

**FLORIDA COORDINATING COUNCIL
FOR THE DEAF AND HARD OF HEARING
Quarterly Meeting
Sarasota, Florida**

Thursday, November 15, 2018
9:00 a.m.

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>> KAREN GOLDBERG: Okay. So the phone is having some issues, so we have a technical delay.

This is Karen Goldberg. We are still having technical difficulty with the telephone. We are no longer have difficulty with the telephone, and we're going to go ahead and get started. Okay. Do we have anybody on the phone? Just wanted to test.

>> JOHN JACKSON: John's on the phone.

>> KAREN GOLDBERG: Okay, John. Thank you for testing. Okay. This is Karen Goldberg. I am the Chair for the Florida Coordinating Council for the Deaf and Hard of Hearing. I want to welcome everyone to the November meeting in Sarasota, Florida. We welcome all of our members, Council members, our interpreters, our CART provider, our technical staff, as well as anyone who is joining on the phone. We're going to go ahead and get started and do a call to order. All in favor, say aye.

[Ayes].

>> KAREN GOLDBERG: Testing out the waters. So why don't we go ahead and start with a council member roll call and we will start from the left of me, which will be Megan. And please, we're going to do a little differently. Let's check the addresses, because some of these addresses are incorrect. Gina, will you make the corrections, and then they'll have it on record.

>> GINA HALLIBURTON: Yes, ma'am.

>> Good morning.

>> KAREN GOLDBERG: Good morning. We're doing roll call right now.

>> MEGAN CALLAHAN: Good morning. This is Megan Callahan from Tallahassee with the Florida Department of Health. My address in the membership list is 4052 Bald Cypress Way, that's still correct.

>> KAREN GOLDBERG: Thank you. And welcome.

>> CINDY SIMON: Good morning, everyone. Cindy Simon representing audiologists. It's good to see everyone, and my address is correct as written.

>> KAREN GOLDBERG: All right. Thank you, Cindy. Welcome.

>> CHRIS LITTLEWOOD: Good morning, everyone. This the Chris Littlewood. I represent the Association for late deafened adults, live in Seminole, Florida. Work for St. Petersburg College.

>> KAREN GOLDBERG: Welcome, Chris. And this is correct address?

>> CHRIS LITTLEWOOD: It is. My only question is all this information printed where -- I mean, it's public information.

>> KAREN GOLDBERG: This is just for our update. Okay. All right. And I am Karen Goldberg. I represent Hearing Loss Association of America, Florida State. The address that's listed here is not correct for me. I'm not with the University of South Florida any longer. I'm in private practice. I can update it now or I can just give it to you, Megan.

>> MEGAN CALLAHAN: Whatever is easiest.

>> KAREN GOLDBERG: Okay. So we'll make a note that we'll update it. All right. Good to be here.

>> GINA HALLIBURTON: Okay. I'm Gina Halliburton, and I represent the Florida Registry For Interpreters For the Deaf, and my address will be updated also.

>> GLENNA ASHTON: I'm Glenna Ashton, I represent Florida Association for the Deaf, and my information is correct.

>> DEBBE HAGNER: Good morning. This is Debbe Hagner. The only thing -- I represent HLAA. You need to remove where it says the phone number for VRS. Just remove that. Otherwise everything is good.

>> DARLENE LAIBL-CROWE: I am -- Megan, on the membership thing, I need to show you what it's doing with the screen reader, and hopefully we can solve it later. But I'm not able to read the whole thing. Thank you.

>> KAREN GOLDBERG: Okay. And who do we have on chat.

>> GINA HALLIBURTON: Cecil Bradley, and he's representing the Florida Department of Education.

>> KAREN GOLDBERG: Cecil, is your address correct here? All righty. And who do we have on the phone.

>> MARY HODGES: Mary Hodges.

>> JOHN JACKSON: Good morning. This is John Jackson representing the Florida Department of Children and Families from Tallahassee, and I'm appearing from Tallahassee for today's meeting. I didn't know what you were looking at that's in front of you, but if it has a -- my address should be correct.

>> KAREN GOLDBERG: All right. Fair enough. Thank you. Welcome, John. Who else is on the phone.

>> MARY HODGES: Hello. This is Mary Hodges.

>> KAREN GOLDBERG: Hi, Mary. Do you want to give us your introduction.

>> MARY HODGES: Hello. Can you hear me.

>> KAREN GOLDBERG: Yes, we can hear you.

>> MARY HODGES: Mary Hodges, and my information is correct except the title. The bureau chief. The room number is changed to 325 east.

>> KAREN GOLDBERG: Okay. Thank you very much. Megan, did you get that? All right. She got that. All right. Great. Thank you. Who else is on the phone? Okay. And Gina.

>> GINA HALLIBURTON: Cecil is on. He's asking what did you mean when you asked him was it correct.

>> KAREN GOLDBERG: Was there an address. Any updates on your address? Okay. If there is any updates, just let us know. Okay. We're going to move forward. I wanted to announce that we do have an appropriate number of people for a quorum, so we will be able to vote, if need be. Okay. So going on to some housekeeping. Just remember to wait to be recognized by either Gina or me before speaking, and if I don't see you, just keep waving or poking on the CART or yelping or something. Okay? Please remember to state your name before speaking for the CART to correctly identify who is speaking, and put that in the minutes. All right. Let's move on. Everybody received a copy of the minutes for the last meeting. Yes? Okay. What tab is that.

>> CINDY SIMON: Six.

>> KAREN GOLDBERG: Thank you. All right. So moving to Tab 6, these are the minutes from the last meeting. Wanted to know if everybody had a chance to review them. Do we have any discussion about them.

>> CINDY SIMON: I just have --

>> KAREN GOLDBERG: Go ahead.

>> CINDY SIMON: I have a question on that. In the minutes, it says for the Department of Children and Family, no update. When we had the committee, there was updates, because it was based on the DCF Committee. But we don't have updates after that as far as I'm aware.

>> KAREN GOLDBERG: What do you mean that we don't have updates.

>> CINDY SIMON: Well, the DCF updates were when we had to have this DCF Committee with HHS, when we were all there. We had updates at every meeting from those of us who were on that committee, on what was going on. When the committee disbanded, there was no need for any more updates unless someone wanted to come in and give us a report. So I'm not sure whether or not we need to have that in there.

>> KAREN GOLDBERG: Thank you, Cindy. I think that's a very good point. Can we have some discussion on that? Other thoughts? Yes, Chris.

>> CHRIS LITTLEWOOD: John, are you on the line? Is there anything that you wanted to comment about DCF.

>> JOHN JACKSON: I'm having a hard time hearing y'all. This is John.

>> KAREN GOLDBERG: Okay. We're going to work on correcting that right now. Can you hear me? John.

>> JOHN JACKSON: Hello.

>> KAREN GOLDBERG: Are you able to hear me at all.

>> JOHN JACKSON: Yeah. It's not completely clear.

>> KAREN GOLDBERG: Okay. Is there any way to bring the speaker for him closer, or to use a dual -- we're going to work on putting a mic connected to the speaker for you.

>> JOHN JACKSON: I appreciate it. What is it that's being --

>> If all of them have the phones open, they're going to hear crazy sounds.

>> KAREN GOLDBERG: Okay. So our technical support is reporting that -- suggesting that everyone who is on the phone, please put your phones on mute while he adjusts this, or you will get some feedback.

>> Only when they're speaking, to turn the phones on.

>> KAREN GOLDBERG: Unmute only when you are speaking. Otherwise, keep it muted.

>> Okay. Try to have that gentleman speak now.

>> KAREN GOLDBERG: John, can you please speak now? Let's see if you're able to hear us a little bit better.

>> JOHN JACKSON: Okay. I'm hearing a little bit better, yes.

>> KAREN GOLDBERG: Great. That's wonderful. So Cindy was asking a question about should we have DCF updates, and are there any updates. Is that what you're asking, Cindy? Let me have her ask it.

>> CINDY SIMON: Actually, we had DCF on the minutes that there was no report. So -- am I on? Okay. Now I'm on. Now I can hear myself on. I couldn't before. So the question is, it looked like it was the old committee update. Since the committee is disbanded, do we even need to mention that there were no DCF updates unless you have something new to tell us or someone wants to come in from DCF, or something like that.

>> JOHN JACKSON: This is John. I think Cindy's asking a very reasonable question. We really haven't had updates to give I think for the past couple minutes. I did miss the last meeting, but I was not informed that there was anything to update or I would have sent somebody, and also I don't think that anyone requested any kind of updates. If I'm wrong, I apologize. But that makes sense to me, Cindy.

>> KAREN GOLDBERG: Okay. Yeah. I think that's good to know. Can somebody give me a little history on what the DCF Committee did in the past? I think that predated me.

>> CINDY SIMON: Do you want to do it, John, and explain how we had this temporary committee? It wasn't part of the Council. It was a separate committee that started with the Council, and John, I'll let you give the synopsis.

>> KAREN GOLDBERG: Just a brief one.

>> JOHN JACKSON: The department was sued a number of years ago for not providing adequate services and accommodations -- I'm giving a real Reader's Digest version here -- and part of the settlement with the feds was we came up with the idea to create a committee or a task force or some other type of entity that would assist DCF in some of the things that we agreed to do in the settlement with the feds. From there, because it was initially they wanted the Florida Coordinated Council to be that committee, but in discussing it, it made more sense to request the Council to create a committee that would be made up of some council members, but then again, I haven't seen the settlement agreement in a little while, but it also laid out others that we wanted on the committee, and it reviewed materials that were being generated by DCF in order to comply with the settlement agreement we had with the feds, and obviously, because the Council created this committee at DCF's request, and I believe this was about nine years ago. It was probably about a year before Governor Scott was elected to his first term.

>> KAREN GOLDBERG: Got it.

>> JOHN JACKSON: So obviously since the Council created this committee, the Council wanted reports on the status of committee actions, and the committee has not gotten -- I can't even tell you the last time the committee got together. I don't even know. I was not heavily involved with the meetings for the committee once it got going. But maybe someone on the Council there can tell us a better time of when the committee disbanded, but, you know, the committee doesn't exist anymore. There aren't really things to update based on what's going on with the committee.

>> KAREN GOLDBERG: Okay. So it sounds like the committee is not active at this time. Is that correct.

>> JOHN JACKSON: I do not believe so, Karen.

>> KAREN GOLDBERG: Cindy.

>> CINDY SIMON: Basically, the committee was set for a specific of years for which it was funded. They extended it, I think it was by two years. I could be wrong. And then once everything was established, you know, we looked at trainings for personnel on how to handle, and it's been disbanded.

>> KAREN GOLDBERG: Okay. Fair enough.

>> CINDY SIMON: So there is no committee.

>> KAREN GOLDBERG: Okay. Fair enough. I would like to stay on our agenda here, which is to approve the minutes as they are. So can we get a motion in that regard to approve the minutes? Debbe.

>> DEBBE HAGNER: I make the motion that we accept the minutes.

>> KAREN GOLDBERG: Darlene.

>> DARLENE LAIBL-CROWE: And I second it.

>> KAREN GOLDBERG: Thank you, Darlene and thank you, Debbe. Okay. The minutes have been accepted from August meeting. I think the question what to do with the committees is a separate question outside of do we accept the minutes or not. Okay. Yes, Chris.

>> CHRIS LITTLEWOOD: I missed the end of the discussion with the DCF Committee. The question that I had was, as I understand it, Allison Schlesinger is no longer with DCF, and one of the determinations from the committee that was established by DCF was to have a deaf and hard-of-hearing coordinator, and I'm just wondering if there are plans in place, or if John knows anything about that, or a new coordinator to be assigned.

>> JOHN JACKSON: I do not have an answer for you, Chris.

>> CHRIS LITTLEWOOD: Okay.

>> KAREN GOLDBERG: Glenna.

>> GLENNA ASHTON: I'm wondering should we contact Allison to get reports from her because she's much more directly involved with what's happening with the deaf and hard of hearing under DCF.

>> KAREN GOLDBERG: Yeah. My understanding is that she is no longer with the Department of Children and Family Services, but I have a way to reach her outside of that. I can get a direct update. I'll see if she's able to respond today. And then I can give you feedback on that. Does that seem reasonable.

>> GLENNA ASHTON: What's she doing now.

>> KAREN GOLDBERG: Okay. Yes, Darlene.

>> DARLENE LAIBL-CROWE: I was just wondering when Chris was talking about a -- I think you were talking about a representative. Does DCF have like a state board or something to where someone -- like John could be on that board to bring us information.

>> KAREN GOLDBERG: Well, I think that's a very good question, and thank you for raising it. The discussion has been that they did have a representative, and that representative has recently resigned her position. So I will reach out to that representative and try to get -- well, ex-representative, and see what her understanding is and if she has a contact for us. And then I'll bring that back to the meeting. Any further discussion on this? Because I would like to stay with our agenda. Anybody online? Nothing. Okay.

All right. So we have approval of the minutes. Everyone has received a copy of the agenda for the meeting for today and tomorrow. Has everyone had an opportunity to take a look at the agenda? And can we get a motion to approve the agenda, or should we have some discussion about it? Yes, Darlene.

>> DARLENE LAIBL-CROWE: I make a motion to accept the agenda.

>> KAREN GOLDBERG: Okay. Before I second it -- before I get it seconded, I wanted to ask, does anybody want to add anything to the agenda, is the question I'm asking. Before we make a motion, I want everyone to have an opportunity to say I've looked at the agenda. I think I'd like to add something, because all of a sudden we've been talking about DCF, which is not on the agenda, so is that something we want to add to the agenda? Yes, Cindy.

>> CINDY SIMON: That committee was a separate thing from the Council, so typically if there's something to update, Chris would update. After Allison came on, we invited her in to tell us what was going on --

>> CHRIS LITTLEWOOD: You said I would update.

>> KAREN GOLDBERG: You did say Chris. You meant John.

>> CINDY SIMON: Yeah. Maybe. Because I was looking at Chris, and he was there, too. Sorry. But if there was something to say, John would say it. It's not a separate item for us typically unless something came up and then someone would come in and tell us about it. So I don't know that we really need to have any discussion on it.

>> KAREN GOLDBERG: Fair enough. Thank you. Everyone take a quick look at your agenda. Tell me if there's anything that you would like to add before we start motioning to accept. Debbe.

>> DEBBE HAGNER: I would like to talk a little bit about what's happening with the text to 911.

>> KAREN GOLDBERG: Okay. So maybe we can add that somewhere. I recommend that we add that at 10:30 and change the It's A Deaf Thing review to 30 minutes. Oh, I'm sorry, Megan.

>> MEGAN CALLAHAN: That was part of my action items and I'll be discussing that a little bit at least during my update, and then from there, if you still wanted to discuss it further, we could.

>> KAREN GOLDBERG: That's actually a better idea. Thank you, Megan. Anybody else? Take a look at the agenda. Is there anything else that, you know, since the agenda came out, and to the time of this meeting, maybe somebody approached you or you had another thought as to something you would like to discuss at this meeting today. Yes, Darlene.

>> DARLENE LAIBL-CROWE: Does this mean with, like, the Website Committee, if you have something you want to ask with the committee, does that mean I need to add that to the agenda.

>> KAREN GOLDBERG: No. That's part of the updates on the committee updates.

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

>> KAREN GOLDBERG: Good question. Okay. So we're good and we're opening it back up to the motion to accept. And I think that went to Darlene. Darlene, do you make that motion again to accept the agenda as written.

>> DARLENE LAIBL-CROWE: Yes. I make the motion to accept the agenda.

>> KAREN GOLDBERG: Okay. Thank you. Do we have a second? Chris Littlewood has provided a second. Thank you. And he did it like he was bidding on an art piece. [Laughter] He raised two fingers, and the winning bid goes to him. It was very cool.

>> CHRIS LITTLEWOOD: It's the sign for second.

>> KAREN GOLDBERG: Okay. Very good. It was not voiced.

>> CHRIS LITTLEWOOD: Late deaf.

>> KAREN GOLDBERG: It was awesome. I thought it was a pretty cool sign. Okay. The agenda has been adopted. Prior to going on to our next item, and we are right on time. This almost never happens. We had a question about some technical challenge that Darlene may be having, and I want to just check in with you, Darlene, and see if you are able to --

>> DEBBE HAGNER: We'll do that during the break.

>> KAREN GOLDBERG: You're okay right now.

>> DEBBE HAGNER: No.

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

>> KAREN GOLDBERG: Okay. Do you want to move forward.

>> DEBBE HAGNER: Do you want to have me try and fix this or wait until we have a break.

>> DARLENE LAIBL-CROWE: We can wait until we have a break.

>> KAREN GOLDBERG: Okay. Thank you. So for I think the first time in history, we're on time at the 9:30 mark, at least. All right. So 9:30 is time for the Florida Department of Health update. And we will hear from Megan.

>> MEGAN CALLAHAN: This is Megan. I know Shay was going to try and call in for the meeting. I don't think she's on the phone right now, but she should be trying to call in later, and at that time, if she has an update, she'll let you guys know. I'm not sure. So I'll go ahead with mine, the action items update, as well as the binder contents. So, of course, in the first pocket of your binder, you have the restaurant list of restaurants that are near here, which are sparse. So the restaurants on there are a little farther away than usual. You also have a copy of the 2017 biennial report, which are on there as well, and since I had to do the table of contents a little bit differently, the mediation is in the back pocket of your binder. And moving on to the action items, that's going to be under tab seven.

Okay. So getting started with those. The first one was to have a finalized draft of the 2019 biennial report by the November meeting to be conducted by the Biennial Report Committee. That's in progress. I know we're trying to get some statistics and things like that together, so we're working on that. We're moving on it.

The next one is to check with the Department's web team regarding a website version of the 2017 report, to be done by myself. That was completed. If you all want a copy of that, I can e-mail it to you. I sent it to Debbe and Darlene, and Darlene requested a

text version with the picture descriptions as well, so I did draft that up. I can send that as well to you all if you would like.

The next action item was to start sending thank you for your service type letters to the members who are no longer serving on the Council, to be done by the department staff and the current council chairperson, Karen. That's to be completed as necessary. The next was to follow up with the governor's office --

>> GLENNA ASHTON: Megan, did you send one to Donna Drake.

>> MEGAN CALLAHAN: I don't think we've sent any out yet.

>> DEBBE HAGNER: Is it kind of a little too late now? I mean --

>> KAREN GOLDBERG: I personally don't think it's too late. I think it's actually a very nice thing to do, and I think that we should do it while we're here, and Megan, are there any certificates that go with that? Like, when you get appointed to the Council, you get a very nice certificate with the governor's signature on it. Everybody got that? I got that. Okay. So maybe they started that with fairly recently, because I did get a very nice packet from the appointments office. So Megan, could we ask the appointments office about onboarding/offboarding certification or certificates.

>> MEGAN CALLAHAN: We can. To my knowledge, they don't do that for members who --

>> KAREN GOLDBERG: Who left.

>> MEGAN CALLAHAN: Right.

>> KAREN GOLDBERG: Maybe we should do something.

>> MEGAN CALLAHAN: I can contact them and ask.

>> KAREN GOLDBERG: That would be nice.

>> MEGAN CALLAHAN: If there's a certificate that they send for that.

>> KAREN GOLDBERG: Cindy.

>> CINDY SIMON: I think that at the last minute -- meeting, we did talk about it, if we go back and review. That's where this thank you letter for your service came up, and we said we could just make up a certificate with the thank you for your service that we can print up ourselves from this.

>> KAREN GOLDBERG: Fair enough. I like that idea. Give me the list of the names that we're going to be sending it to. Donna Drake.

>> MEGAN CALLAHAN: Julie Church. And Rosie Finigan would be the three that I --

>> KAREN GOLDBERG: Anybody else have a name? All right. Let's set that as an

agenda item and action item that we would like to complete by tomorrow.

>> MEGAN CALLAHAN: Okay. So moving on. Oh, the next action item I was on, it was follow up with the governor's office regarding appointment applications, to be done by myself. That's in progress. I've been reaching out to them, but of course with the elections and transition and everything, they've got their hands pretty full now. So I'll keep reaching out to them and I will let you guys know once I get a response.

>> KAREN GOLDBERG: So things transition January. Is that correct? Right? So for the governor's office? Isn't it like inauguration.

>> GLENNA ASHTON: Wait for the count to be finished.

>> KAREN GOLDBERG: After the count is finished. But typically, it's January, right? That things transition over.

>> GLENNA ASHTON: They have transition teams now getting ready.

>> KAREN GOLDBERG: Okay. But what's the official start date for new governor, regardless of recount? January, right? Okay. So I think that while, you know, things are busy in the world of recounts, they're still -- our governor is in place and I would like to make sure that their team, the appointments team, is still helping us get people on. I would like to see something happen before the transition. That way we have council members. People are waiting to hear if they have been appointed and re-appointed. Is that correct? Okay. Yes, ma'am. Cindy.

>> CINDY SIMON: Traditionally, it takes months and months and months, and sometimes years -- and I'm going back because I've been on the Council since 2008 -- and we have been on there when we had direct access and bugged and bugged, and it could take a very long time for them to do it, and you can't demand.

>> KAREN GOLDBERG: Well, I mean, I understand that they have --

>> CINDY SIMON: I'm just explaining historically.

>> KAREN GOLDBERG: And I know they have multiple councils that they have to appoint, too, so I understand that there's a vetting process and things take time. Do we have a number of people who are currently waiting? What is the number? Because we have 17 seats. How many are open and vacant right now.

>> MEGAN CALLAHAN: Tab 2 of your binder, the membership, it's updated with the vacant spots.

>> KAREN GOLDBERG: I know we're kind of bouncing back and forth, but we're making good use of time here. Yes, Glenna.

>> GLENNA ASHTON: I know three people that sent in their applications have still been waiting.

>> KAREN GOLDBERG: Okay. So does the Chair of this Council get a copy of who's

applying and who's reapplying.

>> CINDY SIMON: No.

>> KAREN GOLDBERG: Is there any way -- is that okay to get? You can't get it. So we're hearing rumors that there's three people, right? We have no official documentation that there are three people who have applied. How many reappointments that we know of.

>> GLENNA ASHTON: Those three, I know they sent in their application.

>> KAREN GOLDBERG: For new appointment.

>> GLENNA ASHTON: FAD, one for hearing specialist, and one for -- I forgot.

>> KAREN GOLDBERG: Deaf Services Center.

>> GLENNA ASHTON: Yeah. Deaf Services Center, right.

>> DEBBE HAGNER: And CART.

>> KAREN GOLDBERG: But how about reappointments? How many reappointments are waiting.

>> GLENNA ASHTON: Those three have sent in their application, I know.

>> KAREN GOLDBERG: So that's new appointments. That we know for sure, are three. And then how about reappointments? Hold on, Cindy. I just want to ask her.

>> DEBBE HAGNER: I reapplied.

>> KAREN GOLDBERG: So that's one. So that's one person that we know of for sure. Yes, ma'am.

>> CINDY SIMON: And I reapplied as well.

>> KAREN GOLDBERG: So that's two that we know of and we haven't heard anything. How long ago did you reapply.

>> CINDY SIMON: Months ago.

>> DEBBE HAGNER: Right after the last -- before the last meeting.

>> KAREN GOLDBERG: Okay. So I would like to say, and raise this question, if it would be reasonable, as the Chair of this Council to send a note, maybe signed by you, Megan, as well, asking the appointments office to take a look at the outstanding appointment applications and reappointment applications and see if we can't move on them and let them know. Maybe we'll draft a quick letter.

>> MEGAN CALLAHAN: I'm going to wait for Shay's response for that. I'm not sure

how all of that moves through, so I'm going to wait for her whenever we can get a response from her, and then we can move forward.

>> KAREN GOLDBERG: Okay. Because I can tell you that when I applied and there were delays, I called probably every week and talked with them, and sent in letters, and I think I got appointed pretty quickly. I think I was applied late October to early November -- No. No. No. I think I applied in August, went to the November meeting, and then right after that November meeting, I got appointed. So I mean, I think sometimes just reminding them that we're waiting helps. All right. Somebody had a question. Glenna.

>> GLENNA ASHTON: From what I understand, the council cannot be calling and asking the appointment office. The person that applied themselves can bother them, but we can't. You can ask -- I mean, Megan can ask, but that's all.

>> KAREN GOLDBERG: All right. Fair enough. Thank you.

>> DEBBE HAGNER: I think we still need to find someone for the CART, a representative for CART. And parent, right.

>> KAREN GOLDBERG: All right. Fair enough. Thank you. Thank you for everybody's feedback.

>> DEBBE HAGNER: Goes back to Megan.

>> KAREN GOLDBERG: Megan.

>> CINDY SIMON: I'm sorry. I have one question. It says parent of a deaf child. Is that any degree of hearing loss, or do they have to be considered deaf.

>> GLENNA ASHTON: There's one parent that I wanted to apply, and I'll have to check to see if she did or not, I don't know if she did, but she had six girls, hearing, hard of hearing and deaf, because she had them all.

>> KAREN GOLDBERG: I would love to see if she would be willing to apply.

>> GLENNA ASHTON: I'll ask her again.

>> KAREN GOLDBERG: Okay. Anybody else? I mean, for the actual definition, we would have to go back to the Florida State Statute. We don't have a copy of that in the binder, do we, the statute.

>> MEGAN CALLAHAN: We don't. The statute number is at the bylaws, but I think I can tell you, it's 413 (271). I can look that up once I'm finished with my action items list.

>> KAREN GOLDBERG: All right. Thank you very much, Megan. Okay. Action items. Moving down the list.

>> MEGAN CALLAHAN: The next one was to send the 2017 biennial report draft document to the Council to be done by myself. That was completed. The next action

item was to register for the It's A Deaf Thing event sponsorship. The department staff was to do that, and that was completed. The next action item was to update the Council members on the website, to be done by myself. That's been completed. The next was to adjust the Florida Administrative Register balance on the 2018 to the 2019 budget, to be done by the department staff. That's in progress. Once that's updated, I'll send you all an updated budget showing that. The next thing was to create an outline for one page cheat sheets to be placed on the website, to be completed by Cindy Simon. That has since been completed. Cindy, I don't know if you want to speak to that, or Karen if you want to speak to that at all.

>> KAREN GOLDBERG: I wanted Cindy to present that, if she could.

>> CINDY SIMON: Sorry. I'm a paper nut, so I print everything in advance and have it with me.

>> KAREN GOLDBERG: That's awesome. I wish we had the ability to put it up on the screen. We do not? I mean, is that screen active.

>> MEGAN CALLAHAN: All we would have to do is turn it on and hook up the computer to it, correct? Because I can pull it up real quick.

>> KAREN GOLDBERG: Because I know she did a lot of work on this, and I wanted everyone on the Council to take a look at it since it is one of our action items.

>> CINDY SIMON: It was really just some suggestions of how to go about it. I didn't know if you'd like it or not, but I apologize to everyone that it took so long and couldn't go out in advance. Between my daughter's wedding, and then I blew my knee out a couple of weeks ago and was actually in a wheelchair because I was incapable of walking, so it kind of put a curtail, kibosh, on things I was doing.

>> KAREN GOLDBERG: Okay. Well, thank you for getting it in before the meeting. And now we'll put it up on the board and let everyone take a look at it. While he's doing that, why don't we move forward with some of the other completed action items.

>> MEGAN CALLAHAN: Do you want me to complete the action items.

>> KAREN GOLDBERG: Is that okay? Or do you need -- are you needed for this other part? All right. Go for it. Anything that we need to pen for a second, yeah, let's do that. I like the completed ones. Let's go.

>> MEGAN CALLAHAN: Okay. So the next action item was to locate the PDF version of the council brochure to be done by myself. That was completed. And then also to send the brochure to the council. That's been completed. And then once I can, I'll scan, if you still want me to, the tri-fold, the actual brochure itself, I can scan that to you.

The next action item was to review and update the member list, to be done by myself. That was completed. The next was to add TASA and PSC to the acronyms list, to be done by myself. That's been completed. The next was to reach out to the state's text

to 911 Emergency Management Committee contact to be done by myself. That's in progress. That's what I wanted to kind of touch on a little bit. So I ended up, I was trying and trying and trying to find this person who runs this committee, and I could not find anything, so I ended up e-mailing, and someone from the department got back to me, and they actually put my request and my question through, and I got the contact information of the person who I think should be in charge of this committee. However, I just got that contact information either yesterday or Tuesday, and haven't had time to reach out to them yet. So after the meeting next week, I'll e-mail them on Monday and, you know, ask them or call them, whatever, ask --

>> KAREN GOLDBERG: Who is it? Who is the person.

>> MEGAN CALLAHAN: I have it in an e-mail. Give me just a second. I can let you know. It looks like they suggest I contact Dannette McBride. She's with the Department of Emergency Management Services. She's in the division of telecommunications and the ESF2 Emergency Coordination Officer. So I was planning on reaching out to her and asking her the questions that were mentioned during the previous meeting.

>> KAREN GOLDBERG: Thank you very much. I know Darlene -- well, Darlene had said she wanted to raise the question at this section, didn't she, about text 911.

>> MEGAN CALLAHAN: I believe that was Debbe.

>> KAREN GOLDBERG: That was Debbe. Okay. I'm sorry about that. Chris.

>> CHRIS LITTLEWOOD: I was just going to mention that at least at one time there was a text to 911 initiative for the State of Florida. I don't know who the person is that's in charge. My guess is since that was established, the person that's coordinating that committee has changed, so it may be the person you just mentioned, but I do have some information in my office, but if you reach out to me after the meeting, I can see what I have in my office so I can share with you.

>> KAREN GOLDBERG: My understanding is that the text to 911 is actually in several counties, and I think it's a county-by-county decision to go text to 911. So the question would be, is there anything that we can do to support counties doing that? Yes.

>> CHRIS LITTLEWOOD: Well, it's a county by counties decision to have the finding as -- the public safety access point to do it. Right now, I believe there's less than ten counties in the State of Florida. There's 67 counties in the State of Florida, so we've still got quite a ways to go. As we've talked about before, there is, on the FCC's website, there is a place where you can go and you can see all the counties in the whole country, and I think we had discussed, Megan, that you were going to send that to us on a monthly basis so that we could see what updates are happening. So if you could send that to us, that would be appreciated.

>> KAREN GOLDBERG: So at this time there's less than ten counties that have the text to 911. Which are the ten counties.

>> DEBBE HAGNER: I know Sarasota/Manatee county is one of them. Orange

County has recently got it.

>> KAREN GOLDBERG: Orange.

>> DEBBE HAGNER: Orange County. I don't know the others.

>> KAREN GOLDBERG: Hillsborough.

>> DEBBE HAGNER: No. Pasco County, no.

>> KAREN GOLDBERG: Do you have a list.

>> MEGAN CALLAHAN: Volusia. I'll e-mail the spreadsheet that has all of the -- that lists out all the counties.

>> KAREN GOLDBERG: That's wonderful.

>> GLENNA ASHTON: Palm Beach County was just recently added.

>> KAREN GOLDBERG: Is there a role for the Florida Coordinating Council to support or encourage other counties to do that? Yes, Glenna.

>> GLENNA ASHTON: I would suggest we have some kind of a letter with maybe contact information of those counties that did it, so that the other counties could contact them to see -- maybe it is doable. It's not that -- to send out -- we have to figure out who to send the letter to for each county. I guess the sheriff's office.

>> KAREN GOLDBERG: Sorry, Chris. Darlene had her hand up so I just wanted to recognize her first, and then you.

>> DARLENE LAIBL-CROWE: I think a lot of it is that the counties do not know who is in the county that needs it, so it would be very wise on the deaf and hard of hearing and the deaf-blind people in those counties to contact their service coordinator so that they are aware that they're in there, and then once they see that, then it's a possibility that it will be added.

>> KAREN GOLDBERG: Good idea. Chris.

>> CHRIS LITTLEWOOD: Well, first, as a piggyback to Darlene's comment, text to 911 is not only for people with disabilities or people that are deaf-blind or deaf and hard of hearing. It's deaf gain at the very least because there are a lot of situations where people that have hearing in the normal range still might need texting to 911. A couple examples, domestic violence, active shooter situations, home invasion situations. So it was not put in place just for people with disabilities.

Under next generation 911, and when I was involved with the FCC in the implementations for the CVAA law, which made texting to 911 possible, I was a little bit more updated on what the planning process was to do that. However, as we've discussed, it happens on a county-by-county basis, and when we're asking who we need to reach out to, it needs to be the decision makers. You can reach out to the

sheriffs all day long. You can reach out to the people that work in the 911 centers, but they don't fund them. The people that we need to be contacting are the county commissioners and stuff like that. And one of the reasons that I've been kind of stagnant on this is it's been an election year. People that are outgoing aren't really going to do anything. People that don't know if they're going to be re-elected aren't really going to do anything. As soon as the new year starts, that's when action is going to be needed.

One of the things that we can do about this is make sure that texting to 911 is addressed in our biennial report and make sure that we say that we have the number of counties that we have that texting to 911 is available. That's why that monthly report is so important. We need to be aware of what changes are happening. Some of the counties that have come up online that have come up online, but they're not full access. Like, they may have for 911 and fire services, but it doesn't work for law enforcement. So it depends. We just need to know the information as much as we can and make sure that we share it with the decision makers for the individual counties that don't have it. And I think it was Glenna that was saying make sure that we talk to the counties that do have it and tell them to share their information with other counties as to this is what we did, and this is how you do it.

>> GLENNA ASHTON: One thing I noticed that on that list, where they list the counties, they do put in contact information, so we have that. All we have to do is pull it out, put it in the letter, and it's better than just a general letter because we can actually give them specific information who to contact and that can encourage them with the first step. That would help a lot.

>> DEBBE HAGNER: I think that we should also have some persistence on the number of deaf or hard of hearing or just the population for that county included in the letter to --

>> GLENNA ASHTON: We don't have county numbers.

>> DEBBE HAGNER: Well, just the population county itself, regardless if they're deaf or hard of hearing. And then that way -- and then the people somehow add the people who already successfully have the text to 911.

>> KAREN GOLDBERG: Are we sure we don't have county numbers? I want to reach out --

>> GLENNA ASHTON: Some of the local deaf service centers or programs have a rough estimate of the county numbers. I mean, so far, the only numbers we've ever had, like, from education in VR, some counties, but we know we'll never have the total number, but the only thing we can do is like, you know, a percentage has been established by I think Gallaudet a long time ago was .01% of any population would be considered the deaf and hard-of-hearing group.

>> KAREN GOLDBERG: Darlene.

>> DARLENE LAIBL-CROWE: I would like to -- I know that we recently sent a letter for healthcare providers and put it in the biennial report last year -- I might be wrong, or

maybe it was a talking point. I would like to suggest that we create a letter that can be sent to each of the counties, and include it in the biennial report to show that we are trying to reach out to the counties, and put the information in that Chris was talking about what text to 911 is about, and what counties have it and how they can be reached, and, you know, whatever information that needs within that letter so that the counties are aware that this is out there.

And then I have a second subject is something that I want to talk to the Website Committee, so I can do that later.

>> KAREN GOLDBERG: Okay. Thank you. Chris. I thought I saw your hand up, Chris.

>> CHRIS LITTLEWOOD: The first thing I was going to say as far as the statistics for the county breakdown, the numbers information that I used are still from FTRI, and they do make efforts to keep that information updated. It is based on a 2010 census, and then updates from there. So how that's extrapolated and made accurate, I'm not quite sure. My guess is that the numbers are significantly higher, and I always point out that the people that are deaf or hard of hearing are not self identified in any type of statistics like that are very important to keep in mind.

>> KAREN GOLDBERG: Okay. Thank you. I want to recognize Gina.

>> GINA HALLIBURTON: In terms of statistics, I will try to find them by later this afternoon. But when we were working with the inclusive health, they had a database that showed the location of all kind of disabilities, including deaf and hard of hearing by county. If I can find that, I'll bring it and give that to everybody so that we could maybe use that as a resource.

>> KAREN GOLDBERG: Thank you very much. And Cindy.

>> CINDY SIMON: I want to agree with Darlene on the part that maybe on this text 911, that's something we can put in the biennial report, that we have some doing it. What's the importance. We're behind it. We've written letters. We would ask them to support that in every county. And I think that would be a very positive thing on there.

>> KAREN GOLDBERG: Right. And I would even say that maybe Glenna and I, in our letter to the governor and thanking him for meeting with us -- that we maybe add some information that's going to be in the biennial report, including the text to 911. Glenna, I saw your hand was up. Did you want to add something.

>> GLENNA ASHTON: Yeah. I'm wondering, Mary, does the aging agency, or whatever, do they do surveys? Do they have numbers on who is deaf or hard of hearing.

>> DEBBE HAGNER: Cecil's on the chat.

>> KAREN GOLDBERG: There's a question first. Hold on, Cecil. And Glenna is asking a question to Mary. Mary, did you hear the question? Unmute. We can't hear you. Okay. Let's move on to Cecil had a comment.

>> GINA HALLIBURTON: Cecil on the chat, he says, well the population figures can be changed by calculating the current population with the prevalence rates from Gallaudet University. And then he clarified by saying the numbers can be updated by calculating the current population with the prevalence rates.

>> KAREN GOLDBERG: Boy, he loves numbers. I love -- Cecil, I love that you love numbers. Cecil, while you're there, are you able to maybe do a quick lit search on some county numbers in Florida? Okay. So he hasn't responded. Okay. So, lots of great ideas to move on this issue. It is now 10:01, and I am now behind schedule already. So we're not finished with the action items. Okay. Cecil has responded.

>> GINA HALLIBURTON: He says not now, as I'm connected via internet with you guys, but maybe I can do it later.

>> KAREN GOLDBERG: Fantastic. Thank you, Cecil. Okay. So we are at the text to 911. Let's turn the page.

>> MEGAN CALLAHAN: Are we ready.

>> KAREN GOLDBERG: Yes, we are ready. For the next page.

>> MEGAN CALLAHAN: I just wanted to make sure. Only a few left. So the next one was to compose a letter stating the needs for communication and ADA requirements to be done by the EMO Committee. That's to be completed. However, Gina e-mailed me requesting to schedule a committee meeting on November 30th at 3 p.m. for an hour to discuss this, have your drafts sent to me to post to the One Drive by November 28th. And I'll send the CART excerpt that explains all of that to everyone.

>> KAREN GOLDBERG: Terrific. Go ahead. All right. Thank you. Gina.

>> GINA HALLIBURTON: When we met by telecon in November, it didn't come up, and I wasn't at the August meeting, and so we missed that opportunity to have that done by this meeting. So that's why I tried to regroup really quick.

>> KAREN GOLDBERG: All right. Thank you very much, Gina, for bringing that up.

>> MEGAN CALLAHAN: So I'll be sending that e-mail out to the EMO Committee as well as the council once I have confirmation that Lisa is able to schedule for CART on that date as well.

>> KAREN GOLDBERG: Thank you.

>> MEGAN CALLAHAN: The next one was to invite the Florida Healthcare Administration to present at the Tallahassee meeting, to be done by myself. That's to be completed. That will be completed right after this meeting. I didn't want to schedule it too far in advance and have it kind of fall through the cracks. So that will be completed next week.

The next one was to reserve three rooms for Tuesday night, February 5th, for the

legislator meetings, to be done by myself. That's been completed. And the last action item was to send me Council website revisions or recommendations to be completed by all Council members, and that's a running action item. Also, the contact log is in Tab 8 of your binders, if anyone was wondering.

>> KAREN GOLDBERG: I wanted to go back to the invite of Florida Healthcare Administration. Who are you referring to when you say that? AHCA.

>> MEGAN CALLAHAN: I think that's what was requested. I would have to go back in the CART and look. That's what I plan on doing.

>> KAREN GOLDBERG: Okay. The Agency for Healthcare Administration? So AHCA. A meeting with them for a different reason on December 12th. Should I ask them at that time.

>> MEGAN CALLAHAN: If you would like to, you can, or I can send an e-mail it doesn't matter.

>> KAREN GOLDBERG: Okay. Because I'll be up in Tallahassee then for another reason. I'm sorry, Glenna, you had your hand up.

>> GLENNA ASHTON: For the website, we'll be discussing this again during the report allotted time, that I wrote and Darlene wrote a scenario that we can't include in the report, too much, but we can put it on the website.

>> KAREN GOLDBERG: Okay. Let's go back to the issue that Cindy had raised. We were putting her cheat sheet up on the board there. Yes, Debbe.

>> DEBBE HAGNER: What happened with the -- you wanted to have somebody from Minnesota or some out of state to come to speak and --

>> KAREN GOLDBERG: Yeah. So what we had proposed the last time was to have a representative from Minnesota's Commission on Deaf and Hard of Hearing services. Some states have an actual department for deaf and hard-of-hearing services and a commission that, you know, works with different agencies throughout their states, and I thought that it would be a good idea to have somebody from one of those states who's familiar with how you get that to happen, to come and speak with our Council and see if there's anything that we can help our legislature know in order to move forward in that direction. It didn't work out. She had another meeting she had to attend this time, and Megan and I discussed that probably best this meeting that we really focus in on the biennial report and we'll discuss for the next meeting who we would like to have come and speak with us.

Okay. So up on the board there -- I don't know what you call that. Projected on to the screen is a silhouette of our friend -- okay. Maybe we could enlarge it. Suggestions for the one-page documents of popular topics. Go, Cindy.

>> MEGAN CALLAHAN: Wait. I'm sorry. Before Cindy starts, is that good for everyone, or do I need to enlarge it.

>> GINA HALLIBURTON: A little bit bigger.

>> CINDY SIMON: If not, I have a few extra copies with me.

>> KAREN GOLDBERG: I think I need to go over there and get it to the size that we are going to need to see it.

>> CINDY SIMON: Maybe we can take a minute and ask them -- we don't have that many people here, maybe they can make some copies.

>> KAREN GOLDBERG: Or Darlene -- I would like Darlene to have a large copy.

>> DEBBE HAGNER: I'll go ask the hotel if they'll make a copy.

>> CINDY SIMON: This is pretty small, but Darlene can have mine if she can enlarge it with something.

>> KAREN GOLDBERG: Do you have a magnifying glass.

>> DARLENE LAIBL-CROWE: I can't see anything on paper, so --

>> KAREN GOLDBERG: We'll read it.

>> DARLENE LAIBL-CROWE: You can read it and describe it to me, whoever.

>> CINDY SIMON: Okay. So I thought about this. I thought about how to set it up, but depending on the topic, it may have to be changed, and things are always changing out there. So I came up with some general suggestions. And I believe this came about because Karen was asking at the last meeting about a new implant, and it had to do with middle ear implants that a lot of people didn't know much about. So I said topics should be suggested based on -- should be selected based on suggestions from Council members. This can be something new that someone read about and thought would be interesting for everybody to know about. It can be selected based on public comment. It could be selected based on the calls that Megan gets with questions and where to find it. So there's a lot of different topics you can get from different sources.

We can look at websites to get information, some which give one-pagers for consumers, that they would let us use, might come from AAA is American Academy of Audiology, the American Speech and Hearing Association, but the topics may be limited there. Some of our organizations have it. I know HLAA does very often, and --

>> GLENNA ASHTON: NAD as well.

>> CINDY SIMON: I was getting there. And NAD may have. There's another website that I think I mentioned some there, BHI, Better Hearing Institute is always changing their articles and they have some very excellent one-pagers for consumers. So depending on the topic, we can look there. We can start it out with the name of the topic, who it applies to. Is it deaf, hard of hearing, late-deafened, deaf-blind. So someone can target someone they might be interested in. What is it? What are the pros and cons and where to find more information.

This would be a living document. It's not just dedicated to this meeting, but it's a living document that, as things come up, we can write it, pass it around for approval and get it on there. So it's not a stagnant thing. Technology changes, treatments change, we need to be able to alter for what the latest that comes out is.

Some of the topics were what -- based on what I heard, were what are the different implants and what type of hearing loss is each one for. Like the severe loss, you're not going to get a middle ear implant. And depending on which one, some of them, while it may not destroy the cochlea, destroy the -- if you have to ex plant, it has to be reconstructed, so people should know about that. What are accessories that make life easier for individuals? What are all the educational options? So that we have for every degree of loss, a parent can see what are my choices for my child and just have everything there objectively. Individual pages for ALDs, like all the different types of phones you can get. FM infrared systems, telecoils, Bluetooth. You know, they want to know, what are these hearing aids with Bluetooth? Why would I want it? Something about telecoils for phone news, as well as for looped areas. They should know their rights under the Americans with Disability Act, and know it, and any updates that come out. That, by the way, which isn't on there, goes for IDEA as well. The Individuals With Disabilities Education Act has to get reauthorized, and it changes somewhat. And so people should know that it's violation of this that started this whole DCF Committee that we were talking about earlier. And some of us can try to remember some of the other topics that were of interest. Maybe Chris can help out with the old website. We had a lot of these topics and information on it. If we were able to access, even if Valerie had the old sheets, instead of reinventing the wheel, maybe we could get it and update them and get it back on.

>> KAREN GOLDBERG: Sounds reasonable. Sounds reasonable. Yes. I think Debbe had her hand up first.

>> DEBBE HAGNER: I would like to see where are the facilities have loops, what church has loops, what theater is looped. Where. So that people would know.

>> KAREN GOLDBERG: That seems reasonable. Can you make a note of that.

>> CINDY SIMON: If I can comment to that. So when that gets written, that would be something we would want to include. Like I said, you have to change what's in there based on the same thing. People don't know about movie theaters and having captioning glasses or capi view. That would be a great topic so that they know they could get that. So I'm just giving you examples.

>> DEBBE HAGNER: And if you have more or greater than ten people, you can have opening captions if you make an arrangement with the movie theater.

>> KAREN GOLDBERG: I'm sorry. It was Debbe had her hand raised, and then Glenna and then Darlene. Go ahead. Glenna.

>> GLENNA ASHTON: VRI interpreters and NAD has a lot of good what they call white papers. So I don't think we need to reinvent the wheel. Because a lot of other good organizations have good papers. We just ask permission to post this and post it

there. But NAD has a lot of good white papers and they just recently added another one for VRI interpreters. Those are the two issues that keep coming up all the time.

>> KAREN GOLDBERG: Okay. Thank you, Glenna. Darlene, you had a comment to add.

>> DARLENE LAIBL-CROWE: Yes. I was going to say there's an app that you can download -- I can't remember the name of it -- that will tell you what movie theaters.

>> KAREN GOLDBERG: Something about fish.

>> CINDY SIMON: It's Caption Fish.

>> KAREN GOLDBERG: Caption fish. I knew it had something to do with fish. Is that still around. Oh, that's awesome. Caption Fish is still around. But even now, if you just look at the movie listings, it's easier to find out, which I think is great. All right. Chris.

>> CHRIS LITTLEWOOD: I have two questions, first with an apology. I didn't hear where we're going to be using these one-page papers. Are they going to be posted on the website, or disseminated whenever we go to a function, or both.

>> CINDY SIMON: Website.

>> CHRIS LITTLEWOOD: Okay. So primarily on the website. I think these are all outstanding ideas. I am noticing that the list that's up there is very assisted listening device or personal assisted listening device centric. Don't forget people that are in the Deaf community, and using sign language interpreters, employing people that are Deaf, other things related to sign language and not just things related to hearing aids. Just make sure that it's an even mix.

>> CINDY SIMON: So this was just a short list. I started saying it was not all inclusive. There was immediate ideas that came to mind, and it started saying things that everyone else is interested in, topics from the group. So maybe we need to make an action item that everyone should send suggested topics for these papers to Megan, and then we can figure it out or maybe with the education committee, and we'll talk about that later, education technology, create these.

>> KAREN GOLDBERG: Sounds like a wonderful idea. I wanted to check with the folks who are on the phone and see if they had anything that they wanted to comment on.

>> MARY HODGES: This is Mary.

>> KAREN GOLDBERG: Hi, Mary. Welcome.

>> MARY HODGES: This is Mary. Can you hear me.

>> KAREN GOLDBERG: Yes, we hear you great, Mary. Are you able to hear us.

>> MARY HODGES: Okay. Thanks. I'm sorry, I'm trying to keep up, but I wanted to -- in Megan's report, I wanted to ask if there was a deadline for comments related to the Council brochure.

>> KAREN GOLDBERG: You mean the biennial report.

>> MARY HODGES: The Council brochure.

>> MEGAN CALLAHAN: The PDF version that I mailed out.

>> MARY HODGES: Do you have a deadline yet for comments.

>> KAREN GOLDBERG: No. Comments are being accepted right now. Do you have a comment about that.

>> MARY HODGES: No -- yes, I do, but I didn't know if we had additional time to submit comments.

>> KAREN GOLDBERG: Yes. You have time. Did you want to submit some comments now or send them in by e-mail.

>> MARY HODGES: Send them in.

>> KAREN GOLDBERG: Okay. Yeah. Go ahead and send them in. We would be interested in seeing them.

>> MARY HODGES: Okay.

>> KAREN GOLDBERG: Now, Glenna had asked you a question earlier, and I wasn't sure if you heard it. Maybe Glenna can restate that question now.

>> GLENNA ASHTON: Yes. Mary, we were talking about statistics, and I was wondering if your agency, aging -- or Council on Aging, whatever, related to aging, have any of their surveys or counting, anything of it, included asking about deaf or hard of hearing? Did you have numbers for those groups.

>> MARY HODGES: Okay. Can you repeat the question, please.

>> KAREN GOLDBERG: Let me see if I can, unless Glenna you want to speak right into the mic. All right. I was -- Glenna was asking, does the Department of Elder Affairs, or the Department on Aging, have any statistics throughout the State of Florida of how many are deaf and hard of hearing by county, by chance. Anything like that.

>> MARY HODGES: I can certainly find out. Deaf and hard of hearing.

>> KAREN GOLDBERG: And deaf-blind. Either by the state. So deaf, hard of hearing, deaf-blind, numbers in the state, as well as by county for older adults.

>> MARY HODGES: I will see if I can get that data and get it sent to everybody.

>> KAREN GOLDBERG: Thank you so much.

>> MARY HODGES: Absolutely.

>> KAREN GOLDBERG: Mary, any other questions or thoughts? Okay. John, any thoughts or questions.

>> JOHN JACKSON: No comments.

>> KAREN GOLDBERG: All right. Thank you, John.

>> JOHN JACKSON: Sorry. Having technical problems.

>> KAREN GOLDBERG: Okay. It's okay. Cecil, any questions, thoughts or comments? Okay. If any come through, we'll go ahead and announce it when we receive them.

Okay. So can we make a motion that we move forward now? To the next agenda item?

>> DEBBE HAGNER: Do we want to review some of the calls that Megan was getting.

>> KAREN GOLDBERG: Is that something that we typically do at this time.

>> MEGAN CALLAHAN: Normally we don't. That's just in there for your convenience. And like we were saying to do like the cheat sheets on the website, so you guys can see. Normally, most of the calls and e-mails I get are for hearing aid financial assistance or local interpreters, employment, things like that.

>> KAREN GOLDBERG: Okay. All right. Yes, Gina.

>> GINA HALLIBURTON: The one call that Megan forwarded was regarding a person that called based on our introduction letter from the EMO, and they responded and it was a lady from the Special Olympics. And she's been actively involved since that time, so that was a good one.

>> KAREN GOLDBERG: All right. Fantastic. Thank you. I'd like to announce that my streak of being on time is now over. We made one agenda item on time, and it has since changed.

Okay. So we're going to move forward to the next agenda item, which is It's A Deaf Thing 2018 review. And Glenna and I attended that event. I'm going to let Glenna give a good update on it, but I can tell you from my perspective, it was amazing. So Glenna, your turn. I gave my report.

>> GLENNA ASHTON: It was in Lakeland. It was the second time they hosted that. Last year there was about 2,500. This year they said it was about 3,000. Supposed to be local people, but there were a few from out of town. I was surprised to see some from South Florida. We had a good booth. We were at the end, facing the workshop area, and we had two tables because we were one of the sponsors. And we were one of the few people that had things to give away. A lot of the other tables didn't have

much to give away. There was a lot of church groups there and a lot of small businesses there, and we were one of the few that gave away things, so a lot of people came by, picked up the lanyards and paper and pens, and we even had candy. But most of the people were clueless about FCCDHH, so we spent time explaining. I did have an opportunity to talk with Lisa Rose, who is the FAD president, about the Council and about FAD, and what's possible to do. Karen can explain what happened there.

>> KAREN GOLDBERG: For which one.

>> GLENNA ASHTON: The emergency.

>> KAREN GOLDBERG: Oh.

>> GLENNA ASHTON: Not directly related, but I want to bring up this point. A lot of people that I meet, and Debbe had mentioned that a lot of people said, FCCDHH, what for? They do nothing! And that's because they think, oh -- don't understand we don't provide direct services and we don't have the money to get out there to outreach. We don't have a person for that. So that perception is something we have to deal with. But it was fun. The one big negative that also kept the numbers low and not from all over the state is that It's A Deaf Thing is actually run by hearing people. They have some deaf on the staff, but it's a profit thing, and so a lot of deaf people don't really appreciate that.

I did hear that DeafNation, which is a national deaf-owned business, is coming back and will start traveling again maybe 2019, 2020, we don't know. So that would be good and I know they will definitely include Florida, for sure. They've always come through Florida. So if DeafNation comes back, I will want to have a booth there, for sure.

>> KAREN GOLDBERG: Gina.

>> GINA HALLIBURTON: This is for Cecil.

>> KAREN GOLDBERG: Yes. Cecil.

>> GINA HALLIBURTON: Cecil responded to your question about any other comments, and he says, sorry, I had to step out of the office for a few minutes. Another source about statistics would be to check with the FTRI, if they have any updated figures to share. I can check with the last FCCDHH report in 2009 indicating 17% of the population with hearing difficulties. We can keep investigating. That was based on the National Center for Health Statistics. One more, the 2017 FCCDHH report stated approximately 20% based on the latest NCHS study. Okay. Great. Thank you very much, Cecil.

Megan, can you pull up that study, the 2017 report that he's talking about, NCHS study. If we have it. Probably something addressed on our last biennial report. Okay. Going back to It's A Deaf Thing. I know it's put on by Project Deaf.

>> GLENNA ASHTON: Which is owned by hearing people.

>> KAREN GOLDBERG: It's owned by an interpreting agency. There's a connection.

What's the connection.

>> GLENNA ASHTON: No. The guy is an interpreter himself. He's white (?), had a business background.

>> KAREN GOLDBERG: The presentations I thought were very good. There was a strong deaf focus.

>> GLENNA ASHTON: His wife, his wife.

>> CART PROVIDER: Sorry.

>> KAREN GOLDBERG: The CART made error. Sounds like we were referring to the wife. So I guess I didn't get that impression that people were dissatisfied, but I'm not really talking with a lot of people about are you happy about who owns the place, or whatever. But I think it was a really great presentation -- I mean, a great program. It had a lot of people, a lot of vendors there. Sorenson was there. All of the VRS programs or companies were there. I got to meet a lot of people, which I really enjoyed -- sorry, Glenna, again. I said I'll be right back. I'll be right back. Glenna's used to that now.

We had a lot of people come up and want information. We have -- we brought in the question -- the forms that people filled out. They're over on the table over there. So we did get some interest in it, and we did explain that it is an advisory council to the legislature, and that we're not direct providers. Now, some members may have -- may be direct providers on some degree, but we're not -- the Council itself is not a direct-providing agency. And it's important to get people's opinions so that we can take it back to the legislature and make recommendations. Yes, Chris.

>> CHRIS LITTLEWOOD: One of the things that I think it's important to say to people when they say we do nothing, that we don't provide direct services, is say well, come say that at a public meeting. Come say that at one of our quarterly meetings, and if you can't be here, call. One of the things that I think was really good that Karen did is broke precedence a little bit in the fact that we normally had public comment just at the end of Thursday, and I'm noticing on the agenda that it's at a few different times. So people have plenty of opportunities to come and make that comment, and then we have a little bit of ammunition to say, you know, people are coming in to us and they're saying that we're not providing any information, but if they're not here, then there's not much we can do. So it kind of puts it back on them to say well, you need to come out and be involved with us. We can't do it on our own. We need to let people know that the community is out there.

>> KAREN GOLDBERG: Yes, Glenna.

>> GLENNA ASHTON: You didn't bring it up. I will. We had an incident, someone fainted, and the people gathered around, and when I saw that happened, I -- I yelled for Karen, because she's a medical doctor, so she went there, and was able to help the woman, who refused 911 services and all that stuff, but she was there to help the woman. So people became aware of us through that, especially her.

>> KAREN GOLDBERG: And it was not staged. It was not staged to get attention for the Florida Coordinating Council. You know, it's interesting, sometimes that happens, and you worry, you want to make sure people are safe. Things like this do happen, and I'm just glad that it worked out that this young woman was okay. And yeah. I don't know that that gave us as much attention. I think that Glenna may be downplaying her presentation. Glenna gave a presentation talk about what the Council does, and I was so impressed with her presentation. She forgot about that. Well, we were -- we paid for that. We paid for the ability to give a talk at the -- at this It's A Deaf Thing Expo, and I want you all to know that we paid a little bit more for our table so that we could do the talk and inform the Deaf community and hard-of-hearing community, what we do and what we can do, and to encourage them to be involved. We are your Florida Coordinating Council for the Deaf and Hard of Hearing. So that went really well.

We had, because of our level of sponsorship, we actually were on their website as a sponsor of It's A Deaf Thing, so they had our logo, and so that -- I think that gets us awareness or recognition. People start to notice that, and they want to ask questions, who is the Florida Coordinating Council. We were also positioned at the end of a row, where you had a lot of vendors behind us, right, and then --

>> GLENNA ASHTON: 40. They were hoping for 50 or more, but they only had about 40.

>> KAREN GOLDBERG: They had 40 vendors, and we had a double table. More than enough room. I mean, we could have made it an apartment, and we laid out information from all 17, as much as we had, all the agencies that are members of Florida Coordinating Council. We had the banner up, the big banner. We had the table cloth with our logo. We had that sign, the upright sign. People were saying, who are you.

>> GLENNA ASHTON: When I did the presentation, I made a simple PowerPoint, but this PowerPoint that I made, the whole Council could use if we ever get to the point where we can go and talk to the service clubs like the Kiwanis, Rotary and that so we could use that PowerPoint.

>> KAREN GOLDBERG: And we ought to be speaking at FAD meetings, HLAA meetings, all the meetings, and just let them know that this is the Florida Coordinating Council, and coordinating means coordinating. It's not signing deaf against the late deafened or hard of hearing. It's not young kids only. This is anyone in our state who has hearing loss or who is born deaf. I mean, we have -- we represent it all. And that's important to say, that we represent it all without political affiliation, without views that, you know, only one way is the right way. And there's a lot of variation in how deaf and hard of hearing view their condition. Yes.

>> DEBBE HAGNER: I was wondering if Megan could send us a copy of your presentation so that we have it, and that way, if we could get a request, we're ready to go.

>> KAREN GOLDBERG: And we have pictures of Glenna presenting. What else can I say? I see a hand. Darlene.

>> DARLENE LAIBL-CROWE: I agree with you, Karen, about needing to get the word out for the deaf and the hard of hearing, and the deaf-blind because there are varying degrees of vision and hearing loss, and if we don't treat it as a unit, then they get lost. So I have been doing some research about what's out there, and things like that, but I found that according to the National Center for the Deaf-Blind, that there is a project called the National Child Count, and that count determines who of the children are eligible based on the IDEA. And when I read it, I was surprised, because it says that the IDEA treats deaf-blind children as a single unit. Plus, when they define that deaf-blind child, it's whatever impacts their daily activities. So that -- as a person that has lost their vision, over a lifetime of hard of hearing, it's hard. And it's definitely something that needs to be recognized, that those who are deaf-blind have varying degrees of loss in vision and hearing, and they are a single unit. So that means that the resources that they get, both the vision and the hearing loss, has to be considered so that they can communicate, communicate with people, communicate with the environment, communicate with what's out there, the object, the tree, the flower. So I'm just saying that it's very important that we recognize that the deaf-blind are one whole unit.

>> KAREN GOLDBERG: Meaning a community? Correct? Yes. Okay. Very nice. Darlene, do you do public speaking.

>> DARLENE LAIBL-CROWE: Pardon.

>> DEBBE HAGNER: Do you do public speaking.

>> DARLENE LAIBL-CROWE: I have in the past. I've done some public speaking with the Lion's Club, the Kiwanis, things like that. So yes.

>> KAREN GOLDBERG: I think that would be another question we want to ask the Council. Do we want to have a list of a speakers bureau? Debbe.

>> DEBBE HAGNER: Yeah. I think we should.

>> KAREN GOLDBERG: Okay. So maybe that's something we can put on an action item is create a list, a speakers bureau list. Because you're right, although we are one community, there's so much variability within our community, and so many different experiences. Yes, Debbe.

>> DEBBE HAGNER: Megan, do we have to have a permission, PowerPoint, be approved to speak.

>> MEGAN CALLAHAN: I'm not sure I understand your question.

>> DEBBE HAGNER: What I'm asking is do we have to have the Council's approval or your approval before we can go and speak related to the Council. Or the PowerPoint has to be approved.

>> CHRIS LITTLEWOOD: I would think no, and the reason you would go as the speaker just using yourself as an example, you're speaking as Debbe Hagner, who is

on the Florida Coordinating Council for the Deaf and Hard of Hearing. That's one thing, when you talk about people saying that the Council doesn't do anything, well, do they know that I go around the state and I teach ten classes a year for people that are deaf or hard of hearing to first responders and healthcare workers? And that's something -- information that we need to get out. We don't have an outreach coordinator that goes out and does that anymore, but myself as a Council member, I do that. I do that with another certified deaf interpreter. We talk about all people that have hearing loss, whether someone is born deaf, someone is born hard of hearing, or acquires hearing loss after birth, and all the things that need to be taken care of in healthcare and public safety. That's just one example of what we do. We can talk about that. I talk about that when I go out and do my presentation. I don't say hi, I'm here from the Florida Coordinating Council for the Deaf and Hard of Hearing. I say hi, I'm here from St. Petersburg College, my employer, and then I also mention that I'm on the Florida Coordinating Council, and that's fine to do that. And I don't think we need to get approval for any presentation, just so long as it's not funded by the Council.

>> KAREN GOLDBERG: Megan.

>> MEGAN CALLAHAN: I was actually just about to bring that up, Chris. You brought up a good point. We would need to know if you're going to a meeting to solely talk about the Council on behalf of the Council. I mean, we would at least have to know that for budget purposes to make sure that we can cover your travel, things like that. But if you're speaking at your organization that you represent on the Council, giving updates or, you know, saying hey, this is a PowerPoint that we -- things like that, if you're not traveling on behalf of the Council specifically, then you won't need approval. It's just if you're going to an event on behalf of the Council, we would need to know.

>> DEBBE HAGNER: Yeah. I just didn't want to violate the Sunshine Law.

>> KAREN GOLDBERG: I wanted to ask something. If there's -- I would like to propose that we have a speakers bureau listed on the website. Now, if you're being asked to speak on behalf of the Council, then yes, we should have a common PowerPoint that we talk about, and you can speak about anything else you want to speak about, if you want to talk about, you know, your personal experience, that's fine, but I think it would be nice to offer the public a speakers bureau. And some of the other topics, like, for instance, I may speak, and would do like the presentation that Glenna did the PowerPoint on. I'm a psychiatrist. They may ask me questions about mental health. And deafness. That's my area of specialty. So yes, I would address that. Or I could do a talk just on that but then I wouldn't be representing the Florida Coordinating Council. But, you know, somebody may ask me a question if I'm doing a presentation that maybe Chris is better at answering, or Debbe, and I would defer back to those people in the meeting. Like, if somebody asked me about genealogy and the deaf, I would be like, I know just the person. So I think it would be great to have a speaker's bureau, put it on the website, and put in our area of specialty, too, that we could speak on, in addition. And then invite us to speak.

>> KAREN GOLDBERG: Gina.

>> GINA HALLIBURTON: And I think piggybacking on what was said earlier, I think letting people know that we exist is things like when I went to -- if we support each other

in what we're doing. When Brian went to the Mayor's Disability Council in Jacksonville, I went to that meeting. I wasn't there to represent the Council or anything, but when they did the round table asking, well, who are you, where are you from, I said the Florida Coordinating Council for the Deaf, in support of what the Department of Health was doing. And I think that as we continue to do that, if we're able to, we can't all travel, but if Glenna is speaking somewhere or Chris is speaking somewhere, if we're able to make a presence there to show support, I think that would go a long way as well.

>> KAREN GOLDBERG: Glenna, you had a response or something to add.

>> GLENNA ASHTON: I'm wondering if there's a way to look through the website to find if there's already existing speakers approved that we could add the Council to, or, you know, like for the service clubs, they're always looking for speakers. Do they have their own speakers, or invitation, something, because if we put on our website in general, people may not think to look there, but if we join other speakers bureaus, add our name to whatever is out there already. People were going to look for a speaker. I don't know if you understand what I mean.

>> KAREN GOLDBERG: That's a good idea. I would say let's do both. Debbe.

>> DEBBE HAGNER: I just looked up. There is one that says Florida Speaker Association and there's also Speaker Bureau Association of Florida Colleges.

>> KAREN GOLDBERG: So just keep adding your name to everything. And you'll always be out speaking. Yes. Cindy.

>> CINDY SIMON: I just -- I'm not trying to interrupt anyone, but I want to suggest that we give our CART provider a break.

>> KAREN GOLDBERG: There's a break coming up in just a minute. Okay? 10:45.

>> CINDY SIMON: I was just watching, and since we don't have, it looks like public comment, then we can continue this through that.

>> KAREN GOLDBERG: Okay. Thank you very much, Cindy. Let's finish up this discussion. Anything else about It's A Deaf Thing? It's almost 10:45 and time for our break. Anything on the phone line? Any comments.

>> GLENNA ASHTON: I would like to suggest that one DeafNation sets up doing their thing, and we join doing that, and stop with deaf thing -- DeafNation attracts a lot more. It will be a little more expensive, but it's more worthwhile.

>> KAREN GOLDBERG: I think that's another discussion to have. But remember, we want to be impartial and not political, so even though it's owned by deaf people, if it is an event that people are going to, deaf and hard of hearing and deaf-blind, I don't think we should discriminate because the owner is deaf. Now, if we want to say we only do non-profit events, that's something else, and then I think that's more of a Department of Health question.

Okay. So it is now 10:45. I'd like to take a break. And have everybody go and take care of themselves and be back at 10:46. I mean, 11:00.

We're on break.

[Break].

>> KAREN GOLDBERG: Hi. This is Karen, and we are back from our break. I realize that I made an error at the start of today, and I did not introduce our interpreters, so I want to make sure that I do that now. They are from Accurate Communication Agency. Do you have a cute little acronym? ACA.

>> INTERPRETER: They contacted me randomly. So it's an independent --

>> KAREN GOLDBERG: Oh, it's independent contractors. Okay. So we have Kristin Tomkins. We have Ben Jackson.

>> INTERPRETER: Hello.

>> KAREN GOLDBERG: We've Marlene Amber Musco. And we've Anna Haynes --

>> INTERPRETER: I need to apologize. I'm stepping out now.

>> KAREN GOLDBERG: Forever.

>> INTERPRETER: No. There were complaints, so that's important to me, because I need to be responsible for that.

>> KAREN GOLDBERG: All right. Fair enough. Okay. Thank you for your work today, and thank you all. We'd like to make recognition to our CART provider. She's going to spell her name correctly, regardless of how I say it, Tammy Milcowitz.

>> CART PROVIDER: Yes, perfect.

>> KAREN GOLDBERG: All right. Excellent. Thank you very much for your service. And we'd like to recognize our technical support, Lashay Lewis. Always a pleasant experience. And he's always working so hard when we get together, and we look forward to seeing him.

We've one more person -- I'm sorry, one more soul we want to recognize, and that is Darlene's support animal, and I forgot Darlene's support animal's name. Jayden. Well, welcome, Jayden. Darlene's not paying attention to me. Oh, Jayden. Welcome Jayden to the show. Okay. Is there anybody that I have not recognized? No. Okay. All right. So now is the time for public comments. Is there anyone on the phone or on the live stream.

>> CINDY SIMON: There's someone on chat that came in.

>> KAREN GOLDBERG: There is someone on chat. Could you please introduce yourself.

>> GINA HALLIBURTON: A person, Corey Parker of HKNC/SERR, has entered the room. And Cecil is back in the room.

>> KAREN GOLDBERG: Okay. So I'm assuming HKNC is Helen Keller National Center. Am I correct? It takes people a second to type. Welcome, Corey Parker from HKNC. The floor is open if you would like to make a comment or ask a question. Okay. I want to remind everyone that this is a time designated for public comments, so at any time you have any thoughts, questions or comments you'd like to make to the Council, we are here until noon to hear them.
Yes, Glenna.

>> GLENNA ASHTON: I want to take the time, because I want to put it on CART, issues with wrecking a car, enterprise. The last three times I had big problems with wrecking a car --

>> KAREN GOLDBERG: Can I clarify? Was that wrecking a car or renting a car.

>> GLENNA ASHTON: Oh, my God, not wrecking a car.

>> KAREN GOLDBERG: I wasn't sure. It could have been wrecking, but when it went three times, I was thinking it was not the rental agency's issue, it might have been the --

>> CHRIS LITTLEWOOD: Don't worry. That's possible. Glenna's a terrible driver.

>> GLENNA ASHTON: I know, I talked with you about it before, but I thought maybe the whole Council might want to hear about comparing renting a car and using a car and how that affects payment.

>> MEGAN CALLAHAN: So I will give you Shayla would most likely be able to explain it better, so I will try my best. Basically, the way that the state reimburses for rental car versus using your personal vehicle is they create what is called a POV worksheet, which basically takes the cost per mileage when using a rental car and applies that to your personal vehicle to compare the mileage and the costs and everything like that. And then usually the rental car reimbursement comes out to be cheaper than your personal vehicle. So the state reimburses using the cheaper amount. That's why we encourage using rental cars, because you're getting the most reimbursement, things like that. I don't believe that there is anything that would hinder you from using your personal vehicle. Just keep in mind the reimbursement, but if you have any further questions, or I can either follow up with Shayla to get a statement, because I think she could probably word it better than me, I could do that. You could just e-mail Shayla or myself and we'll get that answer for you.

>> KAREN GOLDBERG: Yes, Cindy.

>> CINDY SIMON: I do use my own car. I can't use a strange car, and seating-wise, vision-wise, anything else is a disaster, and I get reimbursed less, not up to the mileage I use, but I do that knowingly because after my last experience, I can't rent a car again either.

>> KAREN GOLDBERG: And Glenna, what was your issue.

>> GLENNA ASHTON: So when you get paid, they pay you like equal as if you rented

a car, so it still includes tolls and gas. Okay. I'm using my car from now on. I'm done with Enterprise.

>> KAREN GOLDBERG: And I know that the state wants people to rent, but I've had the same issue. I think one time when I was going to Tallahassee, they put me in a Kia Sole, and I had a lot of stuff to bring, and it just -- you know, my car, which is an Equinox, I could have done it, but this one, I couldn't see out the back window. So I really -- you know, the steering wheel was this big, but it was like I was trying to fit 50 clowns into a car or something, it was just really difficult. And I understand that, but if they would let us rent, like an Equinox, I would do it. Otherwise, I'll just drive my car, and I would accept that I'll get lost, if that's the way it is.

>> CINDY SIMON: So the other thing I found out for that is if you want to rent a car and upgrade it, you pay the upgrade difference, but they pay the basic rental price, because we've done that, too. And it was the worst car we ever drove, and the mileage was ten miles per gallon on it. So no more.

>> GINA HALLIBURTON: The Enterprise in Jacksonville, I haven't had any issues with, and it was just like Cindy said, if I wanted to upgrade, a lot of times they would give the upgrade free at the rate of the state. Otherwise I would pay the difference. So the one I'm going to there is really very, very user-friendly.

>> KAREN GOLDBERG: Which one.

>> GINA HALLIBURTON: In Jacksonville, on Atlantic.

>> KAREN GOLDBERG: But what is it.

>> GINA HALLIBURTON: Enterprise.

>> KAREN GOLDBERG: Right. But the agency. Oh, that actual Enterprise rental spot will do that. Oh, not all them will do that.

>> GINA HALLIBURTON: I know. That's what I'm hearing.

>> KAREN GOLDBERG: Megan.

>> MEGAN CALLAHAN: I know it was mentioned a few meetings ago, that because the state has been experiencing issues with Enterprise, you can e-mail a complaint, and that will -- they had a system for complaints. So I'm e-mailing Shayla now to see what the e-mail would be, or that process to go through for complaints, and then anyone that has a complaint with Enterprise from this meeting can submit one.

>> KAREN GOLDBERG: Oh, I'm sorry, Debbe, go ahead.

>> DEBBE HAGNER: I think we should recognize Cecil is on the chat, and Tammy from CART has entered the room.

>> KAREN GOLDBERG: Tammy. I thought she was already in the room. But I wanted to see, did she just walk in. Yes. Cecil is on CART. Cecil, did you have

anything that you wanted to add.

>> GINA HALLIBURTON: Julie just entered also. Julie Church.

>> KAREN GOLDBERG: Hi, Julie.

>> GINA HALLIBURTON: And Cecil responded, yes, I'm still here, via chat.

>> KAREN GOLDBERG: Wonderful to have you here. Hi, Julie. How are you.

>> GINA HALLIBURTON: She said, good, thanks.

>> KAREN GOLDBERG: Well, welcome to the meeting. It's now time for public comments. Julie, did you have anything that you wanted to add or comment on.

>> GINA HALLIBURTON: No. I'm just listening in.

>> KAREN GOLDBERG: Okay. Well, welcome, and thank you for being here. We changed the agenda a little bit, so the time from 11:00 to 12:00 is now public comments, so we have agenda items that we're going to start again at 1:30. But we did talk about that if there was an absence or a lag in some public comments, that we would talk about other issues that come up, and other items on the agenda if we wanted to. So maybe we'll do that now. Darlene.

>> DARLENE LAIBL-CROWE: First I wanted to talk about the travel thing. Jayden -- she can't drive, so she just lays around on the back seat, so we use our personal transportation.

>> KAREN GOLDBERG: Jayden doesn't want to drive.

>> DARLENE LAIBL-CROWE: Byron won't let her drive.

>> KAREN GOLDBERG: Well, I think you should deal with Byron on that. Equal opportunities for everybody.

>> DARLENE LAIBL-CROWE: Talking about statistics earlier, when I was doing my research, I found that the Rehabilitation Training Center and Mississippi State University did a survey about those who are deaf-blind, and they determined that there is a prevalence of 0.77% of the total population that could have dual sensory loss. Then, there was another article on I think I think it was Department of Labor that was saying that the deaf-blind unemployment rate is 15% compared to the 7%.

>> KAREN GOLDBERG: Those are wonderful statistics. Do you have, actually, the references.

>> DARLENE LAIBL-CROWE: Yeah. I'm going to be sending them to you.

>> KAREN GOLDBERG: Thank you very much.

>> DARLENE LAIBL-CROWE: And they're actually recent, 2017.

>> KAREN GOLDBERG: Wondering, on the Helen Keller National Center, if they have some research, if anybody can go to that website, and see if there's any references to statistics on that website. Somebody with a computer. Anybody with a computer. Is there anybody with a computer, Gina? Do you know anyone who has a computer open right in front them? Gina? Anyone? I want you to stay on the chat. Anybody else? We've a loft fingers moving, and I see Cindy working on one. Debbe's in there now. We're going to have a loft statistics in a few minutes.

>> DEBBE HAGNER: What do you want me to go into.

>> KAREN GOLDBERG: Let's see what Helen Keller National Center has for references. Is there anybody who's connected with a university who can go in on Pub Med? Chris. Chris's connection was interrupted. Are we having problems with the internet? Seems like Chris has been having a loft trouble with the internet.

>> CINDY SIMON: The hotel had problems last night with the internet, and it was spotty.

>> MEGAN CALLAHAN: It seems that everyone is connected fine, so we're thinking maybe it's Chris's fire wall on his computer. That could be the issue.

>> KAREN GOLDBERG: Is it a university computer? Sometimes the university computers might fire wall protect.

>> DEBBE HAGNER: I'm in Helen Keller's resource. There's National Women's History Museum. There's American Foundation for the Blind, and then there's Helen Keller Description Captioned Media Program, so which one do you want me to go into.

>> KAREN GOLDBERG: Do they have any references.

>> DARLENE LAIBL-CROWE: For Helen Keller National Center.

>> KAREN GOLDBERG: Reference for statistics. Is there somebody on the phone who wanted to join in? We heard a beep.

>> JULIE CHURCH: This is Julie Church listening in on the phone.

>> KAREN GOLDBERG: Hi, Julie. Welcome.

>> JULIE CHURCH: Hi. Thanks. Right now, Julie, we're looking up some data. People got in the mood to look up some research. So here I go. I'm doing the same thing.

>> KAREN GOLDBERG: I'm on the Blossom Montessori School For The Deaf, and they have some statistics. Prevalence in hearing loss in children, over one million in the United States. So this is more the United States, not specifically Florida, and their sources are Project Hope, 1990, 2000. Research study from '74, U.S. Public Health, 1990, and vital statistics, '94. I think they're more recent.

>> DARLENE LAIBL-CROWE: One of the things that statistics are separate in certain cases. For example, the Florida and Virgin Islands Deaf-Blind Consortium, they are part of the National Child Count Project that's going out, and they have 595 children in the State of Florida that are eligible for the project, and I talked to Emily -- my device is going off here, making my hearing aids go in and out -- anyway, she told me that the 595 are the ones that are eligible for the project, and that there are more in the state that are not eligible, and she was the one that told me about the IDEA, where I had read it on single units, and I was questioning her about it and she explained that more. Emily Taylor.

When I was mentioned -- I know -- when I do the Website Committee right now, but what I wanted to say that we didn't have a meeting, but my suggestion for that meeting was to create a survey that we can have on the website and do it for an extended period of time, and ask questions of the constituents to see how we can -- you know, ask questions about the hearing aids, or they can rate them, and then we can have some statistics of who they are, deaf, hard of hearing, deaf-blind, and also put a comment on there of what they're looking for. So in that survey, we will actually have something on hand to share in the biennial report. I know we can't do it right now, but it's something that we should consider for the next biennial report. And according to the National Survey site, it says 90% of the time, the surveys, you're more likely to gain more support or something like that. I'll have to go back and look. I'll send it to you, but I just wanted to put that out there by the survey because I know that we're an advisory council, but we do have an opportunity where we can collect some statistics, and things on our website, and we can do that by sending a link to that survey and to that data link so that we can send it to people that we know so that they can participate.

>> KAREN GOLDBERG: Darlene, I think that's a good idea, but that's going to be a self-selection type of survey, which really I think we're going to not get the numbers that are representative. But I mean, when you think about it, even the U.S. Census is a self-selection. I mean, you choose to be in it, or you're not it.

I wanted to call everyone's attention to the U.S. Census Bureau's American Community Survey, ACS. At Cornell, what they did is they went through all of this and they tabulated statistics for each state for different disabilities. I forwarded that to Megan for all of you to look at. It's a 65-page report. 2012 disability status report for the State of Florida, and it does list it by different ones. But it has vision and hearing as two separate ones. I don't know how many of those numbers actually cross over until I read this report.

Okay. Did somebody else have a comment?

So Megan can send out that report to all of us so we can take a look at it. The Gallaudet website, as we had stated, I think on the same thing. This is actually Gallaudet has data based on 2016 from the Annual Disability statistics compendium for 2017, listed in the State of Florida between the ages of 18 and 64, 217,794 people are estimated to have some type of a hearing disability, out of a total population of 12,137,388. Deaf percentage, 1.8% in the State of Florida. I'll forward that to Megan as well. None of these are by county. Voc rehab may have some numbers, too. Let's see.

>> GINA HALLIBURTON: This is from Cecil. He said you could do Google search.

Type "Deaf population," and then you'll see different sources, including the one from the Florida deaf Montessori School.

>> KAREN GOLDBERG: I actually saw that, Cecil. That was from Blossom, but they were quoting numbers and statistics from the 1990s. There's much more frequent or new state data. Yes. Cindy.

>> CINDY SIMON: There's also another article talking about this from 2016 called Hearing Loss Demographics-Deafness Statistics. Statistically how many deaf and hard of hearing, and it goes through the two sources as well as saying -- this was what I found interesting, how many of those who are older -- oh, that there's about 12 out of every thousand persons with hearing losses under 18 based upon the most current NCHS, and then there was something on older people who lost their hearing with age. But I can't find it right now, where it was. So it has links to take you to some of the other sources in that article and what the problems with them are.

>> KAREN GOLDBERG: Thank you, Cindy. Gina.

>> GINA HALLIBURTON: This is Cecil again. He said the VR last did its population listing back in 2002 and the FTRI did one in 2012.

>> KAREN GOLDBERG: Excellent. I actually am sending around -- I sent it to Megan. She'll be disseminating it from the National Center on Deaf-Blindness and they have updated numbers, and they break it down for children -- I think this is throughout the United States, however -- children who have any degree of vision loss and any degree of hearing loss at the same time. So they actually broke it down. So it's not specific, however, for the State of Florida, but it certainly is very interesting numbers. It's called the National Deaf-Blind Child Count. There it is. And I'll send that to you guys, too. Another one coming to you, Megan, from that same website. Chris, how's your internet working now?

>> CHRIS LITTLEWOOD: I'm still dealing with firewall issues and trying to get my administrator in my office to let me use his. In a break, I'll switch to my iPad. It's in my car.

>> KAREN GOLDBERG: I did want to say that at the It's A Deaf Thing Expo, they had representatives from the Florida -- FAVI, Florida and Virgin Islands Deaf-Blind -- I don't know what the rest of their name is, Deaf-Blind Consortium? And they were very interested in learning more about the Florida Coordinating Council.

>> GLENNA ASHTON: Virgin Islands, they actually don't travel to the islands. They're all done by internet and that kind of thing, or they'll bring the teachers, they bring them here to train. So don't look for travel to there.

>> KAREN GOLDBERG: So you're saying we don't schedule our next meeting in the Virgin Islands for the Florida Coordinating Council? Is that what you're telling me? Gotcha.

You know, it's interesting, if you go to this Nationaldeafblind.org, you can look at the numbers from Puerto Rico, from the Pacific Basin, Virgin Islands, it's great.

So it's 11:30 right now. I want to check online and on the phone if there's anybody wanting to make public comments. All right. Anything else that we want to bring up right now? I know from 1:30 to 3:30, we're really going to be digging into the biennial report. Do we want to start the digging procedure now? Or do people feel like they need food in their belly before they can dig into the biennial report? Yes, Cindy.

>> CINDY SIMON: I would like to suggest that the committee reports may go very quickly, be done by noon, and then we'd have that extra time for the biennial report if we want.

>> KAREN GOLDBERG: Okay. There's a motion on the floor to move the agenda item of committee reports.

>> DEBBE HAGNER: Cindy, are you actually making a motion.

>> KAREN GOLDBERG: Are you making a motion.

>> CINDY SIMON: I don't think we have to make a motion. We can go on and if we decide we want to do the committee reports, we can pick whatever we want.

>> KAREN GOLDBERG: Okey dokey. Okay. But I just want to make sure that everybody is comfortable with that idea. So all in favor.

>> DARLENE LAIBL-CROWE: What is the idea.

>> KAREN GOLDBERG: The idea is that we're going to go ahead and do some committee reports.

>> DEBBE HAGNER: The committee reports.

>> DARLENE LAIBL-CROWE: Oh, okay.

>> KAREN GOLDBERG: Okay. Let's go ahead and get started with Darlene. Web Committee.

>> DARLENE LAIBL-CROWE: We scheduled a meeting that we were not able to meet. We did not have a full quorum.

>> DEBBE HAGNER: Anything else you want to say about the website.

>> DARLENE LAIBL-CROWE: What was that again.

>> DEBBE HAGNER: Anything else you want to say about the website.

>> DARLENE LAIBL-CROWE: As far as I know, everything is doing good. David put the biennial report in a text version, which would make it easier for those who are blind to be able to read it. So Debbe, do you have anything to report on it.

>> DEBBE HAGNER: No.

>> DARLENE LAIBL-CROWE: Okay. That's it.

>> KAREN GOLDBERG: Okay. Gina? Oh, I'm sorry, somebody was first. Megan.

>> MEGAN CALLAHAN: Sorry. Just real quick. I have the text version and the website-friendly version of the report if everyone wants to see it. I haven't yet gotten an approval for it to be placed on the website, which is why I haven't sent it, but I can send it to everyone, if you all would like.

>> GINA HALLIBURTON: Cecil, for the budget report, do you want to wait to get to that line item.

>> KAREN GOLDBERG: We want to wait until we get to the line item. So anything else, Darlene, that you wanted to add, or Debbe, to the web? We did come up with new ideas about the website, and that is really your domain, so what are your thoughts about having a speakers bureau on the website.

>> DARLENE LAIBL-CROWE: Are we still on the Website Committee.

>> KAREN GOLDBERG: Yes. Yes.

>> DARLENE LAIBL-CROWE: Okay. What Cindy was suggesting about the highlighting different new technology and stuff that's coming up, I'm just wondering if we could do like a technology page and that highlight can be put on there every so often to where, when anybody goes on to the website, they can click on technology and get an idea of what's new.

>> KAREN GOLDBERG: I think that's a great idea. Debbe, what are your thoughts about that?

>> DEBBE HAGNER: I'm okay with that.

>> KAREN GOLDBERG: Okay. Cindy.

>> CINDY SIMON: I'll renew myself when my report comes on, but I think I'd call it education and technology because it could be other educational methods. It's not limited. And so we could have that as a separate page, and as things come up and comments, it would go there on our website. But I would call it education and technology, because it's not only technology.

>> DARLENE LAIBL-CROWE: What we could do is probably put a tab that says "What's new," and then they can go into it.

>> CINDY SIMON: I think we need something more than what's new, because people need to know it's not just what's new, but also information that they may be looking for. That's why I was going there. But however everyone wishes to call it, that's fine.

>> KAREN GOLDBERG: Discussion.

>> DARLENE LAIBL-CROWE: We could put, like, what's new in hearing resources, technology and techniques.

>> KAREN GOLDBERG: Can I state that I would be actually more comfortable linking to the sites that already do that, like HLAA always has updates, HLAA National, and we hope soon HLAA Florida, so we work on the website there. But other sites already do that. So maybe, because we're a coordinating council, we're better off linking to those organizations that already do that.

>> CINDY SIMON: And so that was where I said earlier we could come up with a topic and then a link to the organizations directly to that page on the topic. So we have a broader view, because I think if we link to one organization, you may get a skewed view based on their politics. So we can either take from there, link to the organizations, or give a broad view and say here's all the links.

>> KAREN GOLDBERG: Sounds great. Debbe.

>> DEBBE HAGNER: I was thinking that maybe we could add something about TED. It's a new technology education, and they have all kinds of different things. There's one new thing where you wear a bracelet or a vest, and it's similar like the cochlear implant, but the bracelet, when there's sound, it will tingle your skin, and then there's one for the vest that you will actually -- it stimulates the skin as opposed to stimulates the cochlear. So it's a new technology. They're still in the beta mode, but it's on TED. So I'll give you the actual name of the thing and you can take a look at it. It's a new device they're trying with bracelets or vests to help deaf people hear.

>> GLENNA ASHTON: One of those inventions. And, you know, that's happened many times in the past, and nothing happens after that. It's just invention. They're playing around, inventing something, and nothing happens after that, so I would be careful about that. But with that TED talk, the university does TED talk, of course it's all signed, but it's captioned, too, and they would touch on a lot more variety of topics. And that could be our link.

>> KAREN GOLDBERG: I think having links is really what we want. People are going to go to the Council website to get information, and so I think the best thing we could do is we're made up of 17 wonderful agencies and individuals that have lots of information and lots of connections. So I think that having those links on our website is going to be really useful. I would do the FAD, the NAD, HLAA National and State, Helen Keller National Center, and ALDA, and what was the other one.

>> DEBBE HAGNER: A.G. Bell.

>> KAREN GOLDBERG: Oh, that's right. A.G. Bell. I just saw something listed, I guess it was on my Facebook, and I was kind of scrolling, and they had an interpreter for queued speech at a concert, and there was a lot of debate about the effectiveness on that, different people with different views. So we are inclusive. So we want to know more about that, so we don't want to exclude any group. So I think having that on our website is the important thing. And national centers, local centers, state centers. Yes. Cindy.

>> CINDY SIMON: I would also like to add some of the national professional organizations, like AAA and ASHA, which is not weighted towards deaf or hard of hearing, but will give all the options, and, what was the other thing on that, on what you were just saying. I'll think of it after.

>> DEBBE HAGNER: And we can add Deaf Senior of America, DSA.

>> KAREN GOLDBERG: Megan, are you writing all that down.

>> GLENNA ASHTON: RID, registry for interpreter for the deaf.

>> MEGAN CALLAHAN: Deaf Seniors of America and RID real quick are already on the website. I added the deaf seniors of America, because that was requested last time, as well as Deaf Women United, I think was requested, and there was one other one I can't think of right now. I added those. RID is already on the website. Both of those I think are on there.

>> GLENNA ASHTON: I didn't know if we already have information about LEAD-K which is about language acquisition of young children, and it seems the newest thing now is that apparently there's some kind of an agreement between LEAD-K and A.G. Bell. I don't know the whole thing, but it seems like they're agreeing on the importance of first language acquisition. I'm not sure exactly what's going to happen after that, but it seems to be some kind of cooperation between the two, and people are kind of like, what's going to happen. I haven't read enough about that.

>> CINDY SIMON: I'm sorry, Glenna, can you explain -- is it LEAD-K.

>> GLENNA ASHTON: LEAD-K.

>> CINDY SIMON: Is it L-E-E and then --

>> GLENNA ASHTON: Language Encasing Acquisition for the Deaf, kindergarten.

>> KAREN GOLDBERG: Oh, LEAD-K.

>> GLENNA ASHTON: Language education and acquisition for the deaf kindergarten. I may be wrong, but it's LEAD-K.

>> CINDY SIMON: Okay. Thank you for the clarification.

>> GLENNA ASHTON: It came out of California. A few states have passed LEAD-K legislation requiring first language acquisition be based on what the child needs, and often what that means that LEAD-K would mean that ASL would be the first language. But now that A.G. Bell is getting involved, I'm not sure what happened with that. I have to read more about that because they're still explaining why they did that.

>> KAREN GOLDBERG: I just wanted to add, it's Language Equality and Acquisition for Deaf Kids. And they have just endorsed the Nyle DiMarco foundation, and Nyle DiMarco is the gentleman who is as you know, is a big proponent of ASL, teaching deaf kids ASL.

I also want to bring to everyone's attention a book that is just now coming out by psychologists, and several of my colleagues, to be honest with you, it's called "Language Deprivation and Deaf Mental Health." Yeah, "Language Deprivation" --

>> GLENNA ASHTON: The way they sign it, language deprivation is really long sign, language takeaway, literally.

>> KAREN GOLDBERG: And I encourage, if anybody enjoys reading that kind of, it's more medical approach to it, and scientific, if you enjoy reading that, which I do very much, it's called "Language Deprivation and Deaf Mental Health," and this is from the experts in the field for deaf mental health, really, that are saying that it is traumatic, in essence, to not have native language at birth, to have no exposure to any kind of native language at birth until -- you know, for deaf kids, they're getting -- many times getting cochlear 12 to 18 months, so they're saying that even that first part of your life with no native language exposure, that that has an impact on mental health and functioning later in life. So it's a very good book. I'm reading it. I'm enjoying it. I'm learning a lot as a physician who works in this area. Yes, Darlene.

>> DARLENE LAIBL-CROWE: You know, talking about language deprivation, it's not just in speaking language, or identified with language, it's actually also with not having others to communicate in the language you need. So the deaf, when they are relying on sign language, and they don't have anyone to sign for them, then they're going to feel isolated right there in that group, and that's the same with those who have dual sensory loss. They can't identify what is happening in the room in order to get the verbal and visual cues to be able to relate to what's happening. So the mental issues that they have in that group, and it's all with isolation. And it's not intentional, it's just something that happens, and people need to be aware of that.

>> KAREN GOLDBERG: The lead author and editor for this book is a colleague I've known for many years, Neil Glickman, G-L-I-C-K-M-A-N. He is a psychologist up in Massachusetts, and has been working in deaf mental health services for many, many years. His -- one of his other authors in that book is Sanjay Gulati, M.D. He is a child and adolescent psychiatrist, who is a late-deafened children and he is with the Boston Children's Deaf Center -- I can't remember the exact name of the center, but it's like Center for Deaf Children, so he does psychiatric evaluations for deaf kids. I think it would be wonderful at some point if we have these speakers come in and talk with us about what's going on. For many years I know Dr. Glickman has been a proponent for having a formal language deprivation center, something that's identified, and I think this is one of his first attempts to put that in writing and connect it with mental health issues, which I think is really interesting.

>> GINA HALLIBURTON: Karen, that is phenomenal, the book. It sounds like it's going to be great, because it brings back --

>> KAREN GOLDBERG: I think it's going to be a great way for a movie.

>> GINA HALLIBURTON: It brings back a conversation we had several meetings about where we talked about really having ASL deaf teachers in the classroom, you know, and when you said that we are not prejudice, we're not, like, choosing one

language over another, within the community itself, there's that division, to where ASL versus signed English versus cued speech, versus, you know, all that, and we talked about having licensure for interpreters, because you could send an interpreter into a school and think that the child is getting the proper information. They're not, because their language acquisition is from that interpreter, and if that interpreter is not skilled or does not have an actual strong ASL background themselves, CODA is a good example, then the child still doesn't get that native language connection that they need so desperately. So it's something we really kind of like -- I know we can't lobby for things, but the FRID is really still actively looking at getting qualifications for interpreters so that everybody gets access to quality communications.

>> KAREN GOLDBERG: So really very interesting information out there. Yes, Cindy.

>> CINDY SIMON: And when we do that, let's not forget the elderly. There were a number of articles years ago about deprive -- auditory deprivation and the effects. There are many articles now about depression and all the mental health issues, the isolation, and there's even more articles about the change in the brain and early cognitive disorders for unassisted hearing loss. So that's something else we may want to consider that it's two ends of the spectrum, but really almost the same thing.

>> GLENNA ASHTON: FSDB, Florida School for the Deaf and Blind, they serve 1,000, 200 -- I'm sorry, 200 blind, 400 deaf and 400 parent to infant programs around the state. So I know they don't limit it to ASL. They provide a range, depending on the child, which is my mantra, it depends on the child, what they are naturally oriented to, which way, and I think one of the problems with language deprivation is that the other people are deciding, they're not really looking at their child, what fit best, and not -- that's the issue.

>> KAREN GOLDBERG: We have a tail wagging on the floor right now; Jayden agrees.

>> GLENNA ASHTON: Lunchtime; ready for a walk and lunchtime.

>> KAREN GOLDBERG: So I wanted to know. We have 10 minutes until 12:00, and I wanted to see if there were any public comments. And I'm going to have to excuse myself because I have a meeting at 12:00, and I want to go set up the computer so I can do this meeting up in my room. So I'm going to step out now at 10 minutes until 12:00 and ask that Gina take over, and I'll see you all I guess at 1:30.

>> GINA HALLIBURTON: Okay. Cindy.

>> CINDY SIMON: If you want, I can give my report in under five minutes and you can get that out of the way.

>> GINA HALLIBURTON: Go ahead. You good? She wants to give her report. Cindy was going to give her report. She said it's really short for the Technology Committee.

>> KAREN GOLDBERG: I'm going to have to step out.

>> GINA HALLIBURTON: Okay. That's fine. Go ahead, Cindy.

>> CINDY SIMON: I can give my report real fast because I have nothing to report. We have not had a meeting. I did that on purpose. I apologize. Between my daughter's wedding, and then I blew my knee out. I didn't get to do a whole lot. However, I'm still waiting to hear in the state when they can finish that PSA. I got names for what he needed, and he hasn't come and both of us have tried to contact him. That's one. The last thing I'm going to bring up is, to be honest, it was back when these committees were made. Sherilyn and I were doing them and we were co-chairs of EMO, and then we separated technology. I think that most of what technology is doing, such as when we were discussing the articles, is really part of education, and I would suggest that we consider moving the two committees together, and then, you know, having many subcommittees as things come up, within the larger committee. It could suddenly become EMOT if we add the "T" for technology to it.

>> GINA HALLIBURTON: Any comments? Any thoughts about her suggestion? If I understand Cindy, she's saying combine the Technology Committee with the EMO. Any thoughts from the Council.

>> DEBBE HAGNER: I'm okay with that idea.

>> GLENNA ASHTON: I'm okay.

>> GINA HALLIBURTON: Any opposition to it? Anybody can think of anything that would say it would not work? Personally, as part of the EMO and as the chair, I see it working, and the reason being is that so much of what communications is all about now is in the technological field, and I think it would be very, very good if we could kind of, you know, marry the two so that we could get more information out in an accurate and timely way. Because just doing the EMO with letters is really kind of challenging in terms of being timely. So I think it's a good idea, and I'll leave that on the table. Megan, go ahead.

>> MEGAN CALLAHAN: Just for my records, if we're planning on doing this, will you be co-chairs, or are we still going to have only one chair of the committee? Do you want to think about it over lunch, or do you want to be co-chair? Just so I know moving forward.

>> GINA HALLIBURTON: That could be a Council decision.

>> GLENNA ASHTON: We start with the co-chair. Combine the committee, co-chair, start with that and you can always change it later.

>> CINDY SIMON: Yeah. We can decide how we want to do it.

>> GINA HALLIBURTON: Okay. So if I understand it correctly, for clarity, we would combine the Technology Committee with the EMO Committee. I'll remain chair, and Cindy co-chair, and we would do it, work together, in terms of getting the things done that the Council needs to have happen. Is there anybody opposed -- Glenna, go ahead.

>> GLENNA ASHTON: Did we make a motion about that.

>> GINA HALLIBURTON: Well, I thought you were going to probably do that.

>> GLENNA ASHTON: Okay. I make a motion that the technology and the Education Medical and Outreach Committee be combined into one committee called Education, Medical, Outreach and Technology Committee to be co-chaired by Cindy and Gina.

>> DEBBE HAGNER: I second the motion.

>> GINA HALLIBURTON: Cindy.

>> CINDY SIMON: Question. Do we have enough people, with Karen gone, and is Mary on the phone, to vote on this now? Or do we need to wait until after lunch.

>> GINA HALLIBURTON: Is anyone on the phone or in the chat room that has any input or comments about the suggestion, the motion to combine the EMO and the Technology Committee together and have it --

>> MEGAN CALLAHAN: Cecil says that --

>> GINA HALLIBURTON: Aye. Cindy said Aye. Anyone on the phone? I'm sorry, Cecil said aye. Cindy said aye. Okay. Anyone on the phone.

>> GLENNA ASHTON: Seven. So we just need seven, so if we all --

>> GINA HALLIBURTON: Okay. Glenna pointed out that we have seven, and that's enough to vote. Okay. So now we're going to ask for a vote now for the -- all in favor. Say aye. All opposed? Okay. That is unanimous, and so therefore officially from here out, it will be the EMOT Committee.

>> CINDY SIMON: We can stretch it to EMOT. I think that sounds nicer and it says good things about us.

>> GINA HALLIBURTON: Okay. Cindy suggested we pronounce EMOT with a long "O." It sounds a little bit better than the EMOT.
All right. Next on the reporting here, is the EMOT report committee, and as we had a meeting, it was -- I thought it was very good. I always enjoy hearing everybody's input, but the one thing that was dropped off the table from the August meeting was having a letter explaining the importance of communication and ADA rights and requirements to be sent out to, you know, the appropriate distribution list. We have it scheduled for coming up this November 30th to finalize that and what I've asked is everybody would send their input as to what they thought should be included in that prior to the 28th so that on the 30th, we can finalize it and get it published. However, since now we're having the Technology Committee involved, we may be able to just do it all electronically. But we'll talk about that later.

>> GINA HALLIBURTON: Any comments on that.

>> CINDY SIMON: Doesn't make a difference.

>> GINA HALLIBURTON: Legislative Committee is Glenna.

>> GLENNA ASHTON: Obviously that was on hold because of the election, and now recount, so but once the recount is done, and I'm going to look up who are the new people in the House and the Senate, and governor group, all three branches, and we have to start preparing for a February meeting because we have a few of us that will -- I have to wait two weeks before to make appointments. But there is something that we all can do at home. We need to start making friends with our home legislators. It doesn't -- e-mail, call them, ask for an appointment. You should stop by, ask for 15 minutes, 30 minutes, give them a report and explain about the Council. This is something that that's the one big thing that the Council can do is maintain contacts with legislators -- I'm losing my voice -- voice for me, please. To maintain contact with the legislators in our home area, and not just once a year, but, you know, to encourage them to make a commitment, and for us to continue to stay in contact with them and in our home legislative area, and we really do need to vote to have them -- or we need to show up to have them vote on the issues. And I'm making stops, visiting them, following up and making sure that everything goes well. Because we need to have talking points to make sure that we stick to that and not go off topic. We need to have a report that doesn't matter whether, you know, we emphasize on one specific area, or really we need to make a difference. That's the most important issue. We need to make sure that we see our legislators, inform the committee about the positives, the things that we need to happen within the community. And then we also need to let them know about what's going on. What is our organization. So right now, we're not thinking about any of our representatives in the office. We have to drive to Tallahassee, to our government, FSDB and get ahold of the lobbyists. Oh, FAD. I apologize, not FSDB, FAD, and also FRID because they used to have a lobbyist, but we no longer have one. But we kind of -- hmmm, we kind of dropped the ball. We need to present that to the government, because people are less aware of what the issues are, and we need to make sure that our committee does go ahead and take over that and the lobbyists know what's going on, so we need to visit our legislatives, let them know, whether we e-mail them, visit them, that's one way we could become more active. Showing the people that we're really trying to speak up for the people themselves.

>> GINA HALLIBURTON: Also, Glenna had sent out before, so really good outline talking points, that if you still have them, she may have updates to that, but it was a really good outline for those who are not necessarily familiar or comfortable, that it's a good guide to follow. And so I thank you, Glenna, for that. Also, Darlene had her hand up, and then Chris.

>> DARLENE LAIBL-CROWE: I don't know if you remember last year in November, Sam Wagner came and spoke on behalf of Bobby Payne, state legislator, district 19, and he is no longer with Bobby, but he is a lobbyist, and he sent me an e-mail asking me to share his information with anybody who might be interested.

>> GINA HALLIBURTON: Thank you, Chris. Oh, I'm sorry.

>> GLENNA ASHTON: So the lobbyist, yes. But we can't use a lobby person, just to let you know.

>> GINA HALLIBURTON: Okay. Chris, you had your hand up.

>> CHRIS LITTLEWOOD: I just wanted to make sure that we remember and be careful that we cannot lobby as a Council. We can educate and provide outreach information. But asking for money for the Council or anything like that, because that would be in violation of the Florida statute of what we're allowed to do as a coordinating Council.

>> GINA HALLIBURTON: Okay. Before acknowledging Cindy, I want to point out that we're three minutes past lunchtime. Is everybody okay with finishing this little segment? Cindy, and then I have Cecil's report.

>> CINDY SIMON: I only wanted to -- I just wanted to correct, I think it's Chris Wagner, not Sam Wagner. Just so we have the name correct. Chris Wagner who came. Is that two different people.

>> GLENNA ASHTON: No. It was Sam Wagner.

>> CINDY SIMON: Is that someone else then? Then I must have missed that one. Sorry.

>> GINA HALLIBURTON: That's okay. And next we have the Budget Committee. Cecil said that his -- Cindy, did you want something.

>> CINDY SIMON: No. I was just saying since his person was coming after lunch, let's put him on first.

>> GINA HALLIBURTON: Do you want to wait? Okay. Cecil, he responded that his staff person would not be back until after lunch, and therefore Megan would have to do the report. Cindy's suggestion is to just wait until after lunch, because it is lunchtime now. Do we need to vote on that? Okay. So let's suspend for lunch now. Be back in an hour and a half. And then we'll pick up with the Budget Committee. Cecil, are you good with that? Cecil says okay. That's great. So his staff person will be back and he'll get a budget report after lunch. And then we will continue with the agenda talking about the Engage For Change and the Biennial Report. You guys have a great lunch.

[Break].

>> KAREN GOLDBERG: We're coming back together.

>> GINA HALLIBURTON: Meeting is starting now At 1:36. And we're going to start with the roll call, and we'll start again to my left with Ms. Tammy -- oh, I'm sorry, Ms. Megan.

>> MEGAN CALLAHAN: Good afternoon. This is Megan Callahan with the Florida Department of Health.

>> CINDY SIMON: Good afternoon, everyone, Cindy Simon representing audiologists.

>> KAREN GOLDBERG: Good afternoon, everyone, this is Karen Goldberg representing Hearing Loss Association of America.

>> GINA HALLIBURTON: And this is Gina Halliburton representing Florida interpreters for the deaf.

>> DARLENE LAIBL-CROWE: This is Darlene. I am on the board; I am an individual who is deaf-blind.

>> GINA HALLIBURTON: Is there anyone in the phone or in the chat room.

>> CECIL BRADLEY: Yes, hi. Good afternoon. This is Cecil Bradley speaking through an interpreter.

>> MEGAN CALLAHAN: Hi, Cecil. Good afternoon. This is Megan.

>> GINA HALLIBURTON: Afternoon, Cecil. This is Gina. We're going to go ahead with the budget report. So if you could give that to us, Cecil, we would appreciate it.

>> CECIL BRADLEY: Good afternoon, everyone. I apologize. I think -- my wife is away on work-related training so I am staying at home as a house husband taking care of the house. Let's talk about the budget. If you look at Tab 4 in your folder. Thank you, Megan, for taking care of this and arranging all of this. I appreciate the Department of Health putting together the budget. Does everyone have Tab 4 open? Are we good.

>> GINA HALLIBURTON: Yes. We're good.

>> CECIL BRADLEY: Just a quick review of what we have. Keep in mind the budget is similar to what we had last year. The amount is very -- [Inaudible] -- if I remember correctly. Our expenditure through -- the amount is the same as last year, if I remember correctly.

Remember, the first column on the left is categories, and then the next column, how much money is set aside. The third is what has been encumbered. Where we have money designated and dedicated because of contracts or other specific thoughts. We've already agreed to the encumbered funds if we can't change them. Okay. So the remainder of the columns are by month. The last two columns are going to be the totals there. And the very bottom of the spreadsheet, just for informational purposes, as in monthly totals, totals per quarter, total each quarter without the OPS position. We have all the information there for your perusal. So so far, if you look at the first and second columns, year-to-date expenditures, the last two columns, rather, were fairly close. \$30,000. \$29,836.50 to be exact. So I think we're safe and we're going to stay on target. And if you look back at the very second column on the left side, you have about 33,000 there. So roughly half of the way through the year we're doing okay. We may have to add a little extra money. I'm not sure how much flexibility we'll have within the budget and moving money. So we'll have to see what happens after our spring meeting. I believe our next meeting will be February or March or so, so we'll look at the budget again to see how much is left and based on that, we may have to ask the department to adjust expenditures. We may have additional expenditures like brochures, reports, so on. We'll have to see how it plays out. So that's basically what

I wanted to share with you.
Do you have any questions based on that?

>> KAREN GOLDBERG: I have a couple of questions. Inside this budget is the salary for our DOH representative. Is that correct? OPS.

>> CECIL BRADLEY: This is for Megan's position.

>> KAREN GOLDBERG: What is our FTE? For the Council.

>> CECIL BRADLEY: We don't have an FTE, Karen, at this point. We have the OPS position. It's like an office personnel support position, OPS. It's a special budget designation. It's designated as OPS, but it's pretty much a permanent position. We don't have an FTE, though. Megan, do you want to speak to that specifically.

>> KAREN GOLDBERG: I guess my question is are we your only job with the Department of Health, or is there, like, you know, 50% of the time is the Florida Coordinating Council, or 100% of the time is Florida Coordinating Council business.

>> MEGAN CALLAHAN: This is Megan. Right. So I'm 100% of the time basically is dedicated to the Council with the department. There might be different webinars or, like, conference calls or things like that for, like, the disability and health management group and things like that, that I'll be a part of, but mostly it is the Council.

>> KAREN GOLDBERG: Here's another question. How do you get a raise.

>> MEGAN CALLAHAN: That's sweet of you to ask. Thank you.

>> KAREN GOLDBERG: I wasn't offering. [Laughter] I want to know the procedure.

>> MEGAN CALLAHAN: That would have to be a question for Shay, honestly, but I'm not sure that I can, with the way that the state budget is set up. But I'm not speaking to anything like that. I'm not sure.

>> KAREN GOLDBERG: Okay. Maybe it's a question better for Shay. Okay. Fair enough. Because I don't see much change in the two years that I've been here, so I didn't -- I wasn't sure.

Cecil, this is Karen again. Where does it have the expenses for the meetings we've gone to? It's A Deaf Thing, and so on. Where are those at?

>> CECIL BRADLEY: Miscellaneous expenses? But that being said, I believe that's where it comes from at this point, yes. Miscellaneous expenditures. We had discussed support for that to make sure that we had funding somewhere for events like that, and I think that's the category it's drawn from, if I'm not mistaken.

>> KAREN GOLDBERG: Would it be a better idea in the future, when we have the miscellaneous expense to itemize that out? Would we be able to do that.

>> CECIL BRADLEY: I'll have to ask Megan. Megan, could you ask the Department of Health what their definition is of that and how we can get something itemized? If we

could add a little footnote in the budget with miscellaneous expenses, including, A, B, C, et cetera. So if you could look into that for us so we could have a possible breakdown.

>> MEGAN CALLAHAN: I'll ask Joyce about that.

>> CECIL BRADLEY: Okay. Great. I appreciate that and that will be helpful, I think, for everyone, based on what Karen had mentioned, so I think we'll be able to see it that way. So those were Karen's questions. Does anyone else have any other questions about the budget? I did want to just make one comment. I want to remind everyone on the Council that the budget comes directly from Department of Health, not the legislature. So keep that in mind. So we're very grateful to Department of Health for providing funding to sustain the Council.

>> GINA HALLIBURTON: Cecil, you want questions from anyone except Karen, correct.

>> CECIL BRADLEY: Okay. I guess I kind of missed the boat on that. I'm not in the room. Does anybody have any questions? Does it look good? Everyone satisfied.

>> KAREN GOLDBERG: I think it looks great. I just -- I recall that when I first joined the Council, that there had been a higher amount of money before I joined, the history of the Council. I think somewhere towards 250,000. The entire time that I've been -- 235,000, I think. The entire time that I've been on the Council, it has been, I guess, at the 130s. And how do we think as a Council we've been able to manage with that kind of money? Yes, Cindy.

>> CINDY SIMON: Just to go back historically, we were a line item in the budget. And then when they were cutting out everyone, they took us off as a line item, and, in fact, they tried to eliminate us all together. There was enough protest and letters that we were brought back, but we were starting to move from department to department. When we came here is where we really found a home. The reason everyone shunted us off is because where we exist is responsible for getting that funding for us. And so a lot of them didn't want it. So I think we've discussed this with Shay, and she's tried to get us back as our own line item. This is the money that they're giving us from here. So we're grateful because we didn't even have an amount before. We only got this the last two years. Prior to that, in between when they stopped the line item, it was at whatever we could get.

>> KAREN GOLDBERG: Thank you, Cindy, for that perspective. And I think that we are all very grateful. I just wanted to get a sense of do we feel like -- and of course we don't have Glenna, Debbe or Chris in the room at the moment, but give a sense of does it seem like we're able to manage within this current amount, or do we need more, and is there any way -- and if we do need more, for what specifically would we be asking it for? Because we're staying in the black, aren't we.

>> MEGAN CALLAHAN: It seems that the one request that the Council has had continuously, if we were to, you know, become a line item again, or get more money in the budget, would be an outreach person, someone for outreach. I mean, I can't speak for the whole Council, I just know that that's one thing that's been mentioned previously.

>> CINDY SIMON: So when we had the higher amount, one thing Eloise always said was spend it, spend it, spend it. Because we are careful. We did have money left over, which is when we got Valerie, because we had the money, and then we had it to vote to send her out on outreach and pay the expenses. When we lost it all is when everybody was going, and we moved around. So I think that that's why we've been able to do it. We're careful. We don't go overboard. But if we had it, we would probably want to look back for an outreach person who did nothing but go to these meetings that we've been talking about, represent us, talk at the sheriff's office and things like that, create PowerPoints.

>> KAREN GOLDBERG: Thank you, Cindy. I think you're right about that. We were just talking this morning about developing a speaker's bureau. That's going to cost money. Right? I mean, we would ask for reimbursement on gas and that kind of thing, right.

>> CECIL BRADLEY: That's right.

>> MEGAN CALLAHAN: Those funds for that would come out of the travel budget. So you're right. It would cost money for reimbursement for gas, hotels, et cetera.

>> CECIL BRADLEY: Oh, okay. I don't know what will happen next year. Again, we'll reconsider our budget in the springtime and we'll see how much flexibility we have and what we can do with other items. So perhaps when we meet in the spring, we can talk about some kind of arrangement for a speakers bureau. And I'm talking about for the remainder of the year through summer. Maybe we'll be able to do something with the funds we have left, if we have them.

>> GINA HALLIBURTON: I want to clarify. I don't know if this is a Cecil question or a Mayor question, but how does the Council get more money, more working capital. What is the process? Because I know last year we talked about how we can't do fundraising and things like that, but how do we get an increase in our budget.

>> CECIL BRADLEY: I can address that a little. Basically, if I remember correctly from last year, I can't remember if it's Joyce or Shay, but the Department of Health considers those, and if I remember right, we did propose a position or something to approach the department at the top level. They had to go to the legislature. I think that is the process, but what we were trying to do didn't fly, didn't work at the time. So if we want to get any kind of increase, we have to go through that process, and the department ultimately goes to the legislature, and I believe the governor's office is involved as well. Megan.

>> MEGAN CALLAHAN: That sounds about right. For further information, I would ask Shay. I believe she would know, but I believe what the process is, the beginning of every fiscal year, which begins I think July 31st is when the fiscal year begins for the Department, that's when, you know, the requests go up for more funding, things like that, and that's when you find out whether or not the requests have been approved. That's the process that I know of.

>> KAREN GOLDBERG: Yes, Gina, and then Darlene.

>> GINA HALLIBURTON: Megan, how far in advance prior to the fiscal year does the proposal have to be submitted.

>> MEGAN CALLAHAN: I'm not sure. But I don't believe that the Council members submit a proposal for funding. I believe it's just through the Department.

>> DARLENE LAIBL-CROWE: I just wanted to say that I came on to the Council in 2012, and the first four years there, we went through three agencies, and we ended up with the current one, and I think they've done a great job in the past few years since we've been with them. And they've been very open and willing to do whatever they can to keep us going.

>> KAREN GOLDBERG: Thank you, Darlene.

>> MEGAN CALLAHAN: Thank you, on behalf of the Department.

>> KAREN GOLDBERG: I think I heard that Cecil was trying to say something.

>> CECIL BRADLEY: Just a brief remark. If we want to do anything different, we do have to start now. Time is of the essence. If I recall, the legislature reviews budgets usually in the springtime to approve them for the fall. So it may even be too late, but I suggest, Megan, you talk to Shay and Joyce, and if you can report back to us on any kind of deadlines with budget proposals, that would be great. Okay.

>> KAREN GOLDBERG: Debbe.

>> DEBBE HAGNER: Hi. Sorry I'm late. This is Debbe. I was wondering, is there a possibility that the council can provide a certified SSP for Darlene, because I had a hard time figuring out how to help her with her network and it would have been nice if we had an actual SNP for her. And the staff that was supposed to do it would help, but she couldn't but I think it would be better qualified to have real SSP. Is there any way that they could include that in part of the budget.

>> GLENNA ASHTON: CART and interpreter to SSP should be also provided, too.

>> KAREN GOLDBERG: I think Darlene wanted to say something. Darlene.

>> DARLENE LAIBL-CROWE: I think you've done really good so far. Just to start cold, it's hard. When I first started, I got SSP, and until my last SSP, Leah, started working full-time. And since then, I haven't had one. It would be nice, yes, because they have more understanding and things like that. As far as I've been trying to get one on my own, but I just don't have anybody available in my area, and trying to get somebody right now. The Florida Deaf-Blind Association, we are updating our system, and we have dropped down to, like, eight to ten SSPs statewide. So they are very limited. So if the state can provide someone to help me, that would be great. If not, I can stick with what I'm doing.

>> KAREN GOLDBERG: Okay. This is a Council that provides accommodations, so I think that's something that we need to put in the budget, and we put that in because it's needed. We have a seat for someone who is deaf-blind. We should allow for

accommodations. Yes. Cindy.

>> CINDY SIMON: So back on what Darlene was saying when she first came on. We have, in the past, always provided an SSP. I'm not sure if that was under a grant or not, but we actually had a routine individual from our FSDB who would come to the meeting to provide these services. So I'm not sure why it was stopped, but it was a routine meeting thing in the past.

>> DARLENE LAIBL-CROWE: The reason why it was thought, because it was hard to get an SSP. Diane Degado, she did it when I started, and then she couldn't do it any longer, and then I found Leah to do it with me, and after that we just haven't been able to get anybody that is able to take off time from work and this and that. But I would love to have one because I know with Shayla and Kim and everything, they do a great job, but they're just distracted from extra work that they have to do.

>> KAREN GOLDBERG: Thank you very much for raising this issue. I don't know that there's a whole lot more discussion we need to have on it. Sounds like we're all in agreement that we need to allot in the budget an SSP for you. And then we need to put that through to the Department of Health to make sure that that accommodation is available for you at the meetings.

>> GLENNA ASHTON: It seems like it's more --

>> DARLENE LAIBL-CROWE: Maybe they can do it through the interpreting services.

>> KAREN GOLDBERG: I don't know where the SSP -- how you would hire.

>> DARLENE LAIBL-CROWE: SSPs are, some of them are interpreters, and some aren't. So, you know, if you have a voice interpreter, and things like that, that would be good for an SSP.

>> KAREN GOLDBERG: And I want to remind everyone, please, to just be acknowledged so we don't get too much cross-talk, and overtalk with each other. Glenna? Yes.

>> GLENNA ASHTON: It seems to be more of a question of supply and demand than the budget.

>> DEBBE HAGNER: Is it the demand for the SSP as opposed to the budget.

>> DARLENE LAIBL-CROWE: Well, I would like to have it because it's a lot easier for me to understand what's happening, you know, like whenever I raise my hand, I can't see anybody, so I just would like to know the environmental information. Plus, when I come into the room, I like to know the outline and who's sitting where, and things like that. There's so many little innuendos that we miss as a visual, you know, vision so it would be nice to have someone to do that. But as I said, if the funding is not there or they're not able to get it through the interpreting service, then, you know, we'll do what we can with what we have.

>> KAREN GOLDBERG: Right. Okay. Yes. Gina.

>> GINA HALLIBURTON: I'm willing to check through our resources and our avenues as to what we can provide and what the cost would be.

>> KAREN GOLDBERG: What is our avenues, what do you mean.

>> GINA HALLIBURTON: The Florida Registry for interpreters For the Deaf. There's a lot of avenues there for the different types of interpreting. The deaf-blind interpreting is one type. Some are tactile, some are close vision, so I'll see what we have available.

>> KAREN GOLDBERG: I'd like to make sure that I understand what Darlene's needs are. Do you prefer to have somebody signing or close vision.

>> DARLENE LAIBL-CROWE: What I need is to have someone that understands, like if I have to go to the bathroom, I can sign this, or if they have to go, then sign it in my hand. So I recognize that they need to go to the bathroom without having to talk to them, and, you know, they can go. So I know where they're at and to be prepared. So it just depends on the situation. And, like, with Leah, we had it set up that if you raised your hand and somebody recognized it, Leah would tap me on my arm and let me know. So it's just little things so that I can get the extra information out there.

>> KAREN GOLDBERG: I think it needs to be put into the budget with the specific -- not specific. I think it needs to be included with the other accommodations. Okay.

>> GLENNA ASHTON: And we do have a permanent position on the Council. Somebody represents deaf-blind, so that should always be part of it, accommodation.

>> KAREN GOLDBERG: Okay. Thank you. Any other comments on the budget? Cecil, how do we make sure that money is allotted and protected.

>> CECIL BRADLEY: A while ago we had about \$30,000, and we're almost halfway through the fiscal year and we don't have any expenditures for December, where we will be halfway through the fiscal year. So I think we are in good shape, and I think maybe we could ask, for the time being, for those accommodations to fall under miscellaneous so the money could possibly come from that category. As you know, we don't have a separate line item for SSPs, so we could look at miscellaneous expenditures, and then next year, we could possibly have a separate line in the budget for SSPs.

>> KAREN GOLDBERG: Yes, Darlene, I'm sorry. I was processing my thoughts.

>> DARLENE LAIBL-CROWE: I know that whenever I have a job interview, or, like, by phone, or anything like that, the state actually pays for voice interpreter to come and sit with me so that if there's something somebody -- what they said I don't understand, they can clarify it. So that's how they use voice interpreters, to kind of help those with hard of hearing.

>> KAREN GOLDBERG: Cecil, this is Karen. I have another question. I'm looking at the budget, and it says for October 2018, the interpreting cost is \$4700. Was that in anticipation of this meeting? Or what am I missing on that one.

>> MEGAN CALLAHAN: I can speak to that. That is just where it hit. So that's when it was -- the interpreting agency was paid, and so instead of putting it in the August column, even though that's when we had our meeting, and that's when we utilized the interpreters, the invoice wasn't paid and it didn't hit and go through until October.

>> KAREN GOLDBERG: Okay. Thank you for clarifying. So the November one we should see a little bit later. Okay.

>> MEGAN CALLAHAN: Right. Normally that can happen with things like this. It just depends on how the invoices come through, if there are revisions that need to be made, things like that. Sometimes they do hit in the same month, and sometimes they get paid, you know, a month later, things like that. Just depends.

>> KAREN GOLDBERG: Okay. Terrific. Thanks.

>> CECIL BRADLEY: Megan, correct me if I'm wrong on this. I was looking at July expenditures. It could be that we received a bill for the previous month of June, and then it was paid in July, and we ended up paying the invoice in July. Is that correct? Is it the same thing.

>> MEGAN CALLAHAN: I believe you're correct, but I would have to check with Joyce just to make sure.

>> KAREN GOLDBERG: And how much does that complicate the fiscal year budget.

>> CECIL BRADLEY: It tends to be a month or two behind.

>> KAREN GOLDBERG: How does that affect the fiscal year budget.

>> CECIL BRADLEY: Not much. For example, if we had a Council meeting in May or June, it's possible that we wouldn't receive the interpreting invoice and pay it until later and it would go into the next fiscal year. But usually we have enough and we're okay. If you look at year-to-date expenses, we have almost 19 -- oh, wait. I'm sorry. Hold on. I'm looking at the wrong column. Give me a second here. Wait. Something's not right here. Oh, wait. No. I'm sorry. Communication here for the previous quarter is what I'm looking at. October. What Megan had mentioned. How we paid an invoice in October for services rendered. But long story short, it should be okay.

>> KAREN GOLDBERG: Okay. The reason why I'm asking is that it looks like the fiscal year, July 1, to June 30th, we start out almost 7,000 -- yeah. \$7,000 in July 2018. So it looks like we're paying last year, at least part of that is for last year's budget. Is that correct? That we're paying what should have been paid out of last year's budgeted amount.

>> CECIL BRADLEY: Are you talking about for travel? Yes. I think that was paid late.

>> KAREN GOLDBERG: Right. It's paid late, but out of which budget? Fiscal year 20 -- what is it called, 18/19.

>> MEGAN CALLAHAN: This is 18/19.

>> KAREN GOLDBERG: So did we pay \$4800 in travel out of fiscal year 2018 to '19, when it was really 2017 to 2018? Does that make sense? Because it doesn't carry over so we end up giving back money and then we start out in the hole. Is that right.

>> CECIL BRADLEY: Here's the problem. The state budget, as you know, ends June 30th. Any payments have to be made after June 30th, in the next fiscal year, if it crosses fiscal years. So with July travel, that's why that happened. We ended up paying for what had been done the previous -- the month behind, but we end up being a fiscal year behind. So, for example, if we had a meeting, say, in early May, we would hopefully be able to pay everything off before the end of the fiscal year, but sometimes the state's budget year towards the very end, the final few weeks of the year, meaning mid June until the end of June, sometimes the state suspends any payments until the next fiscal year begins. So we end up paying for something in the next fiscal year. All that being said, though, I don't think there are any concerns about it because we end up kind of repeating this cycle, when we have meetings in May or June, sometimes we have to use money for the next fiscal year to pay for what had been done in the previous fiscal year.

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

>> MEGAN CALLAHAN: This is Megan. Cecil was right. I was going to mention that we do -- this has happened before, and we've always been fine with the budget. Also, keep in mind that that May meeting was, I believe, when we tried to do go travel, so everything online for everyone, with the travel reimbursements, and yeah, even though we tried telling them paperwork is best, they still wanted us to try. We see that didn't really work that well, so we're back to paper now, but keep that in mind as well, but that's partially why those expenses probably are hitting in July was because those reimbursements weren't able to be sent out until everything was settled with that.

>> KAREN GOLDBERG: Debbe.

>> DEBBE HAGNER: Whatever remaining money is left over, does that carry over to the following year? No. Okay.

>> KAREN GOLDBERG: We lose that, but then we start in the hole.

>> CECIL BRADLEY: Unfortunately, no, it does not carry over. We just lose it.

>> KAREN GOLDBERG: Well, I mean, I'm glad to hear that there's something to lose. That gives me hope for the next year because we're starting in the hole every year.

>> DEBBE HAGNER: But then we have to be careful because if we're not using -- if we say we want \$50,000 and we're only funding a total of 30, next year they're going to say, okay, well you really don't need 50,000, you really only need 35.

>> KAREN GOLDBERG: Right. I understand what you're saying.

>> DEBBE HAGNER: So we have to be careful.

>> KAREN GOLDBERG: But you get a budget where there's an expenditure but there's not a payment, or we do not have that on our -- we don't have that on our list of what's -- right? Like, on the budget, we don't have what's due. We just have when it's paid. Right? So that's not really a clear picture of what we're spending. We're spending it in May. We should have somewhere in May, it's due. But then it's paid in July. That way it gives whoever reviews this up in the state a clear understanding of what exactly is happening. Maybe we add another line. Okay. Yes, Chris.

>> CHRIS LITTLEWOOD: There's not a list of what's been encumbered for -- that should be on there, or I believe it has been in the past.

>> KAREN GOLDBERG: There's nothing there.

>> CHRIS LITTLEWOOD: Okay. Maybe not. What I was going to point out in my comments, this is Chris speaking, what I was going to point out is that it's my understanding that the Council has zero dollars and zero cents every year. We no longer have a line item in the state budget. So every penny that the Council has comes from the Department of Health under the department that we're provided services for. I can't even remember where we are.

>> MEGAN CALLAHAN: It moved from Bureau of Chronic Disease. We're now under the Bureau of Family Health Services.

>> CHRIS LITTLEWOOD: Okay. So Bureau of Family Health Services. Everything that we're spending, it comes out of their budget. And under Florida statute, they have to support us. We keep track of what we're spending and everything, and try and stay within the budget that we've done in previous years and things like that and let them know if there's going to be an increase, but when we start talking about our budget this and our budget that, I just want to make sure that we remember and that we're clear that we do not have a line item in the state budget for this Council.

>> KAREN GOLDBERG: Thank you, Chris, for that. Although what we're talking about is our budget that we're looking at right here. Okay. Go ahead, Megan.

>> MEGAN CALLAHAN: Also, keep in mind that the Department does realize that you need to travel for these face-to-face meetings, and they realize that there are events that you do want to attend on behalf of the Council, especially considering that we don't have that outreach position. And it's like Shay has said in the past, you know, if we ever even get close to going over budget, we discuss it with the Department and, you know, hopefully we'll be able to find those funds somewhere. I mean, I can't guarantee anything, but we've always kind of told you guys, you know, you don't really need to worry so much if it gets down to the last meeting and you're worried that we might not have enough budget to cover travel.

>> KAREN GOLDBERG: Thank you, Megan. Any other comments? I also want to check online and in the chat.

>> GINA HALLIBURTON: Just Cory left the room. That's it.

>> KAREN GOLDBERG: Okay. Yes, Darlene.

>> DARLENE LAIBL-CROWE: I just wanted to explain a little bit about the SSPs again. I have a friend that is a rehabilitation counselor up in North Carolina, and they -- when they had the hurricane, the flooding and things like that, he ended up in a shelter, and they were able to provide him with an SSP. And so he was able to go and meet with other deaf-blind individuals with the help of that SSP. So the SSP told him if there was someone that was deaf-blind or looked like they were deaf-blind, then he could decide to go over there and talk to that deaf-blind individual just to get an idea of what they need so that he could serve as a vocational rehabilitation as a volunteer so the SSPs are the eyes and the ears to those who are deaf-blind. They pick up those cues so that we can better communicate with others and understand. Sometimes when I don't know what's happening around me, I feel like I'm dumb. So, I mean, Byron's even guilty of that when we're out and about. If somebody comes up and talks to us and they just talk and talk, and I try to interrupt and say, who is it, and they forget, so when they leave, I ask him who it was. You don't need to know. I'm sorry.

>> KAREN GOLDBERG: Okay. Darlene --

>> DARLENE LAIBL-CROWE: So I'm just letting you know, that is why an SSP is so important.

>> KAREN GOLDBERG: All right. Darlene, I just want you to be assured that we have heard the need for an SSP. We're all in agreement, and we're moving forward with that.

>> DARLENE LAIBL-CROWE: Okay.

>> KAREN GOLDBERG: Okay. Thank you very much. Okay. So, you know, I'm sorry, we have gotten a little bit off course, because we had started the committee meeting reports, but we really need to start -- keep pushing through so we can get into the biennial report. Okay? So let's go ahead and do that. Megan, do you have anything quickly you want to add about budget or anything else.

>> MEGAN CALLAHAN: Yeah, just real quick since we were on the subject of SSPs, if there are any companies, you know, specific companies or anything like that that you guys know of, that would really help us out, and also the going rates for an SSP, because if we're trying to add this into the budget, we're going to need to look through our systems to see, you know, who's contracted, and if you guys have a company or anything like that and then also what we can expect.

>> KAREN GOLDBERG: Thank you very much. So I had to step out a little bit early before lunch, and I want to make sure we did the Tech Committee, we did education, EMO? We did everything legislative, too? Okay. So we're just at the Biennial Report Committee, and that's going to lead us right into discussing the biennial report. Glenna, did you have one last thought.

>> GLENNA ASHTON: To answer Megan, the only ones that really know who the SSP is the Florida Association -- No. The Florida Deaf-Blind Association because they

themselves have taken up training to try to grow the pool of SSPs. And they've done it twice so far. And I'm thinking that what she really needs is somebody that's SSP and a tech person, too.

>> DEBBE HAGNER: I agree.

>> KAREN GOLDBERG: All right. Thank you all for your comments. Let's move forward, please. Biennial Report Committee, Executive Committee, Gina.

>> GINA HALLIBURTON: You are so unfair. I missed the last meeting so I will defer to the chair to catch us up on the Biennial Committee.

>> CECIL BRADLEY: So just a moment. Thank you. Goodbye. I'll be here keeping up with the meeting via CART, so I'm not really leaving, but I'm concluding my report now.

>> KAREN GOLDBERG: Hold on one second. Hold, Cecil. Gina.

>> GINA HALLIBURTON: Yes. Cecil, there's an agenda item on here about the Florida Engage For Change Transition Project discussion. I didn't want you to leave before they did that. And I'm going to ask Karen if we're still able to do that, because we're behind time now. But in case you had something important to add.

>> KAREN GOLDBERG: It's fine with me. I think that's great. Let's go ahead and do that now.

>> CECIL BRADLEY: Okay. Thank you for bringing that up. We have a working group that has already got several people involved, including a representative from the Florida Association of the Deaf, FAD, and then we have another rep from VR, a deaf counselor from VR, so we do have a working group that's been meeting -- that will meet at FSDB in December that will be looking at developing a website and that website will be designed to assist students who are deaf, hard of hearing and deaf-blind, to become better prepared for life after high school. That's the initiative in the project we're looking at. So we're looking at available materials, links, anything we can put together on our website. Anything from teachers, parents or providers who want to access that, but the goal is hopefully to help students to be better prepared when they leave high school and have better resources and better plans for their post-secondary life. It could be starting in the workforce. It could be going to college. It could be general life experience that they need some support with. So we do have a working group with several people, like I mentioned, an FAD rep, a VR counselor who is deaf, and in addition we have a teacher. We have a few different perspectives. We have Kara Wilma from RNCC-DHH, which is a project under the Department of Education, which is a specific program that teaches teachers throughout the state. So Cara is in the group. She's taking the lead. I'll approximate participating as well. So I think we have a good group. We have a good goal. I'll keep you updated on it. Like I said, we have good representation and I'm very excited about the opportunity we have as well to make the difference in the lives of the young people with hearing loss.

>> KAREN GOLDBERG: Very interesting. Do they have regular meetings.

>> CECIL BRADLEY: Not regular meetings, per se. It's a short-term working group and we are going to be meeting in -- let me see, I think we're going to have four meetings in total. I know we'll have a meeting in the springtime as well to continue to develop the website and associated materials, and then our goal is to finish the proposal in May or June, so I don't know who is going to actually develop the website, but we're trying to come up with a plan. The point is this is not a long-term thing. It's a short-term working group. And it will end when the project concludes. This is all related to NDC, the National Deaf Center. NDC is encouraging each state to improve transition opportunities for kids with hearing loss. So that's what this is.

>> KAREN GOLDBERG: L all right. Thank you very much. Any discussion on this? Anybody want to ask Cecil questions? Yes, Glenna.

>> GLENNA ASHTON: Cecil, the reason you're discussing this is because you want somebody to represent from FCCDHH.

>> CECIL BRADLEY: Yes. That's correct. We have enough people on the work group. I had asked to make sure that we had enough representatives, and I think we're good. Like I mentioned, we do have an FAD rep. We're really looking for people who represent deaf consumers. That was the point of this. But I think we're okay and we have enough people on the work group.

>> GLENNA ASHTON: That means you don't need someone from FCCDHH since you were able to find enough people for a working group.

>> CECIL BRADLEY: No, Glenna, not at this point. I was just told by the person who's taking the lead that I think we're at capacity and we want to keep the group purposefully small. No more than 10 or 11 people. That way we'll be able to have some face-to-face meetings. We're going to have a face-to-face meeting in December and some online meetings. But if the Council feels very strongly about having someone else on it, I can talk with Cara Wilma, but I think at this point we have adequate representation and we're satisfied with the composition of the group.

>> KAREN GOLDBERG: Gina.

>> GINA HALLIBURTON: Just very quickly. Cecil, when you sent out that message to the Council for FCCDHH representative, I applied, and on the way down here was accepted. So we do have representation on that group.

>> KAREN GOLDBERG: Okay. Congratulations, Gina. Debbe.

>> DEBBE HAGNER: What's the whole purpose of that organization? You lost me on that. That Florida Engage Transition. What's the purpose of it.

>> KAREN GOLDBERG: Cecil, could you address that question.

>> CECIL BRADLEY: Yes. This is Cecil. I'll clarify that. The goal of this group is related to the mission of the National Deaf Center throughout the country to improve transition opportunities for students who are deaf, hard of hearing and deaf-blind. Florida has a team of representatives and various stakeholders like myself, Cara,

former Department of Education folks, and others, and we want to create something in Florida. We have identified some activities related to developing a website and relevant resources because unfortunately we're in a state that has a lack of resources to benefit transition students and their parents who are leaving high school. So we want to make sure students who are leaving high school who have hearing loss have adequate resources and information to lead successful post-secondary lives. That's our goal. The purpose of the working group specifically is short-term activity to produce something by the summertime, a website and associated materials to help with that.

>> KAREN GOLDBERG: That sounds fantastic. Cindy.

>> CINDY SIMON: So listening to this, I have one concern. I appreciate the concept of helping post-secondary. I think that's fabulous. And you've mentioned a number of times for deaf and hard-of-hearing students. And then in the other breath, you say, you know, it's for the deaf consumer. So I want to make sure that those hard-of-hearing students are adequately served, such as finding a way to help them with assistive devices in order to function and be able to hold a job out there or function in the classroom because I've heard a lot of deaf pushing, but at the same time we're saying it's for hard of hearing. So I just want to ensure they're covered as well. Those students are in between a rock and a hard place. They're not in one group. They're not in the other, and they have their own issues due to this and I want to make sure we help them.

>> KAREN GOLDBERG: Thank you for bringing up that issue. And Cecil, it sounds like a wonderful project and I wish you all the best on the work group. It is now 10:30. Are you all comfortable that we launch in now to the biennial report and try to get as much done as we can before, say, 3:30 to 4:00 that we take a little break. Okay? Let's do an hour and then maybe take a little break, even though it's not on the agenda. All right? How would you like to proceed with the biennial report? Does it help everyone to have the PDF up and get working on it and do that? I mean, we did that the last time. It seemed to help.

>> MARY HODGES: Is there a copy of it in the packet? Of the biennial report.

>> MEGAN CALLAHAN: There should have been a 2017 biennial report included in your meeting contents that I sent. I also sent out the -- e-mailed out the website-friendly version and the text versions of the biennial report as well. So you should have both of those.

>> MARY HODGES: I'll pull it up, Megan. Thank you.

>> KAREN GOLDBERG: Darlene.

>> DARLENE LAIBL-CROWE: I know that we weren't doing scenarios this time, but I felt that I needed to write a scenario with the issues and a resolution, and make some recommendations, and so I sent it to Megan, so I hope she sent it to everybody else. I kind of culminated different people of what they told me about the issues that they've had, and I've actually had, you know, someone call me about post-secondary issues and the disabilities coordinator was not able to help her because they were wanting to

get it in Braille or large print. And I told her no, I said, they can get it from the publisher in a PDF format or put it in a Word document. So it's easier to use your computer, iPhone, everything, so use it. So I put that in that scenario. So that scenario has a culmination of things that a deaf-blind person could do and how deaf-blind specialist can help them.

>> KAREN GOLDBERG: Okay. Thank you very much. I'm a person who I tend to be very visual. I like to see things up on the big screen. Is that where we want to go with this.

>> GINA HALLIBURTON: Yes. Cindy said yes, too.

>> KAREN GOLDBERG: All right. Let's go ahead. Do we have it that you can put it up there.

>> MEGAN CALLAHAN: Would you like the website-friendly version so we don't have to try and navigate like we did last time.

>> KAREN GOLDBERG: Yeah. Let's do that and then we'll figure out where we're going. Okay? I just want to make sure that we're meeting the needs of the legislature or the Florida statute when it says a biennial report. Can someone go over what exactly they're looking for in the biennial report? And where we would find that, Megan.

>> MEGAN CALLAHAN: I don't believe you all are required to do a biennial report. This is something that the Council has decided to do so that the legislature would have a report from the Council, like an update, things like that. I believe. You can correct me if I'm wrong.

>> KAREN GOLDBERG: I thought it was in the statute. Can somebody pull up the statute? Or I'll look for the statute. I have the statute. You do, too. Do you want to read it.

>> DEBBE HAGNER: Sure. It says the Florida Coordinating Council for the Deaf and Hard of Hearing, 1, for the purpose of this session, the term A, SS realtime translation means the instant translation of the spoken words to English, text using information technology in which the text appears on the computer --

>> KAREN GOLDBERG: Let's move down, if that's okay, for the purpose of this section, if you don't mind, go down, that's just a definition of what the CART is and interpreter. If you go down to section 2A. It's just a little bit below. It's below the definitions.

>> DEBBE HAGNER: Okay. This is to establish the Florida Coordinating Council for the Deaf and Hard of Hearing. The Council is assigned to the Department of Health. And then it says the coordinating council has be composed of 17 members. The appointment of the members not to represent agencies shall be made by the governor. The appointment of members representing organizations shall be made by the governor in conjunction with the organization. The membership shall be the following: Two members represent FAD. Two members represent HLA.

>> KAREN GOLDBERG: Well, actually, the statute still says, Florida Association of Self Help for Hard-of-Hearing People. I need to ask Megan -- oh, there she is. I thought you left the room. Is that going to change at some point? Are they going to amend that to what the name of the agency actually is.

>> MEGAN CALLAHAN: I can't speak on that, and I know if you all tried to change it, it would probably take a long time for it to.

>> KAREN GOLDBERG: Ac. I wanted to make that clear. Florida association of SHHH has changed its name to Hearing Loss Association of Florida. What did I say.

>> DEBBE HAGNER: You said HLAA Florida. It's HLAA.

>> KAREN GOLDBERG: Oh, it never said HLAA Florida? I don't think it said anything. It has changed its name. Yes, Cindy.

>> CINDY SIMON: So I know whenever you want to open up a statute it opens up a whole bunch of other issues and people try to get in with other things when you open this, but it's possible that if you -- we can -- maybe Megan can check, if they're informed that it's the same organization under another name, then you don't have to go through that whole process of opening the statute to get it changed.

>> KAREN GOLDBERG: Right. I don't think they ever have. They've never changed it. So it stays as SHHH. Okay. So right. So two members representing HLAA. All right. Go ahead.

>> DEBBE HAGNER: A member representing the Association of Late-Deafened Adults, an individual who's deaf and blind, a parent of individual who's deaf, a member represents the Deaf Service Center Association, a member represent the Florida Register of Interpreters for the Deaf, a member to represent the Florida Alexander Graham Bell Association for the Deaf and Hard of Hearing, 9 is a communication access realtime translation. 10 is audiologist licensed under part 1 of chapter 468. And 11 is the hearing aid specialist licensed under part II of chapter 484. 12 is the Secretary of Children and Families of his or her designee. 13 is the State Surgeon General or his or her designee.

>> KAREN GOLDBERG: Who is the surgeon general's designee.

>> MEGAN CALLAHAN: Shay.

>> KAREN GOLDBERG: Oh, cool. I was just wondering. I want to know the faces of all these people now. Okay. Commissioner of education, or designee. Who is that.

>> MEGAN CALLAHAN: Cecil.

>> KAREN GOLDBERG: And then elder affairs is Mary. All right.

>> DEBBE HAGNER: And then the last two is the -- 14 is the Commissioner of Education or his or her designee. And 15, the Secretary of Elder Affairs or his or her designee.

>> KAREN GOLDBERG: So in -- and underneath that is just the terms of the appointments and how you get re-appointed. I'm looking for anything in here that says what we're going to do. Here 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 the public and private entities that provide services pertaining to interpreter services, computer-aided realtime captioning services, and assistive listening devices, including hearing aids. The Council is authorized to provide technical assistance, advocacy and education. To that end, here's what's required. A, provide information assistance to the legislature. B, providing technical assistance to other state agencies. C, provide information and referral services. D, promote public and individual advocacy for deaf, hard of hearing and late-deafened citizens, and E, conduct public hearings as needed. I'm not sure what the public hearings are. Is that this? Is it a public hearing? Okay. Public hearings, so like, town halls, that's where we have the public come and give their comments. That's what we're referring to? Okay. Fair enough. So I don't see in here where it says that there's a biennial report that is mandated. But what we have been doing is provide information assistance to the legislature. We've been doing that in a biennial report. Is that correct? At any time have we done a ten-year report? Summary report? So we've never done that.

>> MEGAN CALLAHAN: Not since I've been working with the Council.

>> KAREN GOLDBERG: All righty. Okay. I just wanted to see if there was anything written in the statute that says the biennial report is a requirement. But I know that when we have met with legislature, they really seem to appreciate having report in hand and can discuss the issues. I think we're doing that, because we're meeting with them in February.

Okay. Anything else anybody wants to bring up? All right. Cindy.

>> CINDY SIMON: I'll just say one thing. Over the years, the format of the report has changed. What we've put in has changed. And so because we have it one way doesn't mean you can't look at it. We've had it as a one-page item, or a two-page foldover. We went about the time Darlene came on to a tri-fold. It doesn't mean we can't change how we want if we have a better concept. There are things we should probably put in there that haven't been in there in the past such as texting 911 and the importance. So, you know, we have an opportunity to introduce, instead of staying on this same topic, maybe to go up and introduce something new, introduce new needs.

>> KAREN GOLDBERG: I think that's a fantastic idea. That's what we want to do. We want to make sure that we are putting in the most pertinent information that we have at this time. Debbe.

>> DEBBE HAGNER: I feel that we should talk a little bit about the Hurricane Michael, how it impacted the Panhandle, that there was -- I don't know how many deaf people were affected, but quite a few. Their building was destroyed. There was no accessible, we should talk about we need to improve that area, and the text to 911.

>> KAREN GOLDBERG: So would that go under public safety and emergencies.

>> DEBBE HAGNER: Yes.

>> KAREN GOLDBERG: All right. Is somebody taking notes, besides Tammy? I think this is it. This is our chance. Let's do it. We also need new photos for the pamphlet.
I'm in favor of going through it section by section. I think we can bang this out today. Before dinner. Possibly tomorrow morning. But I'm just saying I think we can do this. I mean, I feel like I'm alone right now.

>> GINA HALLIBURTON: No, you're good.

>> KAREN GOLDBERG: We're good? All right. Yes, Cindy.

>> CINDY SIMON: Again, I just want to remind you that because we've had this topic for the last few biennials, you don't have to stay on those topics, so if you want to create new headings, give it a new fresh appearance, we can. We can start it out with text 911. You may not want to, but that may be an effective catch.

>> KAREN GOLDBERG: Well, I think you can bring it up a little --

>> CINDY SIMON: We could have other things.

>> KAREN GOLDBERG: You can move it around. I personally like this format. I like the way it looks and I like the way it feels. And it grabs me right away. Anyone else.

>> CINDY SIMON: So I'm not saying the format. I'm just saying you don't have to keep the same titles. If we want to use new headings, by all means.

>> KAREN GOLDBERG: I agree with you, Cindy. Yes, Gina.

>> GINA HALLIBURTON: I think your idea of going section by section is great because I think a lot of it is not going to require a whole lot of tweaking, but I also like Cindy's thing about having a hook, something that grabs you, because you would not expect to see something like a picture of, like Debbe said, a victim of Hurricane Michael and they can't reach help, but if they had text to 911, they could. You know, something like that. Just right at the beginning.

>> KAREN GOLDBERG: Okay. I agree with you. And we do need new photos. Yes.

>> DEBBE HAGNER: Yes. I agree.

>> KAREN GOLDBERG: All right. So can we get some -- start looking? Do we need permission to use things on the internet.

>> DEBBE HAGNER: If they're copy right. It depends if it's copy right or if it's in the public domain.

>> MEGAN CALLAHAN: We cited the pictures in the report last year to avoid --

>> KAREN GOLDBERG: Yes. I see that. I would recommend that we do that again. I would like to not take up as much space on a citation. I think I could use this for other things, okay? But we could put it at the end. Right.

>> MEGAN CALLAHAN: Or I mean down at the bottom where -- I think that might be where we wanted it to be.

>> KAREN GOLDBERG: Was lower.

>> MEGAN CALLAHAN: Down at the foot of the page.

>> KAREN GOLDBERG: Oh, where the other one is. Okay. Yes, ma'am.

>> GINA HALLIBURTON: So keeping with the plan to go section by section, if we go on the first page, is it accurate that the only thing we need to change is the year and the governor, possibly, the picture.

>> KAREN GOLDBERG: The governor stays the same because it's -- it's the biennial report, but it's --

>> MEGAN CALLAHAN: It's for 2019, though.

>> KAREN GOLDBERG: Well, it goes up through 2018, though.

>> GINA HALLIBURTON: '19.

>> KAREN GOLDBERG: So it will be the new.

>> MEGAN CALLAHAN: Right. Because this is the 2017 biennial report that we're looking at now, so the next one will be the 2019.

>> KAREN GOLDBERG: That makes sense. I always think of it like a two-year report, but it's not really that. Okay. All right. So Gina, will you take the lead on going section by section? I was going to get another pamphlet.

>> GINA HALLIBURTON: Sure. Okay. So am I correct, you all -- you got the first page here that we're on. The picture -- question, Megan or Karen, can we get like a Drop Box so that everybody can put everything in one place, and we can upload it, sort it out.

>> MEGAN CALLAHAN: There's a One Drive set up, and if anyone has issues with it, they can send me whatever pictures or information, anything like that they want in the 2019 report and I can upload it for them.

>> GINA HALLIBURTON: So the first thing we gotta look at is get a different picture for the cover. Also, talk about do we want to have like a hook, like we spoke of showing a picture of a person in the hurricane Michael situation, and trying to call 911, and there's no way to get to. I think that's a great idea. I really do. But that's just my idea. Go ahead.

>> MEGAN CALLAHAN: I do also want to mention that with Hurricane Michael, I mean, there were cell phone towers bent in half, things like that. So even with texts, they weren't really going through, so I don't know if Hurricane Michael and text to 911 could go together so much as much as the other tragedies that have happened, such as club shootings, or mass shootings, which is sad to say, that's becoming more of an issue.

>> GINA HALLIBURTON: That's a point well-taken. But something like that. Something to draw attention to the need. I think that's great to have the 911 be in. And then the other thing we have on the Council, is there anything that anyone wants to make in that paragraph about the Council? Or is that going to kind of stand.

>> MEGAN CALLAHAN: This one that I'm on right now that says the Council needs consistent funding staffed --

>> MARY HODGES: I have two points. I was thinking that I wonder if we could have a page that just has all of the citations and not have them in the body. The other comment I had is the second paragraph. I think we probably can reword that a little bit, with the second sentence that says we have -- [indiscernible] -- we may want to amend that a little bit.

>> GINA HALLIBURTON: Okay. Mary, are you still talking about the first section about the Council.

>> MARY HODGES: The first thing I said was maybe have a page with just citations so that it wouldn't be in the body of the report. And then in the introduction, the second paragraph, second sentence, I think we may need to modify that and say that we have listed our accomplishments in previous reports. I'm not sure that previous reports, we may not be looking at this first -- we may not know what the accomplishments were. So I don't know how you want to modify that section.

>> KAREN GOLDBERG: We're having multiple conversations, and I apologize about that. Go ahead, Gina.

>> GINA HALLIBURTON: Cindy, go ahead.

>> CINDY SIMON: I wonder -- I think we can change this just a little bit, update it, but over here, we really need to change it, and I think it would be nice if we had, being we've been involved with since the last report, bullet, bullet, bullet, all this stuff Chris does, all this stuff that just went on, to show the activity, and I think when you do bullet points like that, that's an attention-grabber, so if you have this and you just have a short paragraph to say just an update of what we've done, bullet, bullet, bullet, that should get -- grab attention, and it says very positive things.

>> GINA HALLIBURTON: Mary, would that address your concern.

>> MARY HODGES: I think it does, and I also am worried about the first statement in the second paragraph as well.

>> GINA HALLIBURTON: What is that.

>> KAREN GOLDBERG: What concern.

>> MARY HODGES: I think the Council has already informed the Department, that is the Department of Health, and the Department of Health is aware that the Council needs to be supported. I don't think we need to document that in the report.

>> KAREN GOLDBERG: Mary, I agree with you. I think it starts off negative. It just does. It starts off with "The Council needs," and I think that's a little bit of a turnoff. Like if I'm a legislator, and I see what the Council needs, I'm like, okay, the first thing, you want something. How about share with me what you're doing and get me excited. And then hit me with the -- you know, the Council needs. A couple things that came to my mind, when we were looking at the first part of this, I'm going up at the very first paragraph, the Florida Coordinating Council for the Deaf and Hard of Hearing, I don't know why it's called the Council. There are many things called the Council. I don't want to get rid of the name of it. Why are we calling it the Council? Cindy?

>> CINDY SIMON: The reason it went to the Council, which may be there as well is technically, I would change that to deaf-blind and late-deafened, and we need to add that, and that was a long thing to write every time, so when we called it the Council, and then for a while, we were saying to say instead of going through every type of hearing loss, individuals with hearing loss, which covers deaf, hard of hearing, deaf-blind and late-deafened.

>> KAREN GOLDBERG: Well, it actually doesn't. I think that's actually a good point. You're trying to make it very individualized, and that's more of a humanistic approach, that when you say a person with intellectual disability, a person with developmental disability, a person with hearing loss, some don't like that. Some prefer deaf, like call me a deaf person. So -- but I understand what you're saying. What I'm saying is that the Florida Coordinating Council for the Deaf and Hard of Hearing, herein referred to as the Council, I would prefer we didn't say that because you lose your message every time you go down to the Council, the Council. They have lots of councils. I would say, herein referred to FCCDHH. It's short. It's our acronym, and let's get it in their brains. I don't want a legislator saying remember that council that came by? Who were they again? I want them to say remember when FCCDHH came by and they talked to us about the needs of the deaf and hard of hearing and deaf-blind. Okay? So that would be my recommendation. I love that it's larger and it's bolded.

>> DEBBE HAGNER: So they'll remember the name more than anything else.

>> KAREN GOLDBERG: I want them to remember. Don't get rid of FCCDHH. The Council is expendable. Any council. We want them to know that this one is not. Yes, Gina.

>> GINA HALLIBURTON: I have a process question. In keeping, grabbing these notes, do we have to vote on and agree on a change? Because I don't want to write all these changes down and then we have to go pick them all out. How does that work.

>> KAREN GOLDBERG: I think we're a work group right now, aren't we? We have a quorum.

>> MEGAN CALLAHAN: You don't have to approve of any of the notes or anything that's being written down, any changes that you might make. The only thing that would really only need the Council's approval would be the finalized report. So like how we sent out that final draft document of the 2017 report, we did that, and said, you know, it's going to be a tri-fold, it's still going to have this format, all of these things, just this is for you to view, to approve, disapprove, send revisions and things like that. And we set a deadline for that.

>> KAREN GOLDBERG: So let's go ahead and see how it looks when we put it up as FCCDHH. And that starts every significant sentence or paragraph. Okay? I think it's going to look good. Popped out in big old red. And if you guys want, we'll bold the word "Need" at the end. I'm kidding. I'm kidding. Kidding. Kidding.

Okay. So FCCDHH was initially mandated by Florida statute, was initially -- okay. I think that's fine. In 2004. I don't want to say was initially mandated. I don't know. I think I want to say -- I want it to be very current.

>> CINDY SIMON: How about was mandated.

>> KAREN GOLDBERG: Not was, is. You can say since 2004. But I like it to be positive and in the present so that it remains in the present, in the future, so to speak.

>> MEGAN CALLAHAN: So it would read the Florida Coordinating Council for the Deaf and Hard of Hearing, hereinafter referred to as FCCDHH, is mandated by Florida statute since 2004.

>> KAREN GOLDBERG: Yes. Since 2004. I love that. It says, and continues to do so today. I don't care if we keep that part of the sentence in. Tammy, when you feel like your need your hands to take a break, send up a flare.

>> CART PROVIDER: Thank you.

>> CINDY SIMON: I was going to suggest going on. We are the resource.

>> KAREN GOLDBERG: The resource? There are many resources.

>> CINDY SIMON: I know, but we should be the primary resource for persons with hearing loss.

>> KAREN GOLDBERG: So let's start it off as FCCDHH is a resource, or you can say "The". We're having a debate between "A" and "The".

>> CINDY SIMON: I just thought we are is stronger than saying FCCDHH. That's all.

>> KAREN GOLDBERG: I'm trying to keep it from being -- I mean in this one we have it in first person. We --

>> CINDY SIMON: Are. That's all I was saying.

>> KAREN GOLDBERG: I don't know. I kind of get mixed about do you do first person in an official report, or do you not? I mean, sometimes it brings you closer to the situation, and sometimes it feels too informal. So I don't know.

>> CINDY SIMON: I think you have to decide based on the rest of the report format. Last time, if we were going to do scenarios, then you can be more touchy feely on that point and if we're going to be more clinical, then you go the other way, or we find something that's in between the two, but you can decide on that after you see how the rest of the format looks, in what manner.

>> KAREN GOLDBERG: I want to make a note that in the 2017 biennial report, we say "We" one time, and that's on the first page. Tell me if I'm missing it anywhere else. I don't see it in first person anywhere else in this Council -- I mean, in this Council -- in this brochure.

The first time -- we say "we" there, but we don't say it anywhere else. The rest of it looks like a professional report of -- not that it isn't professional, but I think we want to be careful. You want to decide, is it going to be we, us, you or is it going to be uniform as more of this entity does this and this. Okay. Yes, Darlene.

>> DARLENE LAIBL-CROWE: I guess you could make it formal by saying -- identifying in the beginning, we are the Council, and that is what it would be listed as a first person -- I'm just trying to see how you can do that professionally and formally.

>> KAREN GOLDBERG: Glenna I'm going to put you on the spot.

>> GLENNA ASHTON: Oh, good.

>> KAREN GOLDBERG: So Glenna, we made some changes while you were out. So we made just some minor changes at the very start of it that we're not going to call ourselves "The Council." We're changing it to FCCDHH so that that remains in people's minds when they read these reports. Okay? Because you have the Council starting a lot of these topics. We want FCCDHH to pop. That was one thing. The other thing we were talking about is do we use the word "We."

>> DARLENE LAIBL-CROWE: Right. That's what I was referring to. I understood about the Council and the FCCDHH. I was just saying that in the beginning, before, keep it formal and professional, we can identify FCCDHH as "We" and use that first person throughout the report.

>> KAREN GOLDBERG: You can do that or you can keep it as a third person. And I was saying that in the 2017 biennial report it only occurs "We" one time. The very first page. And then other times it doesn't at all. I'm in favor of doing it more third person, to be honest with you, because it's another opportunity, instead of saying we, that we say FCCDHH one more time. Okay? Let's try it that way and see how we like it. I mean, FCCDHH like it. Chris, any thoughts.

>> CHRIS LITTLEWOOD: Off my head, no.

>> KAREN GOLDBERG: Nothing? Nothing popping out? Yes, Megan.

>> MEGAN CALLAHAN: Just in rereading the part where you wanted it to say is mandated and since 2004, would it make more sense for it to say the Florida Coordinating Council for the Deaf and Hard of Hearing, hereinafter referred to as FCCDHH has been mandated by Florida statute blah, blah, blah since 2004.

>> KAREN GOLDBERG: It absolutely does sound better. And then you can leave the "And continues to do so today," if you do it that way. Has been mandated and continues to do so today. And you can either say continues to do so today, or something along those lines, a little bit different. Okay. FCCDHH is a resource for persons. Now, Cindy had recommended that we change that to FCCDHH is the resource for persons with hearing loss. I think that's a bit ballsy, but -- or bold.

>> GINA HALLIBURTON: How about we say a vital resource.

>> KAREN GOLDBERG: Is a vital -- ooh, I like that.

>> MEGAN CALLAHAN: So the Council is a vital resource? Is that what we're -- in the first paragraph? Is that what we're referring to.

>> KAREN GOLDBERG: Yeah.

>> MEGAN CALLAHAN: Okay.

>> KAREN GOLDBERG: Does that sound good to everyone? Okay.

>> GINA HALLIBURTON: Keep going.

>> KAREN GOLDBERG: Yes.

>> GINA HALLIBURTON: Karen, you're tired, aren't you. Moving right along. To recap, Megan, are you putting in these suggestions and corrections as we go along? Okay. Good. All right. Then we're going down to the next section, the next page.

>> KAREN GOLDBERG: Wait. We're not even done with the last paragraph.

>> GINA HALLIBURTON: We didn't do that.

>> KAREN GOLDBERG: No.

>> GINA HALLIBURTON: Yeah, we did.

>> KAREN GOLDBERG: No, we didn't. We just did the top half.

>> MEGAN CALLAHAN: FCCDHH is a vital resource, we finished that.

>> GINA HALLIBURTON: In the next paragraph, we have we have listed our accomplishments, we said we're going to put FCCDHH and put down an updated bullet form of all the things that we've done.

>> KAREN GOLDBERG: Right. But we also said we're not going to put down needs funding, first and foremost.

>> GINA HALLIBURTON: Right. That's also on here, delete the needs.

>> KAREN GOLDBERG: So we're going to get rid of the whole paragraph.

>> GINA HALLIBURTON: No. We're going to get rid of the feel that we're begging so it's going to be reworded so it's a positive this is what we've done.

>> KAREN GOLDBERG: Okay. So FCCDHH -- I need to know what we're saying. I've just got the first acronym.

>> GINA HALLIBURTON: Okay. Cindy, we're going back over what we had agreed to change in that first paragraph, and remember on that paragraph, it says, we have listed our accomplishments -- wait a minute -- the Council needs significant blah, blah, blah. And we said we were going to take out that feeling of we need you, you know, we're begging, and rather highlight what we have accomplished and put in bullet form. So that whole paragraph becomes a very positive update. This is who we are, this is what we've done. Am I accurate.

>> CINDY SIMON: Yeah. That's what I said.

>> GINA HALLIBURTON: And what Karen was saying was she needs to have some --

>> KAREN GOLDBERG: I want something specific.

>> GINA HALLIBURTON: So specifics. Meat on the bones.

>> CINDY SIMON: No, I agree. Chris does a ton of stuff. Why aren't we featuring what he does.

>> KAREN GOLDBERG: Okay. So FCCDHH is proud to present Chris.

>> CINDY SIMON: No. No. No. No. But put his work with emergency management so --

>> KAREN GOLDBERG: All right. So let's put it down. Let's get some meat on those bones, much like that poor animal used to have before Gina was wearing his skin. I'm kidding.

>> CINDY SIMON: Attending these meetings. You know, didn't someone call over the last two years for advice on how to handle something and hospitals and stuff? Why aren't we saying we helped them with this.

>> KAREN GOLDBERG: Let's put it down. I want to see it.

>> GINA HALLIBURTON: For example, we could say a member of the FCCDHH gave ten trainings to -- he would have to put the wording. Ten trainings for emergency management. A member of FCCDHH did that by, you know, helped 15 children find homes, that kind of thing.

>> KAREN GOLDBERG: We say we. We don't say a member. We say "We." Or not we, not we.

>> GINA HALLIBURTON: FCCDHH.

>> KAREN GOLDBERG: No. No. What I'm saying is we don't say a member did this. If he represents the Council, that's what the Council did. The Council presented safety, mental health. What's he -- go, Chris.

>> CHRIS LITTLEWOOD: Okay. This is Chris. With regard to statement about the trainings that I've given, we can't really say that the Council did that because it was not done as a Council function. It was done, I am a member of the Council, but it was done as a St. Pete College function.

>> KAREN GOLDBERG: Fair enough. Okay.

>> CHRIS LITTLEWOOD: So just want to make sure that we're clear on that. We can say that the Council members are involved in many parts of the community and disseminating information that's needed for important members of the community, like public safety, emergency management, healthcare, education, things like that.

>> GINA HALLIBURTON: And you are now delegated to write that out.

>> KAREN GOLDBERG: Well, let's do it now. Do you have a word document that's next to this? Can you bring up two things on the screen? You might not be able to.

>> MEGAN CALLAHAN: I'm not sure how to do it and it might be difficult for you to see both.

>> KAREN GOLDBERG: Okay. Fair enough. I like the idea of saying FCCDHH something.

>> GINA HALLIBURTON: Members are actively involved in all these things.

>> KAREN GOLDBERG: Well, we already know the members are actively involved. That's why they're on the Council.

>> MEGAN CALLAHAN: But we're wanting to make it partially, like we're going to say something and then lead into our bullet points, right? Like we're saying something about the accomplishments.

>> KAREN GOLDBERG: So are we getting rid of the significant funding -- to effectively follow best practices and provide appropriate representation. Do we want to just get rid of that.

>> MEGAN CALLAHAN: I'm sorry. I would say so if you're going to make this about the accomplishments that have been made since the 2017 report.

>> KAREN GOLDBERG: Okay. Let's brain storm and listen. Go ahead, Chris.

>> CHRIS LITTLEWOOD: We need to get Megan a microphone if she's going to be speaking because people on the phone and stuff can't hear her.

>> MEGAN CALLAHAN: I have one right here. By the phone.

>> KAREN GOLDBERG: Cindy.

>> CINDY SIMON: Okay. So one of the things is that meeting that Gina was recently at and the letter we created to send out, that would be something of an involvement that's the Council because we did that from the Council. Okay? What else have we done to represent us.

>> DEBBE HAGNER: We can say that we went to the Family Cafe. We also went to the deaf thing. That's another. You can also say that we received numerous calls to answer the blah, blah, blah --

>> CINDY SIMON: The concerns and needs of the population we serve.

>> KAREN GOLDBERG: Somebody write that down. All right. And we want to do that in bullet points. Another one of the bullet points was the public service announcement.

>> DEBBE HAGNER: Okay. This is Debbe. I have a concern about that. I know we created the PSA, but it's never been completed and so why do we bother.

>> CINDY SIMON: You're right. It hasn't been completed and it shouldn't be here and my recommendation is this doesn't belong here until it's put out publicly. This was something that was coming to fruition. He hasn't responded back yet. Don't have it here. Let's go on with the other thing. When it's done and out publicly, we can add it on the next report that we had a PSA that was produced, and disseminated publicly for this. But for this report, No. It doesn't belong.

>> KAREN GOLDBERG: Has the Council done anything in regards to public service? We talk a lot about text to 911. Do we get behind certain issues? Are we allowed to get behind certain issues? Are we required to get behind certain issues? I think we are.

>> DEBBE HAGNER: We wanted someone to come from the emergency management, but we never got around to having that person speak to the Council about that. So was this -- right? We --

>> MEGAN CALLAHAN: I don't know if --

>> DEBBE HAGNER: Remember, we requested that one meeting asking for someone

from that department to come and talk about text to 911.

>> GINA HALLIBURTON: Glenna, did you want to say something? No? Cindy.

>> CINDY SIMON: If I may make a suggestion, maybe for homework, people can review the past CARTs or go to the meeting summary that's only two or three pages and write down the list since the last one, of what's been done. And now we actually have it right from the CART.

>> DEBBE HAGNER: We can also add that we've had a number of several people come from the public comment who brought up these issues, and it's the same issues.

>> KAREN GOLDBERG: Yeah. And I also think that the Council provides a forum for people to come and share what their agency is doing to try to meet the needs of deaf and hard of hearing in our community, or our state. That's something that should be a bullet point. Because this Council exists, people come and -- I mean, you know, we pick a couple of people to present, but this is a forum where you can present and you're presenting not just to the Council but you're presenting to the public because these meetings are public. And open record.

>> CINDY SIMON: And didn't we also, they changed it so that you can get an identification on your license or something like that? We were advocating for that. We were pushing. Debbe, I remember you being in a meeting before you were a Council member on that. I think Chris was chair at the time. But it finally came through in the last, what, year or two. So, you know, we were advocating for that. I think that's another thing we can put in there as a positive, that we did recommend as a Council.

>> KAREN GOLDBERG: Fair enough. And I think -- so I think we have a good start. So some of these achievements down at the very bottom, the last paragraph, with continued engagement with other government departments and agencies, I think those need to be bullet points, boom, boom, boom. Okay? So I think we have enough bullet points. Let's move on to page 2. Now, what we do at the top of each of these is basically we start -- I'm sorry. Go ahead, Debbe.

>> DEBBE HAGNER: Are we going to change it to talk about the Hurricane Michael and instead of Hurricane Hermine and Matthew.

>> KAREN GOLDBERG: Yes. Change that. Thank you.

>> DEBBE HAGNER: I think we should emphasize that we have --

>> MARY HODGES: I'm so sorry.

>> MEGAN CALLAHAN: Go ahead, Mary.

>> MARY HODGES: I wonder if we could include the bullet in terms of the -- and I think it was you, Cindy, who was the person on the audiology project for trying to get information related to falls, risk and hearing loss linked to diabetes. Do you remember that one.

>> CINDY SIMON: I do, and I know the person, and I passed on the information.

>> MARY HODGES: Or state-specific projects.

>> CINDY SIMON: Correct. And I gave her information based on what I was given on where to go in the state and who to contact. And I did do that. And that was actually a national project that's still ongoing because for audiologists, they were doing all the different chronic health conditions and the effect on hearing loss. Diabetes is a really big one right now.

>> MARY HODGES: That's just one that I was looking through my e-mails to see which e-mail that forwarded or responded to and sent to Megan in regard to just kind of inquiries from the public, and I wonder if -- I know Megan keeps track of those, and if we had numbers of, you know, numbers of public assistance, you know, inquiries, responded to or something like that with some examples. And I don't know if that would be something that would be appealing to somebody who was reading the report.

>> CINDY SIMON: I think that's a good one, Mary. I think if we look in the back --

>> MARY HODGES: We could highlight some of those that we think are really far-reaching and impactful to not -- you know, to not just -- to the State, and then -- important issues that we help people to address.

>> CINDY SIMON: And I think when we look at the back of our binders, there were so many phone calls that Megan handled. You know, it's like she's the clearinghouse for everyone with questions, and there was a large number. So if we average it out by the month, it's really big if they see how many people in the public actually contact us. That was awesome, Mary!

>> KAREN GOLDBERG: These are all the calls since the last meeting.

>> MEGAN CALLAHAN: Calls and e-mails.

>> KAREN GOLDBERG: Wow.

>> MARY HODGES: I mean, to me, that really speaks to the issue of us having a person, a staff person, who is sort of a clearinghouse for these issues, and can kind of reach into the coordinating Council as needed to be able to respond to these, but if we're documenting these, I think somebody needs to know that that work is being done.

>> MEGAN CALLAHAN: Believe it or not, that number has gone down a lot since I started with the Council and answering the phones and giving resources through e-mail, phone, things like that, and I think maybe -- I mean, it could possibly be because maybe people aren't calling about it, they don't know where to call, or it could be because of word of mouth, you know, someone has called in and I'm giving them resources for hearing aid financial assistance and they have a friend that comes and says, hey, you know, I mean, I don't know if it really helps, I'm just saying the number has gone down.

>> KAREN GOLDBERG: Well, I think that that may account for a few of the lowered

numbers. I'm more concerned that they're just not aware that there's a Council that can help them.

>> CINDY SIMON: I agree with you. I think they don't know, and. I think that is a good one on the end, when you start asking, for speaking to the reason why we need an outreach person, because we have people contacting us. Why people need to go out to these meetings. So they do recognize us and contact us. So that could sit on the other side of why we need this.

>> KAREN GOLDBERG: Okay. And I think that that's good. I think if you -- sometimes if you list what's needed, like -- I mean, what's been accomplished and how we're reaching people and meeting the need, then that lets the legislature know they're moving in the right direction with the Council. So yeah. We definitely want to have that listed.

Okay. I notice that towards the bottom of this first page it says, in quotes, hearing loss is third most common chronic health condition in the U.S. I'm not sure why that's right there. On the first page. It probably doesn't really belong there. I mean, maybe it belongs up at the somewhere else, but if you want to put that at the -- do we want to keep that statistic.

>> DEBBE HAGNER: I think that should be part of title or something.

>> KAREN GOLDBERG: I think that's a good idea. I want to say that at the tops of these, we want to talk about some of the challenges people have, okay, and we're glad to have that information. I just want to make sure it's not overly negative. There's progress.

>> DEBBE HAGNER: Well, I think we could have some kind of like a statistic, and then saying that the facts that hearing loss is a serious -- not --

>> KAREN GOLDBERG: Consequences. Consequences. But yeah. Challenges.

>> DEBBE HAGNER: Yeah.

>> KAREN GOLDBERG: So I had also passed out this facts and statistics form from HLAA, and I just -- I like the way this looks in that I mean, it's simple to read in that sense. And statistics do grab people, you're right. So maybe do we want to have statistics at the top instead of a statement? Like maybe the headers. And do we want education to be first? I mean, now is our chance to make these changes. Yes, Cindy.

>> CINDY SIMON: So again, going off from the format here, maybe we want one statistic up there, like the third chronic, and maybe not on the second, but the third page, because I want to go from positive to difficulties back to positive. I would think. And then who's affected by that when you have it. So children in school. Even like when it's temporary chronic middle ear, they're still affected in school. The elderly, medication problems. That's why that's the third most chronic, you know, and then you follow it with they can be helped. They -- you know, they need better --

>> KAREN GOLDBERG: Which is what is on this form right here. I mean, when you

think about this, they have it set out as general statistics, employment, children and teens, and then on the back, veterans. And all they're doing is giving you the scope of what -- of how many people are affected by hearing loss. Okay? Based on data. So we want to go in a little bit more specific. That's what the whole purpose is. We have a header. And then we do the whole education thing. But I implore this Council to think of ways that we can word things that starts off with a scope of the problem rather than inconsistent access. And maybe the Council believes that's the right way to start the education piece, okay, maybe starting it off with the word Inconsistent Access might be the right word. I'm not sure. I just want to get everyone's opinion about that on how we grab the audience, so to speak, and bring them in so that they understand the scope of the challenges.

>> CINDY SIMON: So when we look at this, and this really is a beautiful-looking document that catches your eyes, okay? This is kind of boring. So we're dealing with people where we need to get a balance of the two. So since this is four pages, this is six, maybe we can have two meaty pages with much more explanation, or intersperse it with half a page that looks similar to this and then the information underneath. Half a page that's colorful and looks similar to this, and then the, you know, a good, solid paragraph underneath. So that would mean, like, say for her, this part which explains education might be under here if we're not doing scenarios, with the eye-grabbing on top. And that way you have a balance, and it's more interesting. They say, oh, I like that one. Oh, maybe that one. So just a thought of how you can balance both ways. Because they're not going to read everything. So it has to be larger print. This is almost too small. Short, concise, to the point.

>> KAREN GOLDBERG: Right. I agree it needs to be short, concise. The paragraph thing doesn't quite grab it. But that's why we tried to do the bottom part as bullet points on each of these sections. And I still like that bottom part of scope of the problem -- not scope of the problem, but the specific problems, and then solutions. I still like that. I think I would like to see the education be more bullet point, here are the challenges. Is that not -- how do you guys want to do it? Gina.

>> GINA HALLIBURTON: Would it work in that section here talking about education, to have like the statistics of in education, how many deaf and hard-of-hearing children are successful, they come in in kindergarten, they never graduate, something like that, you know, or something --

>> KAREN GOLDBERG: Well, we have to be careful that we're not skewing the statistics to try it make it look like the scope of the problem is worse than it is.

>> GINA HALLIBURTON: No. No. I mean, have the actual stats in terms of the success rate in education, and based on the things like on this paper where it says about when a person has -- a child has either mild hearing loss, they lose 50% of all the information. That's significant. That's significant. I'm just thinking, doing a graph on something, the statistics there, is then go down to your scope and your solutions.

>> CINDY SIMON: So I think what you said, Gina, you can put the statistics, but rather have a statistic of how many students have some degree of hearing loss, whether permanent or fluctuating, and then you can go on underneath to say the difficulties they had. But rather than saying it's negative, we're just presenting so that they're awed by

not how many are failures in their state, but how many actually have it that they need to serve because they want their families.

>> GINA HALLIBURTON: That's good.

>> KAREN GOLDBERG: Darlene, I'm concerned, and I want to check to make sure that you're following.

>> DARLENE LAIBL-CROWE: I'm just reading alone because I can't really tell what the -- I pulled it up on my phone, but it's hard to tell where you're at. I'm listening to it, trying to find a spot.

>> KAREN GOLDBERG: Okay. Did you want to --

>> DARLENE LAIBL-CROWE: So I'm just following along. The only thing I think is I was trying to picture the statistics. Are you thinking about putting it like in a text box or a graph box, or.

>> KAREN GOLDBERG: I was thinking at the top of that page, maybe Debbie, can you hold up one for her to see, a little closer, if you can hold one, to show her that blue box.

>> DEBBIE HAGNER: She can't see.

>> DARLENE LAIBL-CROWE: I can only see what I can on the computer. With black background with white text. To look at paper -- it's not a matter of magnifying anymore.

>> KAREN GOLDBERG: Okay. I understand. I was just trying to get you a sense of what it was on the page. At the very top, it's a banner that's blue and it has white writing, and right now, like, for the page that we talk about education, we have a one-sentence statement, ineffective communication when accessing public safety and emergency services can have outcomes ranging from confusion to loss of life. Now, that is a statement that's a powerful statement. I think it requires someone to read it. Right? So I don't know that people are reading this. If that makes sense. Plus, it's on top of the page where we talk about education.

>> DARLENE LAIBL-CROWE: I understand -- about the statistics, how were you going to put that in a text box, or a graph.

>> KAREN GOLDBERG: Yeah. At the top of the box to put a statistic.

>> DARLENE LAIBL-CROWE: Are you going to do the header like they did the statement? Just make a statement. You're not going to put bulleted numbers or whatever.

>> KAREN GOLDBERG: Right. Like, we're going to make a very brief, clear, concise statement about percentage. And that's where -- honestly, that's where I would put hearing loss being the third most common chronic health condition. Or actually even what Hearing Loss Association says is it has 48 million Americans, that kind of thing.

>> CINDY SIMON: That's what I'm saying. We don't have to use these statements

and we don't have to use them over and over. Things change. We can change the statement. Honestly, I would like to see a health page that talks about how many people end up in the hospital because they can't hear the medication instructions from the physician. The research out there on the changes in cognition in today's society based on untreated hearing loss and what can be done, you know, as long as we can ensure appropriate amplification to reduce these problems. It would be less people getting -- you know, getting chronic assistance from the state and things like that. I mean, hit them in the pocketbook. If you support the children early on in education, then they become working, contributing members. People can work longer now if they have the assistance they need to work.

>> KAREN GOLDBERG: Right. And I understand that. Now the question is how do you want to put it.

>> DEBBE HAGNER: One of the things I know that HLAA is really trying to shorten the time. The average is seven years before anyone realizes to do anything about their hearing loss. And so I know HLAA, that's the whole purpose of the over-the-counter hearing aid was to get them started trying something, and then hopefully you'll wake up and realize that they need more. To get their foot in the door. I know there's pros and cons for both. I'm not getting into that. But the idea is that we're trying to lessen the time and not have people wait until seven years, so we need to educate. When you have a hearing loss, it's nothing different than wearing glasses. Nothing to be ashamed of.

>> CINDY SIMON: And I think that's a great page. And then bring in the research from places like Johns Hopkins and University of Colorado with a link to those articles. I think is a very effective and powerful thing. These legislators themselves who won't wear something themselves can expect cognitive decline earlier than others because they're not doing anything about improving their communication and awareness. Hit them where it hurts.

>> KAREN GOLDBERG: All right. So let's talk a little bit about how we want it to flow. We're now on second page. Do we want to keep it as education? Do we want to do something different in how we do this? Do we want to do like start off with healthcare? Do we want to do it completely different? How do we want to structure it.

>> DEBBE HAGNER: I would like to see statistics and then the hurricane because that's what most people remember, the impacts, and then get into text to 911 and then go into all the others. We have to pick and choose. We're not going to be able to cover everything, so the two most important to us, we'll have to vote, and then I think the hurricane and the text to 911. That's me.

>> KAREN GOLDBERG: Okay. So we want to maybe start page 2 with statistics. General statistics.

>> DEBBE HAGNER: And all the impact on related to dementia or the medication, the noisy environment causes hearing loss, to educate them.

>> KAREN GOLDBERG: Okay. So I say already, if we're going to do general statistics, there are some that are well-known and accepted. Number of Americans

with hearing loss. I'd like to know how many from the State of Florida then. So we would have that.

>> DEBBE HAGNER: Nationwide, State of Florida.

>> CINDY SIMON: And it would be interesting to see if we have a higher number, we can point out, more important to Floridians than most states.

>> KAREN GOLDBERG: Well, I don't know if we want to start doing that but I think we want to say that maybe it's the third highest number or something like that. Yes, Megan.

>> MEGAN CALLAHAN: Just to make sure that I'm following correctly. Steed of it saying "Education" it will just say general statistics.

>> KAREN GOLDBERG: Yes. The meat on the bones is what we really need right now. Yes, Darlene.

>> DARLENE LAIBL-CROWE: Are you planning on putting any numbers in there at all.

>> KAREN GOLDBERG: Yeah.

>> DARLENE LAIBL-CROWE: Okay. I was thinking that you could take the numbers and actually put them in a side bar beside what is going to be written so that all they gotta do is take a look at it right there, and then go from, you know, side by side, but a side bar would be kind of draw the eye.

>> GINA HALLIBURTON: I think that if we first settle on what information we're going to have, then we can do the aesthetics. You know, then we can talk about positioning and what looks best, but I think Debbe's suggestion in terms of the two things she felt was most important, we should kind of all kind of consider, do we all agree that those are the two most important things that we need to address. And then if we agree on that, then we agree on what goes -- you know, what statistics are we going to have to really support that and then go to the solutions and what we did to remedy.

>> MEGAN CALLAHAN: Basically we just need --

>> GINA HALLIBURTON: Important things came up. We talked about all the public comments that Megan gets. We talked about the effect of not having 911 to text, and I thought it was excellent what Megan pointed out about it wouldn't have helped with the hurricane, but what about the shootings, even though -- that is critical, you know, if a kid was in the place and could not get help. Those are kind of important things. So that's my two cents.

>> KAREN GOLDBERG: Glenna.

>> GLENNA ASHTON: In South Florida, the important issue is the access to healthcare.

>> KAREN GOLDBERG: Chris.

>> CHRIS LITTLEWOOD: Okay. I like the idea of picking two things, or maybe three things, because it's hard to narrow it down to just two. The hurricanes and text to 911 are obviously very close if not at the top of my list, but texting to 911 and hurricanes can really be combined under the idea of public safety. So you could have public safety as one and healthcare as another, and that would essentially accomplish all three in two bigger statements.

The other thing that I wanted to mention is I don't know if it's been discussed or not, but the big paragraph on the front of the first page at the top, I really think we would be better off having that on the back, and putting something that's more eye-catching, less wordy, on the front of our report. But that's just my opinion.

>> KAREN GOLDBERG: One of the reasons why I like it on the front is that it's already there, and it sets the tone for what we're talking about. I want them to know right off the bat who we are and what we are, and that's what I would recommend. I don't know if you want to move it. You can move it. Maybe put the 2019 biennial report up at the top instead and then the paragraph becomes one of the paragraphs on the first page or something like that. I just personally like it up there, just to have it. But that's my opinion. Others? Yes, Chris.

>> CHRIS LITTLEWOOD: I think it's all very wordy and related to the statute and I would move it more to the back. I like the first sentence where it talks about the Florida Coordinating Council for the Deaf and Hard of Hearing, hearing referred to and then instead of saying the Council, I love your idea that instead of saying the Council throughout our report, saying FCCDHH, so I would keep that first sentence, and then everything else I would put on the back.

>> KAREN GOLDBERG: Okay. So if you look at the first page on the right-hand side, you see the Council's composed of 17 members appointed by the governor, blah, blah, blah. It actually almost is a continuation of the statute statement, and -- right? So right here and right there.

>> MEGAN CALLAHAN: I think maybe put that on the back especially, that part, because then you list the Council members on the back.

>> KAREN GOLDBERG: Yeah. Move that.

>> MARY HODGES: I was just looking at the -- are we still on the introduction.

>> KAREN GOLDBERG: We have not moved past the introduction.

>> MARY HODGES: I'm sorry.

>> KAREN GOLDBERG: We have not moved past the introduction yet.

>> MARY HODGES: I was thinking maybe if, as we get past the first paragraph, that we have like a sentence that leads into kind of -- I was just about to send an e-mail to Megan, but maybe if I read it. I was just going to, at the end of the first paragraph,

maybe start, and I know we had some bullets there, try and see if this will work in there. The FCCDHH meets quarterly and publicly noticed workshops to address issues and challenges faced by individuals with hearing loss, issues that exist in the areas of education, employment, healthcare, public safety and emergencies, communication and technology. And then we can go ahead and address what those issues are in each of those areas, if we agree to keep those as main focus areas for the report.

>> KAREN GOLDBERG: Yeah. And we hear what you're saying. I think what Chris was saying is maybe move that wordy paragraph to a statement in the back and just jump right into issues.

>> MARY HODGES: I think we need an introduction before --

>> KAREN GOLDBERG: I agree. That's sort of where I'm at. I feel like there should be an introduction. I say move it out of that picture box, move it down to somewhere else on that first page, but I think we need an intro of what the Council is or the FCCDHH is.

>> CINDY SIMON: Question. If we keep that, can we end it with we invite you to join us and see the issues, where we're inviting them to attend our meetings somehow. I think that would be a good thing to do.

>> KAREN GOLDBERG: I think that's important to put in there. I just am not quite sure how and where but I agree it does need to be in there somewhere.

>> MEGAN CALLAHAN: I would think maybe back page because then it's the conclusion of the whole report. Before you start listing out the Council members.

>> KAREN GOLDBERG: Yeah.

>> CINDY SIMON: So if you move that to the back end, just on that second half, leave the first sentence where it is, like you wanted. Move that to the back end, and then say we invite you to see this impact on your constituents, or something like that, to join us and --

>> KAREN GOLDBERG: Well, I like that you're inviting, and I think that's important. Maybe we need a statement on the very back that the FCCDHH meetings are open to the public. We invite -- and, you know, everybody's invited kind of thing. So we should make a statement.

>> CINDY SIMON: Or, on the front here, and it's online to see the impact on, list those things, and then you go into the report where you talk about. So that invites them, explains it, and segues right into that.

>> KAREN GOLDBERG: All right. I'm going to suggest, it's 3:45, that we take maybe a ten-minute break, everybody go and take care of your needs. And then we'll meet back 5 before 4:00. Okay.

[Break].

>> KAREN GOLDBERG: Welcome back! Welcome back! Wanted to double check to see if there was anybody on the phone. I know we had Mary on the phone. John has been intermittently trying to stay connected. And Cecil was on the phone but now says he's back on the chat and just wanted to double check that. He just now left? Okay. So he wasn't able to stay the whole time. Okay. So anybody else that we need to be aware of? All right. So we have one hour left before public comments. And I'd like to get to page 2. So I'm going to turn this over to Gina.

>> GINA HALLIBURTON: I have a question. Have you guys -- are you familiar with -- my suggestion would be that we take what Megan does in terms of the important points that have been made -- for example, let me just give you a broad example. I'm making this up as I go along. You've got the first page. What did we agree on the first page. Page 1, healthcare. Page 2, public safety. Back, what the Council is all about. Four pages. That's it. Let's just say that's an example. Put that out there on something like Survey Monkey or Google Drive and everybody on the Council say yea or nay. That cuts out the time we're spending talking about it. So if you put down what your suggestion is, what verbiage you want, plug it in there, and then the Council just immediately just vote on it, and that will be done.

>> DARLENE LAIBL-CROWE: And what four headings are you talking about? Four subjects, topics.

>> GINA HALLIBURTON: Well, what we said was to narrow it down to two, maybe three very important topics, and, for example, let's just say, because everybody agree that we should focus on healthcare, public safety, and if you want one more, put your suggestion as to one more, what the one more should be.

>> KAREN GOLDBERG: I'm going to go ahead and just say right out at the start I don't think we should narrow it down to two or three. Honestly. I think that what we have right now is good. We have education, healthcare, public safety and technology. Now, if you want to do -- and which one else.

>> DARLENE LAIBL-CROWE: Employment and --

>> KAREN GOLDBERG: I'm sorry, I missed it.

>> MEGAN CALLAHAN: She's making suggestions, I believe, for employment and communication.

>> KAREN GOLDBERG: Communication. Communication. Okay. So I like the headers in that sense. I like that we've done it this way. I think it's a little late in the ball game to talk about changing, because we need to have it into the printer by when, Megan.

>> MEGAN CALLAHAN: They can get it printed really quickly, it's a matter of when they format it and they send it to me for approval, making sure everything is correct and the approval from the Council before they print it.

>> KAREN GOLDBERG: And we want to have it in our hands by our February

meeting when we're going around to meet with the legislature.

>> MEGAN CALLAHAN: I would be hoping to send it out sometime in January so that way I could send it to you guys and get it sent to the legislators as well and they would already have a copy whenever you go visit them. And then you, you know, have extra copies if they need it, or you can just not give them a choice and hand it to them, regardless.

>> KAREN GOLDBERG: All right. So I mean, I think narrowing it is going to be a mistake. I think we need to have the issues that you think are important, those issues clearly with the -- I think in Florida with the emergencies and public safety, I think that maybe we move it around and that becomes the first section. That's fine with me. And then we move on to the others. I would go, if I were going to design this myself, I would put the public safety first and foremost, and then I would put healthcare, the next and then I would do -- I'm missing one -- education. And employment. And I would squeeze in technology there. But I would also consider doing veterans because we also do represent the veterans. Yes.

>> GLENNA ASHTON: One of the issues is technology. I think we can't remove that because the technology can be included in all the other areas anyway.

>> KAREN GOLDBERG: Right. That's what I was thinking, too. That's a good point. So let's go with five.

>> DEBBE HAGNER: I agree with you for the veterans, but we don't have a representative for the veterans here on the Council.

>> KAREN GOLDBERG: Yeah. I wonder why that is.

>> DARLENE LAIBL-CROWE: I think like Debbe that the veterans -- I know that they serve the country and this and that, but they're similar to the rest of the population as far as what we are focused on.

>> GLENNA ASHTON: They do have V.A. service. They get completely covered for hearing aids, everything.

>> KAREN GOLDBERG: Right. But we're the Florida Coordinating Council for the Deaf and Hard of Hearing, and veterans are Florida residents who have some hearing issues, too, right.

>> DEBBE HAGNER: Right. But we don't have a representative of that organization here on the Council.

>> KAREN GOLDBERG: Not specifically, but you could have somebody who meets one of the other criteria. What if they went through HLAA.

>> GLENNA ASHTON: Maybe somebody from V.A. Is there anybody in V.A. that specializes in hearing issues.

>> KAREN GOLDBERG: I'm just saying that we don't want to have that as a separate

header.

>> DARLENE LAIBL-CROWE: I think that if we focus on the deaf, the hard of hearing and the deaf-blind we're going to have a lot to talk -- I mean, a lot to share about the different topics.

>> KAREN GOLDBERG: Can we have a line in there maybe under the employment, or -- I'm trying to think -- I think we need to have at least one line in there about veterans. Go ahead.

>> CINDY SIMON: I think that you can add something about -- a line about veterans in almost every one of them.

>> KAREN GOLDBERG: Right.

>> CINDY SIMON: You could say it's our fastest-growing population of those with hearing loss, practically. So you can look and see where do they stand on the numbers. It just might well be, after the elderly. When you get to employment, it impacts them in obtaining the job. In education, you know, if they suffer tinnitus, if they now have high frequency hearing loss, the assistance they need in the classroom. That honestly, I haven't heard of anyone giving these guys assistance. I see these guys all the time. Not just through the V.A., when they come to me, but through other areas. They kind of blend in with our other public service people like law enforcement and fire, et cetera. So, you know, we can work that in somewhere. I don't know that it has to be its own. And honestly, a lot of them don't consider themselves part of that, or they're using it to get assistance, so the ones who really work hard at it, tinnitus is probably the number one. We've never used tinnitus in there. I don't know how familiar everyone is. That's one of my specialties. I sit on a board for that. So there's a lot of things with hearing aids now that actually help tinnitus. There's a lot of things out there that people need to be educated in, but I don't think we're going to hit on that. I just agree, I think that public -- you know, public safety, public health, education and employment are major.

>> KAREN GOLDBERG: Okay. I agree with you. Yes, Debbe.

>> DEBBE HAGNER: I think that everything related to what you just talked about, the ringing in the ears can be all on the website as a resource.

>> CINDY SIMON: If you ever need it.

>> KAREN GOLDBERG: Right. Okay. So one of the things I'd like to see is that if we have a header, I'd like the header to relate to what we talk about below. I think it just got off somehow.

>> MEGAN CALLAHAN: Yeah. I don't know what happened.

>> KAREN GOLDBERG: Yeah. That one got off because you got the public safety one on top of education, you got education on top of healthcare. You've got -- and you've got the education on top of public health. So I think it just got off is what happened. And but I think we can tighten that up and get everything cleared up.

Now, in previous Council meetings, I was confused as to whether a couple of us can meet for an hour on a topic just for this thing.

>> MEGAN CALLAHAN: Not while the meeting is being conducted.

>> KAREN GOLDBERG: Like tonight if, say, Gina and I who do a lot with education and healthcare could meet for an hour and take some of it so that tomorrow morning we can have something to talk about, is that allowed.

>> MEGAN CALLAHAN: Not if you're discussing Council business. It's not.

>> KAREN GOLDBERG: So if we're discussing how to put the brochure together for a section? Although we're not discussing new Council business, we're discussing how do we formulate. How does that violate Sunshine Laws.

>> CINDY SIMON: Since they're both chair and co-chair, maybe what they can do is do it as long as you're present, because you told me, if they're together and it's executive, as long as you're present, you don't necessarily have to notice --

>> KAREN GOLDBERG: I'm not sure how Megan being present will help. I think it's the public. So if it's not about actually --

>> MEGAN CALLAHAN: I'm there so you don't violate Sunshine Laws. It's not so much whether or not the public has to be noted. If it's between you two, it's the fact that even though you're discussing the format and formulation of the report, it's still Council business because it has to do with biennial report, which is noted on the agenda.

>> KAREN GOLDBERG: Okay. Then it does not sound like we can break into smaller groups this evening and have people work so that we can come tomorrow and be done.

>> MEGAN CALLAHAN: Unfortunately, you can't do that. That violates sunshine laws.

>> CINDY SIMON: So question, and we did this once before and maybe it was a violation. I know they allowed it. We broke up into small groups on each subject during the meeting.

>> MEGAN CALLAHAN: You can't.

>> CINDY SIMON: And then came back and wrote it on a big sheet.

>> MEGAN CALLAHAN: You can't do that either. Remember, we had someone from the Office of the General Counsel come and speak to the Council. I think it was last February, and I think someone asked that specifically, can we break out into small groups and she said absolutely not because it's on the agenda and it's publicly noted and if you're doing that you're violating sunshine laws because you're talking amongst yourselves in different groups about Council business. The public wouldn't -- the public hasn't been notified of that. There's no way to make sure you're not violating Sunshine

Laws when you're in small groups.

>> DARLENE LAIBL-CROWE: I think we need to apply like we're public elected officials. They are not supposed to talk about business outside of the -- of their official location, or whatever you want to call it.

>> GINA HALLIBURTON: This is Gina for Cecil. He said we can address communication in each of the top three issues or subjects.

>> MEGAN CALLAHAN: Also, I don't believe we really have anything on the agenda tomorrow besides public comment from 11:00 to 12:00, so we basically have that whole day to discuss this as well.

>> KAREN GOLDBERG: Okay. So then I will ask for tonight, whatever we're not getting done, while people are enjoying their meals to think about what you want to accomplish by tomorrow so that we leave here with really a very strong draft.

>> MEGAN CALLAHAN: I would suggest what we do before leaving tonight is figure out which -- at least figure out which topic we want to address on each page, so then people, for homework, can think about what they would want included in those topics, what problems that they might want to address, or statistics, anything that they might want to do just so we have a solid foundation going into tomorrow knowing already what we're looking at. That's just my suggestion.

>> KAREN GOLDBERG: I agree with you. Okay. I didn't realize it. I'm getting calls. Let me just take these. I'm going to hand it over to Gina.

>> GINA HALLIBURTON: That's dangerous. No. Okay. This is Gina. Okay. If I'm correct, then we're going to have the top subjects to be healthcare, public safety, education, employment and we're dropping veterans. Is that accurate.

>> MEGAN CALLAHAN: Right. I think veterans, if we wanted to was going to be included in each. Are we still doing general statistics where education was.

>> GINA HALLIBURTON: Debbe.

>> DEBBE HAGNER: I thought we talked about that the general statistics will be up on the top and then maybe a brief statistic under the education.

>> MEGAN CALLAHAN: Right. I thought that, too, and then I asked her if she wanted to replace the education topic with general statistics and I thought she said yes. That's where I'm confused because now I don't know if general statistics is going to be a topic or if maybe she misunderstood me.

>> GINA HALLIBURTON: Okay. Cindy.

>> CINDY SIMON: I was under the impression that for each of the topics, we would put one or two statistics with a little explanation, on the top, in the header area, and then go on with that information. So we could do statistics with the statement, or we can eliminate the statement and utilize the statistics in place.

>> GINA HALLIBURTON: And also for the record, Megan -- this is Gina -- we both maybe misunderstood because I understood that also, that she wanted the general in place of that ineffective communications when accessing, there's going to be a topic of general and some statistics, because she mentioned about the 48 million people, and she said to narrow it down to how many are in Florida. And talk about the general picture of Florida in terms of people who are deaf and hard of hearing, deaf-blind, and then go in to healthcare, public safety, 1 and 2, and the education and employment, 3 and 4. Is that accurate for everybody? So that's our five. We have the general State of Florida, the healthcare, the public safety, the education, the employment.

>> MEGAN CALLAHAN: Okay.

>> GINA HALLIBURTON: And then on the back, we'll have the general Council makeup.

>> MEGAN CALLAHAN: Instead of general statistics, it will just say, like, State of Florida.

>> GINA HALLIBURTON: Yes.

>> MEGAN CALLAHAN: Okay.

>> GINA HALLIBURTON: Is anybody on the phone that wanted to add anything to that? Was that clear? Okay. So then my understanding is tonight, then everybody will come up with what you want that healthcare page to look like, what you would want that public safety page to look like, and the education, employment, bring it back tomorrow, and then we'll kind of hash it out as to how to lay it out. Is that good for everybody? Everybody's tired. Debbe.

>> DEBBE HAGNER: I just wanted to let you know that HLAA came out with a new brochure of facts and statistics. That one is the old one. This is the new one, so I'll pass this around to everybody so they can have it.

>> GINA HALLIBURTON: Can we hire the person that makes your brochures? This is Gina for Cecil. He said okay, that works for him. Okay. Debbe, is there a way that Cecil can get this?

>> DEBBE HAGNER: I gave Megan extra copies. She can mail it to him, and then for her, I will try and look for the soft copies so she can read it on the computer.

>> GINA HALLIBURTON: Thank you, Debbe. For those of you on the phone or in the chat that are not physically here, Megan is going to mail you the new brochure that Debbe distributed from HLAA about the statistics for you to review. Anybody want to start off with general statistics that you want on the front page? Cindy.

>> CINDY SIMON: I'm sorry. What I'd really like to see is the general statistics nationally, if we can do this, and then Florida in particular. I think it would be really interesting to see the two next to each other and be impactful. And it could start out

with as simple as how many people with hearing loss. How many individuals zero to 18 with hearing loss. How many over 65 with hearing loss.

>> GINA HALLIBURTON: So you would want by age and by type? Because there are different types of hearing loss, as well as by age. In other words, is it --

>> CINDY SIMON: No. I wouldn't go to type. Like sensory neural, conductive --

>> GINA HALLIBURTON: No. I mean, like hard of hearing, deaf-blind.

>> CINDY SIMON: I think we need to look at the big number. Those with hearing loss which includes hard of hearing, deaf-blind, deaf, that's a much bigger number than separating it and much or impactful and legitimate.

>> MARY HODGES: I wonder if we break it down that way that somewhere in the report we talk about what the sections are.

>> GINA HALLIBURTON: Mary, could you repeat that? We couldn't hear you.

>> MARY HODGES: I'm sorry. If we are specific about deaf, hard of hearing, or deaf-blind, late-deafened, can we somewhere in the report talk about the differences or the distinctions? Because it's not public knowledge in terms of, you know, we talked about being hard of hearing, so if we're going to be specific about the types of hearing loss, or to what degrees or what have you, can we address it in the report.

>> GINA HALLIBURTON: Okay. This is to the Council. Would we want that in this report? Or do we want that as part of what the EMO communications sends out? Megan.

>> MEGAN CALLAHAN: That might be a better idea. The EMO Technology Committee could draft up a cover letter that we could send out with the report. We already send out a cover letter with the report so that could be our cover letter that explains the definitions that are in the report as well as maybe things that weren't able to be mentioned in the report that are still important, or, you know, general Council -- I mean, whatever needs to be addressed.

>> GINA HALLIBURTON: Debbe? Oh, that's it? Okay. Anybody else have a comment? Okay. So we're going to have the national compared to the state statistics of people with hearing loss in general by age. Is that accurate? Was there any other statistics.

>> DARLENE LAIBL-CROWE: We should have, like with the deaf-blind, statistics.

>> DEBBE HAGNER: Yeah. We will make sure that the deaf-blind statistics are in there.

>> DARLENE LAIBL-CROWE: Okay.

>> MEGAN CALLAHAN: So that's deaf, hard of hearing, deaf-blind, late-deafened. Right.

>> GINA HALLIBURTON: Okay. Let's be clear, because I'm getting back to being confused. We talked about having a general hearing loss, including all the groups, because that's a bigger number, so we would have the all hearing loss, period, no matter what kind it is, nationally, and then Florida. That's period. And then on our cover letter, we would explain the different types, meaning deaf-blind, late-deafened, hard of hearing, et cetera.

>> MEGAN CALLAHAN: Okay. I apologize, I missed that part.

>> GINA HALLIBURTON: Okay. Anything else? Yes, Cindy.

>> CINDY SIMON: I don't know if we want this. I found an article dealing with a patient's noncompliant behavior that does address hearing loss and responsibility of physicians, including giving it to them in writing to ensure understanding. Do we want me to give this to Megan? Maybe there's some statements that we can use from here for the health.

>> GINA HALLIBURTON: I would agree. Everybody? Sure. Anything else? So we're going to have those general statistics. Anything else on that general statistics page? Because that's not going to take up a whole page.

>> MEGAN CALLAHAN: Maybe the one that's on the first page that says hearing loss is the third most common chronic health condition in the U.S.

>> GINA HALLIBURTON: Where are you looking here.

>> MEGAN CALLAHAN: The first page on the report at the bottom. It says --

>> GINA HALLIBURTON: Oh, yes.

>> MEGAN CALLAHAN: Hearing loss is the third most common chronic health condition in the U.S.

>> GINA HALLIBURTON: Yes. That could be the banner, sure. That could be the banner, and then we have the statistics under that.

>> MEGAN CALLAHAN: Now I'm confused because I thought that these general statistics were going at the tops of the pages that you were wanting together.

>> DEBBE HAGNER: We can try it both ways and see how it would look, if it looks appealing to have that first or underneath, we can experiment with both ways.

>> MEGAN CALLAHAN: Okay. I just got thrown off because then it made it sound like that was going to be at the top of the page for the general statistics, but we decided not to have a page for the general statistics.

>> GINA HALLIBURTON: I think the layout, like Debbe said, we can kind of determine. But I think the issue is, my understanding, what Karen said when that came up, was that she wanted that general in place of where that blue is. Is that correct.

>> DEBBE HAGNER: Yeah. That's correct.

>> GINA HALLIBURTON: With some statistics there. And then under that have possible -- the bullets that are here in terms of things the population faces and possible solutions in general, and then under each one after that, public safety, the same thing, something that would grab them in terms of like we talked about, the hurricane, the shootings, the text to 911, all that stuff is really important and have that as a grabber. The healthcare. I think we should delegate that to Glenna to really look at. I love this. I love being in charge. So Glenna can really look at the healthcare issues and what statistics are important that would get everybody's attention and get it done.

Perhaps Debbe and Chris can do the public safety, what statistics would be really helpful and what kind of graphics can really grab somebody, and absolutely believe that Darlene should give us statistics on deaf-blindness and how they are affected, whether it's in education or healthcare or public safety, how they are affected, and that just leaves for Cindy and I the education and employment facts, and we can pull some stats on that, and then we'll put it all together and bring what we have tomorrow and everybody kind of look at it and say yeah, that will work or that won't work, and then we'll finish it up by getting layout. Does that make sense to everybody? Okay. Anybody else have any other comments? Does that work for everybody? Chris, are you okay with that.

>> CHRIS LITTLEWOOD: Huh? [Laughter].

>> GINA HALLIBURTON: Glenna.

>> CHRIS LITTLEWOOD: The only --

>> GLENNA ASHTON: I'm noticing that the logo is kind of small on the first page, and nowhere else. Why don't we make the logo on the first page and the last page, and bigger. We overlooked that.

>> GINA HALLIBURTON: Chris.

>> CHRIS LITTLEWOOD: I guess I have a few comments. I'm really trying to take a back seat because I've been so involved in previous reports. I would just rather let the new ideas come flowing out from the people that have been on the Council less time than I have. But one of the things I was thinking is when we're listing or talking about the statistics related to people that are deaf or hard of hearing is also mentioning, as I often do in all my classes, how difficult it is to state the number of people that are deaf or hard of hearing because they don't always self identify, and for a lot of other different reasons. When we did report back 2015, we changed the total number of people with hearing loss in the State of Florida from over 3 million to a number that the Department of Health came up with from the Surgeon General's office to 2.5, but if you drove down into where they got the number, it did not include people that were age zero to 18. So that's a big part, especially when you're talking about developmental disability, and children and the needs for communication and that area. So back to my original point, when we're talking about the statistics, if we can figure out a way to make a statement about how difficult it is to determine the exact number of people with hearing loss, and

then, it's always going to show lower than it really is.

>> GINA HALLIBURTON: Correct. Just for the record, there are no back seat drivers. You cannot sit in the back seat on this Council. Okay? So you're going to have to still contribute your part because it's valuable. And even though I respect the fact that we need new blood, et cetera, we need old dogs, too. Okay? So that being said, it's not so much I'm looking for the statistics, like you mentioned about, because they do vary, and there's a lot of already stated information about why these stats are not necessarily accurate or reliable, because of how people don't self identify, because of how -- depends on what you define as hard of hearing or what you define as having any kind of hearing loss. So we can put that statement in there in our cover letter. The cover letter that's going to explain all the different types. I think we can put that in there to say these are not in stone, because, and that way they all have that information. I think that's probably the better -- a better way to go.

Now, Mary had mentioned about she would get the stats for those who are late-deafened and those who are aging. And Mary, I was not leaving you off of this also opportunity to put input. And Cecil might not be on the phone now, but there's an old adage that those who are not here get the toughest duty. So, and that being the case, you and Cecil and whoever John had the great opportunity to get anything that we've -- all the low-hanging fruit. Anything that's left over that we might have missed, you can put it in there.

>> MARY HODGES: Don't forget that I have been present invisibly. I've been -- tried to be present on the phone, so be careful about my assignment.

>> GINA HALLIBURTON: Okay. Point well taken, Mary. We'll count you in, give you a lighter duty, but we do need you to still provide, if you can, e-mail to Megan your thoughts and input in terms of what statistics or problems the population faces or solutions, or especially like Cindy pointed out early on, the bullets that we can say of things that we have accomplished, things that the Council, you know, members or the Council at large has done to serve the people that we represent. Anything you can think of like that? And I think like Chris said it really, really well. I hope Megan captured it in terms of the FCCDHH members have been involved in, and then list all the great things that everybody is doing. You could send that. If we could get that from you tonight or in the morning, that would be good. Is anybody else on the phone? And don't act like you're not just so you don't want to do work. All right. Nobody --

>> CINDY SIMON: I'm checking. Cecil's the only one who was on, and he said I'm watching. Cecil said I'm watching.

>> MEGAN CALLAHAN: Don't forget about John and Debra.

>> CINDY SIMON: John left. But just in the past, John has been invaluable with his comments about what would be really good to put in front of the legislatures. He has amazing ideas, so I look forward to him joining us tomorrow regarding this.

>> GINA HALLIBURTON: So we've got John. He's going to bring his input tomorrow, and Cecil, you absolutely would be invaluable in terms of adding what we need to

include for the education piece. What statistics and what picture do we need to paint as positive. Not so much negative, you know, in terms of how many kids fail, but how many there actually are in school and in what type of education are they getting. Do they have mainstreaming? Do they have contained classrooms? What -- anything that you could say that would help us educate our legislature about what we need. Without saying we need it. Are you okay with that, Cecil.

>> CINDY SIMON: He hasn't said anything yet.

>> GINA HALLIBURTON: It takes a while.

>> CINDY SIMON: So Cecil said, I'm thinking. I'm trying to look back now.

>> GINA HALLIBURTON: Okay. Cecil, don't forget, there's no back seat drivers. You're going to have to get on the boat and roll.

>> CINDY SIMON: Actually, Cecil, I want you to think about this. I have noticed that since you've opened up voc rehab to all the centers, rather than just one in an area, there are more people being seen and spread out, or I'm getting a whole bunch that I never saw before because there used to be one place, and now there's three places, and they're authorizing things for them. I'm very impressed and very happy with that, and maybe if I'm right, that's something we can highlight as a positive from the state in this report.

>> KAREN GOLDBERG: I'd like everyone to stand up for one second. If we can. Shake it off for a second. I think we've been sitting and working really, really hard. Let's get some blood flowing back to the brain. Or we can all do head stands. Which do you prefer? About to lose Megan. Are you okay.

>> MEGAN CALLAHAN: Trying to keep up.

>> GINA HALLIBURTON: Tammy didn't get up.

>> KAREN GOLDBERG: She's busy. She's standing in her mind. Okay. Well, that feels good. So I just want to know where we are at this point.

>> GINA HALLIBURTON: Everybody has gotten their assignments. Okay.

>> KAREN GOLDBERG: Okay. Good.

>> GINA HALLIBURTON: Glenna is going to be -- what we're supposed to do is tonight hash this thing out by parts. The parts we're going to do is we're going to have the general statistics nationally, and then compared to Florida in terms of the total number of hearing loss in the state compared to the nation. That's one. Two, Glenna is going to take charge of getting what kind of picture graphic statistics we need for healthcare, as well as any kind of population issues that we can resolve.

>> KAREN GOLDBERG: Okay. So Glenna is going to do the whole brochure. Okay.

>> GINA HALLIBURTON: That whole page. Chris is going to -- and Debbe are going

to take the lead on public safety and talk about marrying in the 911 and how this affects people with hearing loss who may have been in any kind of dangerous situation, et cetera. They're going to bring those stats, and suggested pictures, suggested graphics and suggested language.

And then we have the education Cecil is working on. Now, he was thinking about it when you came in. He's going to help with the education piece in terms of what the students are experiencing.

>> KAREN GOLDBERG: Excellent.

>> GINA HALLIBURTON: Not as a negative but as a positive. How many are in school and what they're doing, what type of education they're getting. Cindy and I will add a little bit in there as we're able to, but that's Cecil's baby. The employment, we're going to kind of help get the statistics on employment, and that's it, right? Did I miss anything? Oh, yes. Oh, and we got another really important one. Darlene is going to be solo like this child over here, Glenna, and she's going to take care of all the statistics about being deaf-blind, how it's effective, where they are in Florida, what services are provided and how she, as a representative of that group on this Council has contributed to their well-being. Did I miss anything else.

>> CINDY SIMON: So do you know what I think you missed? Cecil has always done employment in the past only because voc rehab has so much to do with that. He may already have some of those statistics just because of voc rehab and maybe how many voc rehab has assisted so they can continue to work.

>> GINA HALLIBURTON: Okay. So then that will be -- Cecil will add education and employment facts and statistics. Okay.

>> CINDY SIMON: So that gets us out of it. But I think that we need to help with healthcare. I think we need to stress the errors that occur due to the physicians or other healthcare individuals not knowing how to communicate effectively, and the individuals who can't follow what they're saying and don't ask. And I forwarded that article to Megan already, that I found, so if she wants to, I told her to look at it and see if you want to forward it to everyone, but you can just do that.

>> GINA HALLIBURTON: The only thing that I would say with everybody, keep in mind what Karen said about our focus should be positive, not so much of how many people have died because they couldn't tell them they hurt, as much as it is how many have been saved because they had effective communications. Does that make sense.

>> KAREN GOLDBERG: It's okay to put down the scope of the issue. There's work to be done, otherwise we can just disband and call it a day, but there's work to be done. But yeah, we want to just be careful that we're not overwhelming them with negative, that we want to let them know that progress has been made, but we have still quite a few people that aren't getting the services they need. So I know that Glenna is doing healthcare. Is there a way that I can do some healthcare, too? And if I do, how do I not step on her toes. I'm just not allowed to talk to her.

>> GINA HALLIBURTON: We were trying to give you a break because you got that --

>> KAREN GOLDBERG: I got a chapter due.

>> GINA HALLIBURTON: Right. So let Glenna do the heavy and then you can help.

>> CINDY SIMON: What if she concentrates on mental health.

>> KAREN GOLDBERG: My own.

>> CINDY SIMON: And then Cecil has some comments. Cecil has some comments here. So let me go through it for you. All right. He says, I could mention several activities, including National Deaf Center data on education and employment, plus the federal legislations on transitioning students. Also, mention that Florida DOE/BEES project benefitting educators of the deaf. Those are a few I have in mind. I meant the National Deaf Center data for Florida. I also have some data for deaf education in Florida. See, I told you he'd have it.

>> KAREN GOLDBERG: Yep.

>> GINA HALLIBURTON: See, Cecil, even though you're far away, you're invaluable to us. And you, too, Mary. We appreciate you.

>> MARY HODGES: Thank you. I appreciate being able to participate over the phone.

>> CINDY SIMON: I just want to note that our elder affairs representative, both Eloise and Mary now have been awesome in terms of organizing, reading, correcting, setting the record straight. Mary, know that we notice this. Eloise used to do it and then we said oh, my God, who's going to do it now, and you have just picked it up and run with it. Thank you.

>> MARY HODGES: Thank you. I really miss being there with y'all.

>> GINA HALLIBURTON: Okay. I just thought about Debra Knox. She could help Glenna with medical healthcare kind of stats, correct.

>> GLENNA ASHTON: Education.

>> MEGAN CALLAHAN: Right. The only thing I would say with Debra is I believe she's out of the office. I think she's on vacation. So I don't know if she would really be able to do anything by tomorrow.

>> GINA HALLIBURTON: Okay. That means, then, our chair is going to have to do double duty because you're going to have to write your book and then stay up and do the brochure -- I mean, the biennial report.

>> KAREN GOLDBERG: Okay. Yes. Glenna.

>> GLENNA ASHTON: She gave me healthcare. Do you remember a while ago a young man named Tyler James came to talk about his health survey? Well, he finished it. So I e-mailed, asking him for statistics.

>> KAREN GOLDBERG: Does he have a copy.

>> GLENNA ASHTON: I'm asking him for statistics. So I did my part.

[Applause].

>> KAREN GOLDBERG: This team is amazing. So I see that we got the new brochure for HLAA, and I think the statistics are pretty comparable to the old one.

>> GLENNA ASHTON: I was comparing the two and I noticed that they did the same thing. They reduced the amount of information on the page, and there's more white there, but a lot -- almost all the numbers were the same. One or two were changed, but it was pretty similar. They just changed the layout and they had less information.

>> KAREN GOLDBERG: I, for one, am a fan of this one.

>> MARY HODGES: I needed to let everybody know. This is Mary. I'm going to be hanging up now and will be 15 minutes late in the morning. I just forwarded to Megan some data from our research unit here related to disability. So Megan has that to share. And then if there's anything else that we come up with, they're going to forward it over to us from our research group. This is for the data we talked about earlier on for folks 60 and over, hearing, vision, they gave some cognitive, ambulatory stuff here.

>> MEGAN CALLAHAN: I think it just came through, Mary.

>> KAREN GOLDBERG: Okay. Fantastic. Thank you.

>> MARY HODGES: Megan, did you get it yet.

>> MEGAN CALLAHAN: Yes, ma'am. It just came through.

>> MARY HODGES: Okay. Very good. All righty. Thank you all.

>> GINA HALLIBURTON: Thank you. Have a good night, Mary.

>> KAREN GOLDBERG: I'm anticipating a lot of people coming in from the public to make their announcements or comments starting at 5:00, so would we like to take a break from 4:45 to 5:00 and give CART and the interpreters a break? Because there's I think going to be a lot of people for public comments.

>> CINDY SIMON: Really.

>> KAREN GOLDBERG: We're on break.

[Break].

>> KAREN GOLDBERG: DeSantis is the new governor.

>> GINA HALLIBURTON: How does that affect our Council.

>> KAREN GOLDBERG: It doesn't. It's just a new name. I mean, that's the law. If you want the recount, finish it on time!

>> DEBBE HAGNER: Voting time.

>> KAREN GOLDBERG: That's how that is.

>> DEBBE HAGNER: It's not deaf time. Voting time.

>> KAREN GOLDBERG: We apparently are on the record so let us move past political discussion. So whoever wins governor, congratulations. We look forward to a new era. Whoever wins the next senate seat, congratulations, we look forward to that as well. Okay. So at this time, we are open for public comments. Listen, in absence of anyone calling in, I say we call. I think there's a new governor's office that needs to be called and congratulated by the Florida Coordinating Council. No, we're not going to do that? No calls.

>> CINDY SIMON: It's the state. It's 5:00. State workers are off the clock.

>> KAREN GOLDBERG: So we were talking about the best way to utilize our time from 5:00 to 6:00 in absence of a lot of phone calls and public comments. Megan thought maybe it might be a good time just to take a little mental break from doing the biennial report and give us our agency reports and go around the room doing that. Thoughts.

>> GINA HALLIBURTON: Sure!

>> KAREN GOLDBERG: Okay. Let's do that. We're going to go in alphabetical order. We're going to start with the agency, Department of Health. No. Okay. We're going to start with ALDA. Am I missing something? It's before audiology.

>> CHRIS LITTLEWOOD: I don't think I really have anything new to report right now. We had our national convention in Portland, Oregon in October. Next year it's going to be in --

>> DEBBE HAGNER: Overland Park.

>> CHRIS LITTLEWOOD: Overland Park in Kansas City, or near Kansas City, and that will, again, be in October of 2019. We're getting ready to have the joint ALDA Family Center on Deafness Thanksgiving picnic Saturday, and then our social ALDA Christmas party sometime next month, I don't remember the date off the top of my head. December 11th? Debbe's on the board for that. So she's got the dates better than me. But other than that, not a whole lot going on. Still waiting, although it's not necessarily ALDA related, with St. Petersburg College. Still waiting for final determination for our grant so that we can continue to teach classes for public safety and healthcare in 2019 and as soon as I get an update on that, I will certainly pass it on. One of the things we want to do is make sure that we reach out and get the largest number of people in those classes. Our target audience is generally the service providers being public safety people, healthcare workers, nurses, people that work in

hospitals, things like that. So while I certainly will pass the information on to you, we don't want people to think that the classes are for a consumer because that's unfortunately not our target audience in this particular grant cycle. So but when I have more information on the classes for 2019, I'll pass it on. That's all I have.

>> KAREN GOLDBERG: Thank you.

>> DEBBE HAGNER: You have the election, ALDA National is having their election.

>> CHRIS LITTLEWOOD: When it's completed and I have something to report next year, I'll bring that up, but right now, we don't.

>> KAREN GOLDBERG: Do we have anybody here from Alexander Graham Bell? It's Debbie, but I don't think she --

>> MEGAN CALLAHAN: Debra, no.

>> KAREN GOLDBERG: Okay. Hearing Loss Association of America.

>> DEBBE HAGNER: We have HLAA Gulf Coast is having their Christmas party, HLAA Tampa is having their Christmas party. I'm the president of both of them. Let's see. We're having regular meetings. That's about it.

>> KAREN GOLDBERG: And I'll also report on HLAA. There's been some -- I think I mentioned this in my report in August that there's been some transition. Did that happen before August? I think it did. That the president stepped down. I was the acting vice president. Now I'm the acting president. There were a number of different people who left the board for HLAA Florida, leaving us with just four people. It was, you know, pretty concerning situation. There's another person who has resigned that dropped it down to three. We have another person who has applied to be on the board, who had previously been on the board, and he's very active. That brings us back to four. So it's in a difficult situation right now. I don't think it's in any danger of shutting down completely. What we're doing is we're having a meeting December 15th, and we're inviting six to eight additional people who have been active in HLAA to come back to meet, brainstorm in how we move forward. So we're not quite sure how that will go. I'm really not in a position to take on the leadership fully for HLAA, so we'll be talking about is there alternative leadership for that for the State of Florida. Debbie's going to be coming back to that meeting and hopefully will be coming back on to the board, given her many years of being active in HLAA. So that's where we are with that.

I'm trying to think of what else. I think I reported in August that I went to the HLAA National Convention. I was recipient of the Joan Andrews Scholarship that helped to fiscal year set some of the costs. It was an excellent -- offset some of the costs. It was an excellent experience. It was in Minneapolis. Loved it. Learned a lot about HLAA.

The next HLAA meeting is in Rochester at the Rochester -- well, it's in Rochester, New York, but it's near NTID, so people who go to that.

>> DEBBE HAGNER: It's downtown Rochester.

>> KAREN GOLDBERG: So it's not at all close to NTID? They're in the same city, aren't they.

>> DEBBE HAGNER: I just understand it's downtown Rochester.

>> KAREN GOLDBERG: So it's downtown Rochester, but Rochester is a very deaf-friendly town, so it's going to be very exciting to be there. And I also wanted to let everybody know that I'm part of AMPHL, Association for Medical Professionals with Hearing Loss. Oh, yeah. There it is. And they're having a meeting June 1st to June 5th next year in association with ADARA, which people are familiar with, right? I forgot what all the different letters mean. Association of -- you'll have to figure out what ADARA is. But anyway, it's pretty much where the mental health and voc rehab meetings happen are at the ADARA conferences and this year they're joining for the first time with AMPHL. I thought that was kind of exciting. Okay. Audiology?

>> CINDY SIMON: The biggest thing out there now is the controversy about embrace or not to embrace over-the-counter product, and the other thing is they just did an entire group of meetings on educating on the effects of diabetes and hearing loss and other problems. So we're hoping that will make people more aware of how many chronic illnesses can create hearing problems and try to help these individuals before it progresses.

>> KAREN GOLDBERG: Thank you. Anything with AAA.

>> CINDY SIMON: AAA hasn't been very exciting. The biggest thing with AAA is going back and forth over this OTC stuff. That's what all the e-mails are on. It's ridiculous.

>> KAREN GOLDBERG: What about ASHA.

>> CINDY SIMON: ASHA is meeting now and they primarily stick to pediatrics now because they lost a lot of the adult population.

>> KAREN GOLDBERG: Got it. Okay. Fair enough. All right. Florida Association of the Deaf.

>> GLENNA ASHTON: FAD had a board meeting last week Saturday in an area near The Villages. A small turnout. They tried a new way of having a meeting where they would have the board meeting in the morning and then town hall meeting in the afternoon, and they get more people to come in the afternoon because they host it at a restaurant or a bar, or some fun place where the people would come, and the concerns they share is pretty much the same thing, VRI, interpreters, jobs, so forth. The 2019 conference will be in South Florida, and of course I'm on the conference committee, and probably in the fall 2019, the conference. FAD is trying to reorganize because one of the issues they have that the board representative was based on Deaf Club. We used to have 11, 12 deaf clubs. We're down to two. So they're trying to figure out how can we have a different way of representing the state, maybe the region, same like FRID does, region or something, some kind of combination. So they're going through, and

they're going to host a retreat in January to look over all the things and see what to do for the future, because they need to make change because the technology and the changing deaf scene, the deaf clubbing, more technology, and the change in population, all of that, so we're figuring out how best to represent that for the future.

>> DEBBE HAGNER: FAD is also planning on and seeing a way to collaborate with the other organizations. So that's in the works, how we can collaborate.

>> KAREN GOLDBERG: Excellent. Excellent. Great reports. FRID.

>> GINA HALLIBURTON: May I make a comment? Is it appropriate to make a comment on what she said about her report, the audiologists before I go into mine.

>> KAREN GOLDBERG: Well, you have me very nervous right now, so --

>> GINA HALLIBURTON: No. I just want to tell for public record at the moment of transparency, when we were there together before -- did you get all that -- when we were together before, Cindy made a comment about the relationship between untreated hearing loss and dementia, and then I totally disrespected her counsel and went and bought over-the-counter hearing aids. Didn't work! Okay. So I'm an advocate for doing the things the right way now. I paid a nice little nickel for them because they said that it would not hurt, you know, blah, blah, blah, and look at my chairperson's face. Look at the camera. And so anyway, I just want to let everybody know that everybody here is representing their function, and we should kind of like follow what they say.

>> CINDY SIMON: Can I piggyback on that? The actual name of the bill is affordable hearing, and that's why they went that way. The problem is if you -- you're only allowed to go mild to moderate sloping. So if you have more than that and you're not educated, you're going to say I'm glad I didn't spend the money on these things because it really won't work. I'm not saying that's good or bad. I'm just saying that is what is. But you're not going to get over the counter for a severe loss. And the reason for that is you can overpower them and create further hearing loss in a mild hearing loss individual without regulation of it.

>> KAREN GOLDBERG: Thank you.

>> GINA HALLIBURTON: And now back to our program. For the Florida Registry for Interpreters for the Deaf they probably as you know have a change in leadership. Adam is now the president. Nicole is the second vice, so they're in the process of getting a new direction. However, the one direction that has not changed is still looking at getting licensure in the State of Florida, which does not exist right now for interpreters. They're still working on that. The North region. The South region, you interpreters who are here, they're looking for a person to represent the South. They don't have that yet. The North region is looking to have mentorship because they have found that when interpreters work with a seasoned interpreter, it helps them improve their skills quite a bit, so they're looking at Kentucky and other states for mentorship program for interpreters. And then the last part of that is that like I shared with you earlier, FRID is being -- is representing the Council on this new Engage For Change transition team, which I'm really kind of excited about, because in my experience as a supervisor of deaf -- employees who are deaf, I could never hire more because of the

testing, and that has always been a problem, because they could not pass the test, and there's reasons for that. So I think that we're going to really do some good stuff in terms of helping young people be able to be successful.

>> KAREN GOLDBERG: Thank you very much. And now we want to hear from individual who represents deaf-blind. Darlene.

>> DARLENE LAIBL-CROWE: The Florida Deaf-Blind Association is supposed to meet with the Florida Association of Organizations, or something -- agencies -- when this agency actually represents other non-profit organizations in the state, and they are interested in hearing what they can do to help with the FSSP program. We are currently updating the FSSP database, and as I mentioned earlier, we have been reduced and so we're going to hope and pray that we can get things going, and then in February in February, they're going to be electing a whole new panel or board, so there will be a lot of changes in the Florida Deaf-Blind Association. And I've already received an e-mail from someone who is looking for FSP for Council member. I wonder who that is.

>> KAREN GOLDBERG: That's wonderful. Can you give me a little history on the Florida Deaf-Blind Association? What's the history of that organization.

>> DARLENE LAIBL-CROWE: What is it what.

>> KAREN GOLDBERG: What's the history of that organization.

>> DARLENE LAIBL-CROWE: It was established in 2004 by, for and of deaf-blind individuals at the conference center in Daytona Beach, and it consists -- on the board, a majority are either deaf, hard of hearing, or -- no, I take that back. Most of them are deaf-blind with the exception of the secretary, and we just -- right now, it's very small. It's predominantly deaf cultured, and it's really hard to give any more information other than the background. But they just want to get things started, and it's just going to -- they need to collaborate with other organizations, and hopefully with the FASO, or something, FA -- whatever the name of it is. Hopefully with them we will be able to do something.

>> GLENNA ASHTON: Darlene, what happened with the -- I know there was at least two SSP trainings that were done.

>> DARLENE LAIBL-CROWE: What happened what.

>> GLENNA ASHTON: Two SSP trainings done. What happened to those two groups of people that were training.

>> DARLENE LAIBL-CROWE: The last training we had was October of 2015 at University of North Florida. We haven't had any more training. The SSPs that we have trained in those, I think we did West Palm Beach, Apopka, Tampa, Jacksonville and one more other place, I think it was Daytona, and we had quite a few of them in the system, but they, as of right now, a majority of them have either dropped out, like moved out to other states. Some of them don't have contact information anymore, and so it's just a matter of regrouping. I don't know what else to say. A lot of them had just

dropped out. And you also have to remember, when we do the training, the majority of the trainings that we've done, we've actually done them with interpreting programs, like University of South Florida, St. Petersburg Community College and Hillsborough Bay College, University of North Florida. So their interpreting programs have actually, a lot of their students have completed the SSP program, and so with that in mind, you have to think about it, the students are probably from out of state, and so that's why we've lost quite a few, too.

>> KAREN GOLDBERG: Okay. Thank you very much, Darlene. Glenna, I noticed that you had your hand up before we went to Darlene. Was there something you wanted to share.

>> GLENNA ASHTON: Yeah. When Gina was talking about her OTC experience, and I know that Cindy and people did not think OTC was a great idea, it might actually end up working in your favor, because if it doesn't work, then they realize they really need to go to the audiologist, so they might pull more business to you.

>> CINDY SIMON: However, the danger there -- and this actually happened when song bird -- the danger there, and this actually happened to someone when Song Bird came out. Unknowingly, they bought it and had it shipped through the internet, and when they put it in their ear, they punctured their eardrum because they didn't realize they had so much wax. Nobody had looked. Very often, that's what the hearing loss is, and they pushed it so hard it actually went through the eardrum and then they turned around with a lawsuit, of course, against the company, but that's one of the concerns. There was a case when Sharper Image was selling it, and I had my little son, who was six years old at the time.

>> KAREN GOLDBERG: I'm going to interrupt. I'm not really comfortable with naming names of companies or lawsuits about that. I mean, I don't think that's the appropriate place for that.

>> CINDY SIMON: All right. The point is that there are negative things, that one company was going to sell my son something, and that's -- you want to avoid parents who think they can save money buying something online for their child, not realizing that it may not be the best way to go. So those are the concerns. The rehabilitation for those who don't know or have other issues going on. That's where the concerns are.

>> KAREN GOLDBERG: Right. Yeah. So using an over-the-counter anything is never a substitute for a medical exam, is the bottom line on that part. Okay.

>> GLENNA ASHTON: And one more thing that could be a factor is that some health insurance say oh, yeah, they offer hearing aid coverage, but it's only \$500, and that could push people to OTC.

>> DARLENE LAIBL-CROWE: Some of the insurance, like Humana, they offer 500, but it's only for one year.

>> KAREN GOLDBERG: Okay. Anybody else have any other thoughts? Anything else they wanted to share.

>> GLENNA ASHTON: Just started a week ago last night, and some of you had shown interest in genealogy. Florida is uniquely lucky that we have three -- not one, not two, but three deaf experience genealogists in Florida. Debbe is one that's certified. She's done it for, like her whole life, whatever. And one just moved here from Ohio and done it for many years, and another one just moved here from Canada. She's really New York, but -- so we have three of them and we agreed that we were trying to set up a, what did we call it, Florida Deaf Genealogy conference, where the three of them in one state could offer workshops and offer one-on-one also. So we're working on that and we're hoping maybe -- we have a lot of things to work on, but it's something we're cooking up for right now.

>> KAREN GOLDBERG: Yes, Cindy.

>> CINDY SIMON: This is kind of cool, but Florida International University is now offering a sign language class starting this coming semester on Thursday nights for the first time. So I'm really excited. I'm going to see if I can monitor that class.

>> KAREN GOLDBERG: That's awesome.

>> GLENNA ASHTON: Monitor the class or take the class.

>> CINDY SIMON: Well, it depends if the university is going to charge me or not since I'm adjunct there. But that just means I will attend the classes. But assuming they allow me, I'm trying to figure out who's teaching it. If I know them.

>> KAREN GOLDBERG: That's wonderful to know. And I know that University of North Florida does a lot of classes in interpreter training as well. Anybody on the phone? Anybody in the audience? Behind us? Oh, hi, Chris.

>> CHRIS LITTLEWOOD: I don't like to tap people on the arm because I don't necessarily like it myself. So anyway, I just wanted to mention Valerie Stafford-Mallis e-mailed me saying she realized we were in Sarasota, which is rather close to her home and she was going to be out of town, unfortunately, during this meeting. She said to say hello to everybody, and she's very proud of what we continue to do, and she -- although she's pretty much retired and mostly advocating being involved in a lot of different things that she likes to do and not working so much, she will still lend a hand if we have any questions and she asked me to pass things on to Megan, some things. I'll send Megan some e-mails and information that she gave to me sometime after this meeting. So I just wanted to share that with the group.

>> KAREN GOLDBERG: Thank you.

>> CINDY SIMON: So does that mean we can give her all these statistics assignments to send over to Megan.

>> CHRIS LITTLEWOOD: Valerie would probably do it.

>> CINDY SIMON: I know.

>> KAREN GOLDBERG: I think we already heard from the Department, didn't we?

Unless Mary wanted to share, but she was already signing off.

>> GINA HALLIBURTON: Cecil.

>> KAREN GOLDBERG: We have how many open seats right now, Megan.

>> MEGAN CALLAHAN: Five.

>> KAREN GOLDBERG: Can you list them, in alphabetical order? Reverse.

>> MEGAN CALLAHAN: Hearing aid specialist, CART person, deaf service center, parent of a child who's deaf, and the other Florida Association of the Deaf.

>> KAREN GOLDBERG: Right. So the other one for FAD, you said that there was some applications.

>> GLENNA ASHTON: Yes.

>> KAREN GOLDBERG: So we're waiting on those. So the other seats, the CART seat, hearing aid specialists, those have been empty since I've been here. Yes.

>> GINA HALLIBURTON: This is Gina for Cecil. I wanted to say something, but it's hard doing this via CART as my staff interpreter has left the building.

>> MEGAN CALLAHAN: What we can do is also offer a time, like it is on the agenda tomorrow, for the people who aren't on the phone right now, or can't give an update, that they can do that tomorrow.

>> KAREN GOLDBERG: That sounds good.

>> GINA HALLIBURTON: Cecil, do you have, like, a video phone, like Sorenson, or Face Time for those Apple users.

>> DEBBE HAGNER: Are we allowed to use Face Time, or do I need public -- I thought there was something that has to be security or something.

>> MEGAN CALLAHAN: Yeah. I'm not sure if we could do it that way.

>> KAREN GOLDBERG: I mean, it's time for public comments. I don't think we mind when people show up or how they show up.

>> GINA HALLIBURTON: This is Gina for Cecil. Yes. He has both VP and VRS if he can use it. Because if he -- hold on, Cecil. If he has VP, the interpreters could voice for him.

>> KAREN GOLDBERG: Wheres the VP machine in here.

>> CINDY SIMON: He says he meant VRS.

>> GINA HALLIBURTON: Oh, I meant VRS. Okay.

>> KAREN GOLDBERG: I was just going to say, there is no VRS, is there? Am I missing a Sorenson? I think Face Time might make sense.

>> GINA HALLIBURTON: If he's doing VRS, he has a video phone. He can't do VRS without a video phone.

>> KAREN GOLDBERG: But we can't do it on this side --

>> GLENNA ASHTON: I have Sorenson.

>> KAREN GOLDBERG: You're right. I have it on my phone, too. I was wrong.

>> CINDY SIMON: Samsung now has a face-to-face. I haven't used it, but the new ones do.

>> GINA HALLIBURTON: This is Gina for Cecil, he says I can connect the Council via VRS. It will take me a few minutes to connect.

>> DEBBE HAGNER: We heard a ding, Karen, we heard a noise on the phone.

>> KAREN GOLDBERG: I didn't. I mean, I'm sure there was. Is there a reason there's a ding on the phone.

>> GINA HALLIBURTON: The ding comes from Cecil talking.

>> KAREN GOLDBERG: When he types.

>> MEGAN CALLAHAN: Yeah, I didn't think it was on the phone. It was from the chat.

>> GINA HALLIBURTON: I just turned it off because it was dinging so loud. I just have to watch it. Otherwise, if we're not looking, it will ding.

>> CINDY SIMON: He says that is not from me. Cecil says what you all want.

>> KAREN GOLDBERG: Just wanted to know, Cecil, if there was an update on anything. From the Department of Education that you wanted to share.

>> CINDY SIMON: Cecil says hold on, let me connect via VRS.

>> GLENNA ASHTON: If we're sharing things, okay. FFLA is Florida Foreign Language Association. FASLTA, Florida ASL Teacher Association. We participate in that. I used to be president of that. But anyway, once in a while, an ASL teacher will win teacher of the year award, so this year, the ASL teacher won the teacher of the year award and just now, I just saw that she is going to be sent to the Regional Foreign Language Association because she was picked as the top best presentation, workshop from FFLA. This is nice the ASL is getting recognition.

>> KAREN GOLDBERG: Wonderful. Thank you. I'm wondering if, while we're

waiting on Cecil -- oh, Darlene wanted to add something. Go ahead, Darlene.

>> DARLENE LAIBL-CROWE: I wanted to mention more about you were asking about the Florida Deaf-Blind Association. There is another organization which is the National Federation of the Blind of Florida Deaf-Blind Division and most of them are hard of hearing and blind and they consider themselves deaf-blind. There is a division between the deaf-blind people and a lot of them aren't comfortable being -- the hearing culture against the deaf culture. Plus, there's a lot in the state, they don't recognize themselves as deaf-blind, or dual sensory loss. They're either blind or they're deaf or hard of hearing, and so there's a lot of -- there's a lot of people out there that have vision and hearing loss that impacts their daily lives, but -- I didn't try to eat that, did I? Okay. I'm just teasing. But it's something that for me, as recognizing myself as deaf-blind, it helped me to gain resources, but for a lot of people, especially the elderly, as they grow older, they, you know, don't want to give in. And it's hard. It's hard to adapt to something that you can't see and this and that. So I just wanted to say that there are people, but they're divided. And until they're willing to work together and collaborate, I don't know, get past that uncomfortable feeling. So the deaf-blind is a hard group to work with, and yes, I do a lot with the Florida Deaf-Blind Association and other organizations, and I'm hoping that some of the others will start doing more, and so I have been seriously considering over the next few years, resigning from everything. So that is what I wanted to say. But to let you know that the deaf-blind are out there. It's just a matter of accepting who they are and understanding where they can get the resources, and you were talking about mental health earlier, and there are not a lot of mental health professionals who are able to understand the sensory loss for those who are deaf and deaf-blind, and it's a shame because there's a lot of them that truly could use that support.

>> KAREN GOLDBERG: I agree. Thank you for sharing. I guess, you know, I was going to see if I could get some clarity really on what the difference is from an audiologist perspective on the OTC hearing aids and hearing aids that an audiologist will order. And I know it may be hard to be unbiased, but try to be unbiased.

>> CINDY SIMON: I'm going to try.

>> KAREN GOLDBERG: I'm looking for education.

>> CINDY SIMON: When you go OTC, number one, some of the companies -- and I know one in particular who is just looking to make a buck, and -- because when I e-mailed them, he said, well, government's going to let me do it. The government intended it as an affordable way to help people, because it's going to be less, and you won't have professional fees. From my point of view, I've had people come in to the office where the problem is if there's something that's not right, if they bought it online, they have to send it back for adjustment, wait for it to come back. If it's not right, they have to send it back again. If there is someone local, willing to adjust it, then they might have to travel great distances to get to that person.

If you're in one of the mills that's just trying to sell it, they just want to pop it out. I know one person who used to pop out so many. She was brought from a selling via internet into being the rep for one of the manufacturers just based on her sales without any professional background. You don't know what could happen. And I've been doing

audiology since 1978. So that's a while. In that time, because of the way I test, and I do full diagnostics, I found maybe four acoustic neuromas. They were issues that had been missed. I found someone who had a calcified meningioma just based on the testing. Everybody cannot go and just fix the problem. If you have a cholesteatoma, it's bad enough when professionals miss it who know what they're doing, but then you have other issues. Let me just finish the one thing.

>> GINA HALLIBURTON: I was just going to say Cecil is holding on via VRS.

>> CINDY SIMON: Oh, okay. Go to Cecil.

>> GINA HALLIBURTON: Okay, Cecil. We're ready for you.

>> CECIL BRADLEY: Okay. Hello, everyone. This is Cecil speaking through the relay service. I'm a female interpreter on the line. I just have a few comments to make very simple regarding my agency of vocational rehabilitation, and I don't remember if I had mentioned it in the last meeting, but we are hiring nine staff interpreters with our agency, and they would be through contract, and they would be providing up to 15 staff interpreters that would work through vocational rehabilitation. So we're hiring the last nine right now, within the next couple of weeks, so we should be fully staffed. And we're trying really hard to confirm our clients, make sure their accommodations for the office are met, and we're very excited about that, and that's keeping me very busy, to say the least. But trying to supervise also a total of I believe nine staff, and there are supervisors that are out that will be supervising the contract interpreters. Thank God for that. But that's what I'm doing right now. And also, we're trying a lot of working with the Division of the Blind and keeping contact with them, and trying to maintain partnership with them as well so that we can improve the services to the blind community. And we're very excited, too, about the Helen Keller Center, Deaf-Blind Center. And I know that we'll be in the process of hiring also deaf-blind individuals that will be specialized working with those individuals as job coaches, as employment search individuals, as well as support staff for the deaf-blind. And we're very excited about that. I don't know exactly when that's going to happen. I believe probably the spring, but we're currently looking to recruit people for that role. We're very excited about that because we believe that there are individuals that are in the blind community that need more attention, and need to be more involved in a variety of challenging situations. And we also want to be able to provide the services that will meet their needs and work together on those cases. So we're excited about all that new information.

Also, oh, yes. Also, we're working on hiring signing counselors, those that would have a good background in deaf culture, deaf understanding, and providing services to hire -- in St. Augustine, Florida. So that's where we're looking to communicate with the school for the deaf-blind there because we want to evaluate sign skills and we also have a few counselors that we're looking for to fill positions. We're looking for people that are qualified, and also we're looking to at least hire a counselor that has sign skills, maybe they're hard of hearing, so they have a background in understanding the deaf culture and also at least eight additional supports in the counseling area. We're having a lot of challenge in finding qualified people. That is definitely -- right now, but we're working on that. And also, we are continuing to be extremely busy and looking forward to next year. We have planned -- last summer, we had two local deaf centers, deaf

programs. Well, yeah. They provided programs over the summer, and those two programs helped with kids and helping them to find jobs, as well as other activities over the summer. We would like to continue doing that. We've gotten some reports back, and we're looking to get two more programs involved, and VR will be paying for that service. And we also have to meet federal requirements that focus more on the youth population and helping them to prepare for the workforce. And so we're looking more at schools and working with them, and also moving this program forward so that we can work with the youth that are deaf, hard of hearing or deaf-blind and blind. And we're looking to work as a partnership with the schools and try to make relationships with them and providing these services. Trying to think what other new things we have going on right now, but definitely we have a great team. We're very busy. We're still developing training materials and other items that really these resources and materials would help people provide services in Florida. So do you have any questions on the information that I've just provided.

>> KAREN GOLDBERG: I'm just really impressed with how much is being done. It's very impressive. Yes, Gina.

>> GINA HALLIBURTON: Cecil, is it permissible for you to send that information to Megan to distribute to the Council? That way we can post it in our respective agencies. There may be candidates qualified to serve in those areas.

>> CECIL BRADLEY: That's a good question. I do have some information that's been called -- I'm sorry, I'm trying to think of the exact name. People First, I believe. Florida People First I believe is the name of the program and if you go into the website and you look that up, you would find the information I'm expressing now. There's also a promotion that we're going to be sharing in Sarasota. That was just closed in Miami, but we're looking to advertise now where we can send out some more advertisements for this particular program and just in general for the youth that we would be able to support them further.

>> KAREN GOLDBERG: So Cecil, this is Karen. You're talking about if you go into People First and search my jobs? Or state jobs? What would the purpose of going --

>> CECIL BRADLEY: That's what's on the website, yeah.

>> KAREN GOLDBERG: Okay.

>> CECIL BRADLEY: And what happens is when you look at job titles or VR, you know, vocational rehabilitation counseling, and you look in that particular area, it may not say "Deaf" specifically. It may just say VR consultants. It may say description required, American Sign Language background, experience, population, it may say those terms, but even though there is one open and then one closed, we do plan one for next year. I'm thinking also, if we re-advertise that one, I can send that to Megan and she can put out the formal announcement so that the Council will have that. But right now, I'm not sure if there are any openings at this point. If so, I'll send them to Megan, yes.

Oh, by the way, when you look also at open positions in Pensacola, and also in -- I'm trying to remember where, in Fort Lauderdale, in those two locations, we have not really

finalized information, so I just wanted to let you know there's more coming regarding those two areas. And I'll be happy to share that with Megan once that comes out. She can share it with the Council.

>> KAREN GOLDBERG: Great. Thank you very much. Yes, Glenna.

>> GLENNA ASHTON: Cecil, while you were talking about the jobs, I sent an e-mail to a deaf friend in another state about the opportunity.

>> KAREN GOLDBERG: That's great. Thank you for the update. And I think Cecil, did you want to add anything else.

>> CECIL BRADLEY: Nope. That was all I had. That was all I had at this point. If you have any other questions, that's fine. Otherwise I'll talk to you tomorrow.

>> KAREN GOLDBERG: All right. Thank you so much.

>> CECIL BRADLEY: Okay. You're welcome. I'll keep on the chat line, but I'll let go of the interpreters at this point.

>> KAREN GOLDBERG: Okay. Thank you very much.

>> CECIL BRADLEY: All righty. Bye-bye.

>> KAREN GOLDBERG: Bye. Okay. Cindy, you had been sharing about the differences. Actually, I was kind of interested in the differences in terms of just the technology. And maybe we can -- we only have a couple of minutes before 6:00, so I just didn't -- I know it's a lengthier conversation.

>> CINDY SIMON: So very briefly, technology comes in different levels, different degrees of hearing loss need different things. And what I thought of -- not to get off your topic, but one of those little one-pagers we have might be realistic expectations based on your particular testing. Because someone who has good speech discrimination is going to do much better than others. So when you get into the technology of hearing aids, as you go down in level of technology, you start losing things. You lose the number of bands, which, quite honestly, for a lot of people, I don't think is such a big deal, because the grouping is usually fine unless you have an unusual loss, but it's more they change how they handle noise out in the environment. And that's where the devastation comes in is when you are in a noisy environment. That's one of the things with over the counter, when someone comes in and says, you know, I'm doing really well, much better than I used to be, but the noise is still a little bit much, I know how to -- for those individuals -- how to turn the noise down while concentrating the voice, and rather than go to multiple programs and noise programs, because my belief is if you can, set it and forget it, as Papil says, so what I try to do is make it so it's one fit in all circumstances, with realistic expectations. And one of the things that we do to check that is to go outside in traffic. And no, I don't push them in front of the cars, but I let them listen as traffic goes by, and a noisy cafe, which in South Florida you have an espresso machine going. So that's how you check. Middle technology is probably fine. When you start going lower is when you come into issues.

>> KAREN GOLDBERG: Thank you for that. It's 5 minutes until 6:00. I want to know if we can get a quorum to say we leave early. Yes, Debbe.

>> DEBBE HAGNER: I make a motion that we close the meeting.

>> DARLENE LAIBL-CROWE: I second it.

>> KAREN GOLDBERG: Okay. We adjourned for the evening. Thank you.

[Concludes at 5:55 p.m.]

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