you individually on break, at lunch, after the meeting, to make sure that she gets everything she needs to process your travel. We are getting ready for legislative budget requests -- oh, yes?

>> KAREN GOLDBERG: Chris?

>> CHRIS LITTLEWOOD: Just a quick question. And your apology upfront, it happens, and I appreciate that, probably because I do heavy travel on my business end [chuckles], you probably hear from me a lot on that front and I apologize for that. But it is important.

My only question is, I'm hoping that are we moving -- when you say we're moving to more paperless, is there hope for direct deposit or are we still counting on snail mail and paper checks?

>> SHAY CHAPMAN: It's my understanding that everyone has the option for direct deposit?

>> SHAYLA KELLY: Yes.

>> SHAY CHAPMAN: Shayla?

>> SHAYLA KELLY: Yes. This is Shayla. Everyone has the option of direct deposit. I just would need your information to send over, and I can follow-up with you on Monday morning to find out who would like direct deposit and who would like to continue to receive paper checks.

>> SHAY CHAPMAN: Okay. Thank you, Chris, for that question. The next point I wanted to cover was the legislative budget request. So we're at that time of year where the Department is preparing their legislative budget request to put forth to the Legislature, of course, for funding.

And as we know, the Council has not had direct funding for the last, I think three years, since I've been involved.

Although the Department still has the commitment to support the Council.

We will once again put forth the budget request the same as we have in the previous years. I moved that forward out of my office this week, so that will be the budget request, to support the meetings, the travel of the Council, as well as Megan's position, and possibly another position for marketing and outreach.

But, again, if that does not get funded, you know that the Department still has a commitment to fund what we've been funding for the last several years, which is the meetings for the Council, the travel, as well as Megan's position, and any other kind of needs, smaller needs that come about.

>> KAREN GOLDBERG: This is Karen. Shay, do we have a number of what we're requesting?

>> SHAY CHAPMAN: I don't have it in front of me, Karen. If I remember correctly, it's in the 200,000 range. I can get the exact figure, if you need it.

>> KAREN GOLDBERG: That would be great. We're also going to have the budget report later as well.

Okay. There was also a -- any other issues from the Department of Health?

>> SHAY CHAPMAN: Not from my end. Megan may have updates that she wishes to provide.

>> KAREN GOLDBERG: Megan?

>> MEGAN CALLAHAN: This is Megan. First of all, I'd like to say, as always, there is a restaurant list in the front pocket of your binders. Mainly all the restaurants are in City Place which is about a 2-3 minute walk, maybe, right across the street, so that's really convenient and nice.

Also I just wanted to bring to everyone's attention that the date for the November meeting has changed to November 15-16, and I believe on the agenda for tomorrow, we will be discussing the upcoming November meeting and the dates and locations and stuff like that so we can get into more detail about that tomorrow, if everyone would like.

>> SHAY CHAPMAN: I apologize, I did -- the appointment update, I know we have a lot of pending appointments that are with the Governor's office for application for renewal on the Council or renewal of appointments and I checked with our contact before the meeting and she alerted me she had called over and prompted them to move those appointments forward, but again, we're kind of in a transition right now. Although we don't have a new Governor, but things are changing and I'm not sure at what speed they will be.

We will continue to try to prod.

And if your organizations have members up for appointment, they can also call the Governor's Office of Appointments and check on the status of those as well, and maybe the squeaky wheel will get the attention.

>> GLENNA ASHTON: This is Glenna. To add to Megan, over at City Place, there is a Starbucks coffee, there is a Panera Bread and a Publix, so you can walk over there and save some money.

>> KAREN GOLDBERG: I wanted to go back to the appointments issue on the Department of Health. This is Karen.

Can you guide me in the bylaws as to where it states once a person's term ends and they have reapplied, what their status is? Where is that in the bylaws? If that seat is available?

Anybody want to be recognized? Yes, Cindy? Up is on.

>> CINDY SIMON: Just historically, you continue until someone is appointed to the place, to that spot on, you know -- unless you don't want to continue. But you are invited to continue to fill that historically, and I've been on this Council since 2008. They are typically slow in appointing people, and, hence, those whose terms have expired have the option of continuing to attend until such time as the announcements have been made.

>> GLENNA ASHTON: This is Glenna. Donna Drake represents FAD but she won't continue, so I'll have to remind FAD to call and try to get on that, because they had picked someone to replace her and sent in the paperwork, but nothing. But Donna will not continue.

>> KAREN GOLDBERG: Yes, Cindy?

>> CINDY SIMON: And so in the past, they've left it open, even if it was only one person with an application in there, until we have to keep bugging them about making that appointment.

Otherwise that just sits empty until such appointment is made, regardless of what's been submitted.

>> KAREN GOLDBERG: Okay. So you said that that is historical. Is it in the bylaws? That's my question.

>> SHAY CHAPMAN: Karen, this is Shay, there's not specific reference to it in the bylaws. However, there is a reference to the Governor's appointment policy and so I'm going to check to see if it's referenced there.

But Cindy is right, historically that has been -- and I've also asked our appointment representative at the Department if that was okay and I've gotten the verbal "yes" that that was fine for members who are re-upping their terms to continue to attend meetings.

>> KAREN GOLDBERG: Okay. Is that something that we need to update in the bylaws?

>> SHAY CHAPMAN: I would suggest at some point, yes. Probably not at this meeting, since we don't have a quorum, but at a future meeting.

>> KAREN GOLDBERG: At a future meeting.

>> SHAY CHAPMAN: Yes.

>> KAREN GOLDBERG: Okay. Yes, Chris?

>> CHRIS LITTLEWOOD: This is Chris. On that same subject, Shay, did you get a feeling that there's not going to be official appointments until after our new Governor is elected from the appointment office?

>> SHAY CHAPMAN: She did not say that specifically.

[Laughter].

>> KAREN GOLDBERG: Hinted at it?

[Laughter].

>> KAREN GOLDBERG: Alluded to it?

>> CHRIS LITTLEWOOD: Is it a feeling?

[Laughter].

>> SHAY CHAPMAN: Um.... I'm just going to speak from my experience, that a lot, you know, doesn't happen during this time of transition. But maybe we can get these pushed through before a new Governor comes on and we won't have a longer waiting period.

So I'll continue to work on our end or if your organizations want to work on it from that end.

>> KAREN GOLDBERG: Terrific. Thank you for that update.

I'm also not sure if this is the appropriate time, but I did want to address, since we're talking about appointments. There had been some question noted at the last meeting about the representative for HLAA whose term is expiring July 31, Debbe Hagner.

There had been some I think some difficult politics involved at the HLAA level and a letter was written about Debbe's involvement at HLAA state board level, as well as on the Council.

I am currently the new president of HLAA Florida State Board. I have reviewed all of the documents and information and with the executive team, determined that that letter that was sent to the Council and to the Governor's Office and the appointments office was inappropriate by the immediate past president of HLAA, Cynthia Moynahan, and the then-serving president Linda Tossoonian, I believe it is, indicating that Debbe Hagner was no longer eligible to serve on the Florida Coordinating Council for the Deaf and Hard of Hearing.

I have, with the executive team of HLAA, the new executive team, determined that that was inappropriate and we have sent a letter to your attention and Megan's attention and to the Department of Health that effective immediately, that letter by Cynthia Moynahan and Linda Tossoonian is null and void.

So that means that any active member of HLAA Florida who is determined and motivated and committed to enhancing services, rights, and access to all activities in the state of Florida through HLAA has an equal right to apply for the seat and that has been our determination.

Any questions about that?

>> CHRIS LITTLEWOOD: This is Chris. Beautifully stated. Certainly deserved for Debbe to continue; she's a very active advocate for people that are deaf and hard of hearing throughout the state, and I would love to see her continue in.

I thank you for making those comments and all you've done with HLAA, both you and

Debbe. Thank you very much.

>> KAREN GOLDBERG: Okay. Back to Starbucks. Just kidding.

[Laughter].

>> KAREN GOLDBERG: Okay. So, is there anything else that --

>> DEBBE HAGNER: This is Debbe. Is it appropriate to thank.... um.... the FAD representative, to thank her for her service, a thank you letter from the Governor or from the Council? Is that appropriate or not appropriate? Or just....

>> SHAY CHAPMAN: This is Shay. That's up to the Council. I would recommend a letter from the Council. I think we could get that done in a timely manner.

>> DEBBE HAGNER: Yeah, I think it would be nice to thank her for her service for three years or how many years she served, and as a thank you letter.

>> KAREN GOLDBERG: This is Karen, I agree. I know that when we were appointed, we get a beautiful letter from the Governor, a certificate, almost -- at least I framed mine.

[Laughter].

>> KAREN GOLDBERG: I was so excited to be appointed!
So, I don't know if they have anything on the outgoing side or not from the Governor's Office.

>> CINDY SIMON: Typically no.

>> KAREN GOLDBERG: No? Okay. Well, I guess I bought that extra frame for nothing.

[Laughter].

>> KAREN GOLDBERG: But I agree, I think a letter thanking the outgoing members of the Florida Coordinating Council for the Deaf and Hard of Hearing is certainly reasonable.

Before we move on, are there any other questions, comments about the Department of Health report?

[No response].

>> KAREN GOLDBERG: Anything online or on the phone?

[No response].

>> KAREN GOLDBERG: Has anyone joined on the phone yet?

[No response].

>> KAREN GOLDBERG: Yes, Chris?

>> CHRIS LITTLEWOOD: This is Chris. A quick comment on the thank you letters for past members, like Donna and others, and did an absolutely outstanding job as well.

However, I think there's a lot of other members that have done the same and we're kind of inconsistent as far as those thanks from the Council.

And it would just be a little bit concerning to me that there would be hurt feelings by others if they didn't receive a letter. I just wanted to point that out.

>> KAREN GOLDBERG: Yes, I'm, Cindy had her hand up first.

>> CINDY SIMON: I assume, based on what Chris said, that when you send a letter to Donna, you mean that any outgoing member of the Council, not just Donna.

>> KAREN GOLDBERG: Oh, of course.

>> CINDY SIMON: Which I think would allay that, Chris, I assume that's what you meant.

And when we put down to some letter being sent to each person ends their term and goes off the Council as a standard action.

I won't even suggest a motion on that; we can wait.

And I would like one more comment. As long as we're saying thank you to different people, I'd like to talk to Shay and her Department, having been on this Council back when we were with the Early Steps, and that was a home, and then moving around, and when we were moved to this department, there was a lot of controversy that went on.

But I want to say that this Department I feel we truly found a home and having been there since the first one, you guys have been nothing but gracious and wonderful to us. So I want to say thank you.

>> SHAY CHAPMAN: Thank you, Cindy, you are most welcome.

And for the -- I wanted to refer back to Chris's thing about the inconsistencies with the letters. I think we cannot make a motion, but just an agreement that moving forward as of this year, anyone who is no longer on the Council, that will be our process, of sending a thank you letter that's signed by the president.

>> KAREN GOLDBERG: I'm in agreement with that. Cindy?

>> CINDY SIMON: So if we're looking at that, another thing we might have is a certificate of service to give them. Then you can use your other little frame there.

[Laughter].

>> CINDY SIMON: -- afterwards!

But that looks like, it's a certificate of service and it sits on the wall.

>> SHAY CHAPMAN: We would be happy to provide those; this is Shay from the Department of Health.

>> KAREN GOLDBERG: This is Karen. We'll have to adjust the budget for that, for \$80 more.

[Laughter].

>> KAREN GOLDBERG: Yes, Chris?

>> CHRIS LITTLEWOOD: This is Chris. Maybe the best way to handle that, just so that it's a note that carries on to future councils, Megan, if you would put that on as an action item when we have quorum to put that as something stated for future councils to address, either in the bylaws or somewhere else, that outgoing council members receive some type of certificate or letter of thanks.

Part of the point of me bringing it up is one particular person in mind, Sherilyn Adler, she served as Chair for many years on this Council, and then when she finished, she left the Council.

And maybe I'm just forgetting or I wasn't here, but I can't remember that we gave a big thanks to her. And she was just very, very involved. Am I forgetting that, Cindy? Did we do that?

>> CINDY SIMON: I think we did say thank you. It was almost teary, like, "Bye, Sherilyn," after all of this. And she was very clear and has been doing other things and a big advocate for protecting your ears from noise damage within the middle school and elementary areas.

So, she is still active in the area; just on to other things. And we did say bye.

>> KAREN GOLDBERG: Yes, Debbe?

>> DEBBE HAGNER: This is Debbe. I was just wondering, what's happening with the other people who are not here? Do they have a legitimate excuse? The people that are not here. I mean.... go ahead, Megan.

>> KAREN GOLDBERG: Megan?

>> MEGAN CALLAHAN: This is Megan. I know in the past, especially the August meeting, we've always had, at least since I've been here, less of an attendance because of maybe vacations, school starting back, things like that. So, I believe that was --

>> DEBBE HAGNER: But don't we have to recognize the absence of the people, like those people, that they're absent?

>> KAREN GOLDBERG: This is Karen, you're absolutely right, Debbe, we should have done that in the welcome. But I do recall that Gina said it would be difficult to attend, I think she had some school

commitment. Tomorrow is the first day of school for many people in different counties; my daughter is actually starting school tomorrow as well.

But, yeah, let us please go through and document who is not able to attend today. That would be Gina Halliburton, Cecil Bradley is unable to attend. Jump in there and remind me who else is on.

>> SHAY CHAPMAN: John Jackson.

>> KAREN GOLDBERG: John Jackson is not in attendance today.

>> CINDY SIMON: Debra Knox.

>> KAREN GOLDBERG: And Debra Knox. And I want to clarify that Julie Church's term has ended and that seat is now vacant as well, okay. And Donna Drake, as we had mentioned, her term has ended.

I'm thinking of one other person, and I apologize... who else is not in attendance? Can anybody help me with my memory? Is that the four that are not in attendance?

I think everybody's commitment has been very strong to this Council, so if they're not here, they have a legitimate reason that they're not here. I don't know if we have a policy on how they let us know ahead of time? I think, Megan, you always ask and....

>> MEGAN CALLAHAN: This is Megan. I always ask for a head count for the meetings and that's when people will tell me whether or not they're able to attend.

Sorry, Chris, just one more thing. Speaking of that, moving forward, if we could get a head count at the latest, you know, two weeks before, if everyone could know, if everyone could let us know up to, you know, two weeks before the meeting, so that way Shayla can prepare the travel. Obviously the sooner, the better.

But I think moving forward, we need to make it where you let us know, you know, within your -- up to -- what am I trying to say? -- two weeks before the meeting would be the cutoff [laughs] if people can let us know if they are traveling and how they would be traveling.

>> KAREN GOLDBERG: I think that's reasonable. Any other comments? Glenna?

>> GLENNA ASHTON: Yeah, I'm looking at the list, and we have 11 active members and 6 vacancies, so out of 11, that really is a majority, so we do have a quorum, because we have 6 vacants that are not active, so we should go by the 11 that we do have. So if we have 7 here, that would be a majority, so we can say we have a quorum today.

>> KAREN GOLDBERG: This is Karen. As an active council, some of these seats are not affiliated with agencies. Some are, we can go to the agencies and put it out there that there are vacant seats, but some are individuals in the community.

So how do we best reach those individuals to try to fill the seats? Chris?

>> CHRIS LITTLEWOOD: This is Chris. I had a few questions and I'm forgetting at least one of them.

But one that comes to mind is I know that CART Provider position has been open for quite some time. Do we know if there's applications in the appointment office for the CART Provider position?

>> SHAY CHAPMAN: I do not know what appointments are at the Governor's Office, but I could follow-up on that, or maybe we can next week.

>> DEBBE HAGNER: And the other one was FRID, FRID, Florida interpreters.

>> KAREN GOLDBERG: Yeah, okay, so that one should be easier. Because you just go to the agency.
Yes, Chris?

>> CHRIS LITTLEWOOD: This is Chris. Gina holds the FRID position until 2020, I believe. So we're okay on that one.

>> KAREN GOLDBERG: Yeah, I thought that, I thought Gina did. Okay. Yeah, Cindy?

>> CINDY SIMON: So one of the things we may be able to do, and, again, from a historical perspective have done, is there's been times when it took so long, people sat -- did have applications, so maybe what we can say is even if no one is appointed, check that we do have applications in for each of the positions, and then we'll know we're just awaiting action in terms of those without organizations.
Like I am someone who is here without needing an organization.

I just think the word gets around. I'm sure people have mentioned to others. And there may be applications in already. I seem to remember at least one of them having an application.
It's just the waiting of an appointment.

>> KAREN GOLDBERG: Thank you for clarifying that.

>> GLENNA ASHTON: And I happen to know of two applications that have already been sent in and been sitting there for two different positions.

>> KAREN GOLDBERG: For FAD or other agencies?

>> GLENNA ASHTON: One is for the hearing aid specialist and the other one is for the FAD representative. And I talked to somebody with CART but I don't think she sent it in. And I talked to somebody who was a parent and I don't think she sent it in. But I know a hearing aid specialist and FAD, they did send in their applications long ago and it's just been sitting there.

>> CINDY SIMON: And that's exactly what I'm referring to. And so as long as we

know they have applications, we can't do much more than keep encouraging them to make an appointment.

>> KAREN GOLDBERG: All right. Thank you all for your comments on this. We have about 15 minutes before our scheduled break.

There was something that I noticed in meetings when I would come in the past before I even joined or was appointed to the Council, is that there's a lot of discussion as soon as we start the meeting, but there's no real discussion of the purpose and how the history of FCCDHH, and for somebody who's joining from the public for the very first time, they may not have a clue as to what actually we do.

And I would hope that nobody sitting at this table has that same dilemma.

But I was wondering if it would be all right if we reviewed the purpose and the vision as stated in the bylaws and Section 3?

Would that be okay?

>> SHAY CHAPMAN: [Nods head].

>> KAREN GOLDBERG: Everybody's good with that? Can I have someone read that? Mary, would you like to read that? Kind of just starting from the top, the legal authority.

>> MARY HODGES: The statutory authority -- I'm sorry, Chris?

>> CHRIS LITTLEWOOD: This is Chris. I was just going to say, the statutory authority, it is listed, the purpose in the Florida statute, and then backed up a little bit by the bylaws, and then I have to look exactly where, but some stated on the website for people to read and review.

We may need to read and review and update that accordingly so the people that are looking at this Council can do that now, because I think the website remains our single source for outreach for people throughout the state of Florida.

>> KAREN GOLDBERG: Thank you. Would it be okay if we went ahead and proceeded with Mary reading that first paragraph? Go ahead, Mary, read that first paragraph. Thank you.

>> MARY HODGES: Statutory authority, for the creation, organization, and operation of a Council for the deaf and hard of hearing is granted pursuant to Section 413.271 Florida statutes, establishing the Florida Coordinating Council for the Deaf and Hard of Hearing.

This legislation specified in part, it is the role of the Council to serve as an advisory and coordinating body in the state which recommends policies that address the needs of deaf, hard of hearing, and late-deafened persons and which recommends methods that improve the coordination of services among public and private entities providing services pertaining to interpreting services, computer aided realtime captioning services, and assistive listening devices, excluding hearing aids.

The Council is authorized to provide technical assistance, advocacy, and education.

>> KAREN GOLDBERG: Thank you very much, Mary. Cindy, did you have a comment about that?

>> GLENNA ASHTON: Glenna. Excluding hearing aids? How did that get in there?

>> CINDY SIMON: Because if you're not an individual educated in hearing aids, you can't make recommendations -- the Council would not be qualified to make hearing aid recommendations.
Hang on, I'm sorry....

>> GLENNA ASHTON: Well, the same thing could apply to interpreters. We have a lot of unqualified interpreters and the same thing could be applied not to make recommendations of interpreters, if they don't know -- what's the difference?

>> CINDY SIMON: They have to be qualified.

>> KAREN GOLDBERG: Go ahead, Cindy, you had a question?

>> CINDY SIMON: I was going back to what you were asking historically, and if we can go back a few years, and I can find the exact spot for you, we had everyone who started the Council initially come in and go back and review when it was started, how it was started, what went on.

Maybe we need to cut that section out of CART, and I assure you, I have it somewhere at home, because I used it for meetings after that when I was Chair.

And we can actually post that, which is a nice little blurb about the Council, what went on, and continuing on, and that might be helpful or a summary of that, that says it in non-legalese jargon.

>> KAREN GOLDBERG: This is Karen, I think that's actually a good idea. But I think it's important when we start meetings, this is a meeting that's open to the public. What is it that we do? Why do we exist? How do we exist? And what can we do for the community and talk about different things?
I'm sorry, Shay has a comment. Shay?

>> SHAY CHAPMAN: I suggest we read the mission statement next and that is a good indicator why we exist.

>> KAREN GOLDBERG: Section?

>> SHAY CHAPMAN: It's on page two of the bylaws, Section 3. Section 4, it's on tab three of your book.

The mission of the Council is to provide a forum for public input and outreach resulting in technical assistance, advocacy, education, and improved communication, access among public and private entities to meet the needs of the deaf, hard of hearing, late-deafened, and deaf-blind persons.

>> KAREN GOLDBERG: Thank you, Shay.

I have to tell you that the state of Florida is unique in having such a wonderful body of different professionals and individuals within the state committed to advocacy, education, of deaf, hard of hearing, and deaf-blind/low-visioned individuals. What an incredible opportunity that we have being here.

And I don't think that -- you know, I work quite a bit with the deaf and hard-of-hearing communities throughout the United States. There's not many that has this type of a council written into the bylaws -- I mean written into the statutes.

What an incredible opportunity we have as a Council and also for the public to comment and aid in this mission.
Yes, Debbe?

>> DEBBE HAGNER: This is Debbe. You mentioned something about the hearing aids. Should we also need to add cochlear implants? Because now that's a new thing.

I think we should probably include cochlear implants. That would probably have to be submitted to the Legislature?

>> KAREN GOLDBERG: Yes, Shay?

>> SHAY CHAPMAN: While I definitely agree with you, Debbe, I think that that's maybe something that needs to be added. Changing statute is a very difficult process and -- but if definitely that's something the Council recommends, we could see how to go about that.

Also if you open up statute to change one word, you open up the statute for repeal or changes that you may not agree upon, because it won't just be up to the Council what's added to that statute.

>> KAREN GOLDBERG: Nicely stated. I'm going to jump in there for just a second. I notice here that the last time the bylaws were amended was in June 2012. That is, if my math is right, a long time ago.

[Laughter].

>> KAREN GOLDBERG: Okay. So is there a procedure as to how and when bylaws are updated? I'm going to put that out to everyone on the Council.
Darlene?

>> DARLENE LAIBL-CROWE: This is Darlene. I just wanted to say, I noticed that -- I'm not going to answer your question -- but I noticed that in what was read, assistive listening devices, isn't -- aren't hearing aids and cochlear implants listening devices? So would that not cover those two equipments?

>> KAREN GOLDBERG: Thank you for noticing that, Darlene, but it does specifically say excluding hearing aids. So, I go back to my question of the last time these bylaws were addressed and amended, 2012.

What is the procedure on updating bylaws? Chris?

>> CHRIS LITTLEWOOD: This is Chris, I just wanted to comment a little bit on the last few statements as far as the advisory board that we sit on here for the state of Florida.

Although I will certainly agree that with the division or department under the Department of Health that we're receiving support from now, being the best that we've had, and I really appreciate that, when Karen mentioned that we are lucky because she doesn't know a whole lot about the opportunity in other states, being able to provide the same, I don't think that's necessarily true, because I know a lot of other states have deaf and hard-of-hearing commissions, where the state helps provide direct services.

We are an advisory board, but we provide advice as we are able, share information among departments within the state of Florida, but we have no power or ability or budget to provide direct services.

And that is a deaf and hard-of-hearing advocate and an advocate for people with disabilities nationally.

When I see other states that have services that are elevated much higher than the state of Florida, that's discouraging for me.

So, I hope that we are able to do that.

I'm not trying to take the wind out of your sail, Karen, coming in as the new Chair to this Council. We have a lot of ability here as an advisory board, but we are not elevated above other states, and that continues to concern me.

I would like it to be elevated to the level of services that other states are able to provide.

Even if it's not directly done by this Council, I would like to see it happen within some other department or the creation of a department within the state of Florida.

And that, of course, will require changes within the Legislature; and we know how difficult that can be, but we should still push for that.

>> KAREN GOLDBERG: I'm going to go ahead and jump in here. Chris, I want to thank you for that comment. Actually, it does not take the wind out of my sail as you address the issue that I want addressed.

We have a Coordinating Council and we are an advisory council, but we do not have final say, and some states actually have an actual commission, and that brings me to something I did want to bring up.

I just went to Minneapolis for the Hearing Loss Association National Convention, I met with their deaf and hard-of-hearing commission, and they have quite, quite a system up there in Minneapolis -- I mean in Minnesota, excuse me.

And in fact, I wanted to suggest that -- gosh, my mind is blanking on her name -- who is the head of the commission right now, she's one of the associates of the commission, she used to live in Sarasota [chuckles] or Ft. Myers and I was talking to her about the possibility of coming down and speaking to -- I have to look it up again -- speaking to

the Council at that time.

You're absolutely right, we're fortunate to have this Council. Could there be more that we can do in the state of Florida?

We're in a better position than if we did not have a Council, is what I'm trying to get at. But we do need a commission at the state level, and I think that would be a wonderful aspiration.

So you brought up exactly what I wanted to address, so thank you, Chris. Debbe, I think, had her hand up?

>> DEBBE HAGNER: Yes, I have the list of all the states that have the commission and which states has the council. I have the list somewhere. And I did review all that. And there's a difference in both of them. And it's interesting, I know I had sent Megan a list of nationwide that we should join under that umbrella, but nothing was done forward from that.

>> KAREN GOLDBERG: Okay. So, can you clarify what that -- joining what nationwide?

>> DEBBE HAGNER: There was a -- do you remember, Chris? Chris? Do you remember what the name that was the national umbrella with all the councils and the N... something. I can look it up. Do you remember? I mailed it to you.

>> KAREN GOLDBERG: Glenna?

>> GLENNA ASHTON: Glenna, yeah, I know what you're talking about, it's that national umbrella for those agencies that actually provide direct services only. We're a council, we don't provide direct services, so we can't join that.

When this was originally started, they wanted to start with the commission, but the Legislature put that down to an advisory board, a council, and they did that.

>> KAREN GOLDBERG: One more comment and then we're getting close to the break. Cindy?

>> CINDY SIMON: A few years ago, I think we shared all of that future planning stuff that I sent you, right, when we were looking at strategic planning, and we had talked about a commission, because every few years we revisit the idea of a commission, and then we toss it back and say if you're not going to do anymore than you're doing now anyway, and we're not going to create it. It doesn't mean we don't keep trying every few years.

Again, there's the whole discussion.

In terms of bylaws, I remember the last time, because we changed when the change of Chair went that we elected then earlier, and there was one other thing added at that time; the change of bylaws can be decided at the Chair's decision that it's time to revisit, everybody look at it, send in, and then schedule a time at the next meeting to have the bylaws discussion.

>> KAREN GOLDBERG: Okay. Thank you all for this great discussion. See what has come up in the last 15 minutes, discussion about the bylaws and taking a look at that, discussion about where we want to go in the state of Florida. Is this a time to start thinking about and asking the new Legislature coming in about a council -- I'm sorry, about a commission?
Many things to discuss.

I'd like to suggest that we take time with whatever we're discussing today, think about it. Tomorrow at 11:15-11:45 is kind of general discussion, I think we ought to, like, revisit some of these things and hammer down some ideas.

Does that sound like a good idea to everyone? Terrific. It's 10:00 o'clock, 10:01, actually, we shaved one minute off your private time for break, but let's go ahead and take that break.
We're going to reconvene here at 10:15. Thank you.

>> GLENNA ASHTON: Have some chocolate!

[Laughter].
[Break].

>> KAREN GOLDBERG: Hello? Can I get everyone's attention? It's 10:15. Can I get everyone's attention? Hello?

[Room chatter].

>> KAREN GOLDBERG: It's 10:15. We're going to take an extra two minutes for everyone to get to their seats since I used up two minutes of your break.

[Pause].

>> KAREN GOLDBERG: Hello, this is Karen Goldberg. Am I on?
Hello, this is Karen Goldberg, and welcome back from the break. I hope everyone got what they needed get taken care of.
Reminders, we wanted to see if there's anyone on the telephone or online who wants to introduce themselves?

[No response].

>> KAREN GOLDBERG: Chris, you handed me this list. Are you saying you want me to go through all of this again?

>> CHRIS LITTLEWOOD: Did you say the name and thank the interpreters and CART Provider and the audio?

>> KAREN GOLDBERG: I did that this morning.

>> CHRIS LITTLEWOOD: I missed that. My apologies. Make sure that's included.

>> KAREN GOLDBERG: You just wanted to thank them once again.

[Laughter].

>> KAREN GOLDBERG: Thank you! Again and again, we thank you all. All right. 10:15, let's talk about the Family Café. I think I know of two people in the room who went to the Family Café to represent the Florida Coordinating Council for the Deaf and Hard of Hearing, although it was a council-supported event and I really want to thank you all for giving us the go ahead to attend and making it possible to get the little trinkets and -- what do you call those little things? The give-aways with our logo on them, which the rest are in my hotel room upstairs and need to be given away [laughs].
I'm just kidding.

I'm going to ask Glenna for an update from the Family Café. Go Glenna.

>> MEGAN CALLAHAN: This is Megan real quick. I think we were going to keep those for the next event, if we were going to do It's A Deaf Thing, or whatever. Remember? [Laughs].
So, if not, we can always take them back, but I don't....

>> KAREN GOLDBERG: I'll give you some. I think that we have plenty that can be stored in Tallahassee and then I'll take some of them to It's A Deaf Thing, I'll be attending that.
All right. Glenna, do you want to give an update what that experience at Family Café was like?

>> GLENNA ASHTON: Family Café had a large number of people that attended the exhibit rooms, it was very active with a lot of -- we had a good table. We were in a second row on a corner, so a lot of people did come by.

We did have a lot of people come up, but none of them were people who were deaf or hard of hearing as a primary "disability." All of them were who had a lot of other issues, and deaf and hard of hearing was third or fourth or whatever.

So, we felt like we were not really getting the people that you want to see that fits with the Council.

And we thought it was kind of expensive to get the few people that would be the kind of people that we would serve.

We did happen to meet Earline, who is one of the interpreters here, because she had a table also. And we had some students that were interested in signing or interpreting.

But I spent \$40 on candy and I don't think I got reimbursed for that. I sent in a receipt, but I was wondering about that.
But the candy went; gone!

We enjoyed it, we had a good time, but I feel like it's not really worth going again, because it's not the primary audience we really want to reach out to.
It's A Deaf Thing is much more appropriate kind of audience that you want to reach out

to.

>> KAREN GOLDBERG: Thank you, Glenna, for that update. I want to also state that I think it's a good idea that we went this time. This was an outreach event and it was good, I think, for us to know what our impact would be in that situation.

As folks may know, that Family Café is a large event for people who have special needs, more so with autism spectrum and intellectual disability, and deafness or hard of hearing or deaf-blind may be a secondary focus for these individuals. The Florida School for the Deaf and Blind was there. Earline was also there -- which group was that?

>> GLENNA ASHTON: The Florida School for the Deaf and Blind and the University of Florida version of their deaf-blind --

>> KAREN GOLDBERG: That's who it was.

>> GLENNA ASHTON: And Earline was there with her program. But, again, we were just hoping that we might hit somebody who was deaf-blind or somebody who had primary -- but it was not -- compared to the cost of going there and the return on investment, it was not really worth it. It's better to go to something like that and the organizations and conferences and It's A Deaf Thing and things like that.

>> KAREN GOLDBERG: I'm in agreement with that. I think it was good that we went to know what works and what doesn't work. So, in terms of outreach, that was a great suggestion and I'm in agreement that the cost-to-benefit ratio was not in our favor on that one. It was great for networking, which I always enjoy doing and I think it's important to do. But in terms of reaching the public, we got a few looks, a couple people stopped by to ask about the candy.

[Laughter].

>> KAREN GOLDBERG: And then would take a lanyard and we would tell them about FCCDHH and they seemed interested. Some people were very interested. But you could tell that a lot of people were, like, this doesn't relate to me kind of look on their face. And that was okay. That was why we were there. And we took some pictures, which I think we sent to you, Megan, so that you can have these pictures.

I will tell you that one of the best things about being there, best meeting, it was a wonderful opportunity, that we met with the Governor. We were in line to take a picture with him, as was six million people, but both Glenna and I cannot just take a picture with anyone without discussing something.

[Laughter].

>> KAREN GOLDBERG: And it turns out that the Governor's wife is hard of hearing. And she wears bilateral hearing aids and she was very interested.

And I would recommend that we just send a thank you note and reminder, and I want to ask if that's an appropriate thing for us to do as a Council, thanking them for that brief moment.

He'll probably be, like, what brief moment, because there was so many people taking pictures with him!

But we had our five minutes of fame and glory and discussion with his wife, which I thought was really awesome.

Yes, Shay?

>> SHAY CHAPMAN: That's great, I applaud you and Glenna for advocating for the Council and for the needs of the community that you serve.

Was the Governor's wife there as well?

>> KAREN GOLDBERG: Yeah, so when we were in line to take the picture, we introduced ourselves with the Governor. Really what they want you to do is just show up, smile, take the picture, and leave.

I am traditionally incapable of doing such a thing, of not talking.

[Laughter].

>> KAREN GOLDBERG: So I introduced myself, Glenna introduced herself, we told him where we were from, that we were with the Florida Coordinating Council for the Deaf and Hard of Hearing, that this is a council that is in the statutes and set up by the Governor, a Governor appointed positions, and he said oh, absolutely, and he said, this is my wife, and interestingly, enough, she is hard of hearing. We're very much in support.

I mean, he said, you know, all of these wonderful things, so, yes --

>> SHAY CHAPMAN: So I was going to suggest then that she has her own office, that we send the letter to her because she probably doesn't get as much correspondence a day as the Governor does, and I think, in my opinion, that would be a better avenue to send the thank you letter.

>> KAREN GOLDBERG: Okay, terrific.

>> SHAY CHAPMAN: And another thing I wanted to say, maybe the audience wasn't intended at the Family Café but it was a good opportunity for us to get some stuff together that we needed to have a presence needed at other avenues that we wanted to be as a Council.

So I think getting the give-aways and we also got some other stuff, like something printed?

>> KAREN GOLDBERG: Yeah, we had wonderful things, we are ready to go to other places. We are ready!

>> SHAY CHAPMAN: We are set up and can look very professional now and we got that done.

>> KAREN GOLDBERG: Remember I told you about the ears, that everybody was a

little bit wiggled out by the ears? Early Steps had the ears and they were so cute and I was going to put a plug in for that in about a year for that for the ears, it was really, really cool. Chris?

>> CHRIS LITTLEWOOD: That's cool. I had mixed feelings about the ears myself, I thought it was a Van Gogh thing.

[Laughter].

>> CHRIS LITTLEWOOD: It's still a very cool takeaway and maybe we should have jumped on that bandwagon. I thought it was a huge hit you got to talk to the Governor about his wife and I think it's an awesome idea to send a letter to the Governor's wife's office. That would be great.

My philosophy about Family Café may be a little bit different, coming from my experience from when Debbe and I went a couple years ago.

And my first question that I'll get back to in just a second is if you've got a list of the people that came up and did talk to you at the booth, what we did was get names and e-mails addresses and Megan followed up and sent them a little e-mail afterwards to kind of keep correspondence going and make get people to write back and communicate with us.

So, hopefully that's something you did or we can think about doing next time.

My philosophy with the Family Café is I know it's not primarily for a target audience of people that are deaf and hard of hearing, but when it is such a large audience of people with disabilities, I think it's very important for us to be included in this as a state council and as an advisory board.

Because for all people with disabilities, this goes to a little bit of my philosophy for advocating for people with disabilities, is it's about inclusion, representation, and access.

And so being part of that meeting and that conference, even though we're not the primary target audience and there may be other people that are more concerned about cognitive disabilities or mobility disabilities, we are part of that group. We get ideas for outreach, we get to communicate with these other groups and how we can help each other and I think it's very important to do that and I would suggest that we continue to be involved in that.

But great job, you guys. It sounds like it was an awesome event.

>> KAREN GOLDBERG: Yes, Cindy?

>> CINDY SIMON: And ditto to what Chris said, but I want to build on that. We have a very large population of people who don't know they belong to us. It's true, okay.

You know, half the elderly out there belong to us and don't know it. So this is probably one of the largest groups where you would find you have all these people, but someone has a relative with hearing loss and doesn't know that they can begin advocating for

themselves by joining an organization like HLAA or starting one.
So it's a really good opportunity to say well, maybe this person doesn't, but do you know anyone?

There's another study that just came out of cognitive function in the elderly and hearing loss and lack of audition.

Again, I go back to the Packwood study and they're done in France done by gerontologists, and so it behooves us to capture some of these people and make them aware that there is a place they can get information. They just don't know yet. And, oh, do you have a relative? Oh, you know what? We take care of that too. And all of a sudden it comes back to them. Some of the caregivers may not even be taking care of their own needs and maybe someone that we are concerned about.

So, we should be keeping that in mind and be sensitive to that at such events as well, because we may have a bigger population than we think there.

>> KAREN GOLDBERG: That's a very good point. This is Karen. I think, you know, it was great, we had quite a few people come by to get information. And we had information about all of our representative groups as well on the table. So we had information about HLAA, FAD, and ALDA, we had some information about Florida School for the Deaf and Blind, they asked if we had some things for them. That's fine, they took a couple things for us, and maybe in the future, you know, I don't know -- I'm always worried about the cost of attending for that. I mean, is the cost benefit too much? Is it in our favor? But I think the idea is to keep the outreach going and to reach the people.

And this is something that came up during the break, we were having a little side discussion about we need to do a better job of educating the people in Florida, that we exist, that we are here to serve, and is there a way that we can do that better?

We did collect names and e-mail addresses at Family Café, I have those up in my room as well.

One of the comments I heard is that people came to a meeting a couple years ago and put their name down on the list, but then they kind of -- it didn't seem to really stick on the list and it's kind of gone.

So that's something that we should discuss as a Council on how we can let the people of Florida know that we're here and let's coordinate services. That's a big, big mission for us, coordinating the services, getting us all together. And there's so much potential here. Discussion?

>> DEBBE HAGNER: This is Debbie. I know that Megan keeps track of all the phone logs. What's happening with that? Where does that stand? How many we've got -- that's supposed to be part of your report.

>> MEGAN CALLAHAN: This is Megan. That is under tab nine in your binders, the contact log is. It's the recent ones from our last meeting in May up until now.

>> DEBBE HAGNER: Okay. Any summary of that? What is yours -- can you quickly summarize?

>> SHAY CHAPMAN: I'll refer to Karen, but there's another section of what Megan goes through, the task list. We're still in the Family Café, I would wait and stay on agenda topics.

>> KAREN GOLDBERG: Let's do that, let's do that, thank you very much. And we'll address those other things.

Let me just check the time here, 10:30. So we have about 13, 14 minutes more to discuss about the Family Café.

I think we've reviewed it pretty good.

From a Department of Health perspective, financially was it something that was a reasonable endeavor for us to do this? Megan or Shay? Financially?

>> SHAY CHAPMAN: Oh, I think so. We had some extra funding due to some folks not traveling, different things, a little cushion in the budget. So I think it was a good opportunity to see if it was something the Council wanted to continue to do and also get the necessary things we needed to be at different conferences.

I do want to give a shout out, she's not listening, but just to put it on record that Joyce Harrison in our office, she is my budget person and she was instrumental in getting things pushed through and very helpful and we do appreciate her help as well.

Just to let you know, you have some support behind the scenes you don't often see but she was helpful in getting that done.

>> KAREN GOLDBERG: This is one of the thought I had. Have we done and applied to do a formal presentation of some type? Any one of our members, that might have helped, have people come by the booth a little bit more.

I had asked to do a presentation, but missed the deadline, so I wasn't able to do one.

But I may apply for next year to do it.

I did it also at the Family Summit a year ago, I presented on psychiatric treatment of deaf kids.

Whenever we have people, I don't know if you're -- if you are the type of person who is comfortable giving presentations and talking and educating, this is -- there's opportunities out there, okay.

And, you know, like, you can give a little plug, like whenever I present, I give a plug that I serve on this council, it's a council committed to meeting the needs of Florida's deaf, hard of hearing, and deaf-blind communities.

Any other discussion? Cindy, I think I saw your hand up? No, I was incorrect.

>> CINDY SIMON: For once not.

[Laughter].

>> KAREN GOLDBERG: I see a finger up.

>> CHRIS LITTLEWOOD: A finger up, yes. This is Chris. We weren't charged for the actual booth at the Family Café, were we? That was pretty much donated? Because last time we did, I don't think there was a charge for that.

>> SHAY CHAPMAN: I think there was a charge, which was different than last time, Chris. They had lower numbers of participants and people for the booth this time, and so there was a charge, but I can double-check on that.
It was \$500, yes, Glenna.

>> CHRIS LITTLEWOOD: This is Chris. That may be a difference from the last time, because it was a huge event and we were not charged. And Debbe and I were so excited to be involved because of the number of people that were there, and the last thing I wanted to say, kind of extending on what Cindy said, is that people don't always know that they have the option to communicate with a deaf and hard-of-hearing council. They don't always know that that's a disability that needs to be addressed because it's number two or number three or number four on their list as a person with a disability.

As we know, being deaf or hard of hearing is an invisible disability, so it's something that's important to be included in an event like this.

But it is concerning if they are charging us to be a part of that. We were not charged the last time.

>> KAREN GOLDBERG: Sorry, I didn't take my ADD medicine today, so.... [laughs].
Mary?

>> MARY HODGES: Thank you. This is Mary. I wanted to remind everybody that we do have, I believe it's next week, the Florida Conference on Aging will be taking place and we would love to include some literature or some of your trinkets, because the department does have a display and we have participated, not last year, but I think the year before last at the conference, and that would be a way to kind of do some public awareness regarding the Council.

>> KAREN GOLDBERG: Thank you, Mary, that's excellent. Where is that council or conference going to be held? Is it Tallahassee?

>> MARY HODGES: It is not Tallahassee. Give me a couple of minutes and I'll tell you.

[Laughter].

>> KAREN GOLDBERG: Thank you. Cindy?

>> CINDY SIMON: I love that Mary just said that, and I'm wondering, now that there is so much literature through those who develop hearing loss later in life and the effect on cognition, even as far as the brain shrinking if this is not addressed, maybe we should have a very short information sheet that goes out to a lot of meetings and says "For more information, for suggestions what to do, for any of your questions...." and refer back to the Council.

Because if they see something like that, if they see something like forgetting things, mixing up what they're saying, no, here's what's been shown, get it checked out. And we're doing a public service with that.

So maybe a set sheet that can be at anyone's meetings as something out there.

>> KAREN GOLDBERG: That's a wonderful idea. Mary?

>> MARY HODGES: I agree with Cindy. And if it's nothing more than educational, because each Disability Resource Centers need that kind of information to get out into the communities.

The gentleman who's doing our AV just let us know that the conference is in Tampa and he's actually working there setting up for it, so.....

If you'd like, I can send you some e-mail information about it and contact with our communications director to get that information to her to distribute.

>> KAREN GOLDBERG: Excellent. Thank you.

>> GLENNA ASHTON: So maybe Karen and Debbe --

[Laughter].

>> GLENNA ASHTON: -- can go. I had a blank moment.

>> KAREN GOLDBERG: No need.....
So what date is that?

>> MARY HODGES: I believe the date is the 11th through the 12th or the --

>> KAREN GOLDBERG: Of August?

>> MARY HODGES: Yes, next week.

>> KAREN GOLDBERG: So it's on Saturday?

>> MARY HODGES: 12-15.

>> CINDY SIMON: This is the 9th --

>> KAREN GOLDBERG: That's wonderful. I can do it -- I mean mostly I can do it.

>> MARY HODGES: He's here, he's working the conference next week.

>> CINDY SIMON: Right, it's Sunday, so it starts this weekend.

>> MARY HODGES: It may start with registration, but the actual conference is --

>> KAREN GOLDBERG: I'll get the details. I can go. And fortunately I have trinkets.

[Laughter].

>> KAREN GOLDBERG: So, thanks. And information, not just trinkets.....
Okay. So, wow, what a great discussion!

So I think that we want to be cognizant of different meetings and events that are going on so that we can have a presence. That's one way to improve our visibility, okay. All right. Anybody else know of any other types of conferences?

>> DEBBE HAGNER: We have to do better publicity.

>> KAREN GOLDBERG: How would you suggest we do that?

>> DEBBE HAGNER: Well, you know, we used to have a dedicated person to do that, but now we don't have anyone doing that. And I don't know if that's something that we can add to Megan's job [chuckles] or.... or somehow someone on the Council be a social media person or.... or how....

>> KAREN GOLDBERG: This is Karen. I would recommend this is something that the Council does. I mean, Megan will help us, I'm sure, with anything that we want to do, but I don't want to just dump it on her. I think this is a council-wide commitment and she'll guide us on how to do it, but maybe we need to have a committee for that. Yes, ma'am?

>> CINDY SIMON: I think that on some of this, what we've done to advise things before is, say, Megan would send it out to all the centers from any group and then they would disseminate it within themselves.

Because we've been to meetings where they said it same through, say, Deaf Services Centers and then it got disseminated to everybody there.

That may be one way to do it without making it onerous or making it too much. Megan could create one database when something comes up, you send it to all of them and they disseminate it to their members locally. Just a thought there. That makes it simple and one step.

>> DEBBE HAGNER: I do know -- this is Debbie -- I do know that Chris and Glenna are involved with the Facebook, Facebook.

>> GLENNA ASHTON: I wanted to bring that up --

>> DEBBE HAGNER: That can reach a group of people looking at Facebook. I think we also need to put it in the newspaper or some other TV, public broadcast, TV something.

>> KAREN GOLDBERG: Go ahead, Glenna, you had a comment?

>> GLENNA ASHTON: Yeah, Facebook I wanted to discuss that later. The Facebook page has changed and we have about 600 people that do look at it and every day

people are liking it and it's getting out there and I do see that people respond when I'm posting a notice about the meeting and things like that.

And then I send it out to.... I actually post it to other deaf groups around the state of Florida, not just the Council page, and that way it helps promote it, so I've been doing that.

And I'll save the discussion about the Facebook page for later on.

I will be going to the FRID, FAD, FASLT, the Florida ASL teacher association and I would be happy to do a table and all of that for those three conferences.

>> KAREN GOLDBERG: Thank you, Glenna.

So I think that, you know, if you're the type of person who likes to present, this is a wonderful opportunity to talk about whatever your area of interest is and talk about what we're doing in the state of Florida.

And you're going to get people coming up to you and wanting to get information. And maybe you're going to meet people who are doing things that, you know, fit exactly what you're wanting to do or like what you'd like to see in Florida happen.

Okay. Any other comments? It's almost 10:45.

>> DEBBE HAGNER: This is Debbe. I think that Megan should have a speaker bureau list and keep it so she knows she can contact us for speaking and go to -- it's like a speaker list or maybe we should have a connection with the speaker bureau and have a more of a reach out.

>> KAREN GOLDBERG: Yes, Shay?

>> SHAY CHAPMAN: I know we're needing to move on to the next topic area, but are we -- is Debbe responding to -- is she saying we're getting requests for speakers?

>> DEBBE HAGNER: Well, yeah, if we -- if the Council asks or wants a speaker to talk about hearing loss to our organizations and it would be a nice way to branch out.

>> SHAY CHAPMAN: I guess I'm confused about what the ask is. Are we saying that we're getting requests in for speakers? If that's what we're saying --

>> DEBBE HAGNER: No, I'm adding that, that we can make ourselves available for that.

>> SHAY CHAPMAN: So we know if we got a request in, Megan would send that to the Council asking who is interested or available.

>> KAREN GOLDBERG: Terrific. There are also people who are wonderful speakers who are not on the Council and we want to support them as well.

>> SHAY CHAPMAN: And we would hope in that case, based on the specific request, you could give us a suggestion. If we got a request for a speaker.

>> KAREN GOLDBERG: Okay, yeah.

>> SHAY CHAPMAN: And you would give us a request for a speaker. That's what Debbe was asking. I thought what Karen referred to is we should start presenting at conferences.

>> KAREN GOLDBERG: That's my goal. I tend to -- I'm pretty comfortable presenting, I've done it for many, many years, I feel comfortable. Some people are not comfortable and that's okay too.
If you are interested in that, we ought to be reaching out.

>> SHAY CHAPMAN: Great. I just wanted to clarify. We're not getting an abundance, I don't remember if we've even gotten one request for a speaker, so....

>> GLENNA ASHTON: I think possibly the opposite way would be better. I don't mind presenting either, to get our name on lists out there where other organizations are looking for speakers.

It could be as simple as a local Kiwanis club or different clubs, they're always looking for speakers and we could get our names out there as a Council and as speakers to offer ourselves as speakers. I think the opposite would work better to getting out there.

>> KAREN GOLDBERG: Right, I agree with you on that.
It is getting pretty close to the next topic that we need to move on to.
Any last thoughts on what we have been discussing up to this point, now is the time to throw it out there before we move on.
Oh, Darlene? Darlene?

>> DARLENE LAIBL-CROWE: Go ahead? This is Darlene. I wanted to say, if you want to, what you can do is go in your own community and visit the different civic clubs and things like that and speak and share about the FCCDHH or your organization. That is a good way of getting the publicity out there.

>> KAREN GOLDBERG: Thank you, Darlene. Well stated.
Okay. I think it's time to move on -- oh, I'm sorry, Chris, one last comment?

>> CHRIS LITTLEWOOD: Okay, I'm sorry, I know you've already shown yourself the task master and staying with the agenda, so I don't want to let you get off track with that.

[Laughter].

>> CHRIS LITTLEWOOD: I do want to add, because we don't have an outreach coordinator anymore, one of the things that I've been fortunate enough to be able to do under a grant is to teach classes to public safety and healthcare workers for communicating with people that are deaf or hard of hearing.

What I have done in the past and I will continue to do is share the brochures or the announcements for those courses. I'm teaching four classes in September at different emergency management locations around the state, so I always mention the Council to those groups.

I think it's important for us all to do that, where we in some ways try to pick up where our past outreach coordinator left off.

Also, I think it's very important for the support office from the Department of Health to help us disseminate that information and get that information out there to other groups, because we did have a little bit of a barrier where mid-year we were trying to find a place to host a course and now the word seems to have gotten out where I have too many people that want to host and I'm not able to go to all the places that I want to within my grant cycle.

So, it's just something to keep in mind, that we all can find creative ways to do some of the things that Karen is talking about.

>> KAREN GOLDBERG: Thank you, Chris. I want to just counter that. In fact, we do have an outreach committee, it's the EMO Committee, which as a psychiatrist I'm not really crazy about the idea, EMO.

[Laughter].

>> CINDY SIMON: We had ELMO but -- we had legal too but everyone canned that.

>> KAREN GOLDBERG: Okay, I don't know, EMO is not my favorite.

[Laughter].

>> CINDY SIMON: It was two committees that ended up joining as one.

>> KAREN GOLDBERG: Okay. That's the education, medical, and outreach committee, so we do actually have a committee that can take on some of this. Go ahead, Megan.

>> MEGAN CALLAHAN: This is Megan. We have been holding conference calls and things like that to discuss the quarterly letters for public comments or recently we sent out a couple of different letters regarding kind of introducing ourselves and the Inclusive Health Coalition and also sent out a letter for the Inclusive Health Coalition, and we recently, you know, we got that sent out within this quarter, before this meeting, and that was sent out from the Department office. And it was sent out on the council letterhead, so keep in mind if anyone wants to send out letters and stuff like that, we can send it out from the Department and comes on letterhead.

>> KAREN GOLDBERG: Thank you. We'll hear more. Chris, one last comment.

>> CHRIS LITTLEWOOD: Do we have the letter sent out to all council members that went out? I know we didn't want everybody involved, too many cooks in the kitchen, but I don't remember seeing the letter itself that went out. Can you make sure that's sent to all council members? I would just like to see what's being sent out to everybody.

The other thing, I wasn't conflicting that we do have the EMO Committee, but I'm just saying we used to have an outreach coordinator person that would go out to different

locations around the state.

>> KAREN GOLDBERG: Oh, I see.

>> CHRIS LITTLEWOOD: And she was an employee of the Department of Health that went out.

>> KAREN GOLDBERG: I see what you're saying.

>> CHRIS LITTLEWOOD: And she was not full-time, but she did more than full-time work.

>> KAREN GOLDBERG: I see.

>> CHRIS LITTLEWOOD: And she was giving presentations all over the place.

>> KAREN GOLDBERG: All right. So now it sounds like we'll need to take over that if there's not a paid employee. No? Shay says no?

>> SHAY CHAPMAN: No, that's not in the available budget that we have for the Council at the moment. Obviously if the legislative budget gets approved, there was money in there for that position.

>> KAREN GOLDBERG: Gotcha. Thank you for clarifying. I think at this point we move forward, we have a very important topic next on the agenda and that's the biennial report. This was handled so beautifully at the -- under the leadership of Glenna and Debbe at the last time that it was due, and I remember her saying she must discuss it, we must discuss it. And now it is my turn to say that, we must discuss the biennial report. Do you have a copy of the biennial report in here?

>> SHAY CHAPMAN: Megan?

>> KAREN GOLDBERG: The last one? I think I have a few upstairs in my hotel room so we're going to move the entire meeting to my room.

[Laughter].

>> MEGAN CALLAHAN: This is Megan. It is on the website, under other reports and publications, so if anyone wants to refer to it before, if you want to bring down the copies --

>> KAREN GOLDBERG: I'll bring it down over lunch time. Actually I want you to go up there and help me decide what's going back in your car.

[Laughter].

>> KAREN GOLDBERG: Okay. So it is now the time for us to put in that report. Now, in the past, we have done a very nice spread of four page front and back, glossy that we have given --

>> MEGAN CALLAHAN: Trifold.

>> KAREN GOLDBERG: Trifold, thank you, with basic information. Is there an actual report that we submit to the Governor's Office? Shay?

>> SHAY CHAPMAN: No, the trifold, that is the report.

>> KAREN GOLDBERG: And it's sufficient.

>> SHAY CHAPMAN: Yes.

>> KAREN GOLDBERG: So we have not ever been asked to elaborate --

>> SHAY CHAPMAN: You are not statutorily mandated to do a report.

>> KAREN GOLDBERG: Oh.

>> SHAY CHAPMAN: So some councils have a statutory mandate to do a report. You all have historically done a report and to update the Legislature and the Governor what has been accomplished and what you think the concerns are that need to be addressed, but it's not in statute that a report is done.

>> KAREN GOLDBERG: Okay. I think at this point in order for us to have this discussion, I really would like to have copies of the report so people can take a look at it.

Would everyone be in favor of taking just a ten-minute break so I can go up and get copies?

I need someone to make a motion.

>> DEBBE HAGNER: I make a motion that we take a ten-minute break.

>> GLENNA ASHTON: We have plenty of time, because we break at 12:15, so we have plenty of time.

>> KAREN GOLDBERG: Okay. So is that a second, Glenna?

[Laughter].

>> KAREN GOLDBERG: Okay. All in favor? I have to go potty.

>> CHRIS LITTLEWOOD: I'm in favor of a break, and it's also on the website.

>> KAREN GOLDBERG: I'm a person that needs paper.

>> CINDY SIMON: I want to add to Chris's, we should have multiple years there. If I realized we wanted it, I have, like, the last four --

>> KAREN GOLDBERG: Do you have them in your hotel room?

>> CINDY SIMON: No, but I have four or five reports.

>> SHAY CHAPMAN: They're on the website.

>> KAREN GOLDBERG: In the meantime, can we have someone pull it up on the website? There's a screen back there, are we able to connect it? Can we do that? So let's go ahead, we're going to adjourn for about 10-14 minutes, let's revisit at 11:10. And Megan, do you want to go up with me to my room and I'll kind of show you what's there?

>> MEGAN CALLAHAN: Yeah, give me just a second.

>> SHAY CHAPMAN: Can Sydney work with LaShay then to pull it up on the screen? We need to work with LaShay --

>> KAREN GOLDBERG: If you need Megan, I'll take Debbe.

>> CINDY SIMON: I am come too.

>> KAREN GOLDBERG: You can come to my room too.

>> SHAY CHAPMAN: Party in Karen's room.

[Laughter].

>> KAREN GOLDBERG: All right. Ready to go?

[Break].

>> KAREN GOLDBERG: Let's start to regather.

[Pause].

>> KAREN GOLDBERG: One minute warning to regather, one minute.

[Pause].

>> KAREN GOLDBERG: I remember the days you can flash the lights. Okay, folks, it's ten after 11:00 so I'm going to ask the public folks to settle down just a little bit. We're starting again. We're going to start again.

Okay. This is Karen. We have some people coming in now and getting their seats, but I'm going to go ahead and get started.

So we went up and we looked through all of the bags and unfortunately I must have given away all of my copies of the biennial report at Family Café, I don't have any leftovers.

I would recommend in future meetings that we have a copy in the binder for people to look at, if that's a reasonable thing to do?

Okay. We do, fortunately we have it up on the website -- yeah, the website that Megan is doing. It's a little visual challenging because.... but it's up, let me start with that.

[Laughter].

>> KAREN GOLDBERG: It's up and it looks wonderful!
Okay. So I was wondering if we could go through it and see how we like it, if we can just kind of start with it from the very beginning.
And I'm going to -- Megan, do you have a microphone over there?

>> SHAY CHAPMAN: I can make notes for you, though.

>> KAREN GOLDBERG: I was going to ask if you could go through it or if somebody could run through this who has better eyesight than I do.

>> DEBBE HAGNER: We can take the mic and give it to Megan.

>> KAREN GOLDBERG: Thank you very much. Megan, can you run through this and how it works?

[Pause].

>> KAREN GOLDBERG: LaShay, while you're walking, if you can do a little song for us?

>> DEBBE HAGNER: I think Chris had something? Chris?

>> CHRIS LITTLEWOOD: Yeah, I guess if I could open with just a couple points. I think we already started to say how important the timeline is. If we're doing an odd-year biennial report, meaning this year or this next year, 2019, we have to have the report ready, when the new Legislature comes into session in March or April, we want to make sure that we have that report to provide to them.

We were really, really late last time. Part of that being the process that the State is forced to go through for approvals for printing and whatever, and we need to make sure that everything is in place so that we can get that done.

What I would strongly encourage and suggest is that we have everything in line by the end of the calendar year. That's a lot of work.

So that really means we have to have a lot of stuff into draft by the time we come into the November meeting.

The other thing I will say is this picture, although it's an awesome picture, the fact that we have used it in two different biennial reports kind of bothers me.

The reason for that is I'm wondering which report am I looking at? I know it's an older one, but we've also used it either in the 2015 or the 2013 report.

>> CINDY SIMON: I think it was a similar picture, but not quite the same in the other report. It was a member who was a parent and it was her son in the previous report.

>> KAREN GOLDBERG: Signing?

Chris, I think your point is good, that you want to make sure that there are unique pictures for each report so that it doesn't get confused with a different year.

Of course, having the year printed on it looks good too, so.... [chuckles].

Okay. So, Debbe?

>> DEBBE HAGNER: I would like to see maybe a picture of a hearing aid and a picture of a cochlear implant, just the different equipment, the loop, the wires, maybe that would be as symbolic representation, because that would represent -- right now what I'm looking at it real quick, it doesn't show that it's a hearing loss picture other than the thumb up.

>> KAREN GOLDBERG: Actually I think that she's signing play.

>> DEBBE HAGNER: Yeah.

>> KAREN GOLDBERG: Yeah, so I think that to me that's a lovely picture. I love that picture.

I think having pictures of hearing aids and technical devices is appropriate for one of the other things. I know we have several pictures. Yes, Shay?

>> SHAY CHAPMAN: I would suggest a picture that grabs people's attention on the front. That's what we want, we want someone to pay attention to read the report, so we need a picture that -- agreed, this is a wonderful picture and we probably don't want to use it a subsequent time, but a picture that tugs at someone's heart and wants them to read the report.

>> KAREN GOLDBERG: Darlene?

>> DARLENE LAIBL-CROWE: Okay. The last biennial report, there was a request for scenarios and if we're going to do an audio one, I would suggest that we have a couple other scenarios within the audio, because, you know, we have some people that just can't -- or even have it in the reading materials, the visual ones, because there's just some people that just can't see the pictures.

So, we need to have something like a storyline to tell so that the representatives and whoever reads it will just get a picture in their mind.

>> KAREN GOLDBERG: Okay. I think that's wonderful. Yes, Glenna?

>> GLENNA ASHTON: Glenna. I had written a bunch of different stories that we were not able to use because we didn't have room for them. I still have the stories and I can send them to Megan tonight and she can send them out to the committee and look over that.

One of the things we had discussed trying to do a different approach through stories like Darlene said.

The problem is we don't have a whole lot of room to say everything we want to say, you

know.

>> KAREN GOLDBERG: All right. So, there are folks who are here today who do not have any clue as to what this actually looks like.

So, Megan, if you can run through the entire report as it is and then we're going to discuss different ideas for future reports.

>> MEGAN CALLAHAN: This is Megan, I'm gonna try and remember the order [chuckles] everything went in since this is, you know, laid out in pages instead of the trifold.

But this is what is on the front.

>> KAREN GOLDBERG: So it basically has a discussion or a little blip about the mission?

>> MEGAN CALLAHAN: Yes.

>> KAREN GOLDBERG: Okay. Beautiful. Love that.

>> MEGAN CALLAHAN: Let me blow it up.

>> KAREN GOLDBERG: It says through the Florida Legislature and Supreme Court?

>> MEGAN CALLAHAN: Yes.

>> KAREN GOLDBERG: Why is it to the Supreme Court? I'm just curious. Glenna? Can you guide me why it's also to the Supreme Court?

[Pause].

>> KAREN GOLDBERG: I'm waiting for Glenna.

>> GLENNA ASHTON: Well, it's the same thing from 2015.

>> KAREN GOLDBERG: Fair enough. Chris?

>> CHRIS LITTLEWOOD: This is Chris. The reason it says to Governor Scott, the Florida Legislature, and the Supreme Court, that's the Florida Supreme Court, because we always distribute it to every legislator and every member of the Florida Supreme Court and the Governor's Office, in hard copy. That's what we've always done, historically, that's the biennial report that we've provided.

The other point that I was going to make is the picture, I just looked at it. The last two biennial reports had the exact same picture on the cover page for the last two biennial reports. So that's what I was saying we want to avoid.

That actually gives us a new opportunity this year to have a new picture and it's going to jump out twice as much because we've had the same picture up for four years now.

>> KAREN GOLDBERG: Thank you, Chris, for updating us on that.

At this time what I would really like to do is go through it as it is and then we're going to discuss these changes, including pictures, okay.

So just traditionally we've always sent it to the Florida Legislature and the -- hold, please -- and the Supreme Court. Okay, Darlene?

>> DARLENE LAIBL-CROWE: I know that when we distributed the biennial reports, a lot of the legislators liked having it electronically and when you are talking about the website and adding a link and where they can click on it and that scenario and where they can read further about "learn more" or something like that. So since they do like to receive it by electronic e-mail, then they can just click on the link to get more information.

>> KAREN GOLDBERG: I think that's a very good idea as an additional approach. I do think that having something in hand is important for them to have, okay. Because we can never really be sure that they clicked on the link, but we can be sure that you handed it to them. Whether they read it is a different issue.

Okay. So it starts out on this very first page as on the left-hand side, the Council needs significant consistent funding, and kind of goes down what we need.

And on the right-hand side has this blip about the Council is composed of 17 members and it has the overview or the table of contents.

That's correct, as we're all seeing the same thing? Okay. All right. And then from there it goes where?

>> MEGAN CALLAHAN: To education, I will take you there now.

>> KAREN GOLDBERG: Okay. It has data, it has some data at the top.

[Pause].

>> KAREN GOLDBERG: Is that to the other side? That's education. That's healthcare.

>> MEGAN CALLAHAN: Yeah, you were talking about the data, and I didn't know if you wanted me to go over there [laughs].

>> KAREN GOLDBERG: Yeah, I was talking about both. There's some data on the top, that was wonderful.

[Pause].

>> KAREN GOLDBERG: Good, that looks -- I like having that data there, it pops right out.

>> MEGAN CALLAHAN: There's education. And this is the second page.

>> KAREN GOLDBERG: And there's a statement about what some of the challenges are and some good data.

>> MEGAN CALLAHAN: Mmm-hmm.

>> KAREN GOLDBERG: I'm not sure who are deaf-blind and then it says "3" right after that, the end of the first paragraph.

>> MEGAN CALLAHAN: Do you want me to read it?

>> KAREN GOLDBERG: I don't know, what is that "3" sitting right there?

>> SHAY CHAPMAN: I think it's a reference.

>> MEGAN CALLAHAN: It's supposed to be like a reference.

>> KAREN GOLDBERG: That should be in parenthesis or that should be in superscript.

>> DEBBE HAGNER: Footnote, it's a footnote.

>> KAREN GOLDBERG: I'm not sure what it is, to be honest with you [chuckles]. It is a reference, it's a reference number, right?

>> MEGAN CALLAHAN: Mmm-hmm.

>> KAREN GOLDBERG: So the reference is Florida Department of Education 2015. Very good, very pertinent data, okay. That's just a typo is what that was. All right. So, some problems faced by population, good. Possible solutions.

I think this is such a really good approach. It's short, sweet, and to the point. And this is what we had reviewed, I think, before this report came out; I remember that. Okay. And possible solutions, I like that we provide that as an option. Okay. All right. Next section?

>> MEGAN CALLAHAN: The next section is employment.

[Pause].

>> KAREN GOLDBERG: Now, does the data or these little blips right above refer to the discussion underneath it?

>> SHAY CHAPMAN: Yes.

>> MEGAN CALLAHAN: Mmm-hmm.

>> KAREN GOLDBERG: So it's like a little blip in the blue and then employment? Okay. That's part of the trifold?

>> MEGAN CALLAHAN: Mmm-hmm.

>> KAREN GOLDBERG: It's part of the trifold, right?

>> CINDY SIMON: On one side, and then the next topic --

>> MEGAN CALLAHAN: This is page three. You open it, page two was employment on the left or education on the left and then employment in the middle, with the blip above it.

>> KAREN GOLDBERG: So it's pertinent to what's below.
All right. I think we can clean up just these little typos about the reference numbers, I think that's an easy fix.
Okay. Statistics look good.
And then the problems and then the solutions made. Okay.

>> CINDY SIMON: Just a reminder on the statistics, when we do it, we need to be careful again, 'cause I think it was on this one and not the one before when they went over it in the State, they changed the statistics on us.

>> SHAY CHAPMAN: That was the previous report.

>> CINDY SIMON: That was the previous?

>> SHAY CHAPMAN: We had an agreement from the Council for this report that if we were going to edit the report at the Department, then the Department wanted rights to change stuff and the Council did not want that to happen, so the Department did not do the editing process for this report.

So anything that's in this report was fully approved by the Council and was not edited in any format by the Department and that was the agreement that we made, because the Department if they edit, they want the right to change because they feel like their stamp is on it and they wanted it in a format that they approve of.

>> KAREN GOLDBERG: The Department of Health?

>> SHAY CHAPMAN: Yes, yes. It's a long history and I don't think we probably want to get into that now, Karen.

[Laughter].

>> SHAY CHAPMAN: I mean, of course you're the Chair and if you choose to get into that, we can.

>> KAREN GOLDBERG: What I want is accuracy in data. That's all I want. I don't care --

>> SHAY CHAPMAN: We can pull the data and ensure the accuracy of the data, but we can only pull data that we have verifiable sources for, so the Council wanted data that we couldn't verify before so the Department was not comfortable with that, and that's why this year the Department said we'll pull the data for you but if you add anything or you don't want the report edited or verified by us, it doesn't go through our

full process.

>> KAREN GOLDBERG: Okay. Let me just, it probably is a longer history than I want to address right now, but I just want to make sure I'm understanding what the issue is.

I think since we are under the Department of Health, we want their stamp of approval for data. I mean, I don't want to be putting out something that the Department of Health is not comfortable with.

>> SHAY CHAPMAN: That was the issue. The Council had a number -- it was a -- it was a larger number, but it was not verifiable by the sources of data that the Department has or that are available on a national level. So, the Department wasn't comfortable putting out something that had their stamp of approval.

So the report the prior year, the '15 report went out and the Department changed the data what the Department was comfortable with.

When the '17 report was ready to be routed, the Council voted or agreed under Glenna's leadership and Debbe's they did not want the Department changing anything they had in the report; therefore, this report did not go through the Department's full review and editing process. That was the agreement.

>> KAREN GOLDBERG: Can I ask if Glenna or Debbe can educate me how that decision process was made? Just as a fact finding and education.

>> GLENNA ASHTON: One of the main reasons we wanted it trifold and wanted pictures was the Department would have just done a plain black and white.

>> KAREN GOLDBERG: It would have been a written report.

>> GLENNA ASHTON: Right.

>> SHAY CHAPMAN: The reports that every council submits that are statutorily mandated do not look like this, they are basically a white paper, looks like a report.

>> KAREN GOLDBERG: Chris?

>> CHRIS LITTLEWOOD: With regard to the history of the data and the numbers, nobody's fault in here at all, but the probably biggest issue with the number used for the people that are deaf or hard of hearing was that when it was changed, we, as a Council, were not even informed before it was changed that that was going to happen. We just got the final product and they changed the number on us without telling us, point blank, so that was a big problem.

And I understand that the Department of Health can't put out any number or statistics that they're not comfortable with, and we certainly would not want to do that. So, we'll be very careful moving forward how we get that number.

I will say also, though, the number that the Department of Health had requested that we

use did not include minors or school-aged children or infants and stuff like that, so that brings your number way down.

So, the number can be skewed either way, and that was -- we just want to make sure we are fully inclusive of the entire population. And that's something that we should strive for moving forward.

>> SHAY CHAPMAN: And we agree and we all know that that report was written and submitted -- I came on after the report was written, so....
But I do know that that was the background on why the Council didn't want the Department to edit or verify their data this year. Although we did provide some data and the data we provided we can say is verifiable.

>> KAREN GOLDBERG: Okay. I think the most important thing is that we have accuracy and where the numbers are coming from, what the numbers include. That's the most important thing.

We are tasked with giving accurate information to the Florida Legislature. We are the advisory council, so I don't want to underrepresent or overstate the numbers or the challenges that we have, okay? We have plenty of challenges; I don't think it's really possible to overstate the challenges. But we don't want to manipulate numbers and then get called out for that. I want accuracy.
Okay. All right. So, at this point this is under the heading of the employment, correct?

>> MEGAN CALLAHAN: [Nods head].

>> KAREN GOLDBERG: All right. And if we can move forward from there.

>> MEGAN CALLAHAN: Sure. The next page or section is healthcare, I believe. Yes. This would be on page four.

>> KAREN GOLDBERG: Let's see.... so that's what I was saying, does this actually represent what's below it and now you're talking about the school year. Is that not lined up correctly?

>> MEGAN CALLAHAN: Um....

[Pause].

>> MEGAN CALLAHAN: That is a good question [chuckles].

>> KAREN GOLDBERG: All right. So I would recommend that under each topic heading, that we actually have a quote up there that is pertinent to what's below. Is that -- maybe it's just not lined up right on the website.

>> CINDY SIMON: Just as a comment. At one point within, we decided to change into a topic and have each area be a topic.
This is what we did then. We've done others. We don't -- just to realize, we can stay on these topics, but if there's not a lot of change, it would be like beating a dead horse.

We could see if there's other current, relevant topics that we have not covered yet and may want to bring in and bring attention to as well.

If something changed in the state, if something changed in education, if some laws changed, we should be bringing this to their attention as well.

>> KAREN GOLDBERG: That's correct, but I think it just reads better if you actually have a header that looks what you're talking about below.

>> CINDY SIMON: I'm not arguing about the header, I'm just saying we can change topics if we want for a header.

>> KAREN GOLDBERG: Okay. This is Karen. So here's the HLAA facts and statistics and how they did it. I mean, this is not a biennial report, okay, this is -- I'll just show you -- it's to the -- to the public as well I'll show it, okay -- so it's got blip, blip, blip, blip, it's kind of an easy read, you've got data and facts right away, you've got references on the back.
It's not a biennial report.

So what we're doing is a little more pointed, so I just kind of wanted to show you the difference. They both look very nice.

I personally like this style that we have, with the color, it pops out. It makes hearing loss and deafness visible, which is actually the slogan for HLAA, "Make hearing loss visible," but it does, and in terms of a black and white-type report, the Legislature gets plenty of those and we need something that grabs their attention. So I'm in favor of keeping it this way.

I think we just need to clean up some things.

So we're currently on the healthcare. We absolutely know there's inadequate training of healthcare professionals.

I was active at the University of South Florida in teaching medical students and training the residents who rotated with me on how to work with individuals who are deaf, hard of hearing, and deaf-blind, as I have many patients in that category. But we also did diversity and culture and workshops with medical students starting as early as the first year of med school and going on from there.

And so I kind of like how this is set up and what some of the statements are making.

The communication access is in the second line there, very effective, okay.

So, just going down, it has some good data and we have a reference for them to look at.

I see there's a picture with Rochester Institute of Technology. I'd like to see what we're doing in Florida; maybe we can put that in. I know UNF has some great programs, too.

And when public comments are available, I would like to hear from the community about what else is happening in terms of educating medical professionals, medical students, and should we, in fact, try to find a way to do a non-credit certificate and healthcare interpreting down here in Florida.

Maybe the interpreters can comment on that, if that's happening or not.

Shay or Glenna, is that an appropriate thing to ask them now? Do we have to step out of a role or do we have to wait?

>> SHAY CHAPMAN: We have to wait until public comment time.

>> KAREN GOLDBERG: All right. Thank you. Okay. Let's go on.

>> MEGAN CALLAHAN: All right. The next section is on page five and it is public safety and emergencies.

>> KAREN GOLDBERG: Beautiful, love it.

>> MEGAN CALLAHAN: So let me go over there.

[Pause].

>> KAREN GOLDBERG: So it's back to educational facilitators. Okay. Oh, I see, that's a general statement.

Okay. So we would want to put something up there that's pertinent, so we want to try to coordinate the page with that -- I love the blip, I absolutely love the blip, and then the discussion.

Great picture of the Governor. I don't see me in that picture.

[Laughter].

>> KAREN GOLDBERG: Let me see.... I'm not in the picture.

[Laughter].

>> KAREN GOLDBERG: We probably should have the guy wearing the flip-flops in the picture.

>> SHAY CHAPMAN: The pizza monster?

>> KAREN GOLDBERG: The pizza guy from Sarasota. Oh.... maybe we don't want to do that. We don't want to really poke the mayor [chuckles]. But that's actually good.

I'm going to make a suggestion for the picture. I know I said I want to go through it first and then we'll make suggestions, but there is is the certified deaf interpreter, and somebody remind me his name who did that amazing interpreting for the hurricane, and I cannot remember his name, but boy, was that beautiful.

>> GLENNA ASHTON: Sam Harris.

>> KAREN GOLDBERG: Oh, Sam Harris. I would love to have a picture of him, because that was -- that actually brought in a really subspecialty and that would be a wonderful picture to have, if he was willing to do it. We would have to ask him. Yes, Chris?

>> CHRIS LITTLEWOOD: This is Chris. Sam worked for St. Petersburg College for at least as an adjunct and I know him personally, so what I would suggest, especially if we're going to use his picture personally, if we ask him, I'm pretty sure he would be supportive of using one of his pictures. But I can definitely reach out to him and ask him if we can use one of his pictures for a future report.

>> GLENNA ASHTON: Also the other name of the guy, Andy Oldman and Betti Bonni.

>> KAREN GOLDBERG: Oh, yeah. I think they're all in the Tampa area, aren't they?

>> GLENNA ASHTON: Andy is Fort Lauderdale.

>> KAREN GOLDBERG: Okay. Fair enough. I think the goal is, like, what you have there, is have an example of appropriate effective interpretation. All right. Perfect, all right. Moving on.

>> MEGAN CALLAHAN: The next section is technology. That's also on page five, I think it's five and six.

>> KAREN GOLDBERG: So we've got a teeny tiny little blip of technology. Is that all of technology?

>> MEGAN CALLAHAN: I think there's more. The possible solutions and problems. Yeah, there we go.

>> KAREN GOLDBERG: Was that the only one that had a -- that had to be at the bottom of the page? Let's see if we can do page per page or page per issue or something. I really like that idea.

Financial assistance for hearing aids and assistive listening devices has probably been on there since the dawn of time.

Cindy, what are some of the options for financial assistance for hearing aids?

>> CINDY SIMON: Very little.

>> KAREN GOLDBERG: But there's some, right? Voc rehab?

>> CINDY SIMON: Voc rehab is one. You likely need to have more than just plain hearing loss in order to get that. I have a couple of patients from voc rehab. Some insurances actually have it. I met with somebody yesterday who actually had insurance, every three years, for \$5,000, and it's, like, what insurance do you have?!

You can go to places like the Lions Club, the United Way used to have a program but they eliminated it and so the Hearing and Speech Center near me no longer does hearing aids because they no longer have the United Way financial. And I think you --

>> KAREN GOLDBERG: Well, at the public comments, we'll hear from some of the members of the community.

>> CINDY SIMON: Yeah. So you may find some organizations, there are some individuals, Randy who used to be our hearing aid specialist representative has a foundation which would give hearing aids. Starkey has a foundation which gives hearing aids.

You have to fill out very daunting paperwork for all of this.

Some other organizations do it. I did a mission for twin 11-year-olds and the hearing aids were donated. There's some philanthropic.

>> DEBBE HAGNER: This is Debbe. I know HLAA has a website where they can get financial aid for hearing aids, and also one of the local chapters has a program where you can donate the old hearing aid, so we had that on the website about donating the old hearing aid.

>> CINDY SIMON: And so that would be Sertoma for children will refurbish it for them. Other things like the Lions Club may do that but every area is not consistent and you have to look at the area that you're in.

>> KAREN GOLDBERG: Going back to our biennial report, when we say possible solutions include.... number one, financial assistance for hearing aids and ALDS, are we talking about having the state do that or is that what we're suggesting, that the state can provide some assistance?

Is that.... what are we talking about then?

When they read that, what are they saying? Yeah, we agree, that's a great idea.

What are we asking them?

>> CINDY SIMON: And again, I think what they're asking is that insurances should have it mandated that they need to cover something for hearing aids.

I really think that's what we were talking about.

>> KAREN GOLDBERG: Okay. Then we need to be specific, because they're going to be, like, yes, we agree, but where are we going to find the money. I think that's something we need to think about.

Megan, the last time we did the biennial report, you had sent out to everybody make your suggestions and updates, is that correct? Didn't you do that and we all kind of made edits to these?

>> MEGAN CALLAHAN: This is Megan. Probably [laughs].

>> KAREN GOLDBERG: You did, it was beautiful. And then we actually saw it without all the pictures and everything, it was a Word document when we were working on it. I remember that.

Am I remembering correctly?

>> GLENNA ASHTON: Yeah, and we ran into problems when we sent it to a publisher and we kept going back and forth because they kept making mistakes, and then finally time just ran out and we had to go with this.

So we had problems not just with the Council looking at the paper, because not everybody did, but we had problems with the publisher themselves not really following

what we wanted. They just kept messing up things.
Do you remember that, Megan?

>> KAREN GOLDBERG: All right. I imagine it's a challenge, but we are going to have to update a few things here and there.
So, my suggestion is if you can send us a current Word document like you had from the last one, or is that impossible to do?
You look perplexed.

>> MEGAN CALLAHAN: I am. I'm not really sure what you're referencing. Do you want an updated one for 2019?

>> KAREN GOLDBERG: Yeah, I want to take 2017 and edit it a little bit and then update the info. We're not going to reprint the same thing over and over again?

>> SHAY CHAPMAN: No, there's a Word document that had all of this information that Megan can send you the 2017 Word document that can be a starting place for the 2019.

>> MEGAN CALLAHAN: I think I was just confused, because I was thinking that you wanted me to send out one for the 2019 biennial report, which we hadn't really worked on yet.

>> KAREN GOLDBERG: Right, no --

>> MEGAN CALLAHAN: So I can send the last draft that we had, that we sent to the publishers, the 2017.

>> KAREN GOLDBERG: Okay, send me what you sent to the publishers because that's what's represented here, or send it to everybody, and we're going to start working on this so that in November we have a consensus of where we want to go.
We're going to be ahead of schedule [chuckles]. Ideally.
Yes?

>> DEBBE HAGNER: This is Debbe. I would suggest that we also have modified the report so that it would flow better on the website, because right now Megan is scrolling the page because it's PDF, correct?

>> MEGAN CALLAHAN: Mmm-hmm.

>> DEBBE HAGNER: So we also need to have a website version and a PDF version too, so that way she wouldn't have to play with it. And that way when someone sees the website, they can come up and have to -- and not have to change.

>> KAREN GOLDBERG: Scroll out, scroll out from that and let's see how it looks.
Glenna?

>> GLENNA ASHTON: I have one suggestion. From all the phone calls that Megan has gotten, all the public comments that we've gotten, really the top two things comes up over and over again and I'm thinking maybe we should highlight it, maybe it prominent.

The two things that's been a constant refrain: ASL interpreters provision and paying for hearing aids. Those are the two top ones that keep coming up over and over.

So I'm wondering maybe in addition to all of the category topics, to really hit on those two top ones separately.

That's something that legislation can do something like that, insurance is required for hearing aids and required to make ADA -- making sure that interpreters are provided. Those are the top two, boom boom, and all the other --

>> KAREN GOLDBERG: I think without a doubt, we have to really address the interpreting, because we need to make it clear that you can't just pull a semi-good, okay signer to the front of the reception area to the hospital to come and help you with your patient, all right?

>> CINDY SIMON: I'm going to, A, warn you to be careful on the hearing aids and payment because they're going to come back to you and say FDA said in another year it's OTC, over-the-counter and even though we know most of those with hearing loss won't be able to use them.

Why are they going to pay for it when you can go into the drug store? That's how they put some medications OTC because they no longer pay for it, and we pay a lot of money in the drug stores.

So be careful what you say where hearing aids are concerned when that pops up.

I would like to see some of the warnings if we talked about it and as public education and encouraging they get an exam before doing that, to ensure there's no medical issues.

So, that's one.

And I had one more thing on the report....

>> GLENNA ASHTON: Yeah, the new thing with the OTC, is there now a new term with the hearing aids, like we had to distinguish it from OTC and, what, customized hearing aids?

>> CINDY SIMON: No.

>> GLENNA ASHTON: Maybe we need to come up with something like that, the industry needs to come up to distinguish the difference between OTC, you know, like you say, OTC medicine and prescription medicine, OTC prescription hearing aids? I don't know.

>> CINDY SIMON: So sometimes it's the same med, one is just stronger than another and one you have the professional adjusting it, and in the other, it has a limited output. But they tell you that.

So I'm not going to get into that discussion here.

There was one more thing you said about this....

>> KAREN GOLDBERG: While you're thinking, this is Karen, I'm going to jump in.

You know, it's interesting, you can go to the drug store and you can buy the glasses, the readers, cute little frames, everything, you know, everything going on, and I did that for a long time, until I realized that eye health is important, right, so now I have a specialist. And that's covered, right, in part, right?

My glasses are covered in part. Partly they are covered by my vision care.

But we have nothing comparable to hearing. And to the best of my knowledge, with hearing aids, they are not cosmetic.

>> CINDY SIMON: Okay. That is not true, I'm sorry.

>> DEBBE HAGNER: No.

>> KAREN GOLDBERG: How is it not true?

>> CINDY SIMON: Because my glasses are not covered at all, not the lenses, not the exam by my insurance. I have zero on it, okay. Not everyone has vision care.

For those who have hearing care in their insurance, like the lady I spoke to yesterday, they have assistance with it.

Otherwise, there is none of it.

So, no, everyone doesn't have vision care --

>> KAREN GOLDBERG: Right, I didn't say everyone has it --

>> CINDY SIMON: Well, I'm saying it's not covered --

>> KAREN GOLDBERG: You have to specifically get the vision covered for care.

>> CINDY SIMON: So some will give you -- I know from working with them, what the companies actually do is it's a no pay, they get whatever the company wants to get rid of offered at a significant, almost nothing, that's for the subscriber, and if they want anything better, then they charge them basically the same as normal retail to upgrade. But most people I know have no vision coverage, so it's pretty equal there.

And Medicare does not cover hearing aids. But the only time they cover glasses is one-time-only after cataract surgery, that I am aware of. Other than that, they don't cover anymore.

>> KAREN GOLDBERG: Fair enough.

>> CINDY SIMON: So it's in the same category.

>> KAREN GOLDBERG: Darlene?

>> DARLENE LAIBL-CROWE: I want to say, I have Humana Medicare and they cover glasses annually for those -- for free, free eye exam and a free pair of glasses.

They also will cover hearing aids, but it's only \$500 and one every year, one per year.

So, there's insurance that is slowly coming out, like with Humana, but they're not sufficient.

>> KAREN GOLDBERG: Thank you, Darlene, that was great. Thank you, everyone,

for that discussion.

So, we have panned out so you can see what it's going to look like on the website or what it does look like. Is that accurate, Megan? That's what it looks like on the website.

So it's a little bit backwards on the website, because it's a brochure.

I don't know if you -- how you want to do it.... um.... on the website, I don't know.

>> SHAY CHAPMAN: We can inquire with our web team if there's a different way to display it. I'm not sure if we've done that before, Megan?

>> MEGAN CALLAHAN: [Shakes head].

>> SHAY CHAPMAN: We can see if there's a different way to display it.

>> KAREN GOLDBERG: It displays it different on the web overview, but I don't see any numbers on the website or any pages, is that correct?

>> MEGAN CALLAHAN: There's no page numbers on the website; I had to go through and find it by the title itself instead of the page number.

>> KAREN GOLDBERG: All right. Fair enough. Yeah, Cindy?

>> CINDY SIMON: I just remembered what I wanted to say before. And this is something that I would suggest Megan can do it, she can do it with you.

Any time you do something like the document that was just worked on with Gina where she went to this meeting and we came out with this statement, anything like that, you should start keeping a separate tick list and then people aren't going with what have we accomplished, what have we done, when it comes time to write the report, but you will have a list of things that we've done that may have reaching consequences that were very positive that we want to highlight.

We may want to highlight more, you know, being out there more with access to the population in Florida.

These are positive things. We want to have good, positive things we're doing in there. So just keep a running list so you don't have to try and remember everything and what happened two years ago might have slipped your mind.

>> KAREN GOLDBERG: Good suggestion, Cindy.

Okay. So as we look to do the next biennial report, we're looking for some additional observations, recommendations, on where we want to go.

[Pause].

>> CINDY SIMON: Sorry, I would suggest first, do you want to keep these topics? If not, do we want to change any one or all of the topics?

And if so, to what?

And then you have a framework to start working from. And to start gathering your data.

>> KAREN GOLDBERG: Chris?

>> CHRIS LITTLEWOOD: Do we have an established biennial report committee?

>> KAREN GOLDBERG: Well, the biennial report committee says it's the Executive Committee. Who is that?

>> MEGAN CALLAHAN: There's also -- you can look in your binders at the membership and it will show you who else is on the Biennial Report Committee besides the Executive Committee.

>> CINDY SIMON: Number two.

>> MEGAN CALLAHAN: I'm not sure if the Executive Committee itself was updated with the Biennial Report Committee, but I know the other members are on there.

>> KAREN GOLDBERG: Oh, I see, I see.

>> CINDY SIMON: They're on there.

[Pause].

>> CHRIS LITTLEWOOD: This is Chris. The point to my comment was that just obviously the biennial report is gonna run into a very lengthy discussion and I just want to make sure that there's plans for committee meetings moving forward throughout the calendar year or you're going to run into the same problem we've run into in the past where it's not completed in time.

>> KAREN GOLDBERG: When is the due date on the biennial report? You said the end of this calendar year?

>> SHAY CHAPMAN: There's not a specific due date, since it's not a statutory report.

However, it would be a good practice to have the report ready to go when the Legislature is in session, when they start their pre-meetings, so, you know, January/February have it ready to go and start meeting, you know, in those months and that way if the Council is visiting, we can have it get out and have it delivered there when they're actually in their office.

As Chris said, a good goal would be to have a completed report by the end of the calendar year in December and printed so it's ready to go. But there's no set date; it's just a good practice.

>> KAREN GOLDBERG: I'm in favor of that plan as well. We meet in -- every February is a Tallahassee meeting, right? And every February, a group gets together the day before to meet with the Legislature. It's nice to have that in hand and ready to go so we can discuss it.

Okay. So we have a target date of November to finalize -- I'd like to finalize, be kind of at the tail end of everything, and then December, ready to print.

>> CINDY SIMON: So we don't always have people going to the Legislature the day

before.

I think in the past there's been other meetings going on around the same time. But that is not something that is a routine thing that we've done in the past.

>> KAREN GOLDBERG: Right. But over the past two years --

>> CINDY SIMON: Right, I'm just saying, if it was in conjunction with another meeting at that same.... right, the past two years, you've flowed from one to another in Tallahassee.

>> KAREN GOLDBERG: I'm sorry, what do you mean we've flowed from one to another?

>> CINDY SIMON: Let's say we went and this group was meeting here now and then we were meeting either crossing over the Council. That's what I'm saying. There were two meetings going on, so when they went to the Legislature, people were already there for other meetings, whether it be a FAD meeting or.....

There was one meeting with -- it was.... which one when we were there? Hearing.... it was deaf-blind primarily, I think, and that was crisscrossing with ours as well, even in the same hotel.

So that's what I'm saying, there were two things going on at the same time.

>> KAREN GOLDBERG: I hear what you're saying. The past two years, however, there have been a number of volunteers from the Council who have volunteered to go up a day before and we set up appointments and that was actually really wonderful to meet with Legislature and very efficient. I think we ended up splitting up part of the list, because even though we had a great schedule, people were running behind, and so we split up and we kind of divided and conquered and it was just an excellent experience.

I encourage if people are available, to come up a day early and do that, you know, we'll get a group together, we can discuss that, we can discuss that at the November meeting as well.

All right, yes, Chris?

>> CHRIS LITTLEWOOD: This is Chris, I just wanted to say I think it's outstanding what's been done in the last couple of years with a meeting with the legislators and I think we should just go forward with that.

>> KAREN GOLDBERG: And again, that needs to be on a volunteer basis, because we know people are working and it's difficult to take off work in that sense. But I did it for the past years with Glenna, with Debbe, with Donna. Anyone else?

>> GLENNA ASHTON: That was it, the four of us.

>> KAREN GOLDBERG: Yes, that was great, if we can continue to do that. Glenna is a master at contacting and setting up appointments. Wow, we were ready to rock!

>> GLENNA ASHTON: I'm willing to do it in February.

>> KAREN GOLDBERG: I think I saw a finger. A hand this time.

>> CHRIS LITTLEWOOD: I've done it on the Hill in D.C. and it is an excellent experience and I want us to continue to do that, if we can. Have we been able to have the Council support the extra day of travel for the people that do go?

>> SHAY CHAPMAN: This is Shay. That should not be a problem.

>> KAREN GOLDBERG: Yeah, it's been covered.

>> SHAY CHAPMAN: Yeah, if we have two to three people, I think we can do that.

>> KAREN GOLDBERG: I'm also part of the advocacy committee for the American Academy of Child and Adolescent Psychiatry and every year I go up and meet on the Hill and that is challenging, we have one meeting in the Canon building and then we have to go to another building and it's challenging.

>> GLENNA ASHTON: Yeah, we've done that, we do that as well and there is a lot of walking! Up, down the Hill and a lot of exercise!

>> KAREN GOLDBERG: Yeah, you're absolutely right, we want to have the biennial report to be ready to rock at the time.

Cindy, you asked if we wanted to add topics or subtract topics? I love the topics. I think that's the most pertinent that's going to grab them.

Under healthcare, however, I just wonder if we can make sure that mental health is -- I mean, that's a big issue for our society now, is mental health.

And thank goodness a person who is dedicated to that professionally, that this is finally getting some attention, much needed. It's been neglected for so many years. But I wonder about mental health, even if there's just a line or two about mental health and outreach.

>> GLENNA ASHTON: I thought we did that.

>> CINDY SIMON: I thought we addressed mental health.

>> KAREN GOLDBERG: Megan, can you scroll in? I love this, scroll in, scroll out.

>> CINDY SIMON: Yeah, we discussed that, and having to do with hearing aids --

>> GLENNA ASHTON: Scroll on that.

>> KAREN GOLDBERG: This includes doctor's offices, pharmacy, laboratory care, I don't see that specifically. Scroll down a little bit more. Okay. A little bit more.... problems in the area.

Yeah, lack of/poor access to mental health, yeah, there are challenges, anybody who

has additional challenges, deaf, hard of hearing, deaf-blind, any kind of -- mobility challenge, anything, we are really needing to up our game on making sure that access to care is there.
Okay. I love it.

All right. So we'll get the Word document from the 2017 draft. And the committee, the Biennial Report Committee will start to work on it.

Our Council is smaller than it has been in the past. I would make a recommendation that every Council member get a copy of that Word document and everybody have the ability to make comments. Everybody okay with that idea? Groovy? Okay. All in favor of saying groovy?

[Laughter].

>> KAREN GOLDBERG: Okay. We have about 10 minutes, 12 minutes left.

[Pause].

>> KAREN GOLDBERG: People had a lot of questions about pictures. Oh, actually I do have a question, maybe we'll hear about it later in the public comment session.

Is there something similar in the state of Florida for the non-credit certificate and healthcare interpreting that anyone on the Council knows about?

[Pause].

>> KAREN GOLDBERG: All right. Maybe over lunch we can do some research into that area, some discussion with people who may be in attendance in the public arena or some of the interpreters, and we can make a comment on that after we get back from lunch.
Okay. Boy, I would love to see more certificates in healthcare interpreting.

>> GLENNA ASHTON: Glenna. That may be something that you want to discuss with FRID.

>> KAREN GOLDBERG: Okay.

>> GLENNA ASHTON: They do lots of workshops on healthcare interpreting and mental health interpreting.

Troy University does an annual mental health interpreting training. There was a national certification. The problem is the actual interpreters spent money and time on more training.

It would be included as part of their CEUs, because every year they have to earn so many CEUs, and their choice of what kind of workshop they go to, specialized workshops, taking workshops on healthcare or mental health interpreting. I don't know what you mean by non-certificate. You mean --

>> KAREN GOLDBERG: That's what it says. It says non-certificate -- non-credit certificate.

>> GLENNA ASHTON: Yeah, that would be the training. So we have to talk with FRID, because they are offering workshops and there are some individuals there offering workshops and we have to encourage them to offer more.

>> KAREN GOLDBERG: All right. So that would be one thing. I think the University of North Florida does some work and I think I heard during the break that Barry University does it as well.

>> CINDY SIMON: A silly question, which would take care of multiple things to add to the report as well as our effectiveness as a Council.

Are there other organizations within the state that we can offer to pair with so that we can say for each of these areas maybe that we're working with that group?

For example, and I'm sorry everyone didn't see the letter that was just written from the committee that went out, so basically we offered our services for anyone within that Health Coalition who are looking to get things, to advise them and make suggestions for access for everybody.

And that's one way we're out there and working with someone else, and almost an outreach.

Are there other groups within the state that work on these things that we can offer our expertise to? That would both get us out there, as well as being able to say here's things working on more effective within the state, help more people, and have more information for your biennial report.

>> KAREN GOLDBERG: All right. Excellent.

>> GLENNA ASHTON: Glenna. I know one of the groups we really wanted to try to contact was the hospital group and the doctor group and that was a tough one; that we've been trying to do that.

>> DEBBE HAGNER: This is Debbe. I was just wondering, has anyone commented or said anything about our biennial report from the Legislature or anything? Is there any way where people can -- on there that says what they thought of it?

>> KAREN GOLDBERG: That's a great idea. I think that's the place where the website -- is there a place on the website where you can ask questions or is it just e-mail?

>> MEGAN CALLAHAN: It's just e-mail.

>> KAREN GOLDBERG: I would love to hear some feedback on, you know, ideas. I think the public is eager to make some responses. That's one avenue of feedback. I wonder if you're asking also about the Legislature?

>> DEBBE HAGNER: Well, anybody, anyone.

>> KAREN GOLDBERG: Anyone.

I have to say when we went and met with folks on the Hill -- is it called the Hill if it's in Tallahassee? Is it the Mount?

[Laughter].

>> SHAY CHAPMAN: The Capitol.

[Laughter].

>> SHAY CHAPMAN: We call it downtown.

>> KAREN GOLDBERG: Has anybody downtown said anything?

[Laughter].

>> KAREN GOLDBERG: I have to tell you that, when I would hand the biennial report to senators and representatives and they would sit there and read it, one even sat down from this area, that you met, too, Glenna, very interested, and went over the report with me, and then wanted more information, and I called Glenna, texted her and said, you know, drop the other senator, come.... no, I didn't say that.

[Laughter].

>> KAREN GOLDBERG: Drop that person! I said when you get a chance, come on over, he was very busy, but he spent probably 20 minutes with me just going over the report.

But I did get some positive feedback and it's easy to read and we put the problems, we put some possible solutions. They liked that, because our time is limited and they want to see what's the issue and what are you suggesting we do about it, and they like that. Glenna?

>> GLENNA ASHTON: I'm seeing so far from all of the things that you've said, you seem to like to keep the report basically similar, with just updates and different pictures? Is that it?

>> KAREN GOLDBERG: I feel comfortable with that. Other folks? Oh, I'm sorry, Mary?

>> MARY HODGES: This is Mary. I was just going to say that sometimes in reports, there is a live link that people can click, or it says "contact us" or, you know, where you can actually access somebody from the report. I don't know if it's possible to put something like that in the report.

>> KAREN GOLDBERG: Like a live chat person?

>> MARY HODGES: Not a live chat, but a way to -- do you know what I mean? Like "contact us" or where they can send feedback?

>> GLENNA ASHTON: We have that on the back page. Megan? Maybe it's on the last page we had that.

>> MEGAN CALLAHAN: I'm looking right now.

>> KAREN GOLDBERG: Scroll out.

[Pause].

>> GLENNA ASHTON: The contact information.

>> DEBBE HAGNER: It's just a phone number.

>> GLENNA ASHTON: On the last page we had a phone number to contact.

>> KAREN GOLDBERG: That is the last page.

>> CINDY SIMON: Mary's saying you know how when you go to a lot of sites, it clicks there, it's blue, and you can go there and it answers questions. But this is given out in paper --

>> KAREN GOLDBERG: Well, it's both.

>> CINDY SIMON: -- I think she's saying can we add online, even if we have the website there, if you click on it because you're looking at it online, and it directs you right to a place where you can write an e-mail and ask your question. Did I get that right?

>> MARY HODGES: Yes.

>> GLENNA ASHTON: And I would leave the e-mail contact only. You don't want to completely afford those comment boxes because they've been abused too much.

>> KAREN GOLDBERG: They've been abused, the comment boxes? You mean underneath it?

>> GLENNA ASHTON: Yeah.

>> KAREN GOLDBERG: Yeah, if somebody has a serious comment, you want them to e-mail it, contact us as an e-mail thing. I think that would be wonderful for that. I don't want any of the, you know, the scrolling nasty-grams.

>> MEGAN CALLAHAN: We have on the website, if you've seen it in the contact block, there's the e-mail right there on the website that people can go to, and it's kind of like a feedback box e-mail that gets sent to me and I send back a response.

>> KAREN GOLDBERG: Wonderful. I'm going to -- I would just say we make that

available there.

Okay. Any other thoughts before we adjourn for lunch?

>> GLENNA ASHTON: Remember, after lunch, we have dessert over there.

>> KAREN GOLDBERG: Oh my gosh, she's trying to sell it! What's in it?

[Laughter].

>> KAREN GOLDBERG: So just some feedback. Everybody feeling like today's flow is going okay and halfway as good as when Glenna does it?

[Laughter].

>> GLENNA ASHTON: You're doing a good job.

>> KAREN GOLDBERG: I'm hemming neglect on the right side and I'll work on that.

>> DEBBE HAGNER: I'll poke you.

>> KAREN GOLDBERG: Now you're going like this [indicates].
Okay. So I think that's good.

Last time we ran a little bit late getting back after lunch because, you know, it gets tight, an hour goes quickly and everybody is going to lunch at the same time, so I'm very excited about the presentation we have at 1:15, so I'm going to suggest that we leave three minutes early so you guys can take that long walk across the street to get to lunch and get back here, because I don't want to miss one moment of this presentation on Inclusive Health Coalition by Bryan Russell.
Any last comments?

[No response].

>> GLENNA ASHTON: Let's eat!

>> KAREN GOLDBERG: Do I have to make a motion to go eat?

[Laughter].

>> KAREN GOLDBERG: All right. Everybody, let's go eat. We'll see you back at 1:15.

[Break].

>> KAREN GOLDBERG: Ahem.....

Okay, folks, okay, folks, it's 1:15. Welcome back. Is everybody here? If you are not here, raise your hand.

[Laughter].

>> KAREN GOLDBERG: I think that we did a tremendous job getting lunch on a very tight schedule. I think everybody's going to have a little bit of indigestion.

[Laughter].

>> KAREN GOLDBERG: I had a bite of my food and my sister is holding the rest and I know what I'm having for dinner.

Welcome back. This is my first time doing the after lunch thing. We don't have to reintroduce ourselves, do we? I know who I'm.

>> CINDY SIMON: After lunch roll call.

>> KAREN GOLDBERG: Okay. Let's do roll call.

>> MEGAN CALLAHAN: Do you want to start that way?

>> KAREN GOLDBERG: Yes.

>> DARLENE LAIBL-CROWE: Hi, this is Darlene Laibl-Crowe, I'm from Palatka, and I represent those who are deaf-blind.

>> SHAYLA KELLY: This is Shayla Kelly representing the Florida Department of Health.

>> MARY HODGES: Mary Hodges, Department of Elder Affairs.

>> DEBBE HAGNER: Debbe Hagner representing HLAA.

>> KAREN GOLDBERG: Karen Goldberg representing HLAA.

>> GLENNA ASHTON: Glenna Ashton representing the Florida Association of the Deaf.

>> CHRIS LITTLEWOOD: Good afternoon, this is Chris Littlewood representing Association of Late-Deafened Adults.

>> CINDY SIMON: Hi, everyone, Cindy Simon representing audiologists.

>> SHAY CHAPMAN: This is Shay Chapman representing the Florida Department of Health and we have Megan Callahan also representing the Department. She is getting the presentation set up.

>> KAREN GOLDBERG: Fantastic. We want to welcome back our interpreters and our CART Provider.

Is there anybody on the telephone or online to introduce themselves?

[No response].

>> CINDY SIMON: Oh, we don't need an interpreter for the audience here? I just want to make sure.

>> KAREN GOLDBERG: I don't know where the interpreters are.

>> CINDY SIMON: Okay. We had one person and I wanted to make sure.

>> KAREN GOLDBERG: Okay. Do we need to announce again who's not in attendance or is that enough? We did it once today.

All right. Okay. We're very fortunate today to have a presentation on Inclusive Health Coalition by Bryan Russell with the Florida Department of Health Disability and Health manager at Bureau of Chronic Disease and Prevention. Bryan, we welcome you and thank you for your service.

>> BRYAN RUSSELL: Thank you.

>> KAREN GOLDBERG: I'm going to go ahead and turn it over to you. Do you have a microphone?

>> MEGAN CALLAHAN: This is Megan. We're currently working on getting the presentation up, so it's going to be a couple minutes.

>> KAREN GOLDBERG: Okay. Does anybody want to talk about anything else that came up in the morning session while we're waiting on Mr. Russell's presentation?

[No response].

>> KAREN GOLDBERG: Where are the other interpreters?

[Pause].

>> KAREN GOLDBERG: Yes, Debbe?

>> DEBBE HAGNER: One thing that should be brought up is to consider the LGBTQ and we also need to deal with the mental health for -- okay. We'll start all over.

We need to be concerned to include how to help those who are LGBTQ. And also for domestic violence, those who are drug addicts, A.A., alcoholics, we need to provide services and help for them.

>> KAREN GOLDBERG: Thank you, Debbe. I think that you're referring to some information in a suggestion that came up during the lunch break about what we can consider for adding to the biennial report and the website.

[Pause].

>> KAREN GOLDBERG: Other thoughts? Cindy?

>> CINDY SIMON: I just have to make a comment. I don't know if anyone, I don't watch TV often, but when I have, showing in the commercials and showing some of the banks or something noticing that they're really highlighting the Deaf population. I'm

seeing that more and more and I'm really excited to see that.

>> KAREN GOLDBERG: There was a -- this is Karen -- there was an advertisement for a hotel, was it the Marriott? I'm sure it was the Hilton.

[Laughter].

>> INTERPRETER: Yeah, I think you're right, it was the Marriott.

>> KAREN GOLDBERG: Yeah, and it was showing that people who worked there were practicing sign language and then, you know, being available. And of course we know that there's the effort by Starbucks to have more accessibility for the deaf and hard of hearing.
Yes, Chris?

>> CHRIS LITTLEWOOD: On that same subject, I've complained a time or two about the accommodations for hotels. But this one here was perfect. They had everything set up for me right in line. The young lady that checked me in even knew a little bit of sign language, so it was really great to have that.

>> KAREN GOLDBERG: This is Karen. Thank you for saying that. I have to say that it has been such a smooth transition to coming into this hotel. Everybody has been wonderful and accommodating. I haven't really been using a lot of sign language with them, but other people have, I think.

>> DEBBE HAGNER: Yeah, I agree.

>> KAREN GOLDBERG: They're wonderful. So kudos to the Hilton! Get your blue Honors on!

[Laughter].

>> KAREN GOLDBERG: How are we doing on setup?

>> LASHAY: Just waiting on the transfer. So far it hasn't come over.

>> MEGAN CALLAHAN: It says it's been sent and you should be getting it.

>> CHRIS LITTLEWOOD: I want to make a comment about the biennial report while we have a moment. One thing I thought of as we were getting ready to break for lunch is the comment that we discussed about other states having a commission for people that are deaf or hard of hearing. That might be something that we want to highlight in our report, this is what is available in other states. Because nobody is going to want to see what we don't have in Florida.

>> KAREN GOLDBERG: I've got to say, I love that!

>> CHRIS LITTLEWOOD: That's an important thing to point out.

>> KAREN GOLDBERG: I've got to say I love that! Maybe we'll have a picture of Minnesota. No, I'm just kidding.

[Laughter].

>> KAREN GOLDBERG: No, let's not do that. But I absolutely love that. We want to be assertive in what we're looking for and what we need. Not just what we're looking for but what we need. Shay?

>> SHAY CHAPMAN: Just some language to say how many states already have commissions?

>> CHRIS LITTLEWOOD: I know a lot of different states that have very strong deaf and hard-of-hearing commissions and they're numerous. So if we can say that, you know, 30 or 40-some states in the Union have those services and we're not one of them, that would be important to do.

>> KAREN GOLDBERG: This is Karen. And yet, at the same time, we have one of the highest numbers of deaf and hard of hearing in the United States, is that correct? We're 1/3 or 1/4 highest number.

I said we have one of the highest numbers, 1/3 or 1/4, from Laurent Clerc at Gallaudet, they have one of the highest --

>> GLENNA ASHTON: It's "Claire," sounds like.

>> CINDY SIMON: It's French.

>> GLENNA ASHTON: I'm assuming because we have a large population, period. We're number three now and if you look at a percent, we would be large, but we have a lot more people here than in other states.

>> KAREN GOLDBERG: Darlene?

>> DARLENE LAIBL-CROWE: This is Darlene. I agree with what Chris said about not having everything that we don't have. And like you said, the deaf and hard-of-hearing commissions and other services in other states, that's the same situation with those who are deaf-blind. They have deaf-blind services in other states that, in Florida, we are served, the deaf-blind are served for their hearing by VR and their vision by the Division of Blind Services, and even though they try to communicate, the training and rehabilitation doesn't meet both needs.

They focus on primary disability. And as a person who is deaf-blind and grew up hard of hearing and sighted, losing vision on top of more hearing, I need to use both of my residual hearing and vision to comprehend and understand things around the room, in the room.

And I know I don't communicate very well in the meeting and that is because I cannot see what is happening, what is being said, and I cannot keep up with the flow of the

conversation.

So I apologize for that, I'm not able to do so, and that's what I want to say.

We definitely need to get the word out that the services in this state or the resources are not sufficient.

>> KAREN GOLDBERG: Thank you, Darlene. And I will counter one point that you said. I think you communicate beautifully. And I value very much what you have to say and to share.

>> DARLENE LAIBL-CROWE: Thank you.

>> KAREN GOLDBERG: We have -- Glenna?

>> GLENNA ASHTON: If we're going to have language about the appearance of other states that have permission, we could also compare how the state has a state-level agency, an agency for disabled persons, ADP, which is now a definition, by the way, that does not include everybody, it's only certain conditions, and you have the blind bureau, or whatever it is, the blind bureau at the state level. You could compare it, we have services for this group, we have services for this group, and yet deaf and hard of hearing are probably a larger population than those two. We could put our mission there for comparison.

>> KAREN GOLDBERG: I just -- thank you, Glenna. It's APD, Agency for Persons with Disabilities.

Are we ready for the presentation?

>> MEGAN CALLAHAN: [Laughs]. We are getting there.

>> KAREN GOLDBERG: Okay, that's good. Getting there is better than no way. Mary?

>> MARY HODGES: This is Mary. While we're still waiting for the presentation, can somebody be very specific about the division or the difference between what we -- how we function as a council versus a commission and what would be our goal as a commission?

>> CHRIS LITTLEWOOD: Okay. As we are a council, we are strictly an advisory board to advise the other departments, commissions, and the agencies that are a part of the state of Florida that provide direct services.

We do not provide any direct services.

If somebody comes to us for information, the only thing we can do is provide them a referral.

So if somebody's never remembered of FTRI but needs to know how to get an amplified telephone or a caption telephone or something like that, we help make that action, but all we're doing is providing information.

And letting the state agencies know what they can do to better connect and provide communication access to people who are deaf and hard of hearing.

Other states have commissions, commissions that do provide direct services. So that would mean that in some cases they would provide sign language interpreters for people in the situations that they may need them.

I do realize in some situations if it's related to the workforce, vocational rehabilitation provides that in the state of Florida.

But the commission would cover all bases for people that are deaf or hard of hearing. Referrals and information and funding and direct services for hearing aids, regulation for audiologists, things like that, these would all be taken care of by a commission. They would help provide the direct services, the regulation, the information, everything. A lot of the things that we just, quite honestly, don't have the power to do as an advisory council.

>> GLENNA ASHTON: They get a big budget.

>> KAREN GOLDBERG: This is Karen, I think that is the difference, they have somebody designated or a committee designated at the state level.

I can only say that my experience -- well, actually with two different states, with Minnesota and with Alabama, both have dedicated committees or commissions for deaf and hard of hearing.

I was going to -- when we were talking about the next meeting, I was going to ask if people would be interested in having the person from Minnesota come and speak on how they set up their commission. She's been with them, I think 25 or 30 years, and as a group something similar to what we have in terms of council to now in the form of a commission, that has a lot of influence and budget that's dedicated for this purpose.

>> GLENNA ASHTON: Glenna. Knowing the history of the Florida Legislature and their policies, they really don't care what the other states are doing, especially if it's not a state they're competing with. Now, Minnesota is too far. We might look at similar states like Texas or Georgia or some other states.

But I know from when I tried to suggest other states, Minnesota is another country to them. Plus if you're bringing somebody to speak. Now, Florida claim they want to be first in everything and it's not happening.

But I've noticed they really don't like to be compared to other states unless they're states that are nearby or similar. And Minnesota is not nearby and it's not similar.

>> KAREN GOLDBERG: This is Karen, I just wanted to comment on that. I don't think that we're bringing them to speak to the Legislature, I think we're bringing them or having that person come in and speak to us about how did they grow the services in their state. I think that's interesting. It's important. How did they make coordinating their services quite well in that state. I'm going to go to Chris and then Debbe.

>> CHRIS LITTLEWOOD: I do think that would be a good idea as far as how they did

it.

And when you say that the Florida Legislature doesn't care how other states are doing, a lot of times I have to agree with you.

But I will also say that it's our job to make them care and that's what we're supposed to do, as an advisory board, let them know why it's important, so we need to keep that up front and provide the information so that we can move forward in some of the directions we want to.

>> DEBBE HAGNER: I wanted to ask Shay if we'll have enough money to pay for them to come, for the hotel, reservations, da, da, da.

>> KAREN GOLDBERG: Go ahead, Shay, if you can respond to that question.

>> SHAY CHAPMAN: I didn't know if Cindy wanted to --

>> DEBBE HAGNER: I asked specifically you.

>> SHAY CHAPMAN: I don't think that should be a problem. This past year, we'll go into this with the budget when we review it tomorrow, the Department had set aside 133,000 for the Council and we spent 90-something thousand, so there was extra money in there and if that's something the Council wants --

>> KAREN GOLDBERG: And the person that's coming to speak is actually a previous or part-time Florida resident and has family in either Ft. Myers or Sarasota so, you know, she's lived here before. So she knows both states and it would be really good to get her perspective.

>> SHAY CHAPMAN: Yeah, I think we can definitely justify travel for that and I'm willing to try to make that work.

>> KAREN GOLDBERG: It's interesting.

>> CINDY SIMON: The only thing I was going to suggest, and that's because I just did a meeting this way, is if the state allowed something like GoToMeeting, we can bring them in on the screen and still be able to talk and get that information.

>> KAREN GOLDBERG: That's a good option, too.

>> CINDY SIMON: While conserving our resources for things within state.

>> KAREN GOLDBERG: That's a good point, too. And we may have to still comp her time. I mean, she's a really busy lady.

>> CINDY SIMON: I understand. I also think if we get that way, it may broaden our options for speakers as well.

>> KAREN GOLDBERG: Yeah. Glenna?

>> GLENNA ASHTON: There's also the commission in Arizona has done a lot of

things and the person that runs the Arizona commission used to live here in Florida.

>> KAREN GOLDBERG: That's another option.

>> GLENNA ASHTON: So I would suggest we do some research about all the different commissions and their background. And I think it's important to consider states' similarity, because some states are a lot more diverse than others states. Like, for example, Arizona is a lot more diverse than Minnesota.

I'm thinking that if we do some researching and we look at all the commissions and the people, I'm thinking this would be a good project where they're not just speaking to the council, we're speaking to all the organizations, because all of them would have -- would be stakeholders, there would be FAD, FRID, HLAA, and all those officers and interested members to have, like, a big open type of meeting to discuss about commissions. I think that could be bigger than just the council.

>> KAREN GOLDBERG: Debbe?

>> DEBBE HAGNER: I already have a spreadsheet on all of that already.

>> KAREN GOLDBERG: Wonderful. She's going to bring that in tomorrow?

>> DEBBE HAGNER: Yeah.

>> KAREN GOLDBERG: Wonderful. That's great. Lots the great ideas. We certainly do make a good use of time.
Mary?

>> MARY HODGES: Yes, is coordination a big part of the work of a commission?
Coordination of services or resources?

>> KAREN GOLDBERG: Partly. I mean, I don't know all of it, that's why I would love to have somebody come in and speak with us.

>> GLENNA ASHTON: Glenna. Maybe of the commissions have their own staff that provide direct services, so it's not just like what we do here, they mainly have their own staff, like case workers and social workers, interpreter trainers, that kind of thing.

>> KAREN GOLDBERG: So I guess in my fantasy, I would envision Florida at some point having a dedicated commission, but that the Coordinating Council still remains and that we would be advisory specifically.

Now, we have somebody that we're specifically advising, right, so we're doing a lot of the legwork for them so that they can continue to improve services throughout the state of Florida. That's my fantasy.

>> MARY HODGES: I guess I was speaking from the consumer perspective. If I were an individual who had hearing loss, surely I don't just need that. So in terms of seeing people as whole individuals and linking them to various resources.

>> KAREN GOLDBERG: Right.

[Pause].

>> KAREN GOLDBERG: Mary, are you saying that they're -- what are you saying?

>> MARY HODGES: I'm saying there's a specialty that we are identifying as hearing loss, so that is a population. But in addition to hearing loss, people have other needs that they need to be connected to.

So, it's kind of like what we talked about earlier on with getting -- oh, I know, we're getting the brochures updated that we have for the Coordinating Council.

>> KAREN GOLDBERG: You mean the biennial report?

>> MARY HODGES: No, we have brochures. We have a little brochure that is very old now, but we need to update it, because that's something that we can distribute and it would have information and it would be something that I know from the aging population, we can definitely get that to communities because that's what we do, is deliver information and resources.

So just making sure that people don't have to go a million places for information.

>> KAREN GOLDBERG: Good point, very good point.
I'm sensing success at the other end of the room.

[Laughter].

>> KAREN GOLDBERG: And it feels like a really appropriate segue to have Inclusive Health Coalition and the iCAN implement process by Mr. Bryan Russell.
I'm going to turn it over.

>> BRYAN RUSSELL: Okay. I'm going to sit down, if y'all don't mind? Maybe?

>> KAREN GOLDBERG: Take a chair; take a knee.

>> BRYAN RUSSELL: [Chuckles]. There we go.
Y'all good?

>> DEBBE HAGNER: No, you're blocking that. Sit in that chair.

>> KAREN GOLDBERG: Oh, perfect.

[Laughter].

>> BRYAN RUSSELL: Okay. If I don't break my neck, I'll be good.

[Laughter].

>> BRYAN RUSSELL: Okay. I want to say thank y'all very much for the chance to speak on the IHC and everything we're doing with DOH and the pilot sites as well.

A quick agenda of what we're working on today, I want to give a brief description of what the Disability Health Program is, what we've done, what we're going to be doing, and throw out some more data, because we all like data and statistics.

So, you know, throw out some statistics and disability in Florida, disability prevalence, diabetes prevalence among people with disabilities.

And then I'll get into the meat of the presentation on the Inclusive Health Coalition, who it is, what it is, what we plan on doing, and go from there.

So, with the Disability and Health Program, our main purpose is really just, like I said earlier, we want to make sure that persons with disabilities or Floridians with disabilities are included in all of the department's programs, interventions, services.

And we also want to do things, like, you know, sharing data with our state, with our stakeholders, with other states on, you know, on the condition, on the state of the disability in Florida.

So beginning in 2016, we were awarded a second round of funding from the Centers For Disease Control and Prevention, otherwise CDC. This new funding cycle we're in is focused more on implementing inclusive actions and programs.

Previously, our previous five-year funding cycle, we were focused on not research, but on emergency preparedness and planning and really just communicating to persons with disabilities and resource development and resource guidance.

So we're going into more of a problematic role this funding cycle, which I'm happy about.

I like getting my hands dirty and providing direct services and really making an impact.

So, we're in a great time right now. We're working on two specific interventions; that is, increasing physical activity for children with disabilities in exceptional student education, or ESE schools, and improving access to diabetes prevention programs for persons with disabilities.

The first one real quick I'll talk about is the -- our working with ESE schools. CDC a number of years ago created a comprehensive school physical activity program to help encourage students to be more physically active before, during, and after school.

The only drawback to that is within the curriculum, there's no mention of persons with disabilities or students with disabilities. Meaning, if you're a teacher and you want your students to do, you know, let's -- to do, like, an activity that requires them to get up and move, if you have a child in a wheelchair, that's not gonna happen.

Or if you have a child who is deaf or hard of hearing or blind or has low vision, how are you going to -- how is that child going to participate?

So, we talked with the CDC and told them what we were going to do. I don't ask permission, I just do it and ask for forgiveness.

[Laughter].

>> BRYAN RUSSELL: So we kind of told them what we're going to do and they think it's a great idea.

So right now we're working with two ESE schools in Tallahassee and Gainesville to implement this adapted curriculum. It's gone very well.

The school, the Sidney Lanier Center in Gainesville has implemented one of their playgrounds specifically for students with disabilities and the Gretchen Everhart School in Tallahassee has built a room for their students with autism and they're renovating some of their equipment with the swimming pool and they're creating rainy day kits for all their teachers.

So, we're making some really good headway. This year we're expanding to five schools and one of them is a mainstream K-8 school in Lee County, so we're going to be implementing this adapted curriculum in a mainstream school. So it's really going to be interesting on how we do that.

The Diabetes Prevention Program I'll be addressing momentarily.

But dealing with disabilities, some quick data. All this data and statistics come from the latest CDC Behavioral Risk Factor Surveillance Study, it's a national survey done every two years.

So the latest stats show that among all adults ages 18 and older in the U.S., about 24-25% of them report having some type of disability.

>> SHAY CHAPMAN: Can you move the slide forward, Bryan?

>> BRYAN RUSSELL: I will move the slide. Thank you. Now you can see the data. I told you it's up there.

So about 25% of all U.S. adults ages 18 and older report having a disability.

Here in Florida, that number is about 27-28%. So we are a little higher in this state. And like I said, this is adults 18 and older. The BRFSS doesn't address children, they focus on adults 18 and older.

>> DEBBE HAGNER: What's BRFSS?

>> BRYAN RUSSELL: Behavioral Risk Factor Surveillance System. It's a study produced by the CDC.

>> SHAY CHAPMAN: It's a telephone based survey, if you'll recall we tried to get some questions added and changed about hearing loss a couple years ago and it's a telephone survey that goes out to Floridians, and historically we only had county-level data on that survey every three years, but they switched to a new bottle where we have county-level data throughout Florida on that survey every year now. And if you need more information how to access the data that comes out of that survey, we can provide that to you.

>> DEBBE HAGNER: How is that accessible for people who are deaf who can't -- is it

through the relay or through the TTY or what?

>> SHAY CHAPMAN: It would be through the adaptive twice that that person use, but yes, we agree they weren't fully capturing that but through Glenna's leadership we provided as feedback to the CDC and they're developing that survey in years to come and we did provide that feedback on a national level.

>> BRYAN RUSSELL: Chris?

>> GLENNA ASHTON: That means it's highly likely that the deaf and hard of hearing are undercounted.

>> BRYAN RUSSELL: Right, right, definitely. This is just a survey. It's a statistical sample that they pull and so it's done at the federal level and we just grab the data. Yeah, Chris?

>> CHRIS LITTLEWOOD: A thought that occurred to me is you mentioned your funding and a lot of your information comes from the CDC.

>> BRYAN RUSSELL: Mmm-hmm.

>> CHRIS LITTLEWOOD: There was a pretty big outcry during the same time you said you got a second cycle of funding maybe a year or two before that that the CDC removed all the language related to people with hearing loss or people that are deaf or hard of hearing as being included with people with disabilities. With that said, how does that affect your work?

>> BRYAN RUSSELL: It doesn't. We look at inclusion for all disabilities, whether it's mobility limitation, intellectual, sensory limitations, developmental disabilities. It's basically how the ADA defines disability.

The stuff that we're doing on the school level is really up to the individual schools that are participating, if they need something for children who are deaf or hard of hearing, you know, to implement the curriculum, then they'll do it, that's not a problem. Yes?

>> DARLENE LAIBL-CROWE: It's okay for me? This is Darlene. One of the things that I noticed when you were just talking a few minutes ago, you were talking about children, services that they have, what they're working with the schools, and then you say the data is from adults.

>> BRYAN RUSSELL: Mmm-hmm.

>> DARLENE LAIBL-CROWE: So, I know that the services are not the same for adults as they are for children, so the statistics aren't matching up with the actual services that you are stating, because you said there were no -- there were not any concrete data for children?

>> BRYAN RUSSELL: Well, there's not concrete data with the BRFSS, with what this survey that I'm presenting on.

As far as surveys for students with disabilities, we work with the Florida Department of Education and they have a lot of good surveys on children and on ESE, children in ESE services, whether that's children with disabilities or children in the gifted programs. So, that's kind of where we're going for that.

But for the diabetes stuff and for this presentation, that's what we're --

>> DARLENE LAIBL-CROWE: What about adults? Do they get services?

>> BRYAN RUSSELL: Yes. And I'll be talking a little about that in a minute with the diabetes prevention.

>> DARLENE LAIBL-CROWE: That's it? Just diabetes prevention?

>> SHAY CHAPMAN: Darlene, this is Shay. So Bryan is limited to the specific activities that were funded in his grant. So this is not an all inclusive program for people with disabilities, this is a pretty specifically-focused program, and so he's just presenting on what his small amount of funding does.

>> BRYAN RUSSELL: [Laughs], right, very small amount of funding.

>> SHAY CHAPMAN: Even though it says the Disability and Health Program, and that seems huge, it's really limited to one grant that has very specific focus areas and very limited funding.

But he did want us to know about what's going on with this grant.

>> BRYAN RUSSELL: Right.

>> SHAY CHAPMAN: But we're not going to cure the world's problems with this small amount of funding but it is a start and a step what he's doing with his program.

>> DARLENE LAIBL-CROWE: Okay. So it's more focused with children services instead of adults.

>> KAREN GOLDBERG: Yeah, this is Karen, I, for one, would like to hear the presentation.

>> BRYAN RUSSELL: Absolutely.

>> KAREN GOLDBERG: So let's go ahead and hold our questions until the end so he can move forward with his presentation, please. Thank you.

>> BRYAN RUSSELL: Thanks. So, with diabetes prevalence in Florida, the same survey was talking about and addressed it with currently about 9% of adults have reported having type II diabetes across the country.

Here in Florida, it's about 12%. So we're, you know, we're leading this nation. We're not leading the nation, but we are higher than the U.S. rate.

And we're going to -- and I got to drill down a little bit more and so with this data, about

16% of Floridians ages 18 and over have diabetes and have a disability.

Within the same survey, that number nationwide is about 7% of Floridians -- of U.S. -- no, 7% of Floridians ages 18 and over have diabetes without having a disability.

All that goes to say is that persons with disabilities are more prevalent to have chronic diseases like diabetes, stroke, heart disease, epilepsy.

And because of that, they also deal with more of a higher prevalence for obesity, lack of access to physical activity, healthy food, doctors' appointments, transportation, lack of access to parks and recreation activities as well, which is kind of where the Inclusive Health Coalition is going to come in and help alleviate some of that.

A quick history. When that started, back in 2016 when we were developing our work plans and what we wanted to address, we knew diabetes was one of the major issues we wanted to address and we looked at the curriculum, some of the diabetes prevention program curriculum that was out there and none of it had inclusive language, none of it was doing anything to make accommodations for persons with disabilities.

And these were all evidence-based programs, sponsored by the CDC but none of it was inclusive.

So we worked with a group of about 16 people from different organizations and persons with disabilities to identify the curriculum and to look and read through it and to see who was going on, what the barriers were and how we could overcome the barriers.

So we added some inclusive language into the curriculum, things like, if -- telling the lifestyle coaches if you have a person that uses a wheelchair, you know, encourage them to do adapted exercises, things like that.

If you have someone who is deaf and hard of hearing, have an interpreter present. You know, items like that, to be more inclusive and accommodating.

At the same time, we also learned that one of our national partners had taken this specific curriculum that we were looking at adapting, they had taken that curriculum and had totally adapted it for persons with disabilities.

So, instead of reinventing the wheel, we partnered with NCHPAD out of the Foundation, that stands for National Center on Health, Physical Activity, and Disability. They're based out of UAB or University of Alabama in Birmingham and they provided us with funding to take their curriculum and implement it in three pilot sites.

Now, as part of the curriculum, that's also where the Inclusive Health Coalition comes in and we thought it would first be to implement the curriculum but it's the whole process of preparing the community for the adapted curriculum.

And so the overall goal of Inclusive Health Coalition is basically we want to create a framework of inclusion for all public health interventions and all public health interventions and all programs can use this framework to reach out to persons with disabilities.

It's kind of like paving the road before the new company comes in or before the new plant comes in.

You know, growing up, when I -- where I grew up, we had a huge Mercedes plant, the first plant in the nation came to Alabama and at the time, the interstate was only two -- was only four lanes.

Well, once they announced Mercedes was come, they had to widen it to six lanes in order for preparation for the plant arriving.

And we want to make sure our three pilot sites in these communities are ready for this new intervention or this adapted intervention.

So, with the Inclusive Health Coalition, like I said, you know, its main purpose is to provide that inclusive framework for all over, whether physical activity, nutrition, obesity prevention, heart disease reduction, activities for persons with disabilities.

And when I say "persons with disabilities," we're talking mobility limitations, persons who are deaf, hard of hearing, persons who are blind and deaf, you know, intellectual disabilities, developmental disabilities, the entire spectrum.

I want to make sure that the community develops health transformation plans. You know, we want to make sure that every stage of the development is addressed with us.

And with the -- with the IHC, we're wanting to, as a way for us to do that, we want to make sure that, you know, that the members, that the membership reflects each community.

Like I said, we're working in Bay, Hillsborough, and Duval Counties with these three pilot sites. Hopefully next year it will be more sites, statewide.

And we want to make sure that the phrase "nothing about us without us" is the central phrase or the essential message within these coalitions.

Persons with disabilities are vital as members, they're caregivers. We want people -- you know, we want -- if we're making decisions about -- that are going to impact them, we want them to be at the table making those decisions. That's the main point of the IHC.

As a part of that, disability-focused organizations such as like the centers for independent living, your Coordinating Council, Agencies For Persons With Disabilities, transportations, Department of Transportation, transportation disadvantaged agencies are really important. So we want them at the table.

And of course the local health departments. I mean, they're the ones that are providing the services, and so they're integral in that.

And Chris will be attending one of our meetings in Hillsborough County next week, so

we're really looking forward to that and how he's gonna represent you and these other agencies.

And so going into this process, it's three stages.

You know, there's three separate stages, but they all kind of work hand-in-hand at the same time, so we want to look and develop the plan, the solution, and then implement and evaluate it and make sure that what we're doing is working. And if it's not, we're gonna change it and make sure it works.

And this is a brand new process for everyone, whether it's, you know, NCHPAD, us, it's Florida and Montana are the two states that are implementing the Diabetes Prevention Program.

So, with stage one, first off we wanted to, the three coalitions need to have at least one or two meetings, and at those meetings, they're going to start deciding on how they want to conduct the assessments, ensuring that the communities, to see what the barriers are to participating in these -- in these programs.

A couple of the tools that we're using are the standard ADA checklist and what NCHPAD has developed called a Community Health Index or a CHI -- can you click on that so we can hear it?

>> LASHAY: We probably won't hear it.

>> BRYAN RUSSELL: NCHPAD has developed a program for what the CHI is. We'll try to play it. If not, we can send you the link.

>> KAREN GOLDBERG: Can we get a copy of the PowerPoint?

>> MEGAN CALLAHAN: I will send it to you.

>> KAREN GOLDBERG: I'm plugging you with links, I'm sorry!

>> MEGAN CALLAHAN: No, that's all right.

>> KAREN GOLDBERG: While we're waiting, can I ask you a quick question? I said wait until the end, but this is the mid-point.

[Laughter].

>> KAREN GOLDBERG: You mentioned the Diabetes Prevention Program. Is that part of this?

>> BRYAN RUSSELL: Yes.

>> KAREN GOLDBERG: I am in the diabetes prevention program through the Y. It's an awesome experience, if anybody is pre-diabetic. It's an excellent experience, I've got to tell ya, it's really well done.

>> BRYAN RUSSELL: It's called a lifestyle change program.

>> KAREN GOLDBERG: It's wonderful.

>> BRYAN RUSSELL: It's not about a diet or that "D" word that is die with a T.

[Laughter].

>> BRYAN RUSSELL: It's not about that, it's more of like a lifestyle change program and NCHPAD has done a great job adapting the program with that.
Yes?

>> CINDY SIMON: Going along with Karen, there is a program out there which actually Mary sent and was disseminated to the Council called The Audiology Project working with hearing loss and diabetes and we're getting talks from all of the medical fields and they want to work on the state level with people, so that might be something --

>> BRYAN RUSSELL: That would be great.

>> CINDY SIMON: -- great to hook up with. We're getting monthly meetings for an hour and we've had everything included all kinds of studies; blood pressure, stroke, all kinds of medical prevention for this, and it might be interesting to see how they can coincide and help each other.

>> BRYAN RUSSELL: That's fantastic.

>> CINDY SIMON: And it may prevent hearing loss, your hearing goes down, so this would work with everybody.

>> BRYAN RUSSELL: Great! Excellent! We'll reach out to them.
So, within the video, like I said, we'll send you a link to the video, but with the CHII is, it's not Tai Chi, it's not an exercise or yoga, it's not some kind of fancy tea at Starbucks.

[Laughter].

>> BRYAN RUSSELL: But it's a community help inclusion index and in that, the -- yeah, the coalitions will go out and it's basically just surveys, it's, like, paper surveys where you document what's out there, what's available, what is accessible, what's not accessible. It's very similar, if you've ever worked with your local county health department on their community health assessment, it's very similar to the community health assessment with an inclusive lens.
So, look at it that way.

You know, looking at things like the built environment, where we're hosting this disability -- or this DPP program, is it accessible for people with a disability? Do they have enough wheelchair -- do they have a wheelchair ramp? Do they have enough parking spaces?

One of the big barriers we've noticed and we're addressing is a lack of wheelchair accessible weight scales at the DPP sites.

Because with this lifestyle change program, weight loss is a sign of success. I think it's a 7% weight loss over the year.

Well, every time you go to the class, you have to weigh in. And if you're in a wheelchair without a scale, it's really difficult to be considered a success.
Yes, Chris?

>> CHRIS LITTLEWOOD: This is Chris. Are you working with the county school systems in your target areas?

>> BRYAN RUSSELL: Oh, absolutely, absolutely.

>> CHRIS LITTLEWOOD: Loaded question, then: It's my understanding in some cases in regular public schools, some children are allowed to opt out of physical education?

>> BRYAN RUSSELL: Mmm-hmm, okay.

>> CHRIS LITTLEWOOD: And it seems like one of your targets being early diabetes prevention and healthier lifestyles, exercise and things like that, that's kind of counterproductive, isn't it?

>> BRYAN RUSSELL: Not if we can make it where it's adapted and kids can participate. But that's up to the child and the parents and the school, so.....

So, we want to do this inclusion index, which includes an assessment. And after that, we look at the -- you know, we want to look at the inclusion strategies, which we've already kind of -- we've already pre-selected that as the prevent e-2 for all curriculum, we've already done that and accomplished that step.

A call to action is more than just from the coalition standpoint of formerly declaring what we're doing and what we're doing in their community and asking people to join the effort, to join the movement.

And then, of course, with the inclusion plan, that is the prevent e-2 and how we're going to address it.

Now, to develop this solution is more of, you know, we want -- the main step right there --

>> KAREN GOLDBERG: Excuse me, I'm going to interrupt. I just noticed on the CART service, are you saying D2, which is what I think you're saying?

>> BRYAN RUSSELL: No, prevent T2, T as in Tom.

>> KAREN GOLDBERG: T2? What is that?

>> BRYAN RUSSELL: That's type II.

>> KAREN GOLDBERG: I thought that was D2.

>> BRYAN RUSSELL: Prevent T2 for all.

>> KAREN GOLDBERG: I wanted to make sure, it said E two, I wanted to clarify.

>> BRYAN RUSSELL: Yeah, it's T2. That's because we're focusing on type II because we're dealing with adults. Type I is really difficult to prevent type I diabetes, so this is much easier to -- this is a much lower-hanging fruit to grab.

So, you know, like I said, the next step is to do a GAP analysis, which means to clarify what and how much needs to be changed in each of the individual systems to really make a difference.

So, you know, with transportation, for instance, we want to make sure that, you know, what needs to be changed with public transportation, where access to the actual sites, is the DPP location going to be at a -- on a bus route? How accessible is that? What about your Inclusive Health Coalition meeting, is that going to be easily accessible? So, we're looking at built environment and any other issues that may come up. And after the GAP analysis, that's where you identify the barriers and you look at this from a local perspective.

With our state and our -- with the way we're approaching it, it's a little different than Montana. Montana is strictly focusing on their sites.

We have more of a statewide reach and centralization, with my program at the central office, so we really want to make sure that the interventions are local. And that's when we kind of finalize the inclusion plan. Make sure that we have everything ready to implement, which, of course, is the next step.

And that's where we implement the type II curriculum. And we monitor and evaluate it ongoing. Evaluation is an ongoing process and we want to make sure what we're doing is working, and we're really flexible and we can change midstream and make further adaptations as needed.

And of course we want to evaluate it and then sustain it and keep it going.

Like I said, we're working in three different sites. In Bay, Hillsborough, and Duval Counties.

And we have funding for these three sites through the end of April. And then after that, you know, we'll see what happens there. If we have to leverage funding from other source, we will, but we'll cross that bridge when we get there.

Any further questions, let me know.

>> KAREN GOLDBERG: I'm sorry, Darlene, I forgot that I'm the recognizer.

[Laughter].

>> DARLENE LAIBL-CROWE: I'm sorry?

>> KAREN GOLDBERG: I recognize Darlene.

>> DARLENE LAIBL-CROWE: Go ahead?
Earlier you had mentioned about weighing the person in a wheelchair and that would be kind of tricky.
How do you weigh them in a wheelchair to be sure of their weight?

>> BRYAN RUSSELL: Well, there's a device called a wheelchair accessible weight scale and they just roll up on the scale and are weighed that way.

>> DARLENE LAIBL-CROWE: Okay. I wondered if it was similar to what you have at the vet.

>> BRYAN RUSSELL: Right, right [chuckles].

>> DARLENE LAIBL-CROWE: That way JayDee, and we take the cat, they measure the crate and the cat.

[Laughter].

>> KAREN GOLDBERG: Good question. Shay?

>> SHAY CHAPMAN: I just wanted to clarify that yes, you're working in three pilot sites on specifically Diabetes Prevention Program and inclusion at the moment.

But the goal is from the lessons learned from this and adapting the toolkit, this is something we would adapt throughout the Department of Health programs --

>> BRYAN RUSSELL: Oh, absolutely.

>> SHAY CHAPMAN: -- that the Department of Health is responsible for delivering to the public and we will take the lessons learned from Bryan's work and deliver that information to the public to being sure we're inclusive in all that we do. I wanted to make sure everybody understands that.

>> BRYAN RUSSELL: Yes, definitely.

>> SHAY CHAPMAN: This would be beyond adults and diabetes prevention but this is where his funding happens to be at the moment.

>> BRYAN RUSSELL: And one of the things we're working with is with the community health inclusion index, we've already shared this with all of the county health departments, they have what is called a Healthiest Weight Florida liaison and they work very closely with the community health assessments and we've already shared all of this inclusion index survey materials with them so they know to, in a nice encouraging way, to do it.

>> KAREN GOLDBERG: And this is an amazing presentation and I thank you very much.

I just want to add a note that nobody should eat the black and white cookies or whatever Glenna brought, in light of your prevention of diabetes.

[Laughter].

>> KAREN GOLDBERG: Which is good, because I've been considering it all day, but then I remembered I'm in the Diabetes Prevention Program and I have to write down my food all day long and you can't just skip --

>> BRYAN RUSSELL: It's just a cookie.

>> KAREN GOLDBERG: Well, that's my mentality my whole life and you can see how that worked out for me.

[Laughter].

>> KAREN GOLDBERG: It was just a cookie, but I loved them anyway.

>> BRYAN RUSSELL: Yes, ma'am?

>> CINDY SIMON: On the levity side, now when I go to restaurants, I have changed everything I eat just by looking at the amount of calories after each item. So if every restaurant you go to writes the calories down, I guarantee you'll find yourself on onion soup and salad the whole time!

[Laughter].

>> KAREN GOLDBERG: Bryan, looking at this type of program which is so important, those with special needs that are not getting to these services, it's critical. And from a public health point of view.

>> BRYAN RUSSELL: Right.

>> KAREN GOLDBERG: I go to the Diabetes Prevention Program meetings, like, every week, every Tuesday night specifically, and, you know, it's a small group, so I don't really need an interpreter, I don't need CART services or anything like that, but, you know, it does cause me some wonder who's not in the room who could benefit.

>> BRYAN RUSSELL: Right.

>> KAREN GOLDBERG: And that number I think is astounding.

>> BRYAN RUSSELL: Yes, yes. And we're -- another program that we have through a whole 'nother funding source is focused specifically at starting adapted Diabetes Prevention Programs in five other rural settings.

They're not doing the Inclusive Health Coalition or anything, they're just implementing the curriculum in five different areas.

Yeah, and they're -- and the marketing aspect of it, that's a challenge, but they're definitely working their way around that.

Yes?

>> DEBBE HAGNER: This is Debbe, I was just curious of your background?

>> BRYAN RUSSELL: Oh, my background.

>> DEBBE HAGNER: Yeah.

>> BRYAN RUSSELL: Well, my degree is in communication and when I was in college, I wanted to be a lobbyist. And then I realized in order to do that, I had this nasty habit called ethics and it was really hard --

[Laughter].

>> BRYAN RUSSELL: -- to balance both. I grew up in Alabama where they have to pass self-laws on ethics and then they break them. Anyway..... That's why I moved to Florida. But my background is public health and communications.

>> SHAY CHAPMAN: Do you want to share, like, what you did prior to this?

>> BRYAN RUSSELL: Oh, absolutely, yeah. Prior to this, I did the -- I was a communication director for a statewide head injury foundation in Alabama and that's kind of what got me into the disability realm, and prior to what I'm doing now, I was a -- I worked at the local county health department level and then did some regional work in public health.

And between -- I left the health department and went to work in a -- to manage a disability employment initiative out of Bay County, for about three years, and furthered, you know, finished working in the disability realm. And then started working back in public health and came back to DOH.

>> KAREN GOLDBERG: You mentioned there's an event next week in Hillsborough County. Can you tell me what that date is?

>> BRYAN RUSSELL: The Inclusive Health Coalition in Hillsborough is August 16 from, I want to say 9:00-1:00 at the health department there. No, I'm sorry, it's 1:00-4:00, my bad. 1:00-4:00.

>> KAREN GOLDBERG: Is it listed on the website when these events will be happening?

>> BRYAN RUSSELL: No, but it will be.

>> KAREN GOLDBERG: Great. Glenna, then Mary.

>> GLENNA ASHTON: I wonder if you're aware of a young man, the University of Florida's name, Tyler James.

>> BRYAN RUSSELL: Yes, we've worked together on a couple of different projects. We have a team at UF in their Office of Disability and Health and they've brought Tyler in on some different council meetings.

>> KAREN GOLDBERG: Mary?

>> MARY HODGES: I kind of wanted to warn you, Bryan.

[Laughter].

>> MARY HODGES: We're working on a strategic plan for evidence-based programs and implementing them, so I'll probably be reaching out to you.

>> BRYAN RUSSELL: Oh, please do.

>> MARY HODGES: Specifically related to the current disease self-management piece for diabetes, okay?

>> BRYAN RUSSELL: Please do.

>> MARY HODGES: Fantastic. Thank you.

>> BRYAN RUSSELL: Thank you.

>> KAREN GOLDBERG: If there are no other questions, Bryan, I cannot thank you enough for being here today.

>> BRYAN RUSSELL: Oh, thank you.

>> KAREN GOLDBERG: It was wonderful. Thank you so much.

>> BRYAN RUSSELL: I enjoyed it. Thank you so much.

[Applause].

>> KAREN GOLDBERG: And wow, can you use time efficiently!

[Laughter].

>> KAREN GOLDBERG: Because it was a delayed start, but you finished right on time.

>> BRYAN RUSSELL: Perfect!

>> KAREN GOLDBERG: Wow. You done good.

>> BRYAN RUSSELL: My parents were teachers and I had to learn time management.

>> KAREN GOLDBERG: This is a good time for a break and we can grab him and talk to him before he leaves to go to his car, so let's have a break.

[Break].

>> KAREN GOLDBERG: We have one ringy-ding-ding and we're restarting in 30 seconds.

I just aged myself, I just showed my age.
What is that from?

>> LISA (CART CAPTIONER): "Laugh-In."

>> KAREN GOLDBERG: From the '60s. I was here in the '60s.
Show of hands of who was here in the '60s. Who was here in the '60s?

>> SHAY CHAPMAN: Oh, no, I'm not from the '60s quite.

>> KAREN GOLDBERG: '70s? Oh, good, welcome.

>> LISA (CART CAPTIONER): In Minneapolis, they did that, "Laugh-In," remember?

>> KAREN GOLDBERG: Oh, yes, in Minneapolis, at the Hearing Loss Association of America National Convention, they had a "Laugh-In"-themed party, is that right? "Very interesting."

It's 2:30, I'm going to recommend and go ahead we get started again.

How's it going so far? Do you feel like we're moving in a good direction? Yes? A show of nods?

Okay. Anybody freezing? Shayla?

>> SHAYLA KELLY: I think I'm the only one.

>> SHAY CHAPMAN: We had him adjust it.

>> KAREN GOLDBERG: All he did was turn the air and why we needed him to do that.

>> DARLENE LAIBL-CROWE: The air is blowing right on top of us.

[Room chatter].

>> KAREN GOLDBERG: I actually feel okay.

>> GLENNA ASHTON: I live here, if you want, I can bring blankets tomorrow.

>> KAREN GOLDBERG: Everybody drag your blankets off the hotel beds.

[Laughter].

>> SHAY CHAPMAN: No, we want to come back here.

>> KAREN GOLDBERG: Oh, yeah, we do want to come back here.

Welcome back, folks, after your break. A lot of exciting things to do here this afternoon, including a discussion of It's A Deaf Thing. And then our committee updates. And then we're going to move into the public comments at 4:00 o'clock. Okay?

So let's go ahead and rock 'n' roll.

Let's start with It's A Deaf Thing event discussion. This is an event that's coming up October 6th, okay, and do we have a table? What do we have?

>> DEBBE HAGNER: They have a -- it's great, I loved it, I wish I can attend that, but I will be out of town that weekend.

It's a wonderful opportunity to meet deaf people. There was about several hundred people. It was great. They had different exhibits/representatives. The most popular one was FEMA was there right after the hurricane and FEMA was there to help. It was great.

They had a lot of jewelry "I love you" stuff. Trying to make money.

>> KAREN GOLDBERG: So It's A Deaf Thing, the history of that is it used to be the Deaf Expo or they're completely separate?

>> DEBBE HAGNER: It used to be.

>> KAREN GOLDBERG: They changed their name. Glenna?

>> GLENNA ASHTON: For many years, DeafNation traveled around the country for DeafNation and then they closed, sort of, and then someone tried to do Deaf Expo and now it's the third person doing It's A Deaf Thing and it's all the same idea.

>> KAREN GOLDBERG: I see. Same idea. Megan?

>> MEGAN CALLAHAN: This is Megan, off topic but I wanted to mention it before I forget. Anyone in the public who is planning on speaking during the public comment, if you wouldn't mind going over to that counter, there's public comment forms and a pen, if you would just fill out the form, please, and then you can give it to our chairperson, Karen, and that way we'll have that on record as well. Thank you.

>> KAREN GOLDBERG: Thank you, Megan. Glenna?

>> GLENNA ASHTON: Because it was successful last year as a first time, I think it will be even bigger this year.

I looked at the website, it didn't say how much it is just for a table. But the lowest sponsor level was only \$200 and that included a table and presentation, I want to say, I'm not sure. But I thought \$200 is not bad.

I would strongly recommend we go to that.

If it was several hundred last year, they'll easily reach a thousand this year.

>> KAREN GOLDBERG: You mean people.

>> GLENNA ASHTON: Yes, yes.

>> KAREN GOLDBERG: Okay.

>> GLENNA ASHTON: And I'm willing to go, just like everybody.

>> KAREN GOLDBERG: So I have pulled up right here, It's A Deaf Thing where you can register to go, I think I've already done that, it's on Saturday, October 6th, 10:00-5:00 p.m. at the R.P. Funding Center and please get samples while you're there. I thought that was a good joke. Nobody got it. That's funny.

It's in Lakeland and I'm trying to think if there's.... parking is \$8. I'm trying to think if there's -- if they have a listing of the tables. Did we already register for it, to have a table?

>> MEGAN CALLAHAN: This is Megan. Not yet. I know that last meeting, we discussed that we would discuss it further at this meeting [chuckles] and which package we wanted to register for. I think there's different levels.

>> KAREN GOLDBERG: All right. Let me take a look.

[Pause].

>> KAREN GOLDBERG: You know what? I'm not sure I'm going -- oh, because I'm on the Event Bright. Is there another website? Let me take a look.

[Pause].

>> KAREN GOLDBERG: It's hosted by It's A Deaf Thing and Project Deaf and SVRS, Sorenson. Oh, there it is. Registration.

>> MEGAN CALLAHAN: Sponsorship packages, I believe is where the different amounts are.

>> KAREN GOLDBERG: Okay. I'm looking at that one right now. I always scroll to the bottom because I know that's where the lower --

>> MEGAN CALLAHAN: [Laughs].

>> KAREN GOLDBERG: Basic package, \$200, standard both which is 10x10, company listed on the website with a link to your website, company featured and promotional items, press releases, company featured in event program and digital display, that sounds quite deluxe. The deluxe one gives you a corner and you can purchase an additional booth for another \$200.

So for \$300, you get a deluxe, you get a corner, and all the other things that were in the basic package.

Premier is \$600 and you can do a 30-minute presentation. And you get a double booth.

Okay. The event partner, I think, are we comfortable not moving on above....

[Laughter].

>> KAREN GOLDBERG: All right.

[Pause].

>> KAREN GOLDBERG: Yeah, I don't know that we need to move on to anything above. I would recommend either \$200-300. And that's really the different -- or 600, the only difference is the placement of the booth. Yes, Shay?

>> SHAY CHAPMAN: I'm going to put a motion for the 600 if that allows a presentation, since we stated earlier we wanted to increase our number of presentations. That would be a good start to do a presentation about the Council and our work.

>> GLENNA ASHTON: Do we have the budget for that? Can we travel and everything?

>> SHAY CHAPMAN: I think we can make it work.

>> KAREN GOLDBERG: I would not need a hotel; I mean, I live probably about 30 minutes to Lakeland.

>> SHAY CHAPMAN: Okay. Then I think -- I mean, that's my -- that's what I --

>> KAREN GOLDBERG: Okay. You put in a motion. Let's hear other discussion.

>> CINDY SIMON: I just wanted to throw in that if we're going to start doing this, and I agree, I think it's great to have someone speaking at meetings, but we're not always going to have travel money, we're not -- and different people live in different areas which is wonderful so we cover the whole state.

Perhaps, and maybe Karen, we can throw this on you, we can create a canned council PowerPoint that can be passed around, so that as different people want to speak, we have it, and then you add your own little twist to it. So you can give a history, purpose, mission statement, and go on from there.
Just my little suggestion.

>> KAREN GOLDBERG: Thank you so much, Cindy, for that suggestion and for being willing to put that PowerPoint together.

[Laughter].

>> CINDY SIMON: I did think I mentioned you!

[Laughter].

>> GLENNA ASHTON: I'm willing to work on that, I'm willing to work on that, okay.

>> KAREN GOLDBERG: Okay. I think that's a lovely idea, actually; that's quite good.

>> CINDY SIMON: I wouldn't mind if I know how to do a PowerPoint, but I don't, I have to bribe my friends to come make them for me when I have to do that, because I have

no clue.

>> KAREN GOLDBERG: I do know now.

>> GLENNA ASHTON: I know how. I can teach you.

>> DEBBE HAGNER: This is Debbe. I do know how to do PowerPoint, as I give genealogy lectures every month, so I can help with that before I leave on October 1st and back on the 14th.

>> KAREN GOLDBERG: Actually, I really love that idea, that's wonderful. Okay. So, I think I heard a motion for the \$600 package, premier package. We get a premier booth location, it looks like it's a small apartment.

[Laughter].

>> KAREN GOLDBERG: It's a double booth located on the aisle end, the 30-minute workshop, company listed on the website with a link to the website, company featured and promotional items, press releases, advertising, social media, as space available. I need more of a commitment than that. Company featured in event program and display.

>> DEBBE HAGNER: Since Shay made a motion that we go ahead with the 600, I second it.

>> KAREN GOLDBERG: Okay. The motion has been seconded. All those in favor, please do something, raise your hand.

[Laughter].

[Hands raised].

>> KAREN GOLDBERG: Seems like we have a majority. Anybody opposed?

[No response].

>> KAREN GOLDBERG: Okay. Okay. I was just going to actually -- can I just throw out one more? I think it just passed, so I guess it doesn't matter. We're finished [chuckles]. Okay. We would have gotten our logo on the back of a T-shirt for 1200.

>> SHAY CHAPMAN: Just for a logo.

>> KAREN GOLDBERG: Why don't we stamp people as they walk by. All in favor of that? When they walk by, we'll stamp it.

>> MARY HODGES: Well, they'll have the lanyards.

>> KAREN GOLDBERG: Awesome! Which I'm wearing, by the way.

>> MARY HODGES: It goes well.

>> KAREN GOLDBERG: It's upside down.
All right. Wonderful. So, we'll put together a PowerPoint. We have a commitment to do that.

Megan, in order for us to work on the PowerPoint, do we need to make a public statement each time we meet to work on the PowerPoint?

>> SHAY CHAPMAN: If you're going to hold a meeting amongst council members, you will. If you work on the PowerPoint in a shared space, such as One Drive or you e-mail it back and forth through us --

>> KAREN GOLDBERG: Then it's okay. So we don't have to have the public comments and all that.

>> SHAY CHAPMAN: No.

>> KAREN GOLDBERG: All right. I think that actually a share drive is a good idea.

>> MEGAN CALLAHAN: The only reason it needs to be notified to the public is if it's a conference call. So, you know, like the EMO Committee meetings and things like that, they have to be notified to the public.

If you're just going to be working on it and sharing it back and forth and going to a share space such as a One Drive or something like that, then it doesn't need to be notified.

>> KAREN GOLDBERG: All right. Fantastic. Okay. So, Megan, at this point do you put in the request for the premier package? Okay. I just want to make sure that's clear.

>> GLENNA ASHTON: Glenna. I think we have a double booth at the Family Café, we didn't really have room for everything, so one table can be for all of the other organizations, the other table would be the Council, for that. And also....

[Pause].

>> GLENNA ASHTON: Shay?

>> SHAY CHAPMAN: I'm sorry.

>> GLENNA ASHTON: This time will you cover the candy?

>> SHAY CHAPMAN: So I think we had this discussion at a previous meeting, and I'll have to look at CART to be sure, but the Department can't pay for food, it's part of our purchasing laws, and so we can't reimbursement -- I mean we can reimburse for travel, like your meal allowance, but we can't reimburse for purchase of food unless it's being used in a demonstration that has a health impact that we can show.
So, I don't think candy --

>> KAREN GOLDBERG: Like if we just unwrap each and every Snickers and say this

is not what you eat?

[Laughter].

>> SHAY CHAPMAN: I thought at the previous meeting, and I may be wrong, but we can review CART, I thought that would be a donation from whoever purchased the candy, but I'm sorry if there was a misunderstanding. But, you know, we can purchase other things to give away, such as the lanyards and the other things.

>> KAREN GOLDBERG: And we're good on those.

>> SHAY CHAPMAN: Yeah.

>> KAREN GOLDBERG: Okay. So, I wonder if it would be possible, if as a council, can we donate money to a member who....

>> SHAY CHAPMAN: If you all want to donate money to Glenna after the meeting to cover her cost of the candy, as long as you're not requiring anyone to do that, and that's all voluntary, you all can....

>> KAREN GOLDBERG: All right. Fair enough.

>> GLENNA ASHTON: Again for October.

>> KAREN GOLDBERG: I'm fine covering the candy, if I need to cover the candy.

[Pause].

>> KAREN GOLDBERG: All righty. So, this seems like a wonderful opportunity, and I agree with Glenna that one thing that the Family Café that we noticed is you had that one table and it was packed with information, because, you know, we have 17 agencies or 17, you know, positions on the Council, individuals as well as agencies.

I can tell you that something that was really nice, and I meant to bring it down, is that this banner that we got, is this the first time we got this banner?

>> MEGAN CALLAHAN: [Nods head].

>> KAREN GOLDBERG: It's fantastic! I should have brought it down to just hang it up here, I don't know why I didn't. It lists every single agency and individuals who are deaf-blind representing that perspective, it was just -- and we had a lot of people stop and actually look at the banner at the booth. So.....
I guess it's going home with me? Is this what I'm hearing?

>> MEGAN CALLAHAN: [Laughs].

>> SHAY CHAPMAN: I would vote since you're going to the next event, you take it home with you, and after that we will be the care taker of the supplies and pass them on to whoever's going to be attending.

>> KAREN GOLDBERG: Okay. I'm going to ask if Debbe, you're headed in the same direction as I am, if she can take some of it, just because I have to pick up a chair.

[Laughter].

>> KAREN GOLDBERG: I'm opening a private practice and I found chairs that I love, but the Home Goods only had one and then the one here only had one, so it's a weird coincidence, so I have to pick up that chair tomorrow.

[Laughter].

>> KAREN GOLDBERG: Okay. So, we'll make this work. We are a team of making things work. Yes, Darlene?

>> DARLENE LAIBL-CROWE: I was just thinking, you were talking about the banner. When you go to this event, have someone take a picture of y'all around the banner and maybe we can use it in our biennial report to show how active we are?

>> KAREN GOLDBERG: We have lots of pictures.

>> GLENNA ASHTON: We took a picture, yeah.

>> KAREN GOLDBERG: I have tons of pictures. I have pictures of us with the Governor.

>> SHAY CHAPMAN: Forward those to Megan and we can forward those out.

>> MEGAN CALLAHAN: This is Megan, I think you sent me three pictures, one is with you all with the Governor.

>> KAREN GOLDBERG: Yeah, this is us with the Governor and his wife. We had overstayed our welcome.

[Laughter].

>> KAREN GOLDBERG: This is the Governor speaking, but I think you guys have seen that before.

[Laughter].

>> KAREN GOLDBERG: Although I took a picture of it. Oh, he speaks too! I don't know what I was thinking with that one.

[Laughter].

>> KAREN GOLDBERG: It was actually a very nice event. Oh, here's the booth. Oh my gosh, I got a great picture of the booth! I'll pass it around. I don't know how to make it really big, and the table with all of our stuff on it.

>> SHAY CHAPMAN: Very nice.

>> CINDY SIMON: Wow!

>> KAREN GOLDBERG: How about I send it around and everybody can take a look at it.

Okay. So, yeah, so I imagine we'll do something similar to that. That was in the morning. In the afternoon, we put out more information and the table really got crowded. But it was a great experience.

So I look forward to It's A Deaf Thing. I imagine we may be surprising people because they may not realize that we exist and this is the perfect opportunity to educate them. And then do a presentation.

Who is going to It's A Deaf Thing? Wait a minute, I didn't figure that out. Hey! I'm going. But I'm going to drive. Are you going to stay, obviously, because you're driving a long way.

Anybody else going to It's A Deaf Thing?

>> CINDY SIMON: I have a wedding.

>> KAREN GOLDBERG: No excuse.

[Laughter].

>> KAREN GOLDBERG: Take a look at this banner, how cool it is.

>> CINDY SIMON: It's my daughter's wedding, not mine.

[Laughter].

>> KAREN GOLDBERG: All righty. I'm sorry, somebody had a hand up, I thought? Was it you?

[Laughter].

>> KAREN GOLDBERG: I could have sworn there was a hand up somewhere.... mid-afternoon slump when you start to think.... there is a hand up! Go, Cindy.

>> CINDY SIMON: Sorry. I just want to say I think this is very exciting that we're having more of a presence and a higher-level presence at these meetings, so what I would like to do is keep track of them on a list somewhere, because I want to make sure that everybody we serve is represented, so maybe at a pediatric meeting, even maybe A.G. Bell or any other organization, maybe we can look at a presence at those meetings as well. Those are people who can see us.

I loved to see a meeting that is all inclusive of everybody, and if that exists, so if anybody hears of it, please bring it up and maybe we can have a presence. I think it would make a lot of impact and spread out to a larger number of individuals, especially

maybe some of the HLAA meetings, if they do a larger one, that would be a very big group.

>> KAREN GOLDBERG: Excellent, excellent idea.

I was also thinking that at It's A Deaf Thing, we ought to have a flyer that says there are open spots on the Council and have a list of those open seats; is that a reasonable thought?

>> CINDY SIMON: You can do that. Remember, check with the office, you may have more than one application for every one of those seats. More applications isn't going to get them filled faster.

>> KAREN GOLDBERG: Right, right, actually I don't think I was thinking of having any application, I would have access or give out information so they can reach out to Megan. Is that a reasonable thing to find out about the seats?

>> MEGAN CALLAHAN: Yeah. If they reach out to me, I can send them -- normally I'll send them, like, the Florida statute which states the seats that are to be filled and I can tell them which ones are vacant.

>> KAREN GOLDBERG: Awesome. Other thoughts? Debbe?

>> DEBBE HAGNER: Yeah, this is Debbe, I just want to make sure we send the money asap to make sure it's not filled up by now, because it's October, which is not too far off, and so we need to send -- make sure the booth is available, because that's a big one, 600.

>> SHAY CHAPMAN: We'll start working on it as soon as we get back. I mean, we do have a purchasing process through the Department that we have to follow certain steps, but we'll reach out to them and ensure there's space and get, you know, get a tentative on their list while we're processing a purchase order.

>> KAREN GOLDBERG: I think the difference is between the premier, the basic, the premier, and -- which is the one we're doing?

>> MEGAN CALLAHAN: The 600.

>> KAREN GOLDBERG: Premier is the 600. It's basic, deluxe, and premier. The difference is that the premier has the option to do the workshop and that end/aisle end, and the double booth. If that's not available, we should start looking at the lower, because that's kind of the premier. The deadline is September 1, so it sounds like we're gonna hop right on it. Okay.

>> MEGAN CALLAHAN: Yeah. Just to clarify, it is only you and Glenna?

>> KAREN GOLDBERG: It sounds like it's just us.

>> MEGAN CALLAHAN: Attending? Okay.

>> CINDY SIMON: If I can get out that weekend, I will.

>> KAREN GOLDBERG: No, no, no.

>> CINDY SIMON: I can't guarantee it.

>> KAREN GOLDBERG: I don't know if anybody else is going to go. Right now it's Glenna and myself, and I don't know if Gina is going to be able to go or Debra who lives in, you know, Orlando who wants to go.

Can we get that number to you in the next week or so? Or if you can send out a message, if that's how you do it.

>> SHAY CHAPMAN: I mean, if they were just planning on attending anyway, I would just say let's limit it to the people that are actually going to conferences that we're going to pay for to be there, to maybe two or three max just so we can maximize the travel. I would say if it's even two, that's up to the Council, but of course we can get a lot more in, and just because if people are choosing to go and represent their organization and et cetera.

>> KAREN GOLDBERG: Oh, okay, I see what you're saying, I see what you're saying. So for FCCDHH, it will be Glenna and me. Fair enough. Okay. I don't know if there's anything else we want to talk about with that.

[Pause].

>> KAREN GOLDBERG: Oh, we have the committee meetings. I thought I was waiting on public statements, but we have a whole 'nother thing we've got to do. Yes, Glenna?

>> GLENNA ASHTON: I'll work on the flyer to advertise the vacancy and work on the PowerPoint and send it to One Drive so people can look at it.

>> KAREN GOLDBERG: Okay, good, excellent.

>> MEGAN CALLAHAN: And I can place the vacancies on the Council letterhead if you want it to be, like, an official handout. If not, then we can just do it that way.

>> GLENNA ASHTON: Yeah, that would be better.

>> MEGAN CALLAHAN: Right, so if you'll just send that to me, I'll put it on the Council letterhead and I can upload that to the One Drive and not only does it state the vacancies on the document, but it also has all of the council members names and the contact information.

>> KAREN GOLDBERG: Great. Do we have a PowerPoint prototype with our little logo? You know how they have those little backgrounds for PowerPoints? Like one that has FCCDHH?

>> GLENNA ASHTON: I have the logo.

>> KAREN GOLDBERG: So you can put it on a PowerPoint?

>> GLENNA ASHTON: You can put it right on there.

>> KAREN GOLDBERG: Okay. Fair enough.

>> MEGAN CALLAHAN: I don't know, Glenna, I have a high resolution logo that we used for the tabletop that they sent me. I don't know if that's the one you have, Glenna?

>> GLENNA ASHTON: I think it's the same one.

>> MEGAN CALLAHAN: It may or may not be. But if you need it, I have it.

>> KAREN GOLDBERG: Okay. Any other final thoughts or discussions about It's A Deaf Thing, presentation and event?

[No response].

>> KAREN GOLDBERG: Okay, fantastic.
All right. Let's move on to committee updates. We have about four minutes. Now, we can take four minutes to go potty or we can move right into it. Thoughts? Keep going? Everybody's ready to go. All right.

Committee updates. We have six committees. So let's go ahead and hear from them. We'll start with the Web Committee. Darlene and Debbe.

>> DARLENE LAIBL-CROWE: This is Darlene. We have not met, so we really don't have anything to report. Thank you.

>> KAREN GOLDBERG: So tell me a little bit about what the Web Committee does.

>> DARLENE LAIBL-CROWE: What did she say?

[Pause].

>> DEBBE HAGNER: This is Debbe. Darlene, I can do it.

>> DARLENE LAIBL-CROWE: Okay, go ahead.

>> DEBBE HAGNER: But basically it just talks about, we review the website, the FCCDHH website to see if there's anything we can change and add, and we report that to Megan.

>> KAREN GOLDBERG: Okay. Can we take a look at the website right now? We're going to have an hour for the committee updates, I'm pretty sure we can --

>> SHAY CHAPMAN: Oh, you're going down a rabbit hole, Karen.

[Laughter].

>> KAREN GOLDBERG: I'm not going down the rabbit hole.

>> SHAY CHAPMAN: The website has been a rabbit hole. I'm happy to do whatever the Council wants.

>> KAREN GOLDBERG: Can we pop it up there like we did before?

>> CINDY SIMON: Maybe they can try to get it up.

>> KAREN GOLDBERG: Can you get it up?

[Laughter].

>> KAREN GOLDBERG: I mean can you please put the website up?

[Pause].

>> KAREN GOLDBERG: We do have a lot of other committees. I say we move on to the next thing while you're working on that.

Technology Committee, that would be Cindy -- I'm sorry, Chris wants to jump in there.

>> CHRIS LITTLEWOOD: This is Chris. As a past chair of the Web Committee, I'm purposefully stepping off and letting Debbe and Darlene talk all about that.

Only one comment I did want to make and that's about the Facebook page and only because somebody posted a question or a comment on the Facebook page yesterday.

The gentleman is a resident is Manoco (sp) of all places and he was asking us a question about services and stuff, and I don't know what we can do for a guy in Manaco, but at the same time, I don't know that we want to just ignore it.

It did not -- it really did not seem like -- he was not asking, you know, for me to deposit a million dollars into his bank account or anything.

[Laughter].

>> CHRIS LITTLEWOOD: I didn't think it was spam, but.....

If we're going to reply at all or who's monitoring those comments, because I generally don't.

>> GLENNA ASHTON: I try to check Facebook. The questions don't show up unless you go and check it, and I'll have to remember to go and check it.

Whatever was there, I tried to answer that, if it's possible to answer.

The other is, I don't feel like we should just ignore it.

So you are looking at Facebook -- you're still administrator for Facebook, right?

>> CHRIS LITTLEWOOD: I probably am still listed as one of the administrators.

But the question or comment comes through once Facebook merged with Messenger, it

comes up separately, and for other reasons, I have an alert for Messenger, and that's why I happened to see it so quickly last night, but I just didn't want to respond to this guy right away, especially knowing that we were having a meeting today. I thought I would consult with everybody first.

He doesn't even live in the state of Florida or this country, so there's not much we can do.

Oh, the other thing is that he's not deaf or hard of hearing, or deaf-blind, he's just blind. Not that he doesn't deserve service or, you know.....

It is still a disability, yeah. I just -- he's outside of our area of expertise.

>> KAREN GOLDBERG: What was the question?

>> CHRIS LITTLEWOOD: I can read it, it's rather short.

>> KAREN GOLDBERG: I mean, I'm only putting it here now instead of public comments because we're on the web discussion.

>> GLENNA ASHTON: Is Facebook part of the web?

>> CHRIS LITTLEWOOD: Yeah, Facebook and social media has always been handled as part of the Web Committee.

[Pause].

>> KAREN GOLDBERG: It sounds like you're the only one that's getting that message.

>> GLENNA ASHTON: He has it set up so he's alerted about it; I don't. I have no way of looking at it because I don't want to be bothered with a lot of stuff.

It doesn't happen that much; it's just once in a while somebody posts a question or something.

>> KAREN GOLDBERG: Yeah, so it would be good if we could make sure they were getting seen. It sounds like they are getting seen pretty quick.

>> GLENNA ASHTON: Yeah, I have to play with the Facebook settings to make it all more visible.

>> KAREN GOLDBERG: Okay.

>> CHRIS LITTLEWOOD: Did you want me to read this? Or maybe what would be better is I can forward the entire message to Megan and we can address it.

>> KAREN GOLDBERG: I think that's appropriate, is forward it.

Okay. Okay. So there's the website right there. And this is what I've been seeing all along, since before I joined.

And so you have the -- when you look at the FCCDHH home, you have the membership, the meetings, reports and publications, which I'm assuming is the biennial report.

Resources, how's that looking? Oh, you've got a lot of good stuff there, a lot of good stuff.

Probably there could be more. Let's -- I'm going to ask every council member, any member of the public who is in attendance, take a look at that when you get a chance and see if there's anything that we're missing, send a message to Megan.

Okay. General information is just nuts and bolts of what we're doing. What's basic facts? Oh, this is actually really great. All right, good, good, good, good resources. All right, excellent.

Okay. All right. Excellent. Agencies and organizations, that's what's represented, right?

>> MEGAN CALLAHAN: It's state agencies, state non-governmental organizations, national agencies, and not non-governmental organizations. So it not only includes the organizations that are a part of the Council, but others as well.

>> KAREN GOLDBERG: Can you -- I was just curious, under medical, do we have any reference that links us to NAD on there?

>> DEBBE HAGNER: I'm pretty sure NAD is listed.

>> KAREN GOLDBERG: Okay. It might be under resources.

>> INTERPRETER: Deaf websites?

>> KAREN GOLDBERG: Maybe national agencies, I'm not sure. The National Association of the Deaf has many -- yeah, there it is -- it has position statements on healthcare, many different things, legal, advocacy, but I really like those position statements for the mental healthcare -- you know, that's my area of interest. So -- but it's just such a wonderful resource to see what is the NAD saying about what they expect with healthcare. Yes, Debbe?

>> DEBBE HAGNER: There's one that we need to add, Deaf Seniors of America. We also need to -- there's another one, I don't know how new it is, but it's called Say What Club for Deaf and Hard of Hearing, they meet online and once a year they have conventions. We should add that to the list.

We also have Deaf Women United, that should be listed. That's for women -- women organization. So we should add those three.

>> KAREN GOLDBERG: Debbe, do you want to send that to --

>> SHAY CHAPMAN: I've added it for our meeting notes.

>> KAREN GOLDBERG: Nice! All righty, very good. Okay. Anything else on the Web Committee? Feedback? Questions? Ideas? No way to put our logo on it because it's the Department of Health? Gotcha.

>> DEBBE HAGNER: Do we have a search where I can type in NAD and it should come up?

>> KAREN GOLDBERG: Oh.

>> DEBBE HAGNER: Within the --

>> KAREN GOLDBERG: Let's try up there.

>> MEGAN CALLAHAN: There is a search bar, but unfortunately it's not only going to search the Council's website, it is under the Department of Health, it's going to search all of the Department of Health.

I know that David has spoken before on that. If I need to, I can reach back out to him and send you something recording that. But I know that there's really no way to change that, I don't believe.

>> SHAY CHAPMAN: So yes, there's no way to change that. However, if you do search in that bar and you're looking for the National Association of the Deaf, it will bring up what is listed on the Council's website. However, it might bring up other stuff within the department if that's somewhere else.

>> KAREN GOLDBERG: That might be okay, too. Let's see what happens. Are you going to search it?

>> MEGAN CALLAHAN: Yeah, I just searched it, all I did was NAD to begin with to see if it came up with anything.

[Pause].

>> KAREN GOLDBERG: All right. I think the website looks great. And it has the link to the e-mail, of the telephone numbers correct and everything is up to date?

>> MEGAN CALLAHAN: Mmm-hmm.

>> DEBBE HAGNER: This is Debbe, except that we need to remove Donna's name and....

>> KAREN GOLDBERG: Let's see, how is that....

>> DEBBE HAGNER: Donna's name is still there.

>> MEGAN CALLAHAN: That's right, I had it on the membership list but I hadn't done it on the website yet because of the other changes that I had to make and her term just ended. Same with Julie. But I'll make that change.

>> KAREN GOLDBERG: Let's roll down and see what's what. Scroll down, if you don't mind.

[Pause].

>> KAREN GOLDBERG: Looks great.

>> DEBBE HAGNER: So Julie Church's name should be removed too.

>> KAREN GOLDBERG: Right, that's what she just said.
Okay. Fantastic.

Anything we can do to support the Facebook page, the rest of the committee? I'm still going to Chris on that, for some reason, Chris and Glenna.

>> GLENNA ASHTON: We are the administrators for Facebook. Is anybody else an administrator for Facebook?

>> CHRIS LITTLEWOOD: This is Chris. I'm just trying to view how I see Messenger from a PC. I get them on my phone all the time. And when I say all the time, it very fairly happens.

>> KAREN GOLDBERG: Nobody messages you?

>> CHRIS LITTLEWOOD: If I can find it to forward it, I certainly will. Otherwise I will figure out a way to copy it and send it to Megan.
And I guess Darlene and Debbe need to decide who's going to administrator that moving forward.

>> KAREN GOLDBERG: Would it be possible to continue in that role, even though you're not actively on that committee anymore?

>> CHRIS LITTLEWOOD: Well, yeah, for now, sure. I'm still on the committee, so I'm just -- it's been turned over to other leadership, so I don't want to step on their toes as the Chair and Co-Chair.

>> DEBBE HAGNER: This is Debbe. I have no problem with Chris continuing and Glenna continuing monitoring Facebook.

>> KAREN GOLDBERG: I'm comfortable with that as well. Darlene, are you comfortable with that?

>> DARLENE LAIBL-CROWE: Yeah, I am.

>> KAREN GOLDBERG: All right. Who's doing the tweeting at 3:00 a.m.?

[Laughter].

>> KAREN GOLDBERG: I would like to fire our official tweet site?
No official tweet? Twitter?
And that's about the extent of my knowledge.

>> SHAY CHAPMAN: Twitter is the app. What you do on Twitter is a tweet.

[Laughter].

>> KAREN GOLDBERG: Okay. And we don't really need a Snapchat, do we, or an Finsta?

>> CINDY SIMON: What's that?

>> KAREN GOLDBERG: It's like Instagram but with friends or something. All right, that's good. Okay.

>> CINDY SIMON: I don't know any of that.

>> KAREN GOLDBERG: Okay.

>> DEBBE HAGNER: This is Debbe. Maybe we can have a logo on Instagram.

>> KAREN GOLDBERG: Instagram? Facebook?

>> DEBBE HAGNER: Not Instagram but Pinterest that would point to our website.

>> KAREN GOLDBERG: What's Pinterest? I'm kidding.

[Laughter].

>> KAREN GOLDBERG: Yeah, I think it's too much. That sounds complicated.

>> MEGAN CALLAHAN: The only thing with that is the Council would have to create a Pinterest account.

>> SHAY CHAPMAN: In my experience, people on Pinterest are looking for fashion, recipes, or decorating.

>> CINDY SIMON: Absolutely.

>> DEBBE HAGNER: Well, maybe it would link people to our website.

>> CHRIS LITTLEWOOD: This is Chris. For Instagram and Pinterest, my 13-year-old would probably be real good with that.

[Laughter].

>> CHRIS LITTLEWOOD: I don't think we need it.

>> KAREN GOLDBERG: All right. Let's move forward. Okay. The Education/Medical/Outreach committee, the current Chair is Gina Halliburton, who is not there.

>> CINDY SIMON: I was there.

>> KAREN GOLDBERG: Oh, there's Megan. Yes, Megan?

>> MEGAN CALLAHAN: Quick question. Are we done with the website? Can I take it off the screen? Do you still need it.

>> KAREN GOLDBERG: Everybody done with it? Everybody tweet me their responses, "We are done with talking about it."

[Laughter].

>> KAREN GOLDBERG: Cindy, are you done with it?

>> CINDY SIMON: Yeah, I'm done.

>> KAREN GOLDBERG: Okay. Let's not even go there. Let's mosey along. All right. EMO. Technology. That's where I'm at.

>> CINDY SIMON: Okay. That's me.

>> KAREN GOLDBERG: All right. Cindy?

>> CINDY SIMON: Well, there was an issue with a couple of real people that they wanted to video and they didn't video. I did get those people for James, but there were changes going on in the department, so he has me on hold calling those people until he can get there to do the live video.

>> KAREN GOLDBERG: Okay. Tell me what you're doing exactly.

>> CINDY SIMON: We were doing a PSA and when it came down to finding someone with hearing loss who was in a certain age range and had been in the service and was having difficulty due to hearing loss, we didn't have anyone. And I happened to get two patients who agreed to do that and let James know and he was going to come down to Miami to film.

>> KAREN GOLDBERG: What is the goal of the PSA? Just remind me.

>> CINDY SIMON: The goal of it was to encourage people to see a licensed hearing healthcare professional.

>> KAREN GOLDBERG: Okay. What's the budget for the PSA? Shay?

>> SHAY CHAPMAN: There was not a specific budget. The Department was taking over the production cost and the travel associated with James or Jay, we call him, his time, so we didn't have a specific budget.

Again, we're in a period as most state agencies as a governor's agencies are, we're in a period of transition where a lot of people are leaving to take jobs that they know are going to have longevity, whereas some people, because, you know, typically there's some turnover at state agencies when the governor changes.

So I'm not certain what Jay's specific issues was, but I know they're down to, like, two people in the whole Office of Communications and he can't be out of the office at the moment.

But he will continue to work on the PSA.

I think we had some great momentum and we'll pick that back up.

>> KAREN GOLDBERG: So are you anticipating that the momentum may pick up in, like, February? I mean after the change?

>> SHAY CHAPMAN: I hope by the end of the year they will be fully staffed and he can take his show on the road again to do those filmings.

>> CINDY SIMON: We talked about it and they were also moving the office, everything was being packed up and he also said you're on my list and I can't just do it right now.

>> KAREN GOLDBERG: Fair enough, fair enough. We hope this PSA would air when and where?

>> CINDY SIMON: We didn't have that down yet. We were just trying to get it established.

>> KAREN GOLDBERG: Okay.

>> CINDY SIMON: And then go to the next step, because the Department was doing it.

>> KAREN GOLDBERG: All right. So the Department is willing to do it, but we didn't have a plan on what happens once it's done.

>> MEGAN CALLAHAN: I know we discussed uploading it to the YouTube, so it would be on the Department's YouTube, I think?

>> SHAY CHAPMAN: The Department has a YouTube page and a YouTube channel. I know we had planned on how to disseminate it for little or no money and then, you know, if further funding were to become available, we would already have it produced and ready to go.

>> KAREN GOLDBERG: I see. But there would be a link on the website?

>> SHAY CHAPMAN: Oh, most definitely, and you can share with all of your representing agencies and that kind of thing.

>> KAREN GOLDBERG: Okay. So there's opportunity -- and who's the director?

>> SHAY CHAPMAN: It's being directed out of our Office of Communications, James Feeney.

>> KAREN GOLDBERG: He's the actual producer/director of it.

>> SHAY CHAPMAN: The script was approved by the Council and under Cindy's offer

and guidance and expert consultation for the PSA.

>> KAREN GOLDBERG: We look forward to seeing that at the Academy Awards.

[Laughter].

>> CINDY SIMON: The amount of time it should be, the amount of time in communication and what was the original PSA that didn't get done, so that's there. If you want, I can tell you what we did in EMO?

>> KAREN GOLDBERG: Well, hold on one second. I do want to know what you did in EMO.

In terms of technology, besides the PSA, what else is the committee working on?

>> CINDY SIMON: That was where we were. And we were waiting for that to be done. The idea was to do a series on these, one concentrating on pediatrics, one for the Deaf community, one person had said to me, why do a PSA, the Deaf don't use hearing healthcare professionals, and I said of course, if you're ill or if you have other issues that go on. There are parents who don't realize that their children need to see.

There are hearing healthcare professionals and I think as we see, and this is my nightmare, the change with the legislation of over-the-counter hearing aids, we are going to see people who are being missed with medical issues.

I think we're going to see children where parents think they're going to save money buying this hearing aid for the kid over the counter and the kid won't do well in school because they have a severe hearing loss, so the whole goal is to encourage to see a hearing healthcare professional and get your information.

>> KAREN GOLDBERG: Okay. So those are very good points and they do fall under technology.

I imagine that there is some concern with medical issues being missed, with the OTC.

Does any of the agencies that are represented here today have a position statement on the OTC hearing aids that we know of?

Oh, I'm sorry.

>> DEBBE HAGNER: The only one I know is HLAA and that's the only one.

>> KAREN GOLDBERG: And the position?

>> DEBBE HAGNER: They're the ones that proposed it. That's as far as I know.

>> KAREN GOLDBERG: Right. So HLAA, as I understand it, was in favor of having a more affordable option for mild to moderate hearing loss. Although moderate can still really be a concern. I mean.... you know, I have a hearing loss, I don't think I would feel comfortable with an OTC, but the idea was to make it more affordable.

But I don't -- and I may be somewhat of a nerd on the technology and maybe, Cindy, since you're an expert, you can help me, but for all of these years there were these

amplification devices that were available to people up until now. So what's the difference between now and an OTC hearing aid?

>> CINDY SIMON: They are still available. It also depends on the terminology you use and how it's classified under the FDA, okay. So the others are not classified --

>> KAREN GOLDBERG: What are the others?

>> CINDY SIMON: -- as hearing aids. Any of the others that you read about --

>> KAREN GOLDBERG: The assistive devices that are amplified --

>> CINDY SIMON: -- that says put this on and it's amplified, there's somebody in my building using it and every time I see it, I wondered what planet it came from and I've never seen anything like that since 1987.

But be that as it may, I'm more concerned, there was some that came out that they tried to mail to people, because this state actually has mail-order laws, believe it or not, even for hearing aids, and there were cases of people who can get these things that were pushing wax through their eardrum creating perforations because nobody checked the ear prior to obtaining them.

So it's not going to be new problems, but people with a more severe loss who may be trying to get them, may not get it.

And for people who are experienced hearing aid users, you may not need all the time and counseling that first-time users, users first coming to acceptance need, and there's a little more involved there in terms of training.

And most of the hearing aids today in general, with the technology involved and connecting to your cell phone, you need a little more assistance with that as well. The ones that they're going to be selling won't do those things.

>> KAREN GOLDBERG: Okay. So they're not going to have all those. But they're going to be digital? We don't know? I don't know enough about them.

>> CINDY SIMON: They could be digital, they could be analogue. One company made their own hearing aids. They were not digital, they are now.

Some of the issues that I've seen have come up are the following -- and this is difficult for the population -- there's one company that was not over \$900, we saw a number of their patients. The programming is probatory and there's one person in Dade County to do this.

>> KAREN GOLDBERG: For the OTC? What are you saying.

>> CINDY SIMON: For the OTC, you won't have any programming.

>> KAREN GOLDBERG: That's what I thought.

>> CINDY SIMON: If you can get it and adjust it, you might have more guidelining, if you want more bass, go here, more treble, go here, and some people get these things and turn them up so high that they will give themselves noise-induced hearing loss.

[Laughter].

>> CINDY SIMON: I'm serious here!

>> KAREN GOLDBERG: It's quite a concern. There's some positive. I think the big push for over-the-counter is the price of hearing aids is very expensive and nobody is covering them, is there any other option for people who have mild to moderate? And that's kind of where it came from.

You can advance in one area and create problems in another area.

And the problems that you raised are legitimate concerns.

So, it would just be -- I would like to maybe learn about the OTC and learn more about technology in general.

But we have to, I think, have a neutral position about it. Because I -- there may be positives to them as well, I just don't know enough about them, I just want to learn about.

Yes, Debbe?

>> DEBBE HAGNER: This is Debbe. I was thinking that maybe we can invite someone from National HLAA, have a GoToMeeting who's knowledgeable about why OTC was established or the, like, Walgreens, I know Walgreens sells over-the-counter hearing aids now. Maybe we can ask them to talk about it.

>> KAREN GOLDBERG: That would be interesting. What's the cost on this? Do you know?

>> DEBBE HAGNER: No, I have no idea.

>> KAREN GOLDBERG: Okay. So it's a significant difference I'm sure, that's why it came through. Okay, Cindy?

>> CINDY SIMON: So, when the FDA did it, they were directed for affordable healthcare app and that's where this comes.

Additional thing they did, if you're going to go over the counter, if they took over the prior, you had to have a medical clearance from a physician or tell the patient that it was in their best interests, and if they didn't want to go to a physician, you would ask them to sign a waiver.

And it was written very clearly on the contracts, it's required.

They, as of that December, that is being eliminated altogether.

So, because if it's over the counter, what is the point?

The ones that are currently, that people are ordering, say, from Walmart, and I only know this because for the state, I actually had dealings with this and I know the person

who's making them, and what people don't know is when they go in there to get to order the hearing aids online, in tiny print on the bottom, it says if you push this button, you agree to waive your right to see a medical physician.

Yes, because that is your medical waiver that had to be there. An association, believe it or not, the FDA does not require a hearing test for hearing aids because originally when it was written, they assumed it was all physicians and that the physicians would automatically do that.

Things have changed. However, it is still written that way.

So when I contacted the person who I knew who made the hearing aids that are being sold by Walmart, I said so and so, come on! I see what you're doing. He says you know what? If it's not required by the FDA and Walmart attorneys say it's okay, I'm in the clear.

And so what we found out is once more, people with hearing loss are being messed with because in most states, and licensure laws, anyone knows the more -- the stricter licensure laws prevail wherever the stricter requirements are is what prevails.

Only in the hearing field is it that the less strict FDA prevails over the stricter state. I know this for a fact.

>> KAREN GOLDBERG: Interesting, interesting. Thank you.

Any other information you want to give in terms of technology? Advances in cochlear implants?

When I went to the HLAA convention, there was a new type of implant that went to the inner ear bones, the middle ear bones, I'm sorry, the middle ear bones. Nucleus? No, it wasn't a Nucleus.

>> DEBBE HAGNER: Baha.

>> KAREN GOLDBERG: No, that's different.

>> CINDY SIMON: I know which one you're thinking about. It's been around for a while.

>> KAREN GOLDBERG: I don't think it's FDA approved.

>> CINDY SIMON: No, there are middle ear implants. A lot of the problems is you have to watch out for companies. There's one company that sits here, I have a friend who was in the first group back in 2000, they put something hanging on the bones of the middle ear. There is one, and we actually used to have a council member who used it, that's supposed to work for more severe losses. It's really for more mild to moderate. They put I think transducers hanging on the gesticular chain and if you have to reimplant it, the whole thing has to be reconstructed, and so they have not really taken off greatly.

Brainstem, those that have neurostritosis (sp), that was bilateral that was removed with a bone cut, and I've seen some meetings on these brainstem implants where they take advantage.

The ear is what we call tonotopically arranged, and it's like a key on a piano, a discrete sound, if you cut the nerve, no implant in the ear is going to work, no cochlear implant, so they created a brainstem implant and those are much better than the days when all you had was knowing there was a sound.

Most popular now are cochlear implant companies are pairing with hearing aid manufacturers for bimodal listening and some of the assistive devices that you use will now, like, remote controls and bluetooth will now work both in your hearing aid and your cochlear implant, which is a really nice thing.

>> DEBBE HAGNER: This is Debbe. I was wondering, are you allowed to list the cochlear implant company, you know, Cochlear America, Advanced Bionics, and MED-EL, the same with the hearing aid companies, are we allowed to list them on the website?

>> CINDY SIMON: Why not?

>> KAREN GOLDBERG: That's a question for Shay.

>> CINDY SIMON: All you're doing is saying which implant company is working with which manufacturer for bimodal, you're not....

>> SHAY CHAPMAN: I don't on the surface see a problem. I'll just check to make sure. I know we typically don't endorse any kind of private business, we're a state agency.

>> CINDY SIMON: We're not endorsing anyone.

>> SHAY CHAPMAN: By listing, we may be endorsing. I need to get a company from our web people at the office and Legal.

>> KAREN GOLDBERG: Let me just jump in here, this is a website from a company in the U.K., I was just looking up medical information, talking about what is it, not the company, just what it is, and the company I've seen -- I don't anything about the company, I don't need to say the name, I don't know anything about it, but I found it very interesting and I was talking about the type of hearing loss that I have and she thought I would not be a candidate for it.

But what I really thought was interesting about it is it does not destroy the cochlea or go -- or bypass the cochlea, it actually goes to the middle ear bone and I thought it was very cool and it's completely implanted, there's no external transducer at all, which I thought was kind of cool.

But you have to have a very specific hearing loss for that.

>> CINDY SIMON: And some of them do have external parts, by the way. And there's about three manufacturers for them.

>> KAREN GOLDBERG: Yeah. So it's just interesting. I was wondering if we had links on our website to different types of assistive listening devices.

>> CINDY SIMON: And so my class at one point and we did have at one time in the Department created a guide --

>> KAREN GOLDBERG: I'm talking about our website for the council.

>> CINDY SIMON: No, we were putting it on our website and included a list of all the cochlear implant and middle ear implants --

>> KAREN GOLDBERG: I'm thinking of something generic, a cochlear implant, this is how it works, blah, blah, blah, and middle ear implant, blah, blah, blah, and the Baha, but not mentioning the companies.

>> CINDY SIMON: They might have had it in there, but if a company was mentioned, it was every company.

>> KAREN GOLDBERG: I would wonder from the Website Committee, if that was listed.

Darlene has her hand up.

>> DARLENE LAIBL-CROWE: Debbe, I wanted to find out, is there a company or an organization, a website, that is -- that represents cochlear implants and talks about it on their website?

For example, I'll use the guide dog user website, there's an organization that actually shares information about guide dogs, but it also shares a list of guide dog training schools all across the country on there.

So I'm thinking that if there's a cochlear implant organization website, they might list each of those brands or recommendations and things like that.

>> KAREN GOLDBERG: Okay. That's useful information, Darlene. Debbe?

>> DEBBE HAGNER: This is Debbe. I do know that there's three cochlear implant companies and there's a fourth one, a new one, which is permanently in the skull and there's no external device and it's on 24 hours, the cochlear implant is on 24 hours and you have to use your remote to turn it off close to your head and turn it off the CI, the device inside the head.

And we had a panel where one person had that device. It was interesting, because he had to use his remote to go to bed or he could hear the music or the noise 24 hours. There's no thing to cover all four of them, that's just individually.

>> KAREN GOLDBERG: Okay. Thank you for the update.

Let's move on now to Education/Medical/Outreach committee. Gina is the Chair of that and she's not here today.

I was not able to make the last meeting. I can't remember, I think it was in the middle of the day when I was seeing patients, and I'll have a lot more flexibility now that I'm changing my position professionally.

Okay. So Cindy was there? And so was Megan, so I'm going to ask both of them for a report.

>> CINDY SIMON: Do you want to do it, Megan?

All right, so Gina had gone to the Coalition meeting and came back all excited. And this went into a letter-writing campaign. And by the way, I have to tell you that Debra Knox is a fabulous writer! Let me say that. Fabulous!

So, what came out of this is we started writing one support letter and trying to offer ourselves and then saying who's reading this, and we came up with two letters from these meetings, and it was a series of meetings. The last one was actually at 8:00 in the morning.

And what we came up with is one letter offering our support to the coalition and anybody who's working with them, to advise them on issues concerning the population we deal with.

And the other letter, back when we were doing long-range planning, we had talked about a letter that introduced ourselves to the various departments and creating connections with all those departments.

So I think if you'll talk to Gina, there's an additional letter that came out of this where we separated out that stuff and made it into an introductory letter for the Council to be able to use with the various agencies to try to create connections. And that was it.

>> KAREN GOLDBERG: I have a copy of the letter opened. Does everyone -- everyone should have a copy of it, because I got it from the e-mail from Megan.
Any comments or thoughts about that?

[No response].

>> KAREN GOLDBERG: Yeah, she was very jazzed after coming back from that meeting.

>> CINDY SIMON: I know.

>> KAREN GOLDBERG: Very excited. It's an excellent letter.
Any other thoughts about that?

[No response].

>> KAREN GOLDBERG: Okay. So the Education/Medical/Outreach Committee is a huge undertaking. And I know it was once called ELMO, so there was something else in there, too.
How did it -- can we back up and review? How did EMO become an all-inclusive committee? How did that happen?

>> CINDY SIMON: I was there when it was created. It was actually an education

committee, period. Sherilyn and I were co-chairs of the education committee and I was doing the technology.

And then we were looking, since Sherilyn was in the mental health field, we were creating letters to send out on the need for proper training and people able to work with the deaf and hard of hearing, deaf-blind population, especially in schools.

Education, so because they considered sending these letters out, that became outreach. But it was a different concept of outreach, because we then had Valerie, who was our outreach person who spoke all over.

So this was outreach in terms of what we were writing, such as sending a letter to create partnerships with other departments.

The L came in because we also had legal and medical. Both Sherilyn and I being in the medical area, that kind of got rolled in, because we created -- there was a legal video created through the Council and a medical video, which is where everybody's been trying to reach the hospital, the Florida Hospital Association, and so the L came from legal. When everyone thought about this, they were rolling in the legal group as well, but that's been pretty quiet, so they went back to EMO.

But it was really separate things that kind of got rolled together. And technology and education worked together, 'cause what we were creating was to be known outside. So that's how it came to be.

>> KAREN GOLDBERG: Okay. I would suggest that at some point, when we have a full house of the seats being filled, that we may consider a restructuring of that committee, because we'll have more people that can serve on committees. It just would be -- just something to think about. Maybe that's not something feasible, but I just was thinking about that.

>> CINDY SIMON: And so those are, like, committees that are there but don't have to be there. And if you can go into the bylaws, if I'm not mistaken, these can come and be changed as we desire to do that.

>> KAREN GOLDBERG: Okay, all right. Great. It's something for us to think about as we maybe go into the November meeting to talk about that a little bit more. And we'll leave it as is for right now.

But it is a pretty large undertaking, that one committee, because there's so much that can be said about the education needs in the state. So much can be said clearly about the medical, and even the legal I'm surprised is not there anymore.

But outreach also.

So just something to consider.

Okay. At this time I don't have anything else to add about EMO. Okay.

Legislative Committee. Donna, if you could share? I'm kidding, I'm kidding, Donna not here.

[Laughter].

>> KAREN GOLDBERG: Okay. It sounds like we need a new Chair. All in favor of "this one"?

[Laughter].

>> KAREN GOLDBERG: We will officially change that. Are we allowed to change that? I want to make sure we're following the guidelines. Glenna being the new chair for the Legislative Committee. Okay. Watch ya got?

>> GLENNA ASHTON: I know that Donna hadn't done much because this is an election year, so nothing much happened, either on the Hill or at the Capitol.

Okay. But, again, I want to emphasize that local visits is important, so we'll need to check and see who's not running for election in either August or November, and those we can go ahead and visit and then wait until after November to visit the new people. Speaking of Office 28, please, I hope you are all registered to vote! Please go vote!

2018 is really a critical year in having our voice and things that's been happening out there in the state and the national levels.
So please vote! August 28, vote --

[Note from CART Captioner]: August 28.

>> KAREN GOLDBERG: You mean August? I was just looking up Office 28. Okay, August 28. Go vote, folks.

All right, yes, Mary? I'm going to get a neurology evaluation, because apparently I don't see anything.

>> DEBBE HAGNER: We need to go back to the V.

>> MEGAN CALLAHAN: I can explain. Normally it is the V and it will continue to be the V, but because this room was so narrow, it's hard to get that and the public seating and everything and we had to do it this way.

>> SHAY CHAPMAN: But we do like the hotel, so....

[Laughter].

>> MEGAN CALLAHAN: Yes!

>> KAREN GOLDBERG: I love the hotel! I was saying me, my neglect. Mary?

>> MARY HODGES: Yes, kind of going backwards to the education committee, do we want to -- well, maybe there is something already in terms of hearing loss in elders and just awareness and is there any kind of.... I guess best practice or recommendation for testing for elders? I mean, when they go to see their primary care physicians, do they just do it on a regular basis or at what age or anything like that?

>> DEBBE HAGNER: This is Debbe. I do know there is a website where you can

self-test yourself to see if you have a hearing loss, there is a website. I can find it and send it to you. I think it's under HLAA, I'm pretty sure, but maybe not, but I'll find it and send it to Megan, and then we can promote that. If you're embarrassed or ashamed or don't want to go to the doctor, you can try yourself online to see if you feel you might have a hearing loss.

Right?

>> CINDY SIMON: I'm not saying anything.

[Laughter].

>> CINDY SIMON: Just remember, your speakers are not calibrated devices.

>> KAREN GOLDBERG: Right, that's actually a very good point. I mean, I think if anything, it's just a screening.

But, you know, it's interesting as I've gotten into my late late late late 20's --

[Laughter].

>> KAREN GOLDBERG: -- I don't really recall that my doctor ever checks my hearing. I mean, I go in and say I'm hard of hearing and she's, like, great, that's wonderful [chuckles], but, you know, there's never been any formal test. Like little kids, they go and do that test.

I can tell you from teaching medical students, this is the testing we teach them, tell me when you can hear it, tell me when you can hear it, tell me when you can hear it. This is what we're teaching the medical students to do, tell me when you can hear it, tell me when you can hear it, and I'm, like.... okay.... [chuckles].

But that's not the only thing. We also do the Ren and the Weber test.

>> CINDY SIMON: Here's what you're going to miss, early onset mild, high frequency and sensorineural hearing loss with that.

>> KAREN GOLDBERG: There's no mandate on that --

>> CINDY SIMON: No, there's no mandate to do any hearing testing. Some doctors will have devices they can put in your ear because companies have manufactured to them, they can now bill for a hearing test by holding this thing which runs through four frequencies at their ears.

>> KAREN GOLDBERG: Yeah, they use that quite a bit in pediatrics. This is a screening. It's not a formal --

>> CINDY SIMON: One is an otoacoustic screening that's not the same thing, one is a tympanometry screening and one came in otoacoustic emissions for screeners and depending how you hold it up to the ear and throw it against the wall, you can have a screening and I can't tell you how many cases I've found this in, and there's a lot of different ways.

My comment to people is you should have at least a test every two years, if for no

reason, other than, God forbid, you're ever in an accident and you're claiming problems with your hearing and they say you must have had that before, because you're this old, you have proof that it wasn't there before to back you up your case.

>> KAREN GOLDBERG: Thank you. Thank you both for bringing that up issue. Glenna?

>> GLENNA ASHTON: It seems like the most common way with older people is that everybody around that person knows they have a hearing loss except that person themselves.

[Laughter].

>> KAREN GOLDBERG: That's actually the best screener.

[Laughter].

>> KAREN GOLDBERG: Okay. We have two more committees, legislative, I just want to say to Glenna, she did a beautiful job when we went to meet with the legislators of having all of the -- maybe that was Donna, too -- having all of the active bills that were up that pertain to the areas that we're interested in and what are some talking points, and I cannot thank you both enough for that.

All right. We have two final reports, although I thought we talked about the biennial report, so we have one, and then I think we really need to take a break so I can go and take care of the soda I drank [chuckles].

And hold on, one more thing.

And after that, we'll take, like, a 5-7 minute break and we'll come back here promptly at 4:00 o'clock and start with the public comments.

Okay. Shay has something.

>> SHAY CHAPMAN: I was going to do the budget update for you since Cecil is not in attendance.

>> KAREN GOLDBERG: Okay. We'll do that. Hold on a second, we have competing communication. Darlene, did you want to share something, Darlene? Did you want to share anything? You were speaking.

>> SHAYLA KELLY: We're going to step back, she has to go.

>> DARLENE LAIBL-CROWE: She's moaning over here, like I have to go.

>> KAREN GOLDBERG: All right. What is your dog's name?

>> DARLENE LAIBL-CROWE: What was that?

>> KAREN GOLDBERG: The dog's name?

>> SHAYLA KELLY: What is your dog's name?

>> DARLENE LAIBL-CROWE: Oh, Jayden.

>> KAREN GOLDBERG: Jayden is going to take her break now and we're going to stay.

[Laughter].

>> SHAY CHAPMAN: Look at tab four in your booklet, that's in the budget that ended in 2018, I want you to look at what we spent, and as you will see, we encumbered for the audiovisual, we budgeted 13,910 and we spent 13,910.40.

[Laughter].

>> KAREN GOLDBERG: That's unacceptable!

[Laughter].

>> SHAY CHAPMAN: For the CART Provider, we budgeted \$8,000 for the four meetings and we spent \$7,946.55 and I'm referring to the first column that says allocated and the years to date expenditures so you can follow along. For the interpreting services, we had budgeted 19,200 and we spent 18,876.96. For travel, we had way overbudgeted \$50,000.

[Laughter].

>> SHAY CHAPMAN: But we did have members that we were low -- we didn't have the full Council so we wanted to account for having the full Council and we had some members who couldn't attend all the meeting and we only extended \$18,873.11.

>> KAREN GOLDBERG: And once we have the full Council again, it will be --

>> SHAY CHAPMAN: I think we're going to keep the travel budget the same because we want to account for having a full Council and everyone attending a meeting and we don't want to be short.

That travel included travel extra for members to the conferences and et cetera and for the legislative days.

We have to note all these meetings in the Florida Administrative Registry and that costs \$250 a year and actually I guess the price went up. We budgeted 250, it was 339.92 so we'll adjust for that for next year.

Yeah, I think we had just done it for the four quarterly and because we had some extra committee meetings in there so we know to adjust that this time.

We had the miscellaneous expense category, we had budgeted 8,400, we spent \$3,229.32, that was the banner and the things we gave away, that was what those expenses were, and of course Megan's position, and she is expended a little over that, she had some extra hours budgeted for her position.

But all in all, we had budgeted \$133,244.98 and it looks like we spent \$97,131.35 and

we were well within the budget that the Department of Health had committed to the Council.

>> KAREN GOLDBERG: Okay.

>> SHAY CHAPMAN: So that was last year's. So if you turn to five, tab five, this is the budget that we have kind of just estimated for this year with our commitment for the Council. And it's exactly the same as last year, we didn't change anything, other than adjusting -- we might need to adjust the federal -- the registry, the Florida registry, that's not adjusted on here but since there was wiggle room in the other areas, I think we're fine.

>> KAREN GOLDBERG: Okay. One other question I have, though, is for the staff position, since it went over a little bit, is there a way to adjust that or it doesn't matter?

>> SHAY CHAPMAN: No, that's Megan's salary, I can't change her salary. But if she has extra hours, you know, we have the ability to pay that. We try to stay within her allotted hours.

>> KAREN GOLDBERG: All right.

>> SHAY CHAPMAN: But sometimes the weeks where she's getting ready for the meeting or setting up, sometimes that goes over. And so as you'll see, the purchase orders are already in place, obviously since we're having this meeting, for audiovisual, for CART, for the interpreting services, and the register, we already have that purchasing in place, so that was already done by Joyce in our office, that's taken care of.

So that's what we have committed and that's what we'll continue to have committed, unless our legislative budget request goes through and we get additional funding.

>> KAREN GOLDBERG: Okay. Fantastic. Thank you. Okay. Anybody have any comments or discussion about that before we take our break?
Chris?

>> CHRIS LITTLEWOOD: This is Chris. I have a question related to travel and future meetings. This comes from years back, when I first signed on as a council member, but we had where the hotels were paid by a purchase order. We can't do that anymore?

>> SHAY CHAPMAN: No.

>> CHRIS LITTLEWOOD: Okay. Enough said, end of discussion.

[Laughter].

>> KAREN GOLDBERG: Okay. Why don't we go ahead and take a break. Let's meet back here at 4:00 o'clock so we can hear from our public comments.

>> MEGAN CALLAHAN: Oh, this is Megan, just a reminder, anyone in the public who plans on submitting a public comment, please fill out a public comment form and hand it to our lovely chairperson, Karen Goldberg, please.

[Break].

>> KAREN GOLDBERG: All right. I would like to call the meeting back to order. Let's go ahead and regather.

[Room chatter].

>> KAREN GOLDBERG: It seems that there are still some people outside the room, in the restroom. They're starting to come back in now.

[Pause].

>> KAREN GOLDBERG: Can we maybe flick the lights?

[Pause].

>> KAREN GOLDBERG: All right, folks, we're going to come back together. We're going to restart the meeting. I'm getting louder. I've got my mom voice on!

[Laughter].

>> KAREN GOLDBERG: Okay. Welcome back after the break. Everybody feeling pretty good? All right, excellent. This is one of my favorite times of the day for the Florida Coordinating Council for the Deaf and Hard of Hearing meeting and that's when we actually get to hear from people who are in attendance from the public.

And we have only -- I see only two papers filled out, but I don't know if there are more people, so I'm just going to go ahead and just -- I'm going to shuffle the list.

[Laughter].

>> KAREN GOLDBERG: So no one has preferential treatment.

[Laughter].

>> KAREN GOLDBERG: Okay. We're good. I tried to shuffle them as best I could, but.... it didn't quite work. All right. Why don't we start with Peggy Brown.

>> AUDIENCE MEMBER: Oh, wow!

>> KAREN GOLDBERG: And she has areas of concern with interpreters, medical, law enforcement, education, and inviting local agencies with Deaf Services to call meetings, programs at CHC, FEMA, mental health, and data. Okay. I decided we're going to start with someone else. Just kidding.

[Laughter].

>> KAREN GOLDBERG: No, I'm excited. Let's go ahead.

>> AUDIENCE MEMBER: Is this on? Okay. Can you all hear me? Well, thank you for this wonderful meeting. I always like coming to this. I've been here before myself as a speaker and one of my colleagues that's going to follow me as well.

I guess the first thing, I was writing comments down as we were going along, so I'm not sure this is going to be in any particular order.

One of the things I should let you know is that I have put in my application as a candidate for Julie Church's replacement. My name is Margaret Brown, I go by Peggy, however, so please call me that.

I'm actually the president of the Deaf Services Center Association for the state of Florida. I am the Executive Director for the center for hearing and communication, which was formerly known as the League of Hard of Hearing, we are the oldest and largest and continual agency offering information to deaf and hard of hearing.

If I had not talked to Julie the other day and this is on me as well, I don't think I would have looked to come to this meeting.

So, it might be nice if, like, you knew the agencies in the area, like I know some of the CILs, I have a CIL near me, Cory Hines, to send out some kind of e-mail blast.

I did send it out to my staff, but on short notice, only Drew Felbaum (sp) came with me and Drew is here for services, hearing loss and education access for seniors in Broward County and it's a service where we go in and provide hearing healthcare education and something as simple as installing a phone, turning on captions on their TV, doing case management, that's actually what Drew does is case management, making referrals to other agencies in the county, whether it's finding assistive living and I guess I should have told her the story, Sol's cat died and coordinating to get him a new cat, because Lisa had died, and we kind of do a whole host of things.

Other things we do, I know this came up, we were talking about under emergency and safety, it came up about FEMA, this is for everybody in the room, we are one of the agencies selected under the United Way of Broward County and Volunteer Florida and FEMA under Homeland Security that we have secured funds and we have case managers and understanding that a lot of our staff is all sign skilled and we are able to help anybody with hearing loss post-Irma crisis management. So that goes, you don't have to be in Broward County, you could have been in Miami-Dade, Lee, Collier, any place.

If you know of somebody that needs that kind of assistance, please don't hesitate to reach out to us.

I did attend the program at Center For Independent Living in Fort Lauderdale, Torrey

Pines posted it, and I would say we had about 60 or so deaf adults that came and we had an enormous discussion about qualified interpreters in the state of Florida during emergency situations.

I am working, I should also mention I'm a politician, I'm an elected official, a city commissioner, and I am working with state legislation to make sure that this is something, the bill was on the floor before, it didn't go far, well, it's hard to secure support, but it is something that's probably going to show up again and I'm coordinating that in a bipartisan effort, to make sure -- unfortunately what happened is the very things that they had said, you know, in terms of lessening the restrictions on certification are now coming back to hurt other people.

They did this in a whole host of areas, whether it was barbers or, you know, beauticians, you know, a whole host of jobs around that kind of space, so to speak, and what ended up happening, and also it affected interpreters, and that's a little bit of a general background on that.

We also provide mental health for adults. I am funded by Broward County for children, mental health, with sign skilled mental health counselors, they see this as a cost savings and I would advise people around the state to do. You know, with the Deaf Services, we try to coordinate that and help them out with the grant funding and secure that kind of support.

But what's interesting about a few years ago, we were able to secure funding for adult mental health for deaf adults or CODAs, if you or anyone was impacted by hearing loss, we can provide mental health counseling at no cost and funded through the Department of Human Services in Broward County.

In getting back to the data, I will tell you this, we've been looking at data, the only thing we've been able -- and I'm working -- I had been working with the city of Fort Lauderdale Police Department and giving them cultural competency on, you know, what they need to know, understanding, and most especially since I am coming from Broward County and there's a lot of money after the Marjory Stoneman Douglas Safety Act and believe me, hearing loss is not a priority, but they have been able to allow us to do training to their recruits, because typically, like we all have CEUs, they have about 40 hours of training they have to do in a year. What we're trying to do now is train the recruits.

I got a call from BSO the other day, Broward Sheriffs Office and now I have to provide data to them on deaf children and deaf adults in the county because they're looking at now implementing this in the county for training for deaf and hard of hearing.

The only thing I can point to you that I know is accurate in terms of data specifically would have to be the school board and reporting because those children are enrolled in the program. That doesn't mean we capture all those kids that are probably home schooled, although they had a reporting mechanism as well.

What we do is we kind of do a data analysis or data projection on those children over the course that have been enrolled and can pretty much predict how many people are still deaf or hard of hearing in the community.

But I will tell you, the fastest-growing community in an increase, because I also sit on the Senior Services Committee for Broward County is our aging population. Thereby, that means that we're seeing a remarkable increase in hearing loss across all cross-sections, basically.

So we're trying to deal with that right now.

I will tell you, it's really been put on the front burner in Broward County. We've done a number of studies and it's called the Silver Tsunami and I sit on that committee as well to kind of address what's happening there.

So, data, I think Glenna said it the best, it's like, first of all, the data we all have on hearing loss is sorely underreported.

I know we all know someone and I think even when we're talking, the best way to know if you have hearing loss if somebody else around you tells you you have hearing loss, so the data, even though I try to provide accurate data, it's never going to be accurate because people -- one, people are living in denial and it's underreported and, you know, that's kind of where it is.

And I think that's all I have.

One of the things I wish that he was still here is talking about transportation. We actually provide education for all of the cluster sites in Broward County and we have funding for the deaf children and some of the responses [chuckles] we've gotten around the table is well, can't they take Uber? [Chuckles] and it's like, I don't think I want to put a deaf child in a Uber car!

So it's kind of difficult. I wouldn't put my deaf, you know, I wouldn't put a 10-year-old hearing child. We have difficulty getting funding and they'll tell us taxpayers don't want to pay for transportation. We do get bus tickets for our high school students and we are good at transitioning them in a hearing environment because we do provide them the high school program is called students transitioning employability program, STEP, so we teach them careers and education, not just to get a job, but to also seek a career, so that's kind of our philosophy, so we do teach them how to navigate transportation around the county and in the city.

I have to say one of my biggest problems I confront in the agency is money for seniors that can't afford hearing aids, transportation for my students, and anybody -- so, you know, that's where I'm at.....

If you have any questions. Thank you very much.

>> KAREN GOLDBERG: Thank you. That was wonderful. I could actually listen to you all day with what services you're providing and what you're doing. So when you concluded, I was a little sad.

[Laughter].

>> AUDIENCE MEMBER: I didn't even list all of them, trust me! [Laughs].

>> KAREN GOLDBERG: Maybe we can generate more discussion with you, if people

have some questions about services.

>> AUDIENCE MEMBER: We do a lot of children services, we do mental health. I didn't even mention, we have a full audiological practice. We are the largest distributors of amplified telephones in the state, I'm a new appointee to TASA, so I'm trying to cover all the bases because there have been so many wonderful people that have been working towards getting things done, but it's, like, how do we move the needle on this?

So collectively we're all trying to -- I see a question.

>> KAREN GOLDBERG: Yes, Cindy?

>> CINDY SIMON: I want to add one more thing in accolades, no, no, really, I've mentioned this to the Council before, I didn't see any of your kids doing a performance this year, but I have been to the fundraiser in the past and they have the most amazing evening ever!

So I just want to say this, in that the kids attending are amazing! The kids who are up there, they're unbelievable.

>> AUDIENCE MEMBER: Horendra (sp), who is actually in the first year of college at Gallaudet, right? He actually was the first deaf JROTC to be -- have a leadership position on a squadron in the United States, and he went off to Gallaudet this year. Usually our kids go to RIT or Gallaudet. We're really emphasis on careers, being about that, you know, we want them -- I don't want them looking for a job, I want them looking for a career. And we spend four years in high school working with them after school, and then we employ them all summer long, they've worked in -- when I heard you talk about hotels, they work in hotels, learn all facets of hospitality since we live in the state of Florida, and they've worked in CVS, because interestingly, the vice president of CVS, his father was deaf, a late-deafened and they learn about pharmacy technician and store operations, so we have a lot of really good success stories.

>> KAREN GOLDBERG: Glenna?

>> GLENNA ASHTON: [Away from microphone and unable to clearly hear].

>> LISA (CART CAPTIONER): I'm sorry, I didn't hear you.

>> GLENNA ASHTON: We have other deaf people that work at the center, right?

>> AUDIENCE MEMBER: Oh, yes, I probably have two deaf mental health counselors, master-level counselors, and we just hired an individual who actually used to work at one of the Deaf Services on the West Coast, Rob Daluca and is working with our youth program, youths that are at risk, they have to be living, first of all, they have -- their deaf or hard of hearing and they're living in an environment where maybe there's been an incarceration, maybe there's been evidence of domestic abuse, maybe there's been some level of neglect, homelessness, drug abuse, a whole host of things. So, yes.

But I say except for a handful of us, the entire staff of which we're about 30 during the academic year, are all signed skilled, and during the summer we employ about 60

people, so....

>> KAREN GOLDBERG: I recognize Karen.

[Laughter].

>> KAREN GOLDBERG: This is Karen.

[Laughter].

>> AUDIENCE MEMBER: I'm looking around.... [chuckles].

>> KAREN GOLDBERG: Is there an opportunity, since we're nearby, to come over and take a look, if somebody was interested, say tomorrow at --

>> AUDIENCE MEMBER: We'd love you to. I won't be able to attend here tomorrow, because we have a lot going on, but....

I don't know if everybody knows there's a new amplified telephone you do not need a landline for anymore, it actually syncs, that's new and happened in the last month or so, so if you have clients, it pairs with your cell phone and our staff. We just signed an MOU with Chen Med, I don't know if anybody knows, they're in the entire state, and they're also around the country, and actually they're being -- their insurance coverage is Humana and we're actually doing some research with Humana because we're looking at dignity with aging, and one of the things that we're doing is we're handing out these phones at all their facilities because we want to see if there's a difference in being able to hear better when contacting their healthcare physician. Is it, like, meeting compliance? We're always looking at compliance. I know Humana insurance was mentioned earlier. Humana loves them because we're always looking at lower readmission rates in hospitals for seniors and they've done great jobs at lower those readmission rates.

>> KAREN GOLDBERG: Yes, Chris?

>> CHRIS LITTLEWOOD: That new amplified phone you mentioned is that one that is not mentioned to be offered by FTRI, is that correct?

>> AUDIENCE MEMBER: Yes, it is, it's the XLC9, it just came out, we started distributing it in July, and I probably do several hundred new phones distribution in a month.

>> CHRIS LITTLEWOOD: Terrific.

>> AUDIENCE MEMBER: Let me know if you want me to stop by your office.

>> KAREN GOLDBERG: Thank you very much.

I notice that you had said reaching out to inviting local agencies with Deaf Services to all the meetings.

I think that, and maybe I'm wrong, and I'm happy to be told that I'm wrong on this, it seems that we put out a public notice as required, but I don't know that we actually

reach out to the agencies, is that correct?

>> SHAY CHAPMAN: No, I mean historically we've never reached out to the agencies.

>> KAREN GOLDBERG: It might be nice, maybe we can do that, and that shouldn't just fall on Megan's shoulders, we should help her out with that.

[Laughter].

>> KAREN GOLDBERG: Okay, yes, Cindy?

>> CINDY SIMON: In the past, when we have a meeting and we know any agencies in the area, we have sent them prior notice of the meeting to share with others so that we would get individuals to the meeting, and I think we can just go back to doing that.

>> KAREN GOLDBERG: How did we do that historically? What were you saying?

>> CINDY SIMON: Well, you know, if we knew there was a deaf -- like we've done it here --

[Talking over one another].

>> LISA (CART CAPTIONER): Excuse me, one at a time, please.

[Laughter].

>> SHAY CHAPMAN: Each individual member is -- we can always send out the meeting notice. If you would like to contact people directly, you would have to let Megan know, because she's not as familiar with each person in the community as you are.

>> KAREN GOLDBERG: Thank you. Glenna?

>> GLENNA ASHTON: Basically we announced the dates for the year, we have the dates in place because we know that already. And the problem is we have to wait a long time for the public notice, because it takes them so long to set up the hotel, and so that doesn't leave much time left. And I post it on Facebook and I post it on any Florida Deaf Group that I can find. If the agencies have a Facebook page, I can post it there too.

But the problem is that the public notice doesn't give us a lot of time to let people know. Or I can tell them that it's a day and place and that's it. The hotel information is the one that really holds it up.

>> KAREN GOLDBERG: Except that -- this is Karen -- on the website, it does list all of the meetings that are upcoming, unless we have a change in the date, which doesn't happen that often, but we tend to have the city, we tend to have the date, correct? And it's up, it's just the hotel at that point.

So, you know, I think we can be proactive and let people in the community know ahead

of time, and then say please pay attention to the website for the posting of the actual location of the meeting within that town.

Yes, Cindy?

>> CINDY SIMON: So this goes back to something that I happened to bring up earlier when we talked about letting people know about this.

If we sent it to every Deaf Services Center, to every HLAA group in a group e-mail, and maybe to the Association of Late-Deafened Adults and any other state association we can think of, then they all have notice in advance and can pass it on to their members.

>> KAREN GOLDBERG: This is Karen. Would having -- would a LISTSERV be not allowed because of the -- a LISTSERV? Is that allowed so that we have the agencies already on there? Or is that problematic because you would have to list every single person?

Does that make sense what I'm asking?

>> SHAY CHAPMAN: I don't see an issue with it. I will just say, from experience that since -- we can do that. We have no problem doing that.

But from experience, since you all are the individual representatives from your groups that you represent, it may be more beneficial or get their attention more if it came from somebody they knew versus just a LISTSERV.

>> KAREN GOLDBERG: Okay. Fair enough.

>> SHAY CHAPMAN: But we're happy to do what the Council desires.

>> DEBBE HAGNER: This is Debbe.

>> KAREN GOLDBERG: Debbe?

>> DEBBE HAGNER: This is Debbe. I was wondering if possible if the Council can be on My Google, not as a business, but as a council and that way we get more exposure into Google Search? It's called My Google Business and that way you add the name to it and it will give more exposure.

[Pause].

>> KAREN GOLDBERG: I have moved out of my comfort zone with that question.

>> DEBBE HAGNER: That's the Web Committee; I'll investigate it.

>> KAREN GOLDBERG: I want to make sure it's allowable for the Department of Health to be on My Google.
Go ahead, Shay.

>> SHAY CHAPMAN: I don't know specifically about My Google, I could check that out. And I don't know the functions, so we would have to research that and ask. But yeah, so we can do the DL list and then I think there's other ways that we can

obviously get exposure for the Council.

>> KAREN GOLDBERG: Okay. Very good.

But if we were able to do also a LISTSERV, because not every agency in the state of Florida is represented on the Council. So a LISTSERV actually would be a good idea.

And posting, which Glenna is already doing on Facebook, and reaching out with personal contacts and letting people know that this meeting's happening.

Okay. Unless there's any other comments, I'd like to move on to the next person who has a comment for our Council.

And that is Beth Wagmeister, is that right?

>> AUDIENCE MEMBER: That's correct.

>> KAREN GOLDBERG: And she wanted to address some services, hearing aids, interpreting, getting the word out, interpreter licensure, support from NAD, development position for direct services, and better support to services from smaller entities.

Okay. Beth, welcome.

>> AUDIENCE MEMBER: Thank you so much, Council, I appreciate you having me here today. What a great meeting to be a part of.

I came to a meeting about five years ago and one of the topics at that time, and I didn't add it to my list, I'm sorry, of things that just came back to me that I was curious about and I would like to start there, there was an issue about DCF being involved with holding parents accountable to learn sign for their deaf children and if it's, you know, if it can be classified as neglect if they don't, and I was just wondering if there has been any real follow-up with DCF and what's happening with that. So that's a question I was wondering about.

We have a -- I'm the director of Deaf Services at Gulfstream Good Will Industries, I was at a Deaf Services Center for 30 years that closed down, I did present to this Council about three meetings ago and I haven't been in any contact with the Council since then and it's very unfortunate and I would like to be in better contact, but I don't want to -- you know, we've kind of seen the problem and figure out a way to be better connected, so I appreciate that, because our involvement with, you know, all together as a collaboration would be great. We're all here for the same mission and I think we can do a better job if there's more people working together.

But we've had a really big win also in Palm Beach County with Text to 911, that was really exciting. It was just launched very recently. I think it was last month, actually. And the saying is call if you can, text if you can't. It's helped a lot of people with hearing loss, as well as domestic violence situations or, like, if there's, you know, a burglary or something in the house and you can't speak or your life would be in danger. So we're really excited about that.

And to follow-up with that with the 911 centers, I have reached out and I would be training the 911 dispatch centers, to be able to actually read the texts that would come in from a deaf person because obviously the ASL grammar and English grammar are

completely different, and if somebody is texting using ASL, they might not clearly understand the situation or know how to respond, where a deaf person could then respond back and forth clearly.
So, I'm really excited about that.

I've been doing a lot of training with the Palm Beach County Sheriffs Office as far as compliance with the ADA and making sure there are interpreters provided at the scene of a crime or to get or somebody being booked in jail, so they've been really welcoming and open to me in the training and that's exciting.

However my funding has been cut in Palm Beach County and I'm taking it upon myself just to do that, when I'm not doing everything I do at Goodwill, so that's really exciting about all the different trainings that people are willing to do and realize that the ADA is 28-years-old now and we can't keep avoiding it.

I've been working diligently with the city of Boynton Beach for the past three years to not only make it an ADA community but a deaf-friendly community with the police, fire, and city workers all learning sign language. Of course we don't expect them to be experts, but just to have a little understanding.

They have iPads they have in their police cards with a VRI contact, to be able to have an interpreter available immediately until a live interpreter can be available.

So they've been really wonderful. Debbie Majors is a resource and advocate for all of the ADA in my favor for the Deaf community, which I'm very grateful for.

I did have a thought about your money you mentioned, that you don't have money for direct services and I was just wondering if the Council has a position for development position or any plans to have a development position to go out into the communities, do these trainings that everybody is, you know, so adamant about having, and asking for monetary, you know, donations so we can provide these services.

Another question.... let me think.... oh, another comment about how can we get information out to the communities? FAD, Florida Association of the Deaf, has been a wonderful partner making sure that information is disseminated across anybody who needs information, so I really think that they're an ally and you should utilize their resources and ways to community with everybody in the state of Florida. They've been wonderful.

I have a program, and I spoke on it when I did my presentation with you last year that helps senior citizens have free hearing aids that income qualify. I have an audiology program that will do free screenings, cleaning of hearing aids, making sure they're working properly, or providing new hearing aids, not even refurbished. We found we could get new hearing aids with a warrant and same cost as refurbishing for our senior citizens. We do see a huge connection with Alzheimer's, dementia, and hearing loss, and the longer we can keep their brain active and their socializing, the better. So we really care about our senior population here in Palm Beach County.

I have wonderful support from the county for funding in this department and if I can be a resource in Palm Beach County, to let you all know this is available.

I heard earlier we don't, you know, we're not sure how we can get hearing aids for people at no cost, but please use me as a resource for that in our county.

I wish I could go outside the county because the need is great, but right now I'm they limited to Palm Beach County.

I was wondering about your interpreter certifications and licensure testing and what the status is with that. I know right now the state of Florida does not require certification for interpreters, especially -- well, to me most importantly in the school system, and I'm hoping that will change over the years. Children are our future -- I hate to be quoting a line of a song -- but they are our future, we need to teach them well and let them lead the way.

[Laughter].

>> AUDIENCE MEMBER: Should I start singing? To really start educating our children with qualified interpreters, not somebody who just knows our ABCs or 123s or who can sign and who is a qualified sign language interpreter.

My last question, we talked about the NAD, National Association of the Deaf, they are wonderful, I was just wondering if there was any representation from the Council this summer at the Biennial NAD Conference. I was there, I was there two years ago in Arizona, it's a wonderful rich experience that everybody, he or she should experience at some point in their life because it would give great perspective to this community and the goals for what we need to do moving forward. Um.... let me think if there's anything else.....

Oh, I am right now waiting on a proposal for the city of West Palm Beach to kind of copy Boynton Beach's philosophy of full inclusion, so I've put a proposal out to the city of West Palm Beach and awaiting their response. I know it's not their top priority as the city is so large, they want to start where first responders and police to learn basic ASL and understand having trainings.

However, I've explained to the city we can't just start there, we have to have policies and procedures in place to start the training, because to train and to not have a follow through would be counter-productive.

I appreciate what the Council does here. I hope to be more involved with the Council going forward and have better communication with all of us and having better partnerships with the CHC. We're looking to try to roll back that partnership as well, and it's really exciting, so I appreciate your time and having me here today. Thank you. If anybody has any questions, I'm happy to.... [chuckles].

>> KAREN GOLDBERG: Thank you, Beth. A number of very important issues that you brought up. I'm wondering if anybody on the Council would like to address some of these issues?
Okay, I imagine -- I'm neglecting!

[Laughter].

>> KAREN GOLDBERG: Mary?

>> MARY HODGES: This is Mary. I just had a question about the fund source for the hearing aids in your area. What is your fund source?

>> AUDIENCE MEMBER: FAA is a county funding for that, all my programs are run 100% on funding from the county. I am home based at Goodwill, they're not providing funding, I mean they provide it up front and then when we provide services, we reimburse Goodwill for it, but all my funding comes from the county. They provide money for audiologists and interpreting, I forgot to mention that, we do interpret for all senior citizens. I had a deaf forum where I invited people to come and asked the community what they were hoping to see happen and everybody complained about not having interpreters, so I negotiated with the county [chuckles] about providing interpreters and they said well, we need you to do hearing testing and then we'll see your interpreters. And I said okay, we did them both, I wasn't trying to go into an audiology business, there's so many audiologists all over, however, there aren't any free audiologists, so they do provide that, and now that I have this program for interpreters, hardly anybody calls to use our service [chuckles] for interpreters because I think that they feel there's a catch or they will have to pay something, because there's free interpreting.

We're not trying to take away from the work of interpreters, but we're trying to lead the program and lead the way in the community to realize it's not that difficult to provide an interpreter, and we're trying to lead by example.

>> KAREN GOLDBERG: Very good. It seems like there are programs that will provide hearing aids for children and now some select programs that may provide for elderly, and there's a large group of people that are still struggling to get hearing aids. But it's just really wonderful.

You mentioned a couple of other things. The direct services, I was wondering if you could address your question about direct services again. You had mentioned when the Council would be setting up some kind of programming to go out to the community. Could you go back to that question?

>> AUDIENCE MEMBER: Absolutely. I've heard all throughout the day today about everybody volunteering to go and do presentations and go out and educate and talk about the services and the importance of compliance of our ADA and accommodations.

However, I feel that, you know, all of these programs don't necessarily have to be free and I feel that people pay for training for sensitivity, you know, cultural sensitivity for various programs that people need training on and I feel that if we continue to develop maybe a development team or a development coordinator whose sole job is to take this out to the communities all over the state of Florida, do these educational presentations, and, you know, charge for these services, you're not charging for the information because it's free to anybody who wants to have the information, they can go Google it if they want, but you're charging for a professional to come in and teach about it.

When I go to the sheriff's office, they're paying for this training, when you go to the

dispatch or 911, they're paying for these trainings, and we should set an expectation in order for us to provide direct services for people, you know, for example, interpreters or whatever, you know, the list is endless of things that we need to provide, there's really not an excuse.

I just feel that it should be somebody's job on a day-to-day instead of just people volunteering whenever they're really, you know, available or in they have nothing better to do [chuckles] on their Saturday afternoon or Friday night.

I think if it's a person's job or if you have a committee set up and structured, that someone could take the lead and do that.

>> GLENNA ASHTON: We used to have a position, an outreach position to do just that. We used to have an outreach position to do that and we lost it.

>> AUDIENCE MEMBER: I would love to see that come back.

>> GLENNA ASHTON: It's complicated how we can take money because we're not set up to take money, so....

>> AUDIENCE MEMBER: I see.

>> GLENNA ASHTON: We're kind of stuck.

>> KAREN GOLDBERG: Cindy?

>> CINDY SIMON: So, we did have someone who did go out and do these trainings, which brought me to a question for you, because on our website, there's something that says Legal and this was a video made by a committee a number of years ago in Palm Beach County, remember Valerie worked here and she created a training for the sheriff's office --

>> AUDIENCE MEMBER: I have that.

>> CINDY SIMON: I know you have it, 'cause.....
So what I'm -- and it's on the website too. So if you utilized that training at all with the -- it was created with the Palm Beach County sheriff's office.

>> AUDIENCE MEMBER: Well, I'm not aware, I was not aware of that.

>> CINDY SIMON: So, when you do that, it was around, I want to say 2010? Maybe?

>> AUDIENCE MEMBER: However, I feel that videos are useful for --

>> CINDY SIMON: Well, she came in and the video showed them what to do when you went into a home, couples arguing, what you needed to have available.

>> AUDIENCE MEMBER: Actually, Cindy, what's kind of interesting -- this is Peggy -- what's interesting about that is we were revisiting it when we started the training for the city of Fort Lauderdale.

We put it together with the city of Fort Lauderdale and their training individual and what we do is we have Dr. David Feldman who is a CODA and then our other doctor of psychology actually go in and it's more also cultural competency and we also advise them that they are not, you know, we don't anticipate them being signed skilled, we want them to know the law. We cite different cases, so it's not just a scripted thing. That's a very nice video, I've seen it --

>> CINDY SIMON: No, no, I'm not just talking about the video, she went in, she trained them, gave them lists, and they carried numbers to contact. So they can do video remote if they need to, whatever they needed to do in order to better help. So I think --

>> AUDIENCE MEMBER: So what happens to that, like with all jobs in terms of retention, some of those people are gone. What we're left with is that video. Things have changed. Like, you know, we're even talking about the Text 911, just a lot of things are changing, and as a result, the technology and our education has to change as well.

So, we're actually doing this. I know this is one of the areas that Beth and I have collaborated on and like I said, Broward Sheriff's Office is now looking at specifically what their needs are.

Most specifically, I know you guys would enjoy this script, Olivia Feldman who is hard of hearing and Dr. David Feldman who is a clinical psychologist and one of my supervisors and his daughters was in the room and giving compression to one of the children who was shot and she did it on the Daily Moth (sp) and it was interesting from her perspective what it was like to go through what they call a Code Red which we all know is active shooter and what that experience was like, and, okay, another thing I've done is I'm also on the Broward County Public Safety and Community Task Force for the county and my whole section is mental health and one thing we're looking at is infrastructure, how do we make it, you have to take into consideration something we're not even talking about here in terms of health and safety. I have a lot of deaf employees. What do I have to alert them when there is an active shooter? Employee shootings happen more frequently than school shootings. The numbers are higher in most areas, and we're addressing active shooting and a whole host of things. Some of that is not -- those are things that it was a great effort, but we need to bump it up a little.

>> CINDY SIMON: Okay. I was just curious if you knew.

>> KAREN GOLDBERG: Thank you, Cindy. Chris?

>> CHRIS LITTLEWOOD: This is Chris. Just a quick comment on that. When you talk about she went in, you were talking about Valerie going into the agency, Valerie Stafford-Mallis.

I'm just thinking there might be some confusion on the agency. I don't know if it was Palm Beach County sheriff's office but it was Manalapan (sp) and Clay Walker who used

to be the chief of that agency and now he works for the Department of Children and Families and time flies, like she was saying, people change, things change. Even that video, you know, like we were talking about, Text to 911 wasn't even thought of at that point.

So, we need to probably move on and collaborate with these ladies and everything on making the newest, most updated things happen.

>> CINDY SIMON: I agree. I just didn't want to start from scratch when we had something to jump off of. That's all.

>> AUDIENCE MEMBER: Absolutely. I appreciate any resource and to continue the outreach part. It's so important, most of the time when a deaf person comes in or when they come in to receive case management, the problem is bigger, it's in the community first, and if we don't educate the community, the problems are never going to go away from generation-to-generation, we have to educate the hearing people in the community about, you know, how simple it is to provide interpreter, how simple it really is just to learn two words a day, a year, to make 500 words and sign that you can know.

It just takes a little bit of effort and I feel that if we're excited about it and we're able to share our passion and our fire with everybody else, it will catch on.

But I'm just one person in Palm Beach County trying to do the best I can.

But I did want to ask, did anybody have a comment about the DCF -- oh, you, I'm sorry, go ahead.

>> SHAY CHAPMAN: I was going to refer to that. Our DCF representative is not here today, but we can e-mail John and ask him if we can get some history on what happened with that.

>> AUDIENCE MEMBER: That would be really helpful.

And I have some participants who come and didn't have any language at all for 15 years, so, you know, now they're working adults and they don't have some of the basic skills that everybody else has and that's just a huge problem, so....

>> KAREN GOLDBERG: Very interesting. Debbe has a comment?

>> DEBBE HAGNER: You mentioned something about what's happening with the interpreting -- interpreters being certified. I think the best person we need to get in touch with is Gina or Adam and maybe we'll be able to share what's happening with the latest or maybe Glenna.

>> GLENNA ASHTON: Everything's on hold.

>> KAREN GOLDBERG: Thank you, Debbe, for bringing that up.

You know, it's interesting, I am constantly just flabbergasted that the state of Florida does not require certification of any kind for interpreters. I'm just.... I'm blown away by that. That it's just not required.

And the way to change that is to keep knocking on the door of the Legislature, okay, and making it clear that that is needed.

And I see one of the things as an advisory council that we can do is to put that on our talking points, which I think is on our talking points when we go to the Capitol. But to keep doing that and support FRID and getting that passed.

>> AUDIENCE MEMBER: I'm sorry, if it's all right, if I can comment what Beth mentioned --

>> KAREN GOLDBERG: Announce your name, please.

>> AUDIENCE MEMBER: I'm Drew and I work with Peggy over here. So Beth was talking about having certified interpreters in the school system and how that was not mandatory and that could be a huge issue.

I believe, but I could be wrong, but the EIPA, has a minimum score of 3.5 and that could also be something that could be looked into, that's a specific educational interpreting test that's done.

>> KAREN GOLDBERG: Glenna.

>> GLENNA ASHTON: What I understand is each county decides how they want to handle hiring interpreters and it takes a lot and it's no longer requiring EIPA or others, you know, just whoever can flap their hands. So it's really on a county level, which is why it's really hard to require anything on a state level.

I know, for example, Pinellas County is pretty strong with requiring good interpreters. And I know Palm Beach County and I believe Broward that they don't require anything, but the pay scale depends on what you have, if you have something or if you have EIPA or if you have RID or whatever, if you have more certifications or the higher certifications, the more money you earn, and money talks and provides the motivation to get the certification. But, again, it's varied by county and....

>> AUDIENCE MEMBER: May I say something, Karen?

>> KAREN GOLDBERG: Yes.

>> AUDIENCE MEMBER: This is Peggy again. So going back to the school issue is one thing, but part of the bill I spoke about earlier is when we're trying to get that, mostly discussion with things like FEMA, maybe that's something that the Coordinating Council can have a discussion with, what they're trying to do is requiring every municipality in the state of Florida or counties to make sure that they have in place a line -- a people in their EOCs, so like when there is, everybody has to take cover and be in the EOC, another part of that that was a huge complaint in the Deaf community is get an interpreter and immediately the media will focus in, like do a short crop sight and they don't show the interpreter.

And I know back in the day when Marty Meyer was the mayor, do not take the camera off of the interpreter, they're not here to interpret for the media but for the Deaf community.

That's another thing to add as a part of this, to add not only a qualified interpreter, but make sure they're on TV so the Deaf community can see them.

>> KAREN GOLDBERG: All right. Thank you. Debbe?

>> DEBBE HAGNER: For the CART, a way up, you had EIPA, it should be EIPA, just so you want to correct that.

>> KAREN GOLDBERG: And that stands for what?

>> AUDIENCE MEMBER: Educational interpreter performance.... I believe.

>> KAREN GOLDBERG: Okay. So you're saying that -- I didn't understand the number -- I didn't understand the number, what that meant, 3.5. What does that mean?

>> GLENNA ASHTON: It's a test of assessment and they are rated between 0-5. 3.5 is almost good enough, it's better if it was 4, it's great if it was 4.5 or 5.

>> KAREN GOLDBERG: Okay. So it sounds like it's a C -?

[Laughter].

>> KAREN GOLDBERG: I'm doing the math now. It's a solid low C! It's a 70. Okay. All right. Chris?

>> CHRIS LITTLEWOOD: This is Chris. I just wanted to comment about what was said before about keeping the interpreter in the shot for an emergency management broadcast, and also about positions from NAD.

I think you're aware, Beth, or maybe Peggy it was you that said you went to Arizona -- okay, Beth, you probably have met my colleague, Neil McDevitt and he talked about the emergency management position paper that both myself and Carole Lazorisak that we teach, we were on that position paper that the deaf and hard-of-hearing community would like to see included in emergency broadcast for public information and things like that.

So those are the type of position papers that NAD is putting out and that has existed. Hopefully more things like that will continue to happen.

>> AUDIENCE MEMBER: Thank you.

>> KAREN GOLDBERG: I wanted to ask a question. Beth, you stated that you do some training around this area, and for the 911 operators and the sheriff's department for ADA, is there any kind of standardized training programs that's -- not copyrighted -- but for instance when I was at USF -- well, I'm still at USF until next week [chuckles] -- but I had safe zone training, I don't know if anybody heard about safe zone training. Safe zone training is a standardized training for LGBT for healthcare providers so that they have some knowledge and skill in working with folks who are LGBTQ and -- but it's standardized, I mean these trainers went around and did

standardized training. Is there any standardized training in talking to the sheriff and law enforcement and physicians and healthcare providers, it's standardized?

>> AUDIENCE MEMBER: No.

[Laughter].

>> KAREN GOLDBERG: Should there be?

>> DEBBE HAGNER: No.

>> KAREN GOLDBERG: There should not be. Why is that?

>> DEBBE HAGNER: Not that it should not be, it's just that it's not standardized.

>> KAREN GOLDBERG: Yeah, it's not standardized, but should there be? Should there be a standardized type of program that people go out into the community and educate folks?

>> AUDIENCE MEMBER: If I could comment about that? I think that the information should be standardized. I think that everybody should be teaching the same thing, because that way we're all on the same page and Boynton Beach is doing it this way and West Palm Beach is doing it this way and Tampa is doing it this way, it should stream across the state.

However, each person that presents it is obviously going to bring their own skill and way to present the information.

>> KAREN GOLDBERG: You're right, you're correct.
Yes?

>> DEBBE HAGNER: I know that Chris Wagner, who was the former president of NAD, he has written a letter to the governors to make sure there would be a certified interpreter for emergencies and to make sure that the camera was on them. So I know that that was done.

>> AUDIENCE MEMBER: It was done and that's wonderful. We just have to hold people accountable.

>> DEBBE HAGNER: Yeah.

>> AUDIENCE MEMBER: Because, I mean, ADA has been also written for the past 28 years and people still aren't holding other people accountable for that.

I would love to see the state require every county, every area to have their own ADA coordinator for each city to make sure these accommodations are being done.

>> DEBBE HAGNER: We need to remind them.

>> AUDIENCE MEMBER: We sure do. I'm a big pain to everybody, but I don't mind

[laughs].

>> KAREN GOLDBERG: Beth, you said we should have an ADA coordinator for every city. Do we have one for the state?

[No response].

>> KAREN GOLDBERG: Yeah, it would nice to be someone at the state level.

>> SHAY CHAPMAN: Not that I'm aware of.

>> AUDIENCE MEMBER: That would be wonderful.

>> KAREN GOLDBERG: Another reason for a commission.

[Laughter].

>> KAREN GOLDBERG: Okay. Chris? And then I want to get to our last public -- or our next public comment. Yes, Chris?

>> CHRIS LITTLEWOOD: Go ahead and proceed.

>> KAREN GOLDBERG: Okay. Anybody else? Any other additional questions? I imagine that if the folks are still staying in the room, we may have additional questions and more discussion.
Okay. We have --

>> DEBBE HAGNER: What is the -- what is the vision of rights of Florida or Florida Disability Rights, is that part of the state level, that agency?

[Noise on telephone].

>> DEBBE HAGNER: Chris or no? Remember we had Barbara came to an ALDA meeting, she represents Florida Disability Rights. Is that....

>> SHAY CHAPMAN: It's not a state agency.

>> DARLENE LAIBL-CROWE: I think it's non-profit.

>> CHRIS LITTLEWOOD: I'm not sure what the question is about disability rights. Disability rights in Florida, what are you asking about them?

>> DEBBE HAGNER: Is that supposed to be the expert on the ADA for the Florida state level?

>> CHRIS LITTLEWOOD: Well, they're one of many. What I was going to say before about the standardization and whether it should exist or not, John's not here, so I'll give the lawyer answer on that. Yes and no.

I mean, there's no cookie-cutter approach to people that are deaf or hard of hearing.

There's no cookie-cutter approach to any community. What works well for a metropolitan community or West Palm Beach might not work well for a rural community outside of Ocala.

The point is communicating and making sure that people understand that visual needs for communication are being met for people that are deaf or hard of hearing.

>> KAREN GOLDBERG: Okay. Hold that thought, let me interrupt you.

>> CHRIS LITTLEWOOD: -- what resources is something I would stress more importantly.

>> KAREN GOLDBERG: This is Karen, hold that thought. By either making a statement that communication needs or that it should be more visual, you just made it a standardized statement.

There are some basic core information that we want communities to know in working with deaf, hard of hearing, and deaf-blind individuals. There's some basic information.

I'm not saying that they're going to be able to implement the same big city to small rural community, but I always think that there needs to be some basic information.

So, when Safe Zone came to USF and I participated in the training, this is the same training that they're giving in Alabama, in California, in New York. It's the basic information.

I would love -- I don't know that the Council can do this, but I would love to see that happening; that there are some basic information.

I mean, Marlee Matlin gave some basic information. How is that difficult to standardize that and get it so that we're all saying the same things, okay, in one loud voice? Okay. Somebody has a hand up.

>> DARLENE LAIBL-CROWE: This is Darlene. What I wanted to say is yes, basic information is good, but communication is the best. Because you have to communicate with each individual who has a disability, because their disability is going to be unique and there's going to be something that they use that the basic information doesn't cover.

So, the main thing is for the communities, the services, the organizations, is to communicate with that individual. Don't communicate with a group and stereotype it and put it in one basic information like you're saying. I'm sorry, but that's the way I interpret it.

We can't -- just like going for accommodations, ADA, ADA is good, but there are different types of accommodations that are used for different types of people.

Plus there's some accommodations that are not covered in ADA. For example, audio description, video description, they don't have any details to define that, to help the person be able to see what's happening. So the basic information is good, but you've got to be able to involve and follow with

everybody else.

>> KAREN GOLDBERG: Thank you, Darlene, that's well stated. I have a question for you. When people go out educating law enforcement and medical professionals and agencies, would you like them to say just what you said? Basic information is good.

>> DARLENE LAIBL-CROWE: Yes.

>> KAREN GOLDBERG: Okay. That's something that's put into a standardize program of education.

>> DARLENE LAIBL-CROWE: As a matter of fact, as part of my program with my master's degree, I used that on my final paper. If we are going to have talent out there, we need to be able to address each of them individually and communicate with them. We don't have to discuss the disability, we just need to say how can we serve you.

>> KAREN GOLDBERG: Okay. All right. We have another individual who would like to address the Council. Mr. Joel Silberstein put up an issue regarding clubs.

>> SHAY CHAPMAN: Now the author Joel Silverstein.

[Laughter].

>> AUDIENCE MEMBER: My name is Joel Silberstein.

>> KAREN GOLDBERG: I wanted to clarify that he said his name is Joel Silberstein. Okay. All right.

>> INTERPRETER: Is it on?

>> KAREN GOLDBERG: We're waiting for a microphone. Test that microphone, please.

>> INTERPRETER: Test test.

>> AUDIENCE MEMBER: Should I start again or continue from where I left off? Okay. I'm the secretary of Palm Beach County for the deaf there in Palm Beach County.

[Pause].

>> AUDIENCE MEMBER: And I have been listening and watching everything that you have been mentioned about the FCC and the CHC and also, you know, this other association here, and.....

The Goodwill as well, where she works, and the Deaf Services there, and all the information that I'm listening to her back here, I go back to the Palm Beach Deaf and share that information with them and let them know everything I've learned here today.

And I would also like to share with you all that when the Palm Beach CHD -- the Palm Beach CHD when it was established way back when, in 1979 -- 1999 -- 1969, 1969..... We're going to celebrate 50 years next year, 50 years already next year.

[Pause].

>> AUDIENCE MEMBER: And we have Deaf clubs, of course, that we have established, we have started Deaf clubs and I think it was recently where we celebrated 20 years with the Deaf club and -- well, 20 years in that particular club.

[Pause].

>> AUDIENCE MEMBER: When we opened, we're open every Tuesdays and Thursdays -- Tuesdays and Saturdays --

>> INTERPRETER: Saturdays.

>> INTERPRETER: Pardon me, Tuesdays and Saturdays.

>> AUDIENCE MEMBER: And we have different activities. And also we have bingo, we have Texas hold em and poker as well, and we've had Valentine's Day parties, we've had St. Patrick's Day parties and Memorial Day parties as well, remembering those who have served, and also we've had barbecues and various holiday parties as well every year. We have a holiday lunch out in....

[Pause].

>> AUDIENCE MEMBER: At the country club. And those other activities that we have.

[Pause].

>> AUDIENCE MEMBER: We have 187 members that attend, that are involved, and about 90% are senior citizens.

[Pause].

>> AUDIENCE MEMBER: 90%. And, you know, 90% are over 60-years-old. And most of them are.... well, much older than 47, those others who are involved, so we have from 47 to much older, up to 98.

[Pause].

>> AUDIENCE MEMBER: And many people are naïve, you know, grew up maybe with just, you know, whichever few services that they've had. Those who have -- who grew up in New York or New Jersey, Pennsylvania, Massachusetts, and many who have come and retired here, many who have moved from up north and retired here, and every year we have new faces that show up here in South Florida that are older, you know, and those who have passed away and those who have moved on and continue to live here as well.

And also, we have many visitors who come from all over the country, from various states; they come here to vacation and to visit people as well, from other countries as well, from Europe and the different European countries, South American countries they come here, and with all the people we see, it's very impressive, the deaf club -- the different faces we see with the Deaf club, and they're very impressed with the clubs here.

[Pause].

>> AUDIENCE MEMBER: It's 1,400 square feet and honestly we would hate for it to be shut down. You know, we definitely want it to continue on and to encourage the continuance of the Deaf club.

[Pause].

>> AUDIENCE MEMBER: And also continue on for the next generation. There are many deaf organizations or different clubs all over the U.S. and many of them are shutting down, many of them don't have.... information, maybe there's not enough phone services, no TTY, there's no captioning, and there's no Deaf club for people to socialize at, you know, maybe they just watch movies with captions, and all day, you know.... use a BP (sp) or possibly text, you know, using text messaging and whatnot, and it's really changing, life is changing, their lifestyles are changing. And you see the Deaf clubs dwindling and shutting down and not much continuation of it.

But you're [indiscernible] and there are a few Deaf clubs that we know of here in the Fort Lauderdale area or here in Florida, and we have accepted.... oh, there are other clubs that have their own association --

>> INTERPRETER: Clubhouse.

>> INTERPRETER: Clubhouse, pardon.
And in Broward County, there is the Deaf Association there and there's 19 facilities.... 1972.

>> INTERPRETER: Sorry.

>> AUDIENCE MEMBER: And this is information that I just wanted to share with you about the Deaf clubs and everything.

>> GLENNA ASHTON: What do you see for the future for the Deaf club?

>> INTERPRETER: What do you see for the future of the Deaf club was the question by Glenna.

And the response is I don't know honestly. Of course there's funding that needs to be given, there needs to be support and.... we also have to establish dues, fundraising, having, you know, food and drinks, sell food and drinks, and also working with Immigration and having different funds to continue on with the services that we have.

>> GLENNA ASHTON: One thing I want to add to what he said was PBCAD which is Palm Beach and BCAD which is Broward, that holiday luncheon that he mentioned, what they do, they sell tickets for the luncheon and add money on top of that and they collect money to donate to FAD to use as college scholarships, and FAD has college scholarships every year. One goes to a graduate from the FSDB and one goes to someone from a mainstream program. So they donate quite a bit every year.

>> KAREN GOLDBERG: This is Karen. It sounds like a wonderful club and program here. I'm sort of sensing --

>> AUDIENCE MEMBER: Do you have any -- all done? Any other questions? Workshops, too, I forgot about the workshops. Every month we invite different speakers to come in and provide workshops, too. So we have an opportunity to learn and things like that.

>> GLENNA ASHTON: Like one example, one time they'll provide training for safe drivers, for senior citizens, and another time it's financial planning, another time it was... uh.... it was police, and another time.... I think Beth came, Beth came one time.

>> AUDIENCE MEMBER: [Nods head].

>> GLENNA ASHTON: And on different topics relating to senior citizens, and they either signed themselves or they have a volunteer interpreter to come.

>> AUDIENCE MEMBER: Last -- like, two months ago there was a workshop recently, probate court, about probate court, and basically wills and estate planning. We had a full house for that! Wow! It was really.... there was a woman, many -- both men and women came, there were many people and learned more about.... like.... like if your husband dies, and how to protect your estates and things like that. It was an excellent workshop.

[Discussion in sign language; no dialogue to caption].

>> INTERPRETER: What did you say, Beth?

>> AUDIENCE MEMBER: There was a CPR class in the next two weeks, we're going to have that workshop in class offered.

>> AUDIENCE MEMBER: Oh, wait, wait, wait, yes.

[Laughter].

>> AUDIENCE MEMBER: Let's see.... oh, recently, let's see.... uh.... there was something.... [Sighs].... Glenna said to me when I was saying -- FCCHH (sic), the Coordinating Council here, you know, so I took responsibility in terms of sending it out to our membership, FCCDHH, they sent it to me, and then I sent around, and then I got....

[Pause].

>> AUDIENCE MEMBER: Oh, being blocked, I sent out and got lots of "non-deliverable" messages back to the e-mails and lists that I sent out to. My blind cc, you know, when you put on -- oh, blind -- so, I got all of these names and other people that I couldn't even see that was being sent out and forwarding and sending out this information. June McMahon forwarded it to me --.

[Microphone feedback].

>> AUDIENCE MEMBER: -- with the agenda but, again, I got all of this returned back. No, not me, not....

[Pause].

>> AUDIENCE MEMBER: I never had a lot of that type of experience before, so, like, having the cc's and bcc's and that was very frustrating, getting all of that extra information, and kind of retyping and copying and having to type, then to send out and clean up the information to send it out again. And finally then was successful. Well, thank you for doing that.

>> DEBBE HAGNER: I think the issue was the attachment, the attachment might be a problem. Instead, you have to embed, embed the flyer into the e-mail.

>> AUDIENCE MEMBER: Yes.

>> DEBBE HAGNER: You said you had to retype it you will in, so that tells me the attachment didn't work and that's blocked. And who did you send it from? Google, gmail, or Yahoo?

>> AUDIENCE MEMBER: I always use gmail.

>> DEBBE HAGNER: Okay.

>> AUDIENCE MEMBER: But....

[Pause].

>> AUDIENCE MEMBER: Before I had no problems and it was fine sending out, so this was just a different experience.

[Microphone feedback].

>> AUDIENCE MEMBER: So, like, when I send in, it gives a long list of names and attached, but, yeah, yeah, I think we got that all fixed.

[Pause].

>> GLENNA ASHTON: PBCAD and BCAD are unique in that they own their own clubhouse and they're really basically two deaf clubs in the state and before we had

about 17 around the state all over, and now we're down to two.

Other areas, no one else has their own clubhouse and no one else that I know of meets regularly, like every week, but now the way the signing Deaf community meets is more casual. They'll meet up at a bar or they'll have a restaurant and groups go there or.... they do a coffee chat type of thing, and the technology --.

[Microphone feedback].

>> GLENNA ASHTON: -- so that may be harder to reach out to the signing Deaf community because we don't have a formal way to contact all of them.

But FAD has a very active Facebook page and they post a lot of information and they make a lot of videos to inform people about what's going on, so that's helping some.

>> KAREN GOLDBERG: Thank you, Joel, for sharing about the Deaf clubs. They sound really active and wonderful.

Now, the one that's open on Tuesday and Saturday, that's the Palm Beach one?

>> GLENNA ASHTON: We, Palm Beach is Tuesdays and Saturdays, yes.

>> AUDIENCE MEMBER: Yes, yes.

>> KAREN GOLDBERG: What about the other one?

>> AUDIENCE MEMBER: And also Lake Worth, and also in Lake Worth.

>> GLENNA ASHTON: That's Saturday only, BCAD.

>> AUDIENCE MEMBER: That's the only one on Saturdays, Tuesdays and Saturdays, those are the only two days.

>> AUDIENCE MEMBER: BCAD is older. It was PBCAD was 69 and BCAD was 72, I was the secretary for that club, by the way.

BCAD started as being more active with a lot of senior citizens and deaf citizens were living in the Fort Lauderdale area and a lot of people moved to Boca Raton and then Boynton beach and PBCAD is more active and BCAD is more in the 70s, 80s, 90, BCAD -- they're 60, 70, 80, we're not even talking young senior citizens.

[Laughter].

>> KAREN GOLDBERG: So, this is Karen, I wanted to ask, you know, there was these clubhouses and club events. How do you reach out to the elderly who are not as mobile? In terms of they may be in assistive living facilities. Are there any ways to reach out to them?

>> GLENNA ASHTON: That's one of the nice things about the signing Deaf community, they support a lot. The deaf senior citizens, they can't drive anymore, they pick each other up to bring them to the club.

But the Deaf senior citizens or the late-deafened senior citizens not part of the signing Deaf community, they are the ones that are really more isolated.

>> AUDIENCE MEMBER: If I could actually speak on that? It's Drew again. So I actually run the senior citizen program at BCAD as Peggy mentioned and particularly I work with a lot of late-deafened hard of hearing people in the county and I go to the homes, they're homebound, I go to their homes and introduce them to the Deaf club and the cities in general and get them more integrated and get them hooked with TOPS and transportation and things like that, I would like to know if there's any kind of deaf or hard-of-hearing clubs or activity centers that are really helpful for these individuals, if someone could talk to me about that, that would be lovely.

>> GLENNA ASHTON: Is there a local HLAA chapter in Fort Lauderdale/Broward County?

>> DEBBE HAGNER: The 14 chapters of HLAA and Florida, there is one in Miami and they're struggling big time. There is one -- a huge one in Sarasota.

>> GLENNA ASHTON: There's a small one in Boca Raton. But in Fort Lauderdale?

>> DEBBE HAGNER: I have to look on the list, I don't know all of the chapters.

>> GLENNA ASHTON: HLAA would be -- a suggestion is to set up a HLAA chapter and have them come -- but NAD is not....

[Laughter].

>> DEBBE HAGNER: There's only one -- there's only one ALDA chapter, which is -- which meets in Clearwater the second Tuesday of every month.

Okay. We have one in Broward, Broward County, Central Florida, The Villages, we have one in Gainesville, Gulf Coast, which is mine, Jacksonville, Lakeland, Lee County, Miami, Orlando, Orlando is a support chapter, a support group instead of a chapter; Sarasota, South Palm Beach County chapter, and Delray, and then there's one in Sun City chapter and Tampa, and there is one in Vero Beach.

>> GLENNA ASHTON: The one in Broward County, where is it?

[Pause].

>> KAREN GOLDBERG: Pompano? John Knox Village, Pompano Beach, Florida.

[Pause].

>> GLENNA ASHTON: [Talking away from microphone].

>> KAREN GOLDBERG: Okay. Excellent information. I am so enjoying the public commentary and discussion. It's just very rich and rewarding, so thank you. I felt like I had a question there for a second.... it's gone.... it's gone gone gone. I was just thinking I want to go to a club meeting now [chuckles].

>> GLENNA ASHTON: Do the senior citizens, do any of them drive or are any still driving?

>> AUDIENCE MEMBER: Some. The specific ones that I go out and visit have very limited driving ability, and that's the portion that I happen to run. I'm sure there are many that drive, though they're 80 and up, but I don't know.

>> GLENNA ASHTON: Are there some of those that might be interested in HLAA or ALDA chapters?

>> AUDIENCE MEMBER: Oh, yeah, I would love that, yeah. Thank you.

>> DEBBE HAGNER: Just to let you know, there's also a cochlear implant support group for those who have cochlear implants. I don't know how many of those. But there's one support group for those who have AB, Cochlear America, and MED-EL, they have support groups in various different places.

>> AUDIENCE MEMBER: What's it called? It's called cochlear implants based on the companies, there's AB, Cochlear America, and MED-EL.

>> KAREN GOLDBERG: Those are based on the companies. Are there any based in hospitals? I mean oftentimes you'll see that, like with bariatric surgery, you have a support group within the hospital after surgery. Is there anything like that?

>> DEBBE HAGNER: Clearwater used to, our old name, HLAA Clearwater used to meet in the hospital and had a support group there, but we moved.

>> KAREN GOLDBERG: Although it sounds like the clubhouse is a lot of fun.

>> AUDIENCE MEMBER: With a bar.

[Laughter].

>> CINDY SIMON: I think for kids with cochlear implants, there are activities that they do at the Miami Ear Institute, because they had a program there and they had someone running it. Actually he used to be from the Tampa area. And they have activities out of there for kids with cochlear implants.

>> DEBBE HAGNER: I also know that All Children's Hospital had their own support group for their patients of All Children's Hospital.

[Pause].

>> KAREN GOLDBERG: Okay. Thank you very much. Just so much potential in services and coordinating. I mean, we've learned so much in just the short amount of time. One of the things that came up, and it's not necessarily related to one of the

speakers -- I'm sorry, one of the public comments, is I had mentioned about safe zone training and when I went through my safe zone training for the LGBTQ, I had asked the folks who were running that training, I think they actually developed the program and came out -- and came down to USF, if they had any specific training to reach out to the LGBTQ community who are deaf, and they did not have any specific training for that. Or any kind of protocol.

They said we would just get an interpreter, which I think is probably what they would do.

But I think it brought up some questions for me about the LGBTQ community who are deaf. How does that -- I think we call it intersectionality. Has anybody ever heard of that term?

>> AUDIENCE MEMBER: So if it's okay, I would like to speak one more time; it's Drew.

>> KAREN GOLDBERG: Hi, Drew.

>> AUDIENCE MEMBER: Hi. I actually applied for a grant with TAC, unfortunately it didn't go through, to create a deaf, hard of hearing, LGBTQ group for kids that was established.

And because kids are in the LGBT community, they don't have support groups, we have tons of support groups but not for deaf and hard-of-hearing students, so I've spoken to some -- I'm sorry, I've not spoken, but I've chatted with some that have gone to the hearing support groups and have felt really excluded and felt really isolated.

One did provide an interpreter but can you imagine being a kid, walking in and hearing things on a personal level and have an adult interpreter? It's kind of not the same.

So my co-worker and I felt it was really important to have at least one established somewhere in the Broward area.

There's not one anywhere in the state of Florida and it's kind of ridiculous, given the high risk factor of being deaf and hard of hearing, but also of being LGBT. So, that's a thing.

>> KAREN GOLDBERG: Well, thank you for sharing that, Drew. You know, it is interesting that teens who are LGBT often are isolated. And can you imagine even more isolation with a deaf and hard of hearing?

So, and they have a high -- just so I can speak in terms of a psychiatrist, they have a high risk of harming themselves. So just anything we can do to reach out to this intersectionality of cultures and communicates.

>> DEBBE HAGNER: This is Debbe, I was thinking that maybe we can add something to the website to support that kind of group, that there are resources for them?

>> KAREN GOLDBERG: What would we add? I want to know. I agree something would be useful. Anybody have any thoughts? Darlene?

>> DARLENE LAIBL-CROWE: Okay. I want to talk about something that has occurred concerning support service providers. Is that okay?

>> KAREN GOLDBERG: Okay, absolutely.

>> DARLENE LAIBL-CROWE: Okay? Pardon?

>> KAREN GOLDBERG: Absolutely.

>> DARLENE LAIBL-CROWE: Like I said, the last time I was at a meeting is the Florida Deaf-Blind Association actually hired two grant writers to help us with a grant proposal.

It has come to the reality that we are not going to be able to do it.

I met with the grant writers on July the 7th in Orlando and we discussed the issues that Florida Deaf-Blind Association has and the first thing is that they are not prepared to handle a large sum of money.

The second thing is they don't have a consistent income that would be able to support the program after the grants are finished.

And the third thing is the lack of data.

And so the grant writers and I brainstormed and we came up with some possible resolutions.

The first thing is that we can partner with other organizations to possibly help us with managing the program.

One of the main issues is because we needed a CPA and an administrator to handle the grant program, the program itself. And even though we could possibly get in-kind donated services, it would still be the same issues after the grants came through.

So, what we're doing, as I am trying to reach out to other organizations to see if they would be interested in partnering with the Florida Deaf-Blind Association to implement the Florida support service providers program so that it can be done to serve those who are deaf-blind.

One of the things that we have considered is possibly doing a pilot program in a certain area and that goes back to the data issue, is that we need to know where to start with a pilot program.

And then the -- I'm trying to go through my mind -- and then we would also establish a board that would manage or direct the program, to be accountable to it and report to the other various organizations.

And we have also talked about changing from support service providers to another more professional name.

So, there's a lot of areas that we are talking about that we need to do.

So what we need to do is we need to -- I'm going to be sending out letters of inquiries to different organizations, just to bullet items that we are interested in, to see if anybody is interested in being involved.

What I thought is it would be great if we could partner with the Lighthouse for the Blind and start with a specific area and would expand with their program and move out as it grows, but we also need to partner with a Deaf Services Agency so we can make sure that the sign language and Deaf culture as well is addressed in that area.

So, there's been a lot of things that's going on, trying to get it out, and other than that, we will not be able to have a grant and then the program will have to stay like it is, as a volunteer, which is very little services.

So, if any of your organizations would be interested in partnering with us. For example, the board that we had considered is maybe creating positions of deserving organizations where they would have a say in what is being done.

And that way we can apply for grants and those organizations can help manage a large sum of money.

One of the things is that Pennsylvania, they got over \$400,000 for an SSP program to be implemented statewide.

Another state just recently got 500,000.

So, the programs are starting to expand from small areas to statewide in the other states.

Minnesota has their state statewide.

So, it's a program that is very much needed in Florida.

And the first thing about the issue of data is if we partnered with other organizations, we can increase on the more perspective of data and more data.

So that is what I wanted to report about the Florida Deaf-Blind Association and we hope that you would be able to approach your leadership.

And once I send out the letters, maybe we can talk about what to do next.

>> KAREN GOLDBERG: Thank you, Darlene. That's such an important issue. With these partnerships, such as with the Lighthouse for the Blind, what are you hoping to get from that partnership, besides funding, is what it sounds partly is needed.

>> DARLENE LAIBL-CROWE: What we're hoping for is to help manage the financial, with the money, help with the administrative, help with training.

Even though we have an excellent workshop for SSPs, we also need to promote training programs for the deaf-blind and for their families of how to use that program.

So, the Lighthouses or any other organizations, we will have to create other programs so we can make sure that the SSP program is implemented in a most effective way it can.

>> KAREN GOLDBERG: Okay. So there is a Helen Keller Association, wasn't there, in Florida, I thought at sometime?

>> DARLENE LAIBL-CROWE: No, there is a Helen Keller National Center that has representatives that Cory Parker is the South Beach representative and he covers Florida, Georgia, Alabama, Mississippi.

>> KAREN GOLDBERG: I see.

>> DARLENE LAIBL-CROWE: So they don't actually have any services in the state, but they have a representative that can help them to obtain services at Helen Keller National Center.

And one thing about the Helen Keller National Center is recently they are doing job development where they are creating deaf-blind specialists to help with employment in certain states and they just recently started the first one in the state of Iowa. So, once they determine how successful that is and they might expand out in certain regions and then maybe to the states, I hope.

>> KAREN GOLDBERG: Okay. Thank you. Glenna?

>> GLENNA ASHTON: Darlene, I remember that the organization was trying to collect data on how many deaf-blind were in Florida. How did you do with getting that data?

>> DARLENE LAIBL-CROWE: The Helen Keller National Center has their own registry and they keep it by state.

The Florida Deaf-Blind Association did a registry to help determine where they are in the counties, but there's been a lack of response.

We only came out -- we only had 60 responses and the data was wide spread, so there wasn't really one specific county that had more than five.

So, it's just -- it wasn't conclusive enough for us to get an idea of what locations to start in.

>> GLENNA ASHTON: With when you send out things like surveys or direct marketing or anything else like that, very often they figure that the response rate would be about 10%. So 60 responded, that means you probably have around 600 around the state.

>> DARLENE LAIBL-CROWE: Well, in the state of Florida, the VR DBS, they have a data of 700-plus deaf-blind individuals in Florida, and that's from age zero and up.

So, the statistics in Florida are very varied, I'll just say that, they're varied and they're not consistent enough for us to determine where the need is.

One of the issues also is when -- a majority of the people are senior citizens. They lose their vision and their hearing, over a lifetime of sighted and hearing. So it's going to be hard for them to recognize themselves as deaf-blind.

So that is another area of where education and awareness is important, because they -- it's important -- the education and awareness is to let them know that by redefining -- or you don't have to reidentify yourself, but defining yourself, dual sensory loss, deaf-blind, you are going to be able to get better resources and better choices. And that is the main thing.

And stigma, stigma is a big thing with people that have grown up sighted. Hard of hearing, I am just as bad because I was very uncomfortable losing my vision, and then when I went to Helen Keller National Center and had to reidentify -- not have to reidentify myself, but made myself reidentify myself so that I could learn to adapt and

accept and move on.

So, there are so many people out there that -- they're very uncomfortable with it and they don't want to accept it.

I mean, think about it with you right there. If you teach, would you want to be blind and be able to identify your students?

If you work in administration, would you want to be blind and have a hearing problem and continue doing what you're doing? It's hard. And it's a more of an accepting and adapting and recognizing what your needs are and how you can get at it. And you can't do that unless those services are there.

The state of Florida does not have a deaf-blind center, they don't have deaf-blind rehabilitation programs. They have a vocational program that is divided.

The Helen Keller National Center, when they train someone that's deaf-blind, they train them so that they explore every alternatives that they might have, and that person gets to decide what works for them and what doesn't.

So, it's very important that the deaf-blind, because of the varying degrees of loss, receive specific specialized training, services, and whatever you want to call it, resources.

That's it.

>> KAREN GOLDBERG: Thank you, Darlene.

You know, I don't think that I've heard this much about this issue from you in other meetings. And I thank you so much for bringing up the issue. And so noted about the request for finding some sponsorship and associations to connect with Florida Deaf-Blind Association.

I wanted to check with the members of the public who are still here.

>> AUDIENCE MEMBER: Hello.

[Laughter].

>> AUDIENCE MEMBER: That's me.

[Laughter].

>> KAREN GOLDBERG: The "member" of the public.

[Laughter].

>> KAREN GOLDBERG: Drew, I wanted to make sure that we addressed your question before we close for the day. Sometimes so many things get brought up that some things may, you know, we're in the middle of a discussion and then somebody has another idea about something and we don't always go back to what we were discussing, so I just wanted to see if you had any additional questions, thoughts, ideas.

>> AUDIENCE MEMBER: Yeah, I'm okay, I'm okay. Thank you. I appreciate it.

>> KAREN GOLDBERG: Okay. Good to know.
We have 18 more minutes before the close of the public comment. I'm going to check and see if there's anybody on the phone?

[No response].

>> AUDIENCE MEMBER: I don't have anymore comments, so I'm okay.

>> KAREN GOLDBERG: Could somebody step out of the room and call us, please?

[Laughter].

>> MEGAN CALLAHAN: This is Megan. We can --

>> AUDIENCE MEMBER: I'll go do that!
No, bye. Thank you.

>> KAREN GOLDBERG: Thank you for coming today.

>> MEGAN CALLAHAN: This is Megan, we can take a 16, 17 minute break and come back with a couple minutes left?

>> KAREN GOLDBERG: Would that be possible? I don't want to be disrespectful. I'll stay here while other people go and take a break.

>> MEGAN CALLAHAN: You can't just technically adjourn until 6:00 p.m., so even if we were to take a 15 minute break or 10 minute break.

>> KAREN GOLDBERG: I would like to leave a few minutes if anybody has any questions.
Yes, Cindy?

>> CINDY SIMON: We can go on and talk about committee wrap ups.

>> KAREN GOLDBERG: No, I don't want to do that. Thank you for the suggestion. I think we ought to just stick with the agenda as it is and see if, you know, if anybody has any other last-minute thoughts or ideas we can discuss, and if a question comes in from an audience member, we'll address it then.
Or we can take a break for five, ten minutes or whatever.
Yes, Cindy?

>> CINDY SIMON: First, Darlene, I think you did an amazing job. I also think you spoke very eloquently, and I think that this Council truly underestimates the number of people that we actually should be serving in this state.
Anybody who has hearing loss and vision loss actually comes under this Council for us to serve.
So, when we look at numbers, we are severely underestimating for how many we can actually make a difference.
Again, I would ask you to remember almost -- almost -- the majority of senior citizens in this state would come under.

>> DEBBE HAGNER: This is Debbe. I know that when it comes to grant writing, that there's a lot of rules, and you have to have real specific information, data, statistics, in order to get the grant.

So, I can see where Darlene is very frustrated because of the data is not as accurate, so....

>> DARLENE LAIBL-CROWE: For one thing, the Florida Deaf-Blind Association is very small, they are very small as far as members, but a grant proposal or even a grant, you have to have eligibility -- whatever it is -- I'm sorry, I had mouth surgery on July the 13th so I have talked more than I have for a while, I just went back for follow-up yesterday and I have to go back in three weeks or more.

So, you know, they're just small and they didn't realize, and a lot of the deaf-blind people, they want the services, but they can't understand that we have to follow the rules.

If they have grants here and grants there, but they still have a criteria that they have to follow, and one of the things was hiring the grant writers so that they are professionals and could tell them.

>> DEBBE HAGNER: Darlene, have you thought about maybe working with some of the companies that -- is there any company that we could go after?

>> DARLENE LAIBL-CROWE: Working with the what now?

>> DEBBE HAGNER: Companies.

>> DARLENE LAIBL-CROWE: Companies?

>> DEBBE HAGNER: I know you can't, like, for example, Starkey company, the hearing aid companies, if there's some company that we can see and collaborate.

>> DARLENE LAIBL-CROWE: For the partnership?

>> DEBBE HAGNER: Yeah.

>> DARLENE LAIBL-CROWE: I would -- you know, since I have my master's degree and everything, I'm willing to do whatever I can, even as far as relocating.

But I, you know, it's just a matter of getting someone who's really open to doing it and possibly helping me get in there and get started.

>> KAREN GOLDBERG: Thank you, Darlene. Megan?

>> MEGAN CALLAHAN: Can we possibly take even maybe a five minute break to give the providers a break?

>> KAREN GOLDBERG: The interpreters and the CART Provider? Yes, I am in favor of taking a break. Everyone else in favor of that? Okay. Let's take a break.

[Break].

>> KAREN GOLDBERG: Are we back?

[Pause].

>> KAREN GOLDBERG: There are three minutes left.

>> DEBBE HAGNER: Just to remind everybody to come to the meeting at 8:00 o'clock tomorrow morning.

>> KAREN GOLDBERG: I'm going to remind everybody that the meeting is at 8:00 o'clock tomorrow morning. Sorry, making Lisa write that twice. I want to know why there's a mushroom box right there and everybody is eating out of it.

[Laughter].

>> DEBBE HAGNER: Remind everybody to come tomorrow.

>> KAREN GOLDBERG: Tomorrow we have an exciting lineup for you all. We're going to call to order immediately at 8:00 a.m. I will be here in my pajamas.

[Laughter].

>> KAREN GOLDBERG: We're then going to move into the committee updates wrap-up, review of upcoming meeting dates and locations, review public comments, and we're going to have a wonderful presentation by June McMahon -- how do you pronounce that in.

>> MEGAN CALLAHAN: Mac-man.

>> KAREN GOLDBERG: And we'll have general council discussion and then adjourn. And I want to thank the interpreters today, they've done a beautiful job.

>> GLENNA ASHTON: Don't forget CART.

>> KAREN GOLDBERG: And Lisa is over there without anybody else; she's over there all by herself. What's going on?

>> MEGAN CALLAHAN: I can go over the November meeting stuff in less than two minutes and we can go ahead and knock that off of the agenda for tomorrow.

Just real quick, I wanted to remind everybody that our November meeting will be in Sarasota, but the meeting dates did have to change due to some complications with the hotel, so the meeting dates are now November 15-16. The hotel contract has already been taken care of, everything is locked down.

The reservation cutoff date which I will e-mail you guys, you know, a few times to remind you, but that is October 14th.

[Pause].

>> KAREN GOLDBERG: Okay. So November 15-16, Sarasota, October 14th is the deadline, we're groovy. What else do you want?

[Laughter].

>> SHAY CHAPMAN: What hotel is it?

>> GLENNA ASHTON: Do you have the hotel?

>> MEGAN CALLAHAN: The Hampton, we have the hotel already. We need to nail down what we want on the agenda, the public notice --

>> KAREN GOLDBERG: I'm going to be speaking to you about inviting some people.

>> MEGAN CALLAHAN: Yes, so we can get that nailed down.

>> KAREN GOLDBERG: We'll put that in that 15 minutes of time slot that's allotted. Ladies and gentlemen, in the absence of any additional public comments, we are officially adjourned.

[Concludes at 6:00 p.m.]

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