DEPARTMENT OF CHILDREN AND FAMILIES ADVISORY COMMITTEE
FOR THE DEAF OR HARD-OF-HEARING MEETING
CROWNE PLAZA HOTEL AIRPORT
ORLANDO, FLORIDA

APRIL 27, 2011

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PROCEDINGS

(Barbara Page, Christine Giancola and Cindy Simon are appearing by telephone.)

>>RICK KOTTLER: Good morning. Can we get situated? Can everybody see the CART that needs to see it? Okay.
   For the record, we're missing four members -- Bob, Cindy, Christine, and Angela. So we do have a quorum.
>>CINDY SIMON: This is Cindy. I'm on the phone line.
>>RICK KOTTLER: Hi, Cindy. How are you?
>>CINDY SIMON: Okay.
>>RICK KOTTLER: All right. So Cindy's here. Anyone else on the phone?
>>BARBARA PAGE: Hi, this is Barbara Page from Disability Rights Florida, formerly known as the Advocacy Center.
>>RICK KOTTLER: Okay. I will remind everybody, please talk into your microphones and identify yourself so that everything goes through on the phone system. First of all, it's nice to see everybody. It was wonderful driving up 95 and seeing all these trucks full of cars heading normal. We have survived another tourist season. I hope you all got your limit.
   Now, I've got a couple of things that I want to discuss.
   And I know normally a with Robert's Rules of Order -- well, I am getting a little ahead of myself. I think we better do introductions first. My name is Rick Côtler, I am the executive director of deaf and hard-of-hearing services of the Treasure Coast and I'm the chairman of this auspicious little board, committee he. Kim, would you like to start down there?
>>KIM GAUT: My name is Kim Gaut, I'm the executive director of Deaf Service Center in Charlotte county.
>>SHANA WILLIAMS: I'm Dr. Shana Williams, licensed psychologist and director of social services for Center for Hearing and Communication, Fort Lauderdale.
>>LOIS MARONEY: I am Lois Maroney from St. Petersburg, licensed mental health counselor.
>>VALERIE STAFFORD-MALLIS: Valerie Stafford-Mallis. I work for the Department of Health, Florida Coordinating Council for the Deaf and Hard of Hearing.
>>MICHELLE RISKE-MORRIS: Michelle Riske-Morris. I am with Justice Research and Advocacy. I'm the independent consultant.
MARC DUBIN: I am Marc Dubin. I serve as director of advocacy at the Center for Independent Living in South Florida, and I serve as vice chair of the council.

YASMINE GILMORE: Yasmine Gilmore, DCF Human Resources.

MERLIN ROULHAC: Merlin Roulhac, DCF Human Resources.

CAROLYN DUDLEY: Carolyn Dudley, DCF Office of Civil Rights.

DANIELLE PORTER: Danielle Porter, support service provider.

SUSAN HERRING: Susan Herring from Pensacola. I sit on the council as a deafblind consumer. I'm on the committee, and I also serve on the FCCDHH council.

JUDY MARTIN: Judy Martin. I am from Jacksonville and I serve on the council as well. And I represent the Hearing Loss Association of Florida.

GAYL: Gayl Hardeman, CART provider from St. Petersburg, Florida.

RICK KOTTLER: And our two interpreters, could you introduce yourself into the microphone, please?

INTERPRETER: Brenda Prudhom, one of the interpreters.

INTERPRETER: Chris Prudhom, the other interpreter.

RICK KOTTLER: Okay. Now, as I was saying, effectively our terms, mine and Marc's, run out this year.

When I started, agreed to this, I really wanted to get through the first six meetings, and since we've gone through the delays and delays and delays, we're just getting to that point. And I'm going to propose this to the committee. I don't want to come off sounding like I want to be Papa Doc Duvalier, president for life. But I would like the committee to consider extending our time as chairpeople until the conclusion of the August meeting. So in August we would have an election, and then the new chairperson would take over in our first meeting in November.

JUDY MARTIN: Do you need a motion for that?

RICK KOTTLER: Yes.

JUDY MARTIN: I move that we extend the terms of the chair, the president and vice chair, until --

RICK KOTTLER: Through the August meeting.

JUDY MARTIN: -- through the August meeting.

VALERIE STAFFORD-MALLIS: I second that.

RICK KOTTLER: All in favor raise your hand?

[Motion carried.]

I haven't even discussed this with Marc, but -- Marc, you've been Shanghaied.

RICK KOTTLER: All right. Let's talk a little bit about the next meeting, which -- there was a lot of confusion we went through, through the last month, trying to figure this whole thing out. One of the things that Marsha and I both came to the conclusion is that we really would do better actually if this committee was not being trained but was watching an actual training. The proposal is to do this. They would have the training at our next meeting. We would literally be looking over their shoulder you and watching them and critiquing them. The problem is, it's going to be a full day because, unbeknownst to me -- well, I was but I forgot -- Merlin over here decides she has to remind everybody -- we have to have a segment of next meeting open to the public because it's a quarterly meeting. Being that the training is a full day affair, we would have to start at 8:30, we would finish up probably around 4 o'clock in the afternoon, we would go from 4 to 5 being open for public comment.

Of course, if we need to go past 5 for the public comment, we could certainly do that. But as we found out many times with the council, you don't always have a lot of people there, and if you set out to be there from 4 to 6 and nobody shows up, then you have to sit here until 6:00, so I would prefer that we -- since there is no minimum amount of time that we have to be available, if we set it for an hour and we need to extend it, we extend it. If we don't, then we're done at 5.

This will require some homework. We will need a real quick turn around on your
review comments. You would have to write them out, because there’s not going to be time for us to stop them in the middle of training and say, no, this is what you need to do. So we’re going to have to take copious notes, so to speak, and pass those along. Now, why does this all have to be done? Because when does the training plan have to be delivered to OCR?

MICHELLE RISKE-MORRIS: June 28th.

RICK KOTTLER: Okay. So we don’t have time to do it in the June meeting and get comments in, but what we will do is, if we do it in the May meeting, you guys have to let us know when you want to have the comments by. And then at the June meeting it will be discussed and they will talk to us about what’s been incorporated into the actual training program. Okay?

Michelle?

MICHELLE RISKE-MORRIS: I think it would be helpful if we could possibly have comments by the beginning of June, because with JRA working with DCF, we’re under that same time frame, so that DCF then has enough time for their own processing and procedures to finalize that training plan as well as the other documents so that they can get them ready for the approval. All right. Who should we be funneling all this information to?

MERLIN ROULHAC: Marsha Ryan.

RICK KOTTLER: Okay. So we will discuss this in early May. It will be a long day. We will start at 8:30 and the earliest you will be out of here is at 5 but there’s just no other way to do it that I can think of. This is open for discussion. What do you all think?

VALERIE STAFFORD-MALLIS: Rick, so we’re talking about this marathon session in May or June?

RICK KOTTLER: May.

VALERIE STAFFORD-MALLIS: Okay. And if for some reason we are unable to stay past a certain time, who do we notify?

RICK KOTTLER: You can get up and leave any time you want. I think the critical thing is to, for the time that you you are there, to really review what’s going on. Okay? I think we will have plenty of people there, and we will really stress this is a meeting that almost everybody needs to be to if they can. So...

VALERIE STAFFORD-MALLIS: Okay, thanks.

RICK KOTTLER: Marc?

MARC DUBIN: I just wanted to ask if there was any flexibility in resetting the date of the meeting in May. If not, just let me know.

RICK KOTTLER: That was half the problem, was trying to figure out schedules and work, and that’s pretty much cast in stone. Susan?

SUSAN HERRING: Well, this meeting, since it’s going to be all day and your time frame is different, there’s not going to be any room for business other than the public forum at the end of the day. Is that correct?

RICK KOTTLER: Correct.

SUSAN HERRING: I was just wondering, since everybody is going to have to come in the day before, if you might want to have like a short afternoon meeting for business, if you feel like you need it, since everybody is going to have to come in the day before anyway to make that meeting. You might want to consider that if that’s necessary.

RICK KOTTLER: I won’t have a problem with that. I myself won’t be able to be here until the next morning but if Marc is here or anyone else, if you want to have a get-together, I don’t have a problem with that at all. Carolyn? Do you have any issues with that?

CAROLYN DUDLEY: No. No issues.

MERLIN ROULHAC: We will already be here anyway.

RICK KOTTLER: Go ahead, Lois?
LOIS MARONEY: I’m not sure I can come the day before. Also I want to say, I drive over in the morning. I am saying I am not certain I can come the day before. I will have to let you know later about that. I did commit to that day. I know I have that on my calendar. Also I just want to say that I can drive over that morning. Usually I work the night before in my office and see clients.

RICK KOTTLER: Yes, I understand. And we are just going to do the best we can with what we got. Lois, that microphone to your right is yours so you don’t have to keep --

LOIS MARONEY: Sorry about that.

RICK KOTTLER: That’s fine. You have your own. You don’t have to share!

LOIS MARONEY: Sorry.

RICK KOTTLER: Other comments? Shana?

SHANA WILLIAMS: Clarify for me. So this is going to be a public meeting and the public, anybody who attends will be watching the training along with us. That’s who’s being trained?

RICK KOTTLER: All of our meetings are public, so anybody can walk in at any time.

The -- what I am talking about, the end from 4 to 5 is a chance for public comment. Where we let the public say anything that they please. But the rest of the time, no, they can come in and watch, but it’s -- we will be there to watch and critique and the points of contact in this Orlando area are the ones that are being trained so that is part of what we are doing, watching the training, if you see somebody napping you know they are not getting the point. Yes, Marc?

MARC DUBIN: I just wanted to remind us all that if we are going to have the public more involved than they currently are, we actually expect them to physically show up, that if we have printed materials, we need to have announcements that requests for Braille and alternative formats need to be made by what date and we have the process to convert the printed material in time before the meeting for the public to access it.

RICK KOTTLER: Cindy? You need to speak up. We can hardly hear you.

CINDY SIMON: I cannot make it the day before but I have no problem on that day staying through. I have to say we can end by 5 and we can always stay later because that is exactly what happens at the council meetings.

RICK KOTTLER: Yeah, and we don't want to be sitting here with nothing to do and no reason to leave, not being able to leave.

Does the committee wish to have a meeting on the 17th? That's the day before. Shana? Or 19th. You can stay over and have the meeting the day after, on the 19th. Does the committee prefer to do that? Susan?

SUSAN HERRING: If we stay over on the 19th I can't get here early enough to make that early meeting and I would have to stay two nights. You might want to consider that.

VALERIE STAFFORD-MALLIS: I would not be able to participate on the 19th.

RICK KOTTLER: To be honest, I'm not sure what business we need to cover that we would be passing up. I think most everything we can cover today, and we can pick up at our June meeting. I think that would make it a little bit easier on everybody if we could just concentrate it on that one day. If no one has any issues with that, we will just stick with the 18th and go from there. Okay?

All right. So that's what we'll do.

Let's move on to the minutes from the last meeting. You you should have received those via e-mail. Any changes, questions, comments? Kim?

KIM GAUT: I move we accept the minutes from the last meeting.

RICK KOTTLER: May I have a second?

SHANA WILLIAMS: I second.
RICK KOTTLER: Any further discussion? All in favor? Motion carries.

RICK KOTTLER: Okay. Moving right along, as you all notice in your agenda, I screwed up you. I said that we would finish this discussion at 9:30 and we wouldn't start until 10 for the next part. I saw it yesterday and e-mailed it out to everybody, but I don't think it got to people in time. So, Michelle, you've got the floor.

MICHELLE RISKE-MORRIS: Good morning. Next on the agenda is a discussion of the DCF policies and procedures. Part of our role as the independent consultant is to review those policies and procedures. I've also reviewed the comments that were provided by the advisory committee from their review, but I thought it would be beneficial to have an open discussion regarding the policies and procedures in working with myself and the committee.

A couple of things to keep in mind, when I was thinking about our discussion of these policies and procedures. The final policies and procedures do not have to be submitted to OCR until February 28th of 2012. So there are -- or there is, I should say, time in order to fully discuss them, and they don't have to be -- this matter doesn't have to be finished today.

There also will be changes to the policies and procedures because we are still reviewing documents that are produced as a result of the settlement agreement which are discussed in the policies and procedures, and are already being changed so that the policies and procedures again are going to have to go through substantial revisions, probably before that February 28th time frame.

But in looking at them, and our initial review, I do have some issues that I would like to discuss with the committee, because a I think there are more substantive issues that I would like to hear your comments and inputs regarding those. Some of which I noticed on your comments, you also had issues with respect to that. So if it's all right with you, I thought we could just go through some of the concerns that I had, and that also I welcome the committee's input as to any additional concerns or things that they feel strongly that should be incorporated or changed with respect to those policies and procedures.

All right. One of the first -- and again, when I review these, I have pages of line item changes and questions which I have for DCF. I am not going through all of those. Some are more clarification changes. These are more substantive issues that I have been looking through.

The first thing that I was questioning was I know there are definitions that are provided in the settlement agreement, for example, for auxiliary aids and services. However, Part 35 of the Code of Federal Regulations, 35.104 has an updated definition of auxiliary aids. And I was proposing that we switch and use the updated definition that was provided for auxiliary aids and services. This is a recent amendment to Section 35 of the Code of Federal Regulations. And I was wondering what the committee feels if that's appropriate.

MICHELLE RISKE-MORRIS: Yes, I K. Auxiliary aids and services includes qualified interpreters on-site or through video remote interpreting services, note-takers, real-time computer aided transcription services, written materials, exchange of written notes, telephone handset amplifiers, assistive listening devices, assistive listening systems, telephones compatible with hearing aids, closed-captioning decoders, open and closed-captioning including real-time captioning, voice, text, and video-based telephone communications, products and systems, including text telephones, video phones and captioned telephone, or equally effective telecommunication device, video text displays, accessible electronic and information technology, or other effective methods of making orally delivered information available to individuals who are deaf or hard of hearing.

They also have a Section 2: Qualified readers, taped texts, audio recordings,
Braille materials and displays, screen reader software, magnification software, optical readers, secondary auditory programs, large print materials, accessible electronic and information technology, or other effective methods of making visually delivered materials available to individuals who are blind or have low vision.

Acquisition of modification or equipment devices or other similar services and actions.

The this is in 35.104 definitions.

— RICK KOTTLER: I think it is very inclusive. It covers just about everything. My only question would be to be consistent, it says, qualified interpreters, and the policy calls for certified interpreters. You may need to change that verbiage.

— MICHELLE RISKE-MORRIS: Yes, and I have a section that governs that distinction as well.

— VALERIE STAFFORD-MALLIS: I am hearing CART labeled two different ways and I am hearing computer assisted real-time translation and I am hearing Communication Access Real-Time Translation. What is the real name?

— JUDY MARTIN: I think it is generally accepted now to be Communication Access Real-Time Translation. We have been planning to use that all the time. And I am sorry the government chose the other term.

— RICK KOTTLER: Yes, I think -- let me ask Gayl.

— GAYL: It's Communication Access Real-Time Translation to us in the know. I don't think the government has caught up you perhaps.

— RICK KOTTLER: So we should go up with it. That's pretty much the accepted meaning of that acronym, so for consistency purposes let's go with it.

— VALERIE STAFFORD-MALLIS: The reason I'm asking is, I am running into this in federal regulations that are stretching across a whole host of areas, such as emergency planning and I don't know if that lack of consistency is important or not.

— RICK KOTTLER: Marc?

— MARC DUBIN: When I have conversations with providers, and I say communication access real-time, a deer in the headlights look glazes over their eyes and I have no idea what I am talking about. But when I say computer assisted real-time, oh, I get it, it's a stenographer. And I explain the difference between a stenographer and CART. I would like to suggest that we say, parenthetically, a/k/a, also known as, computer assisted real-time, so that we don't end up trying to educate the general public and providers about the fact that there are computers involved, that it's assisted real-time captioning, and then have them go, that's another term? It's like the debate between TTY and TDD as far as I'm concerned. So I would just like to see a parenthetical, a/k/a computer assisted real-time, so the people can begin to move towards what the federal government might be moving towards as well, but with what the industry is already using. That's my recommendation.

— RICK KOTTLER: Anyone else? Shana?

— SHANA WILLIAMS: I agree that it's very inclusive. But you the exchange of written notes is not one that we have in our glossary of terms, and that one always causes a concern for me that that might become a standard and we want to discourage that so I have a concern with that verbiage.

— MARC DUBIN: I don't recall if it read included but not limited to. Did it say that? Includes but not limited to?

— MICHELLE RISKE-MORRIS: It doesn't say that but it has a Section 4 that says, "Or similar services and actions."

— MARC DUBIN: I would like to say that it includes but it's not limited to. There are going to be simple communications in which notetaking or passing notes is quote
proper, is lawful, is appropriate, and I know from the advocacy that we have all done
that businesses prefer that to spending money on interpreters and CART. So they will
be pushing towards, well, notes is fine.
I would like to have some language like includes but is not limited to, so that we
can say, not in this circumstance, notes are inappropriate. But I don't think we should
take out the obligation to share notes back and forth when it is lawful and appropriate.

>> LOIS MARONEY: When you think of the culturally Deaf, then the writing of the
notes, it does make us have some alarm. But we must also remember that there's also
late-deafened people, and written notes back and forth might be okay in some
situations. So I think it's good to be included.

>> MARC DUBIN: I respectfully want to suggest that CART would be more
appropriate in communications that are complex and lengthy and that CART has a
price tag and writing notes back and forth does not and businesses are still going to try
to push late-deafened people to write notes back and forth in a complex, lengthy
communication, they have legal entitlement to CART and we should do everything we
can to provide support for them demanding CART and not notes.

>> RICK KOTTLER: Before we go any further, let's remember what we're doing
here. We're working on policies and procedures for DCF, not necessarily going out to
the general public. So this is -- we're directing their people is what we're trying to do.
Michelle?

>> MICHICHELLE RISKE-MORRIS: I just wanted to add too, one thing to keep in mind,
to second what Rick is saying, these are policies and procedures for staff. One thing
to keep in mind is that when an individual comes in to DCF and is requesting services,
they have the ability to request what services they want to use and what they prefer,
and that's why we have the communication template assessment. It is based on client
preference.

And another thing to keep in mind is that in some emergency situations, the
settlement agreement does talk about prior to the ability to have a qualified, certified
interpreter present by that 2-0 window, for example, [CHECK] you may have to rely on
appropriate other forms of communication before the interpreting services can be
obtained.

>> VALERIE STAFFORD-MALLIS: Also remember some discussion about
aid-essential services versus non-aid-essential services, and I would present to the
group there is a different standard for aid-essential services as opposed to auxiliary
aid-essential services than there is for non-aid essential.

>> MARC DUBIN: I guess I just want to point out that yes, this is for DCF, but it is
also for all of DCF's partners, and over the last three or four months, having talked with
a lot of DCF's partners, they still don't have this available. They still don't have it with
them quite yet and they still do businesses traditionally do which is just try to pass
notes back and forth and say that they don't have interpreters, they don't have CART,
they don't know how to do it, they don't know about video remote interpreting. I
understand this is a process, an educational process, for all of DCF's partners. But
any documentation we create, I want to urge us to have DCF provide the individual
seeking the service with as much written justification to argue that the service provider
is obligated to provide the services that are appropriate. And anything that weakens
that cuts against the person seeking the services. So I just want to urge us to be both
as clear as we can that this is simply a list of options, but it's not limited. There are
other options, and it will be developed over years, additional options. But having both
advocate beside this and a enforced about this, I just want to say my experience
compels me to say that there's always going to be resistance, not from DCF, but from
the DCF partners, to having to pay money to provide communication to people who are
seeking services. It's certainly happening in the Florida Keys. I went and spoke with
the director of veterans program, and he has no clue about any of this. Okay. It's a
process. But I want to be able to point to an agreement that he has with DCF to
provide these services that says notetaking is not the only option, and he's going to have to assess that.

>>RICK KOTTLEL: Shana?

>>SHANA WILLIAMS: That being said, I think there's a reason that we left it out of auxiliary aids, the exchange of written notes. We left it out initially in our glossary. There's procedural language in the policies and procedures about when you can use written notes. That's established. But as far as our glossary of terms, I believe that is going to encourage note-passing, and I don't want to do that.

>>MICHELLE RISKE-MORRIS: I'm okay with taking it out. The reason why I suggested upgrading -- redoing the definition to incorporate these new definitions provided in the Code of Federal Regulations is that they were more expanded. They provided more detailed information about types of auxiliary aids and services that are available, that were not included. But I do not have a problem with taking written notes out, as long as the policies and procedures continue to reference, though, that availability, should the need arise. Or if the client requests it. Again, if the client requests that is how they want to communicate, DCF will then have to honor that.

>>RICK KOTTLEL: So basically are we in agreement to remove that, but at the same time, we want to include some language, as Marc says, that basically says this is not an exhaustive list, that there are other things that can be provided? Basically it's what you are looking for. Okay? Okay. What's next on your list?

>>MICHELLE RISKE-MORRIS: The next one is probably going to take us the majority of our discussion. When I reviewed the policies and procedures and I reviewed the settlement agreement, I would like to see a clearer distinction in the policies and procedures between what is meant by qualified interpreters and what is meant by certified interpreter. I know they are defined in the settlement agreement, but when I reviewed the policies and procedures first time reviewing it and trying to get an understanding, I still had questions regarding when the agencies will provide a certified interpreter, when they will provide a qualified interpreter.

When I read the settlement agreement, it seems to me that certified interpreters are provided when you you contract with an agency to provide interpreters. They have to be certified.

However, DCF does have the ability to provide qualified interpreters who will be DCF staff, as long as they have been reviewed by an independent agency and have been not certified by deemed qualified by that agency. But when I reviewed the policies and procedures, I didn't quite get a feel for that manifesting itself in the policies and procedures, so that anybody reviewing these policies, including staff, will understand when they provide certified, when they provide qualified, what's the process for having a qualified interpreter. That should be incorporated, I think more so in the policies and a clear understanding of that. And I didn't know if the committee had confusion when they read that or if this is just something I need to keep rereading to get a better feel for it.

>>RICK KOTTLEL: I'm trying to think back. I know we had an exhaustive discussion about this. Help me out, somebody.

I don't know that we determined -- I think that when we discussed this that we had decided that possibly the policies and procedures wasn't the place to put in what that procedure is for the person to go through to be a qualified interpreter/DCF employee. But that doesn't mean it doesn't need to be in there. Kim?

>>KIM GAUT: I'm a little confused about that myself, because we're starting at the certified level. That just means they have national certification. It doesn't mean they are qualified for every assignment. They need to be certified and qualified. So how do we show that?

>>MICHELLE RISKE-MORRIS: And also I think there needs to be something in there so that unless it's in their auxiliary plan and the policies and procedures state that if they have their local auxiliary plan that it has to be better defined in there so staff
know when, or if it is a contract provider, they say, oh, we have a qualified interpreter --
they understand what DCF means by having that qualified interpreter or when they
know that they need to have certified interpreters.

>> RICK KOTTLE: Here's where the confusion is coming from I think. Certified
interpreters are basically required contractually. Qualified interpreters refers to the
employees who have passed whatever they need to do to prove that they can, in fact,
interpret. Then we are looking at another section which is qualified/certified. So I think
that is where the confusion is coming from. That is what you are basically saying, not
everybody that is certified is qualified. But that "qualifies" is a different "qualifies."
Carol oh Lynn?

>> CAROLYN DUDLEY: I was about to say the same thing, that the provider
agencies are required to use certified interpreters. For our agency, if there is no
qualified employee, we are required to use certified interpreters. Even if there's a
qualified individual, they can only do limited work as a qualified individual. The certified
interpreter is the one that we are promoting within the agency, both our agencies and
the contract agencies as well.

>> RICK KOTTLE: Marc?

>> MARC DUBIN: One way that, if I might make a suggestion to clarify it, instead of
using the term "qualified" exclusively, use "DCF qualified." The reason I want to make
that distinction is because the ADA does not use the term certified nor does it require
certified. It uses the term qualified. And qualified is defined within the regulations. So
that is an ADA qualified.

DCF's level of qualified is a different level. It's maybe a totally different definition.
And maybe that's what we need to be clarifying throughout, that you've got -- because
your point is very well taken. Someone might be nationally certified, have a medical
situation where they are medically certified and expected to work in a hospital. And
then there's a legal situation that comes up and they are certified, but they are not
qualified. And that's because the ADA-qualified requires them to have a specialized
vocabulary of law, which they won't have.

They are throwing in the -- then we're throwing in the same term, qualified, when
we are talking about DCF qualified.

The way I would suggest we mention it is use the term ADA qualified and give
the definition that the regulations have. Use the term DCF qualified, and whatever
definition we have for that, and then certified, and give the definition of what certified
means.

That may clarify it for folks. I think using just the term qualified is admittedly
confusing.

>> RICK KOTTLE: Actually I think since we are sitting here confused, the policy's
got to be confusing. And it really needs to be worked out.

Specifically to cover issues like what you are talking about, Kim. I mean the staff
is going to look and say, well, this person is certified. They've got their RID card, their
NAD card, we are good to go. They don't know to look beyond that. And that probably
needs to be spelled out a little bit in that.

>> MICHELLE RISKE-MORRIS: And I think the process for determining DCF
qualified interpreter does need to be in the policy, for the simple fact that five years
from now, ten years from now, people maybe don't think as much about the settlement
agreement, and then they lose the understanding of how we established a DCF
qualified interpreter. So that remains that there is a process to ensure that any staff at
DCF that is engaging in that function, they do meet those qualifications.

>> RICK KOTTLE: Has there been any thought as to how or what is going to be
involved to determine these people being qualified?

>> MERLIN ROULHAC: I am working with Fred to get employees that have
volunteered and come forward that currently have some Sign Language skills, to have
them screened, to go through the written and the performance screening. So yes, we
are working on that.

>> RICK KOTTLER: So they are going to go through the FRID, like the QA test?

>> MERLIN ROULHAC: Yes, those, and once we get to that, we will know -- that will tell us what level they will be able to assist customers and companions and as Carolyn said, those will be set aside to actually function in that role for the department, and then it will be communicated statewide that if you don't have this qualification, then you will be limited to the rudimentary skills and certified interpreters will be coming in to actually serve this person.

>> RICK KOTTLER: So basically what we are saying is that it's there. As long as it's specific that it's going to be the FRID qualifications through QA, that's what the staff's going to do, what the staff will meet.

>> SHANA WILLIAMS: Oh, boy. Okay. I think that there is also a level of certified interpreters ethical standards where they themselves by being certified either accept the position that they are qualified for or they deny that role, that particular job, because they are not qualified for it. So at some level, we have to count on a certification as guiding their ethical behavior to take a job or not. Just like our licenses do. But I do like the verbiage of having them DCF qualified and including that so that it becomes clear.

>> RICK KOTTLER: I wish we could do that, but I think for every nine interpreters out there who would do that there is a 10th one that will take anything that comes down the pike.

>> SHANA WILLIAMS: I am sure you are correct. However, then we really need to be very simple in the way we are explaining this. Because this can get very grandfatherly and bossy in telling people what their qualifications are. So I am a little concerned about it.

>> KIM GAUT: At the most basic level, as it stands right now, a qualified interpreter is a DCF employee, a staff interpreter. Right? And a certified interpreter is an independent contractor that comes in. Right?

>> MERLIN ROULHAC: (Nodding head.)

>> KIM GAUT: So in the policies and procedures can we not then -- you know, this is what qualifies a DCF staff member to be an interpreter and independent contractor can be -- I mean, we are talking about an employee and an independent contractor. Those are the two differences right now.

>> MERLIN ROULHAC: That's right.

>> RICK KOTTLER: Right.

>> KIM GAUT: And it's up to the individual service providers to get a contract with the local interpreting agency that they will be sending qualified certified interpreters for the assignment.

>> MARC DUBIN: Well, several thoughts on this. First, for rural communities, there will be, I suspect, an inclination to use a qualified in-house staff person rather than to pay for video remote interpreting. So part of the pressure, both inside and outside of the agency, is going to be to try to set examples of circumstances in which a qualified, in-house DCF employee would be correctly the one to use and circumstance in which it would be inappropriate to use that person. Just as the ADA talks about circumstances with respect to what's a qualified interpreter, just like the example earlier where you could have a certified medical person not being qualified for a legal situation, so, too, a DCF-qualified employee may be very good at certain types of situations and a inappropriate for other situations. So I want us to perhaps think about giving some examples both in training and in the materials that would assist the decision-maker about which one to use, knowing that the inclination might be not to spend money.

The other issue I want to ask you to think about is confidentiality. Because as I think about it, I'm hearing that certified interpreter does have certain legal obligations pursuant to being certified about confidential communications. And I know that rape treatment centers and domestic violence programs are going to be very concerned.
about that and justifiably so. If they use an in-house qualified DCF employee who for that circumstance may lawfully meet the requirements of the settlement agreement, that communication may fall outside of the protections of confidentiality, and a defense attorney could subpoena that employee and say what was said. I worry about that and I would like us to make sure that we address that concern in the policy development.

>>RICK KOTTLER: I'm thinking we've had this discussion before, but I don't remember what the outcome was, but I think it's a good point. That's an extremely good point. Any other comments? Lois?

>>LOIS MARONEY: My thoughts are that a DCF employee would be signing a confidentiality agreement. I know that whenever I have worked with agencies, I have confidentiality agreements and I am not permitted to talk to other people about a client. So I would think that something like that would be covered; or if not, we could specifically be covered in EHS [CHECK] so DCF would take care of the qualified interpreter.

>>MARC DUBIN: DCF might want to talk to its general counsel's office and have an assessment done of both privileged and confidentiality. It's different to say you have a privileged communication. Lest say that there is a privilege between a counselor and a victim. Is that privilege breached by having a third party in the room? Yes, more likely than not. Depends on who the third party is. But if for example a parent is there, there may be some issues whether that communication privilege is breached.

So I worry that despite the fact that you have a confidentiality agreement in place between the victim and the DCF employee, I don't know what the repercussions would be of having a non-certified interpreter involved in that.

We have the same issues I might point out, with TTY communications, where there's a printout. I have had situations where defense counsel have sought to have the Justice Department turn over TTY tapes, the written tapes. We fought that. But understand you, defense counsel in rape cases and domestic violence cases are going to be very, very anxious to get whatever they can that they are entitled to. And we have to be very careful about that.

One of the arguments one can more successfully make is with a certified interpreter, there's a history of courts and their protections of that. We are entering a new area here, calling a DCF employee who knows some Sign Language the effective certified interpreter under the law. It's going to be a challenge to get this right, and I think -- I just want to -- I don't know what the right answer is, but I do want to bring to our attention that as we develop policy, it has these implications about privilege and confidentiality.

>>CAROLYN DUDLEY: Our employees are confidential employees. They sign that agreement upon employment, so they are aware of the confidentiality of information that they can and cannot divulge because as you well know we have those who are working with kids, the elderly, those with disability. So that is a part of our regular employment package.

>>RICK KOTTLER: Shana?

>>SHANA WILLIAMS: So even that, certified interpreters are protected from being subpoenaed and having to testify what was said within that room. DCF employees would not be. I think that is what Marc is saying.

>>MARC DUBIN: Yes. It's the difference between essentially a privilege and confidentiality. I am worried about the lack of privilege, legal-protected privilege in communications with an employee who is not a certified interpreter.

>>RICK KOTTLER: Lois?

>>LOIS MARONEY: Yes. Is it possible we can get interpreters opinion on this? We don't really have an interpreter do we right now sitting at the table? So maybe we could get their input and we do have time for when the final policy and procedures.
RICK KOTTLER: I would suggest maybe Carolyn talking to legal counsel and run this by them and say what's the issue? They may say, well, you simply cannot have a person from within DCF doing this, in this type of situation. And then that could be put into the policies; where these are the types of things where it’s forbidden. Valerie?

VALERIE STAFFORD-MALLIS: I just wanted to advise Carolyn and the rest of the committee that the president of the Florida Registry of Interpreters for the Deaf, Terry Chisler wants very much to participate in this discussion.

RICK KOTTLER: Okay. Let me take a little sidebar here and explain that. We need Angela to resign. She needs to resign in writing, and then the committee can move forward to replace her position. But as of yet, she’s not done that. So nothing can be done until she does. I will send her an e-mail. I will try to remember to do it tomorrow when I get back to the office, but that’s what needs to happen procedurally.

VALERIE STAFFORD-MALLIS: Okay thanks, Rick. So is that something that DCF staff can assist with? Or is that something that only the chair can do?

RICK KOTTLER: I will send Angela an e-mail saying we need you to do this so that we can move forward, and that’s all we can do procedurally at this point.

VALERIE STAFFORD-MALLIS: Thank you you. Because it’s coming up again that this is the critical piece of input that is not present to inform the discussion.

RICK KOTTLER: Right. Marc?

MARC DUBIN: Given the time frame here and the concerns, is it possible to have the FRID person come in as a guest and to answer questions and give guidance without being a member of the advisory committee?

RICK KOTTLER: Sure.

MARC DUBIN: I would recommend if we can do that, that we do that.

RICK KOTTLER: The only problem is, can we pay her mileage? Or not? I don't know.

CAROLYN DUDLEY: The project manager will have the answer to that question.

MERLIN ROULHAC: Whatever expenses are deemed necessary to carry out the duties of this committee, of course DCF will come forward with that. But after the chair contacts Angela and secures that, hopefully gets the resignation, then after we submit her name, then we can get that on to HHS and get that approval in, hopefully get that moved along. But certainly that is an option.

RICK KOTTLER: Lois?

LOIS MARONEY: Rick, did we have a CART provider on the committee? And if not, I’d like to also have a CART person come here and help us with the policy and procedures, because I was just thinking that when we do have CART, when DCF does have a CART person, and they have a transcript of what was being said in a meeting, I this think we need some policies and procedures on who owns that transcript. Is it to be immediately deleted? Things like that. So we might like some input from a CART provider on things that we are just not thinking about.

RICK KOTTLER: I don't know that we have the ability to expand the size of the committee. We can certainly invite someone to attend the next meeting that we are going to discuss these type of issues. And invite them to sit in and I don't see any problem that we couldn’t accept their comment. You know, if they have comments to make at the table. Normally we don't accept comments from the general public but if we invite them to sit down and review this, then we can certainly entertain any comments they have. But as far as putting them on the committee, we don't know that we have that ability to expand it. But if you can identify somebody, we will invite them. I don't know that the next meeting would be a good meeting, but possibly the June meeting would be a better time for them to come. Okay?

LOIS MARONEY: (Nodding head.)

RICK KOTTLER: Anyone else? Michelle?
MICHELLE RISKE-MORRIS: Okay. This is somewhat on the discussion that was had regarding problems with qualified interpreters, certified interpreters. It kind of leads into one of my next discussion points, which are looking at the policies discussed honoring the preferences for the type of aid or service that the individual requests, especially when it's an aid-essential communication. However, I think that the policies need to incorporate more on what happens when the service is provided but it's not necessarily effective.

I know that prior to me preparing, DCF has exchanged the communications template assessment to have additional fields where they will capture what happens when the auxiliary aid or service that was provided was not found to be effective, what are they doing to remedy that. But I think the policies need to kind of talk about that. And I also notice that the policies talk about time frames for providing an interpreter -- within 24 hours or 2 hours -- and it mimics the requirements of the settlement agreement. However, I don't see anything with providing different types of auxiliary aids or services and time frames for providing those, so that if they are not on-hand and a request is made, such as for CART, what are the time frames for providing the services? And I would ask that they mirror when you provide an interpreter. But I don't see that in the policies and procedures.

RICK KOTTLE: Comment? Kim?

KIM GAUT: If you think it's hard to get an interpreter, try to get a CART provider within 24 hours.

RICK KOTTLE: Any other comments? Lois?

Hold on one second. Cindy, was that you? Did you have a comment?

CINDY SIMON: I was under the impression that whatever the request was, the service was to be provided within two hours.

RICK KOTTLE: I don't think it specifically says that. Kim?

KIM GAUT: Yes, please clarify the two-hour requirement for me. Under what circumstances does that interpreter have to be there within two hours? Are we talking about an emergency circumstance? Or when someone is scheduling an appointment?

CAROLYN DUDLEY: If the customer or client comes in and we are not able -- we don't have an interpreter there for them to use, then we have that two-hour window to try to get that interpreter available.

It is going to be a very similar situation if the CPIs, APIs are out on call. We are going to try to make that 2-hour window to get someone in. So it is going to be in all situations.

KIM GAUT: So that means anybody just walking in off the streets wanting to sit and talk to a social worker, they don't need to schedule an appointment? You need to have an interpreter there within two hours?

CAROLYN DUDLEY: In a non-scheduled appointment, the individual can walk in and if the staff has determined it is an aid-essential situation, then yes, we know we have to have them there within that two-hour period. But also if they just walk in off the street and it is determined it is not an aid-essential situation and we have a qualified DCF employee, they can handle that situation.

RICK KOTTLE: Doesn't the policy allow you to reschedule an appointment in those situations?

CAROLYN DUDLEY: Yes.

MARC DUBIN: In the handout that's planned for auxiliary aids and services, this one here, Page 3-5, I read it differently than what you just told us. So I would like some clarification, please. At Page 3-5, non-scheduled interpreter requests and scheduled interpreter requests addresses the scenarios you just identified for an aid-emergency situation; and I am not sure we have defined what an emergency situation is, but let's assume that we all agree it is an emergency situation: For any emergency situation that is not a scheduled appointment, staff shall make an
interpreter available as soon as possible, but in no case later than two hours from the
time the customer or companion requests an interpreter, whichever is earlier. That is a
2-hour window.

If the situation is not an emergency, staff shall offer to schedule an appointment
and provide an interpreter as convenient to the customer or companion but at the latest
by the next business day. I assume that means by 5 p.m. on the next business day.

Okay. Well, perhaps in rural communities, particularly the Keys, there are no
qualified -- ADA-qualified interpreters anywhere in the Keys. And I have tried to find
them. They don’t exist.

So they are now forced to use either one of two options. Either they take the
money -- you want to interrupt me? Go ahead.

>>LOIS MARONEY: Oh, no, no. I was trying to get recognized before.
Remember, I had my hand up, I was going to say something. So just letting the chair
know, but not to interrupt.

>>MARC DUBIN: Okay. So what we have in the last two weeks in the Keys,
someone was homeless and deaf and he had a series of services. Some services
took up to a week -- not talking about DCF services now. He had one agency take 4
days to find him a video remote interpreter. They had never contracted a video remote
before, so that takes advocacy and time. And another one, South Florida Work Force,
felt it was going to take so much time to get video remote interpreting in place that they
paid a Fort Lauderdale Sign Language Interpreter company 50 cents a mile to drive to
Key West and whatever it is per hour for their service.

I just want to point out that rural communities in South Florida face that reality.
And there is no way they are going to get an interpreter within two hours. It’s just not
going to happen. And unless they have video remote interpreting, which costs $180 an
hour, $3 a minute, they are just not going to do it. So there is going to be a lot of
pressure to pass notes back and forth, which is what we were facing. Everybody said,
we understand we can pass notes. And it took some advocacy to prevent that from
happening. But I just think that it may be unrealistic to have this as your policy. But it
also is your policy. And so it sounds like, if I am reading it correctly, in an emergency
situation, whatever that is, they’ve got two hours to do it. And if it’s not an emergency,
they have one day to do it. And I just think you are not prepared to do that yet.

>>RICK KOTTLER: Hold on. It’s not a matter of being prepared. It’s a matter of
this is what the settlement agreement says. So this is what you have to live with.
What it is going to require is a lot of preparation. And that I think is part of the training
that we are going to see, hopefully we are going to see next month, that that is hit
home. I agree with you a hundred percent, because I am rural too. But it’s basically,
they got to do their homework before the situation happens, not after the fact. So
Michelle? I’m sorry, Lois.

>>LOIS MARONEY: Very good. For the sake of working well together, we want to
remember that the deaf don’t ever get breaks in conversations, so keep that in mind,
that when the interpreters interpret, everything is always delayed, so the deaf person is
going to be raising their hand maybe possibly when the next person talks. The only
way publicly to avoid that if there is a break after one person talks and give that deaf
person a chance to raise their hand.

Also, if you ever notice, no motions are ever made by a deaf person or
seconded. It’s because it is already into the discussion by the time you realize that.

So what I wanted to say is that I like on 3-5 that it says the staff shall make an
interpreter available and no language that they need to be present to arrive at the
office, et cetera, because you do have that remote capability, remote CART as well.
That is what I want to make a comment about before, that there is no CART in a rural
area so we want to be sure that we don’t limit any DCF employees perception that the
person has to be present there. Thank you.
MICHELLE RISKE-MORRIS: I was going to add, I think one area where we may be able to try to improve upon is also in addition to training, the monitoring plan that DCF is currently working on. Part of the monitoring plan will include site visits to all of the agencies as well as the contract providers.

Now, it may not be every agency that DCF has under their wing as well as the contract providers each year, but within a specified period of time, you will visit each of those.

Looking at part of that responsibility is also looking at the local auxiliary plans and services. So this is a key point to put into the auxiliary plans and services in monitoring them, to assure that what type of auxiliary aids and services do you currently have available to you or you know are available and how do you access them, so that they need to have a general idea of how they can access all the various types of services and aids that are being utilized, so that that situation doesn't happen.

And so, we can try to -- that's another piece that we're talking about today, but hopefully we can try to maybe better reinforce that in the monitoring plan and the review of their local auxiliary aids and service plans.

RICK KOTTLER: I think that is appropriate. But I think before that has to happen, they need to know, they need to know the right up front, we've got to prepare for this. You don't want to do, well, it might be in next year, we will have it next year. No, you have to it now. The monitoring plan is maybe to reinforce it. Okay, Marc?

MARC DUBIN: I don't know what is contemplated as to the role of this committee with respect to monitoring. But I, for one, would like to be very involved in knowing how it's working out; what problems are coming up; what kinds of situations we need to address. And I would like to be pro active in that. And I think there are others here who feel the same way.

Part of the frustration that I think service providers have is that particularly in rural communities, that they don't get the demand as often as they might in larger populations. And so they don't know until somebody comes in and says, I need the interpreter, and then they scramble for we don't know what to do.

When I said they're not prepared, I think that's true. But I also agree with Rick, that that's not an explanation for failure. We have to get prepared.

And some of it may be testing, that you just simply call and say, okay, imagine you've got an emergency situation, what are you going to do? How do you serve them?

And until they get tested, until they get tested by somebody really needing it or DCF is saying hypothetically what's the answer right now, I think there's going to be some challenges to many communities to find the answer.

I also want to ask us to consider who pays for this. I know from a lot of conversations around the state with providers that they're not budgeted for this. They don't have $180 an hour to pay for video remote interpreting. They don't have the money to pay $100 an hour to pay for an interpreter or for CART. They just don't have it in their budgets. Now, the argument that too bad, that's their responsibility, is certainly an argument. But let me suggest another argument. It's a Title II responsibility of DCF, and any violation by your partners is a violation by DCF. So you can either cut them off and say, you are not a partner anymore, and who is going to provide the service? Or you can help them out financially and put a budget together to say, draw on this budget for DCF-related Deaf services, which is what I am going to recommend. But I think right now, they're hoping that there's no demand and they are praying if there is, they will find some money to do it. But in the difficult budgetary circumstance that most non-profits are finding where the counties are cutting their budgets, the state is cutting their budgets, and the federal government is cutting their budgets, they are going to be turning to DCF, that 'if you say I have to do it, and you have every right to say it, I want you to say it, they are going to say, how do I pay for it? I think we need to be discussing the answer to that at some point. And my
recommendation is that DCF find the money and create the budget. And I would like to have a discussion about it whenever it is appropriate to do so.

>>RICK KOTTLE: You want to address that?
>>CAROLYN DUDLEY: That is an issue that we will have to take back to Dennise Parker who is our human resource director and she will have to address that issue.
>>MARC DUBIN: And we would like to get involved in the discussion of the I would like to make a motion that we be involved in that discussion. And that DCF report back to us exactly where we are with how will non-profits pay for these service assist I will make a motion to that effect.
>>RICK KOTTLE: You can't make a motion but it is appropriate that we make that as an agenda item at the June meeting to discuss that, see where it stands, what we can possibly do. We will just add that we will make it a separate line item to discuss on the agenda. And I think Marc's got a good pint. When we get into our quarterly meetings, I think part of those meetings, yeah, we'd love to know what is going on with the monitoring and what is happening out there, and have a report at those meetings if possible.
>>MICHELLE RISKE-MORRIS: Yes. Two things. First off, one of the other areas I had to discuss about the policies and procedures is to look at circumstances or situations where either the type of auxiliary aid or service is not present, they don't have it readily available, such as in remote communities, what are they going to do. Not necessarily having a definitive answer in the policies and procedures, but a process in place with time frames incorporated into that, so that if somebody comes in and they request a service, or an auxiliary aid, they cannot locate that, what is the process for ensuring that will be done, when it will be done, and the time frames incorporated. So that is another suggestion I am having. And I think that will also help clarify some of the recent discussion we had had regarding that. Because the policies really talk about this is what we're going to provide, but they don't necessarily have a -- not necessarily an answer, but what is the process, who do you contact, what do you do when you have unanticipated consequences or problems that are occurring such as with the e-mail that came out recently regarding trying to utilize and access services and that was not working. What do we do and how do we resolve that and incorporate time frames for resolving that. That was my -- I wanted to bring that up before I forgot it.

Second thing is, with respect to the monitoring plan, and I will talk about it a little bit later this afternoon, we have set updates for first rounds of monitoring that I will be doing with DCF pursuant to my contract. We will be engaging in I think nine different site visits. There will be site visits with three of the regional areas and they will be two-week site visits. Then we will also be doing site visits with the state hospitals, two of the state hospitals and one of the private hospitals as well.

So we do have a process in place for going out and starting to do site visits which will begin in June. When we do those site visits, I have to prepare a site visit report after each one. What we can do is, once I do that site visit, at the following committee meeting I can present my findings as well as DCF can present their findings from the site visit. But we can also let you know when those site visits are going to occur because we did sit down yesterday and mapped out all you the site visits for all the regions. We don't know the areas within each region; we will still be picking out which contract providers, which DCF services we will be visiting. But at least we now have dates for all the various monitorings that will be done.

>>MARC DUBIN: Is it possible to share the site visit reports in advance of our meetings so we can review them and have comments available on them?
>>MICHELLE RISKE-MORRIS: Yes. Unless the site visit -- I have 30 days from a site visit to prepare a report and if the advisory committee is one week after my site visit it may just be that I will still share the report with you but I may only be able to
have time in the meeting to discuss, you know, what happened during that meeting.

**MARC DUBIN:** Just one other final question. If we have concerns or questions between meetings that we want to share, with whom do we share them?

**MERLIN ROULHAC:** Merlin.

**MARC DUBIN:** Okay. Thank you.

**RICK KOTTLER:** Any other comments in this area? Next?

**MICHELLE RISKE-MORRIS:** I don't know if the committee has talked about examples or distinctions between aid-essential communications and non-aid-essential communications, and I would like to see more in the policies where -- I saw examples of aid-essential communications. I see in the training that they provide examples of aid-essential communications. But I would like to see some examples also of non-aid-essential communications because I think it is important -- and it may not necessarily have to be incorporated in the policies and procedures, but at least for the training and for staff knowledge and understanding, because there are different standards for providing auxiliary aids and services.

**VALERIE STAFFORD-MALLIS:** In our initial rounds of meetings when we were going through these initial drafts, the committee also said that that was a key topic that needed very, very definite clarification. So I don't think any work has been done on that pending your arrival.

**MICHELLE RISKE-MORRIS:** Okay.

**CAROLYN DUDLEY:** With identifying non-aid-essential situations, we will have to get with legal because there was a concern regarding identifying certain situations. And also we will have to get with legal and they can define what we can do and this they can meet with you, Michelle, and you all can work that out.

**MICHELLE RISKE-MORRIS:** Okay.

**CAROLYN DUDLEY:** And also, non-aid-essential situations we will have to do it by program, because everybody doesn't have the same non-aid essential situations so it would have to go into each one of our programs that we currently administer.

**MICHELLE RISKE-MORRIS:** Yeah, and I think that's important. Maybe a it's more manifested in the trainings, because otherwise, I think you are going to have a lot of staff deem everything aid essential, or if they can't provide services, have an explanation to indicate that it's non-aid essential which we don't want to have happen. So we want an understanding amongst staff as to what is the difference and providing some examples I think will help to clarify that. Just having the definition sometimes is not sufficient. You know, people like to have examples so they can work off of that.

**RICK KOTTLER:** Any other comments? I will tell you what. We are at 20 after 10. Why don't we take our break now. 15 minutes. We back and we will start again at 25 to 11.

And then we will go until noon.

**(Recess taken at 10:22 a.m.)** Cindy, are you still there? I guess that answers that question.

Okay.

So we are in recess.

**RICK KOTTLER:**

**RICK KOTTLER:** Anybody have any general comments to make right now while we are waiting?

I know Christine had had asked for a package of all this stuff to be mailed to her. If we could do that for Bob and Cindy also, just put all this stuff in an envelope, I would appreciate it.

Okay. We're going to get started again. Michelle?
MICHELLE RISKE-MORRIS: Okay. I only have a few more areas to discuss regarding policies and procedures. One of the things I wanted to talk about is, and to get input from the committee are, when those situations arise where the individual or client or the companion has signed -- usually this would be with a client -- has signed a waiver, and they do not want an interpreter provided but DCF has the availability to provide an interpreter. The policies speak to a general, if we feel we need to have an interpreter present, we will. I guess I wanted to have a discussion on what are those circumstances that would arise where the person has signed a waiver but it may be a good idea for DCF to have an interpreter present.

RICK KOTTLER: We have had this discussion before.

MICHELLE RISKE-MORRIS: Sorry.

RICK KOTTLER: I think we agree this in principle that it is not in the policies and procedures yet. But I personally very strongly believe that in any aid-essential situation, that an interpreter should be provided, an interpreter should be present.

And sometimes we have some individuals who are deaf that they much prefer that a spouse interpret or a mother or father, something like that, somebody they feel comfortable with. The point we were trying to make when we've had this discussion in the past is that DCF needs to be in CYA mode when that happens, and they need to have someone there that can ensure that the communication is being made. Because even though that person may be more comfortable with somebody else interpreting, it may not be to their best benefit. And something may slip through the cracks. So we discussed that I think -- it's in the comments section -- that we would definitely like to see that in the policies and procedures that there is an interpreter there. Just to make sure you you are covered. Carolon?

CAROLYN DUDLEY: It is in the revised policy.

MICHELLE RISKE-MORRIS: So in any aid essential communication even if an individual has signed a waiver, you are still going to provide a certified interpreter, or a qualified interpreter?

CAROLYN DUDLEY: Yes, someone will be there to assist, for the agency's protection, just in case, we want to be sure.

MICHELLE RISKE-MORRIS: And real quickly, what happens with a contract provider? Does that follow through? Or is that at their discretion?

CAROLYN DUDLEY: The policy applies to both DCF and contract providers.

MICHELLE RISKE-MORRIS: Okay.

VALERIE STAFFORD-MALLIS: I'd also like to see CART provider inserted there, if that's what's needed to ensure effective communication, not just interpreters.

CAROLYN DUDLEY: On the communication assessment list, those choices are there for them to select. CART is on there.

RICK KOTTLER: I'm confused then. Because I'm trying to think of a situation where a deaf individual would say I want to bring my own CART provider? As opposed to one that's provided for you? That's what we are talking about with the interpreters.

VALERIE STAFFORD-MALLIS: I thought we were talking about somebody waiving their right to have an interpreter.

RICK KOTTLER: But when they waive their right to have an interpreter, they would also have to be providing their own interpreter. In other words, they're saying I don't want your interpreter, I want my mother to interpret for me or I want my brother to interpret for me. And what we're saying is, in those situations that require an interpreter, that DCF will have the interpreter there if nothing else, to ensure that the communication is being made.

VALERIE STAFFORD-MALLIS: So this doesn't mean a situation where a person comes in with severe or profound hearing loss who is not able to orally follow the proceedings and because he's unaware of the extent that the hearing loss is interfering with effective communication, doesn't ask for CART, or says I don't need it, I can do fine reading lips or whatever. We are not talking about that. Correct?
RICK KOTTLER: I think we probably need to talk about it, but that's a separate situation.

VALERIE STAFFORD-MALLIS: Okay.

RICK KOTTLER: It needs to be dealt with on a different -- probably the same place but you probably separate from what we're talking about here. Susan?

SUSAN HERRING: Do I understand that if they insist on having their own personal interpreter for whatever reason, DCF as contracting agency is not obligated to pay for their services?

RICK KOTTLER: That's not it at all. If they want to bring their own interpreter, DCF is not obligated to pay for that interpreter. DCF would be obligated to provide an interpreter on their own to view the situation to make sure that the communication is being met.

SUSAN HERRING: Is it clear to the client that is insisting on having their own personal interpreter, or whoever they choose, that they will not -- because we tell them the same thing, we are offering the interpreter at no charge to you. Are they going to understand, is it clear, that it is not up to them, whoever they choose?

RICK KOTTLER: That's a good point.

CAROLYN DUDLEY: On the waiver form that we've revised, there are four choices. The first choice is, I want a free interpreter. I need an interpreter that signs American Sign Language; the one that I think we are discussing says, I do not want a free interpreter or any other communications assistance. If I change my mind, I will tell you if I need assistance for my next visit. Customer or companion waiver of rights does not prevent the department from getting its own interpreter or for providing assistance to facilitate communication and to make sure violation of -- rights are not violated. Final choice is, I choose blank to act as my own interpreter. He or she is over the age of 18. It is not 77 to my interpreter to act as my authorized representative. I also understand that the service agency may hire a qualified or certified interpreter to observe my own interpreter to ensure that communication is effective.

RICK KOTTLER: I still see where she's coming from. It doesn't spell out that you are not going to pay for their interpreter. So that may be something you want to add in there that says, you know, you are doing this at your own expense.

CAROLYN DUDLEY: (Nodding head.)

RICK KOTTLER: Marc?

MARC DUBIN: Do we have a copy, Carolyn, of what you just read from?

CAROLYN DUDLEY: Yes.

MARC DUBIN: Is it in front of us?

CAROLYN DUDLEY: Michelle is reviewing the revised form. You have the initial form. But she and I have talked, and these are forms that they revised so I don't think you have the new revisions.

MARC DUBIN: Could you please let us see it whenever it is available for comment?

CAROLYN DUDLEY: Sure.

MARC DUBIN: But here's a couple of thoughts as I am hearing it rather than reading it. First of all, I believe you said something that included "does not prevent DCF from providing an interpreter." Right? Okay. Are we now talking about not only doesn't prevent it but DCF will be providing its own interpreter? Because that's very different. I would prefer language that says, even if you waive DCF's right to provide an interpreter and bring your own, we will be providing an interpreter at our expense. If you choose to bring an interpreter of your own, you will be having to pay for your own interpreter. But I would like to have it clear in that policy that DCF in all aid-essential circumstances will be providing an ADA-qualified interpreter. Because I fear that we will not know, absent presence of an interpreter, if the person that the client chooses to bring is doing it correctly. And they may believe that they will do it
correctly. But if we don't have someone watching it, I think we are open to question.

So that is my recommendation.

And with respect to the lipreading/CART question, I would just like to suggest that there's also going to probably be some pressure to use lipreading as opposed to CART because it's free, and I would like to have CART in all circumstances where they're seeking to have lipreading. Because it's my understanding -- correct me if I'm wrong -- that lipreading is essentially ineffective, that they only get about 20 percent. So let's not pretend that either DCF or DCF's contractors will successfully engage in effective communication if they engage in lipreading. So I would recommend that DCF make it clear that its policy is that in all circumstances, where somebody is late-deafened, that they will be providing CART, even if it is not requested.

>>RICK KOTTLER: Lois, you had a comment?

>>LOIS MARONEY: Yes. That's an excellent point. I was going to say that as well, because speech-reading just isn't going to be effective all the time. So if it's an essential -- how do you say it? Aid-essential thing, yes, CART should be there.

Another thought that came up is that sometimes I have a lot of deaf clients that will request a specific interpreter at a doctor's office because they understand that interpreter really well. I'm not talking about, you know, a family member, et cetera. But they do have a specific interpreter that they can understand. Certified doesn't always mean that they provide effective communication. So is that a problem? Is there anything spelled out that if they say, well, I would really like so and so, is that okay? Or are you going to say, no, we provide this interpreter? They are certified, so this should be effective.

>>RICK KOTTLER: I have asked the Department of Justice that, and correct me if I'm wrong, but it really boils down to the Golden Rule, and he who has the gold makes the rules, and he who is paying for the interpreter basically is the one who calls that shot. In the past we've always encouraged organizations and people to try to accommodate the deaf individuals that have a preference for interpreters. But I don't know that there's a legal standing that says you have to do that.

>>MARC DUBIN: Have to do what?

>>RICK KOTTLER: Provide an interpreter that the deaf individual says, I want that interpreter.

>>MARC DUBIN: I will try to respond to that. Yes, the person who pays for it gets to choose it; but ultimately, if that choice results in something less than effective communication, they have violated Title II. So it's not as simple as DCF gets to pick who they want. It's also important to understand that the way that person communicates controls, as to whether it's ultimately effective.

As you know, some people use Signed English. Some people use something less than total ASL. And if you have a certified interpreter, it may be above the understanding level of somebody who has home sign. So this is a challenge that is not going to be met simply by hiring the local certified interpreter. And I think the expertise of people in this room on Sign Language is really going to be more helpful than my comments. But I just wrote down, what about low-level sign? What about Signed English? And what about foreign language signing, like Creole, Cuban Spanish, Mexican Spanish, and other foreign language Sign Language? Has DCF really identified people who can fill those needs? I know in South Florida it's pretty common to have that need, and Creole Sign Language is a mystery to me as to how you find someone; we still haven't. And maybe video remote interpreting is the only solution to that, and you find a list from DCF of all of those interpreters who can meet those very specialized needs.

I also want to highlight, Title II is very different from Title III with respect to the obligation about express preference. It is important what the person asks for, unlike in Title III.

In Title II, if the person says, I want this interpreter, while you don't have to give
them that interpreter, you do have to give them their expressed preference for how they communicate. And if that is the only interpreter that can actually engage in effective communication, you want to think twice before turning down that request.

You might also have to still have to have -- and I would recommend you do -- another interpreter to make sure that their choice works. But again, effective communication is an end result. How you get there is what gets a violation for compliance. Does that make sense to folks?

>>RICK KOTTLER: Lois?

>>LOIS MARONEY: I pass. I think Marc had it right. I do think it is very important. I would just hate to see that read no, we will use our interpreter of choice, not yours. Try to find that no -- we are not being stubborn, you will just be amazed how many deaf clients I work with, did you understand the interpreter? They say no. I said why didn’t you say something? They said I felt stupid. And I said who do you want to juice? They say, I will talk to you about that.

Another thing I want you to understand, at the end of these aid-essential meetings, maybe there is some type of form that they will go over, how effective communication was today? I don’t know if we do something like that. All of those important meetings. But how effective was communication today? Thank you.

>>RICK KOTTLER: Michelle?

>>MICHELLE RISKE-MORRIS: Yes. I think that that will be addressed, and I think DCF is working towards that. The communication assessment that was developed, the record that is completed by DCF staff when an auxiliary aid or service is requested, has been modified to include an additional section that talks about whether or not the communication was effective. And if it was not effective, what are they going to do to remedy that situation? -- what are they going to do?

And as I stated earlier in the committee meeting, I have encouraged DCF to talk about time frames for remedying that situation and how they are going to address that in the policies, as well as the customer feedback form that is also being used that will be given to all clients that feel they have -- they have a communication assessment prepared. They also fill out you that form oh to determine whether or not it’s effective.

Finally, in monitoring we would like to include in the monitoring piece discussions with individuals such as focus groups where we go to a certain area and we try to arrange meetings with individuals in that area who can talk about the services that occur and are being provided and just getting your general comments and feedback about how the agencies are doing. So there are different mechanisms built in to try to address those situations where communications are not necessarily effective even though services are being provided.

>>RICK KOTTLER: Just a thought. And I don't know that you are able to express this statewide, but it's been my experience, if you go to an interpreting agency as opposed to individual interpreters, you have a much better, diversified base, and you can go to an agency in Tampa that has contacts over in West Palm Beach and in my area and it really widens your horizons as far as being accessible to people. I know that the tendency is to go sign up you, get contracts with as many interpreters as you can. But if you do it with an agency, then you don't have to worry about that in most cases. If they say they have the qualifications you are looking.

>>CAROLYN DUDLEY: Currently most of our regions do have contracts with agencies, and there may be some individuals, but a lot of them do have the agencies with contracts in place.

>>MARC DUBIN: I want to express some concern about customer feedback, mechanism and the comments mechanism. If you have someone who is prelingually deaf, who reads at a low reading level, is a Sign Language Interpreter provided to help them fill out forms? And isn't that kind of a circular argument? If the interpreter is not effective in the service provided with DCF, how is it going to be any more effective in explaining the customer feedback form? That is the concern that I want you to give
And with respect to interviewing clients about how did DCF do, you anticipate DCF being in the room when they do that? Because if I am dependent on food stamps and they didn't provide effective communication and that's of significant concern of the client, am I really going to say anything truthful in that interview without fearing that my food stamp services are going to be cut off as a result of my reporting? So I want to again raise those questions and ask you to give some consideration to those concerns.

CAROLYN DUDLEY: The interviews will be taking place with the independent consultant. I will be present, but I may not be in the room when she asks some of her questions. But she and I will be doing the monitoring and the interviews during this process.

RICK KOTTLE: Michelle?

MICHELLE RISKE-MORRIS: And one thing to keep in mind. There is going to be a difference between interviews and also focus groups. There will be interviews that will takes place where I can be conducting the interview. But one thing to keep in mind, my position ends in October of next year. After that, DCF has a responsibility to conduct their own monitoring. All of the interviewing I would suggest be done by the 504 coordinators, not individuals who are at that particular facility and they're not permitted to be in the room, so that when the interview takes place, it is with the 504 coordinator, not with DCF service agency staff or contract provider staff.

Secondly, when we do focus groups where we try to bring in -- similar to the advisory committee, you bring in a lot of individuals who are volunteering, they don't have to come, it is up to them if they would like to be present at the meeting. Normally when I conduct focus groups, when I am speaking with individuals regarding discrimination, I've done it before with individuals who are discriminated against in adoptive foster care, I say at the outset, this is all confidential, but one thing to keep in mind, I don't know your name, you don't have to give me your name, sometimes it's better if you don't so you are free to talk the and have an open discussion. So that when they leave the meeting, I don't know who they are, but yet they feel comfortable, without giving me information when I do that focus groups, because you do have to transcribe those focus groups so you can gather that information, and that confidentiality is preserved that way.

When the interviews are done, again, those are also voluntary. The individuals, it's up to them as to whether or not they want to come to us and speak with us. It's not mandatory.

MARC DUBIN: Voluntary and anonymous?

MICHELLE RISKE-MORRIS: Yes, but we know who they are, because when we do interviews, the focus groups are anonymous. It's going to be sent out to individuals who have participated in the services, who come. We are thinking about having those at advocacy groups that are in the area where we are monitoring, not even having them at the DCF or contract facility.

The interviews, they are different. They are going to be coinciding where we go in to monitor the agency. We look at those individuals who have requested services and would like to interview them regarding how the DCF or contract provider did in providing those services. That won't necessarily be anonymous because we know who they are. But we will keep their information confidential. And normally when I have done monitoring and I do interviews as well as focus groups, when I summarize the responses back to the agency, I don't put individual names, and I group them together so that they can't say, oh, wait a second, who did she interview on Wednesday? Because it says notes from Wednesday of this day. I just summarize them together as, I met with five different people. The summary of that information that came out was this. Unless the individual has told me that they felt that they were discriminated, and then I always ask them, would you like to pursue filing a claim, and give them an opportunity. Because they may not know they have that right to do that.
MARC DUBIN: And during those interviews, I'm assuming that you have requested what kind of service they need for communication, and all that is there?

MICHELLE RISKE-MORRIS: Yes.

MARC DUBIN: Could we just address the question I had about DCF providing an interpreter or other service to help them fill out the form, if their reading level is not very good?

CAROLYN DUDLEY: In the last meeting, when we presented this form, it was agreed that we would go back and revise the form. After the revision of the form, we were going to get someone, a linguist from FSU, to make sure that it is on a third-grade level. I think it was a third-grade level we decided. So once we have finalized the form, that will be done.

But currently what we do have, if you need assistance, which is justified by the committee, if you need assistance completing this form, notify staff or contact the Office of Civil Rights at DCF. We have given them our telephone number so that we will be able to assist them and get an interpreter to assist them in completing these forms.

MARC DUBIN: Thank you.

RICK KOTTLER: Next?

MICHELLE RISKE-MORRIS: The last discussion point on the policies and procedures was a question on Chapter 4, Page 4, of the policies. It talks about communication assessment criteria. And I had a question about -- it states in that section. In determining whether the communication is aid-essential, the department or provider staff shall take into account all relevant facts and circumstances, including, without limitation, the following -- the type of auxiliary aid or service requested by a person.

I you had a question of why does the type of aid or service that they want affect whether or not communication is aid-essential?

RICK KOTTLER: Where are we again?


CAROLYN DUDLEY: Which section?

MICHELLE RISKE-MORRIS: 6 (A), Chapter 4. Number CF operating procedure Number 60-10 Chapter 4, and on the bottom I kind of refer to like it says 4-4. 4-8 communication assessment criteria. I'm sorry.

MARC DUBIN: All right, we are all on the same page.

(Laughter.)

MICHELLE RISKE-MORRIS: I'm sorry. So that was my one question as to why does the type of auxiliary aid or service requested influence? And I didn't know.

SHARON PIMLEY-FONG: May I address that? Do you need me to use the microphone?

RICK KOTTLER: Yes.

SHARON PIMLEY-FONG: I will introduce myself. I'm Sharon Pimley-Fong. Am the Suncoast region civil rights officer. I believe, Michelle, that that paragraph should have read "the type of service being requested by the client." I think that that is an issue that auxiliary aids was placed in there inadvertently. One time when we did a global search, we were changing to how we refer to auxiliary aids and services. I believe the global search hit all the word service and inserted auxiliary aids prior. It does not belong there.

That sentence should read without including, without limitations, the following, "The type of service being requested by the person who is deaf or hard of hearing."

MICHELLE RISKE-MORRIS: Thank you. I think that takes care of that.

And that was all I had on the policies and procedures. I didn't know if the committee had any other areas or talking points that they would like to talk about or to let me know, besides I have reviewed the document that was prepared, the comments regarding revisions to DCF operating procedures. I do have that. So I do have some
things that I know the committee had discuss previously.

>>MARC DUBIN: I just wanted to suggest, same page, same paragraph, at 4-4. Would you consider instead of using the term qualified Sign Language Interpreter, ADA-certified? I am sorry, ADA-qualified or DCF-qualified? Because again we had had that discussion about how it can be very confusing, there are two different issues. So it currently reads methods include certified Sign Language Interpreters, qualified Sign Language Interpreters, written messages, and video remote interpretation. Do you think it's appropriate wherever you are talking about the term qualified, to designate whether you mean DCF-qualified, meaning employee, or ADA-qualified, which is far more complex? What are your thoughts on that?

>>JUDY MARTIN: While people are thinking about that, I want to say that sue bunguard is in the chatroom and she requests to make a comment regarding the request for interpreting services. Is she permitted to do that?

>>RICK KOTTLER: No, she isn't.

>>JUDY MARTIN: Okay, I will tell her that.

>>RICK KOTTLER: Now, should she communicate that comment to you and you'd like to make that comment, Judy? That's up to you. Okay? Go ahead, Lois.

>>LOIS MARONEY: I wonder if it's possible that we have something on the Web site that allows people to make comments. There are a lot of times like with the Florida Coordinating Council for deaf and hard of hearing, they do have the ability to make a public comment and then it's brought up at a meeting. Is that something we could do? Because people cannot always be there in person so we might want to do something like that.

>>RICK KOTTLER: That would be appropriate for the quarterly meetings that we are -- that we have a public forum. I don't know if that's doable or not. What would it require? If you would take a look at the Council and what they do. They just have a little flag on there that you click on and it brings up a way that you can type in a question and it's sent automatically, and then it's read into the record when we have the public forum. And if it's a question, it's open for discussion with the panel, the committee, at that time. So you can take a look at it. I think it's a good idea. If nothing else, we should have a mechanism that they should be able to mail in a comment. You know, we could put that up there. Because you have you to advertise when we are going to be open to the public anyway for public comment. And if you can't be there, here's an address that you can send in your comment to.

>>MERLIN ROULHAC: (Nodding head.)

>>VALERIE STAFFORD-MALLIS: Feel free to go on the Council's Web site and you can see where you can click on a public comment card. Once an individual does that, it comes back into the Council, to the Council administrative people. So nobody else except someone who has the administrative code to the Council Web site can pull that public comment card, which they do, and it gets read into the public record at the next meeting.

>>MICHELLE RISKE-MORRIS: Yes, and Susan is our subject-matter expert. She is with us and she can't be at every committee hearing we have so I don't know if there is something that she can call in, but it's difficult for her. She normally relies upon the CART, for access.

>>RICK KOTTLER: Now, in her case, she can --

>>MICHELLE RISKE-MORRIS: That is who was making the comment, that is who was asking.

>>RICK KOTTLER: I'm sorry, I didn't realize that's who it was. Judy? I didn't realize that it was Sue that was on the -- who made the comment. Go ahead then.

>>JUDY MARTIN: All right. I will read her comment.

>>SUE BUNGUARD: "When you can, please state that to make a request for an interpreter, it should be done as early as possible. Make sure that the request contains the name of the person served, the confirmation number, location of service and the
billing party. The billing mailing list is not always the same as the location of service."

>>RICK KOTTLER: I appreciate her comment but she’s preaching to the choir. I think we already know that part. Marc?

>>MARC DUBIN: I wanted to ask two questions. First, on the communication assessment criteria or the department or staff would do this assessment. Is there a record of that assessment? Is there a way to review what they have considered? Could we address that?

>>MICHELLE RISKE-MORRIS: That's the customer or companion communication assessment and auxiliary aid service record that we discussed at the last committee meeting. At each -- each time an auxiliary aid or service is requested, staff are required to fill out this form. And then, one thing that we are also doing is that usually this form is completed at the initial assessment, and if there is is going to be a reassessment. However, we are now also going to add that attached to the initial assessment, every time the client comes in and services are provided, staff will have to document that, because what we don't want to have happen is, the first time they come in for services, the interpreter is provided within that window of time, everything goes great. The second time, it's okay, but maybe a little bit slow. Third or fourth time, all of a sudden, we are having to remind the individual that they need an interpreter and it is taking longer and longer to make sure that that service is provided. So the auxiliary aid service record, this document, will be completed. There will be like additional pages so that every time that person comes into the agency or has a meeting and that service is provided, they are documenting that to ensure that each time it's timely and productive.

>>VALERIE STAFFORD-MALLIS: Michelle, I was looking at the version of that document that you are holding up, that I have in front of me, an it's different. So what you have is is a later, more revised version. Is that correct?

>>MICHELLE RISKE-MORRIS: Yes. JRA went through the documents. Let me go back and talk about it.

We have different phases that he we have to review documents with time frames. I call them phases because there are so many documents. The first phase incorporates the communication assessment and auxiliary aid service record which we discussed at the last committee meeting, the customer feedback form, and also the action plan. We have gone through those, and in addition to the advisory committee's comments and suggestions, DCF has made initial changes to those forms to incorporate comments from both parties, JRA and the advisory committee. DCF has given me those policies back. I am now reviewing them. I have a checklist to make sure the changes have been made. And that will be done by Monday of next week. I am on a short time frame. And then, I think once those are final, then Carolyn will in turn will probably get those out to the committee.

>>CAROLYN DUDLEY: (Nodding head.)

>>MICHELLE RISKE-MORRIS: The next round, just to give you heads up for I call it phase two round of documents will be the self assessment plan and tools that was also discussed at the last advisory committee meeting, the advocacy survey tool that was discussed, and the training plan. Those three documents we're currently reviewing as well, making suggestions and recommendations to change those, and then we will be forwarding those to DCF. They will in turn review them, make the changes, or if not, discuss those, why not having the changes, get them back to you, and we will get those out to the committee. I will let you know, some of them are being -- I am sort of revising them a lot. The self assessment tool, for example, that you reviewed last time had questions -- and this is something that give to the SPOCs or a manager or supervisor at one of the DCF facilities or a contract provider. It's a self evaluation where they look through their own policies, procedures, processes, to determine how they are doing in providing effective and timely services to individuals who request that.

The question format was very much yes, no, comments. And I kind of changed
that to provide more open-ended information gathering so that when you are looking at these facilities, you are evaluating, instead of saying do you have the policies and procedures? Yes. What is your understanding would be a different way to phrase that. So we are looking at that.

>> RICK KOTTLE: Marc?
>> MARC DUBIN: Would it be helpful to DCF for members of the public to share their insights, concerns and experiences with members of the committee independently of a complaint form or independently of talking to a point of contact? Would it be helpful to you if on the Web site or maybe in some other form the committee members could be communicated with directly by members of the public about their experiences so that we can bring them to your attention?

>> RICK KOTTLE: Excuse me. I'm thinking that that's basically what we're doing with telling them that they can write in for public comment. I mean, it's up to the committee. I personally don't want somebody pounding on my door saying, I got a problem with DCF. You know? I got other things to do.

But yes, if there is one that is brought and laid on your door step, of course you want to share it. I don't see any problem with that. Soliciting it? You might be getting into a whole other can of worms. I don't know. Whatever you think. Michelle?

>> MICHELLE RISKE-MORRIS: Just a suggestion, maybe a more appropriate form is when DCF is coming in to do a monitoring visit, I am thinking, because we are still in the process of developing this monitoring plan, that we are coming in and we are going to do like a focus group. We are going to be notifying all the local agencies and advocacy groups that DCF and myself are going to be coming in to do a site visit. We are going to hold a session, a forum, if they want to come and talk about their experiences. That will happen periodically. So that might be -- that may not be as quick, but it is at least an opportunity for individuals to come in and speak with staff or, excuse me, 504 leaders and myself, regarding their experiences.

>> RICK KOTTLE: I understand that, and I understand what Marc's saying also, is there's possibly a hesitancy on the part of some of our clients to -- at least those that have the deaf service centers -- that our clients may not want to talk to DCF directly because they are afraid they will lose their benefits or whatever, and they like to go through you a mediator. And that's very typical. At least in my experience. But do we want to be that person that they come to talk to?

Other than the forum that we open up, we have to do that twice a year, every six months?

>> MERLIN ROULHAC: Quarterly.
>> RICK KOTTLE: Quarterly we have to do it.
>> MERLIN ROULHAC: Yes.
>> RICK KOTTLE: I think if we make that public that this is their time, as I said personally, I don't want to be the person they call. I would much rather be here as a committee and have them present it to us as a committee. Shana?

>> SHANA WILLIAMS: I agree. I think we have case managers that can assist people to access the Web site and put their comment in if the link is provided.

>> RICK KOTTLE: Any other comments?
>> MARC DUBIN: May I? I have a suggestion.

>> RICK KOTTLE: Sure.
>> MARC DUBIN: I understand that position, and I guess what I'd like us to consider is whether there is any way they would engage in better outreach, now that we are moving forward with this, to educate consumers that there is an ongoing improvement of how services are being provided by DCF. I don't get the sense yet that this is well known or that -- and that's in part because we are at a stage where we are really just beginning, I think, to move forward. But I would like to ask whether we
anticipate any kind of an outreach effort. I am not suggesting they call us personally either, but I do think it would be helpful for consumers to have a place not just on the Internet, but at CILs, deaf service centers, and places that they commonly go to, to both learn about what their rights are, and educate us about how they are experiencing the improved or not improved services.

And that's where I'm coming from. I am feeling a little bit elitist that we are coming to these meetings and the deaf community is not participating. I would like to have them engage more in a way that is meaningful to DCF so we can continue to improve services. That's my comment.

MARC DUBIN: I others think others on the committee are more qualified to answer that but my fear is that people will not believe that it is confidential and will not believe that DCF won't find out they are complaining and they won't respond out of that fear. To the degree that there are places they trust where we can distribute those forms, I think that outreach would be helpful. I don't want to put CILs and Deaf services programs in the awkward position of having to pay for interpreters so they can fill out your forms. That is not where I am going with this. But I do think Web sites, libraries, public service announcements, all of those types of things that are meaningful outreach mechanisms will enhance the understanding of the Deaf community that it's a new day for DCF, and that DCF really does want to hear how it's working so that we can improve things. I really think the other members of the committee are better qualified to assess the reactions of the deaf community to this than I am.

CAROLYN DUDLEY: Yes. The advocacy survey is going to be gathering that type of information for us. I think we have questions on there that says, you know, what has been your client's response or their working relationship with DCF? So hopefully, as the advocacy centers respond to those surveys, we will be able to give them that type of data at that time also.

LOIS MARONEY: I also remember with Florida association of the Deaf, their approach -- I don't know if anybody else remembers that, but it was when we were trying to get a Commission for the Deaf and Hard of Hearing. And we were going all along the state. So Marc's idea of involving all the organizations of deaf, hard-of-hearing, deafblind, maybe we can have them do road trips, set up meetings. I
think a lot of times -- I know at that time road trips were very effective with the deaf. They all came out and said all the things about why they needed to have a state commission.

>>> MERLIN ROULHAC: I need to make a correction. The meetings are open to the public quarterly during the first year that DCF contracts with the independent consultant and then biannually throughout the term of the agreement.

>>> RICK KOTTLE: So you are saying I was right.

>>> (Laughter.)

>>> RICK KOTTLE: Just checking.

>>> (Laughter.)

>>> RICK KOTTLE: Any more comments? Okay, what's say we break for lunch early, come back here a little bit early, and we can get out of here maybe a little bit early. Okay?

So it’s about 11:30 now. Let's try to get everybody back here around 12:30 and we will get started again. Okay?

>>> (Recess taken at 11:33 a.m.)

>>> RICK KOTTLE: Hello. Let's get back to work. I'm not sure where the other half of the room is, but they will just have to catch up with us when they get here.

>>> MICHELLE RISKE-MORRIS: The next item I asked to be put on the agenda was to discuss the monitoring plan. I think the committee will be able to provide a lot of insight as far as DCF enforcing the settlement agreement. I want to make sure that if there are things that are not working, if there are complaints out there, if there are service providers who are not providing the services that they are required to, DCF is going to be able to learn about those and not hear about them a year from now or another class action lawsuit filed.

So what I wanted to talk to the committee about was how do you feel are some of the best and effective means for DCF and myself to monitor the DCF direct-service facility as well as the contract providers? I can start off, to give you a general idea of some of the things that we had talked about that will encompass that monitoring plan and then open it up to the committee for your recommendations, suggestions.

In terms of housekeeping, the first thing to keep in mind is that the monitoring plan, you have to have that completed by August 28th. However, we would like to do our first site visit in June because it would be nice to be able to implement a portion of the monitoring plan and see how -- and a site visit is actually a substantial piece of the monitoring plan -- and see how that works prior to submitting the final monitoring class, almost as a pilot test case.

We are working on the monitoring plan, and what we hope to do is have to you a draft of the monitoring plan prior to the next advisory committee meeting which is on May 18th. We will give you a copy of the draft monitoring plan and if you can have your comments and suggestions prior to the May 18th meeting, we are going to put it on the agenda to talk about it for May 18th. Oh, we can't do it on that one. June. Never mind. June meeting.

>>> RICK KOTTLE: We can probably give you five minutes on May 18th.

>>> MICHELLE RISKE-MORRIS: All right. In June. So we will give you a copy of the monitoring plan prior to the June meeting and then if you can have your comments and suggestions before that or at least ready for the June meeting, we will put that on the agenda.

We are doing a first site visit in I think it's June 6 through the 17th. So I think the advisory committee meeting is June 14th, so during our actual site visit, we can actually talk about that as well during the advisory committee meeting of how it's going so we will be implementing part of the monitoring plan.

And again, it will be in draft form and we welcome your comments and suggestions.
The monitoring plan or the way that I view the monitoring plan, it is not just a site visit. It is not something that periodically happens where you randomly go to certain agencies every year and within a couple of years’ period you hit all agencies including state agencies as well as contract providers. I look at a monitoring plan as encompassing a lot of different means of monitoring the state, one of which is a site visit. In looking at the site visits, DCF and I will have to work out when the site visits will occur, the frequency of the site visits so that you do achieve an actual on-site visit with every agency within a period of time; and also what will we done at the site visits. I have done site visits before. I think that the way that DCF and the settlement agreement has talked about site visits and the role of the consultant, I appreciate that I will have some comments, suggestion -- DCF may not appreciate that but I appreciate that I will have comments and suggestions and the advisory committee will have comments and suggestions, because I have seen other states that have implemented their monitoring plans where they have developed it themselves without input and they go out to do the site visit. And it may be monitoring for monitoring's sake but it is not necessarily effective.

With the site visits I envision an entrance conference for you where you meet with the staff at the organization, let them know what you are doing, set up discussion questions and talking points to go over the process and the procedures, what they're doing, what are their procedures to ensure that they're providing services for individuals.

A lot of this will deal as well with interviews and direct contact with the SPOCs to ensure that, first, what is their position, are they qualified to serve in that position, and are they the person that has the expertise to be the SPOC and that they're actually doing what they're supposed to be doing.

I have seen sometimes that agencies, when they say, that's their contact, it's our SPOC, but really, someone else is doing all the work. They may have the title of SPOC but they are kind of giving it to somebody else. So this will be a check can, is this your SPOC? Are they this one that is doing it? Are they doing the work that they are supposed to be doing?

I have a variety of questions and things we will look at when we do the Sit visits: Making sure they have all the necessary things, have they made available to all the parties, the name, address, telephone number of all the ADA coordinators assigned to their area? Because that's the person if they don't feel comfortable going to their individual agency, it is somebody who is higher up that they may feel comfortable contacting if they have a complaint or concern. Have there been complaints filed? Have they been forwarded to the ADA coordinator? Making sure they understand what is a complaint or concern and that they are forwarding them and not just keeping something and saying well that is not really a complaint so we will just address it here and not worry about it.

Have they posted all the required notes and review them? How does the agency communicate with individuals? What are the auxiliary aids and services that they have available? Examining their local auxiliary aids and services plan.

One of the things to keep in mind, though, is, prior to you going out to the visit, part of the monitoring will be to develop a review tool to look at all of the local auxiliary aids, plans and services once the monitoring starts so that even before you go off to a site visit you are going to be reviewing those plans to ensure that they are compliant with the DCF policies and procedures. But again, still, when you are going out to do the site visit, reviewing those, the auxiliary aids, what are the services that you provide, how do you get access to those, going over in specific detail. If somebody comes in and requests CART, what do you do. And putting them on the spot.

Testing of them with their TTY and TDD systems to ensure that they are working properly. So those are some of the things that I have in there.

And some of this may occur prior to the site visit but will be a talking point if
there's a problem that will occur at the site visits.

Making sure that their Web site, we will review the Web site content to make sure it is accessible to individuals who are deafblind, for example; has all the necessary information; and that it is up to date.

Site visits will also include a random selection of case files. For each case file, I suggest that if it's a small organization, if there's not many individuals who have requested services, you review all the cases. If there's over a certain amount, you randomly select a representative sample of those case files to ensure that if it is a very large organization that provides these services frequently that you are at least reviewing a representative sample of those cases.

If, however, the services, the auxiliary aids or services were either denied or alternative aids were used then I suggest that you review those case files because you really want to know if they deny services why they did deny services, you want to the look at those case files.

Interviews with the SPOCs, we talked about those, will be part of the site visit plan, and they will be developing interview questions with them, in a format for what they will be discussion.

And they will also do randomly select interviews with DCF direct service personnel, asking them questions. So if somebody walks in, what's your process, what do you do? I hate to say it but it's almost testing their knowledge, to see if they know what they're supposed to be doing and are they doing it correctly. It could also be when you interview direct service personnel -- when you do a case file, sometimes you have questions, so it may be contacting that individual who completed that assessment or completed that form and having questions for them. So interviews with DCF staff could be just random, selecting interviews with DCF staff, or contract providers I should say, or if you are reviewing a case file and questions and concerns arising from that case file, that would be done.

Review of training records. Ensure that all staff are being trained, and especially with the contract providers, reviewing their training curriculum, how are they training their staff. Have all staff been trained, all new staff been trained? So looking at that to ensure that that is being done.

There will also be interviews with individuals who are deaf or hard of hearing on a voluntary basis. Those individuals will be selected because their case files were pulled. They will be at the actual facility and appropriate services, auxiliary aids and services based upon what was in the communication assessment, what they requested, will be made available so we communicate effectively with these individuals.

I would hope to think that we will have the clients come in, although after some of today's discussions, I am not that optimistic that individuals will come in. I am also looking to talk, if you have any ideas of how we can better effectuate that to reach out to these clients and/or companions to talk about the services they've gotten, whether or not they were timely, were they effective, how were they treated by DCF staff or contract providers.

In addition to the site visits, again, we will be reviewing the local auxiliary plans. I also want to make sure that a when you review the plans, there is a periodic review to ensure that whatever they put in there are their -- oh, I'm sorry -- when you review the auxiliary plans and services, look at those plans periodically to ensure that they're up to date and appropriate.

New technology is always being developed, and if it's five years from now, they don't have a plan that was developed five years ago and has not been reviewed and has not been examined in those five-year periods.

As I mentioned earlier, we would like to do focus groups or they've also been called like brown bag luncheons or meetings, where we contact local advocacy groups in the area and we invite individuals -- it's voluntary -- from the deaf and
hard-of-hearing community, to come to these meetings, where we can have a open
forum to discuss the services, how the DCF providers are doing in providing the is
services.

I am hoping that because it's confidential, and it's anonymous, that if individuals
are reluctant to be interviewed that they will feel more comfortable to coming to a
service agency or advocacy agency that's not a DCF contract provider or it's not a DCF
service.

And a I welcome your suggestions on how we reach out to that community to try
to get an open forum so that we can talk to them about this.

We're also going to be reviewing the advocacy surveys, which I think they were
presented at the last advisory committee that you reviewed. But working with DCF in
how often are you going to submit those advocacy survey, how are you going to pull
data from that information, how are you going to follow up? That is going to be another
piece of the monitoring tool, not just -- a lot of times -- and I am not saying this for DCF,
but in working with other agencies, I have seen where they will submit surveys, they
will send them out there, they will get the information, and then it comes back in, they
briefly review it, and they do nothing more with it. I would like to build in the monitoring
plan more of a continual process for when you submit them; when you get the
information about, how do you review it, how do you utilize it, how do you follow up
with their concerns; and then where do you go from there.

And each time you submit that advocacy survey, do you change it, do you add
things. It's a constant, continual process.

Same process with the self assessments. The self-assessments go out to not
the advocacy groups but they're somewhat like a survey that goes out to the SPOCs
and to managers and supervisors at the contract providers and direct-service facilities.
Through those self-assessments, gathering that information, reviewing it, using that in
some cases to be a follow-up with the providers when you go out and do a site visit. If
you are asking them to describe what they feel their role is in terms of enforcing a
settlement agreement and they put "I don't know," you are going to want to follow up on
that with them. Because the self-assessment is a way for the agency themselves to
look at themselves to see how they are doing and what their understanding is. So that
is going to be another key piece of the monitoring.

Reviewing the customer feedback forms. And also, after today's discussion, I
think more ways of trying to get those forms out so that people feel comfortable
completing those and turning those back in, so there isn't a hesitancy to complete a
form that they feel more comfortable in getting that form back so that it is received by
the ADA coordinators so they can review that.

And then, also, review of the communication templates and auxiliary aids and
records. I know that DCF currently utilizes those forms, the initial form, not the revised
form, since June of last year. Agencies have been completing those, and then the
ADA coordinators receive information, and I think they are also now going to start
getting copies of those completed forms and review those as well, but that's going to
be another piece.

Some of those forms, the way that they're completed, if they are not properly
completed, these will also indicate training issues that will help with the refresher
trainings.

Another thing I propose is doing unannounced visits. If you have problems or
concerns with an agency -- and again, I don't know what their cycle period is going to
be to review all agencies, but let's say it's three years. Well, if you reviewed one
agency in the first year but then a complaint is filed nine months, or issues come up,
not an actual complaint; you hear things about an agency or somebody is not very
happy with services, you don't want to wait two more years to go out and visit that
agency. So I suggested the possibility of doing unannounced visits where DCF has
the ability to just go to the an agency without them knowing -- unannounced -- and
doing their own site visit. It would be not as comprehensive as a full site visit, but it would address those issues or concerns that popped up that necessitated doing that. It could also arise from discussions from a customer feedback form. It could also come from doing a focus group. That would give you indications of agencies that they need to visit or discussions that they need to have with those agencies.

And I will tell you, I did unannounced visits when I monitored Ohio and agencies didn't like it when I walked in their door because they didn't know that I was coming, but they were very effective. And so I think that that would probably be a good component that we'll add.

Those are essentially some of the general areas of where I think monitoring should focus. We are still working out the logistics of the actual plan and how it will discuss each of those various components. But I wanted to bring it to the committee for their thoughts on ways you think DCF and myself should also be monitoring.

>>CINDY SIMON: Did I hear you earlier today that you assume each site visit is going to be two weeks?

MICHELLE RISKE-MORRIS: Actually we planned that. I will be going out with DCF -- and these are my site visits that I will be going out with DCF -- on six regional site visits. Each site visit will take two weeks, and then we will also be visiting the three state hospitals which will be in addition, so essentially I will be going on nine site visits over the next year and couple of months.

We have not yet picked the actual agencies that will be visited during those site visits and we are going to be working towards that in the next month or so, identifying those particular agencies. But each site visit, yes, it is assumed it will take at least two weeks.

>>CINDY SIMON: (Inaudible).

MICHELLE RISKE-MORRIS: I'm sorry, each region. Each region will be for two weeks.

>>CINDY SIMON: So it may be in different offices within that region?

MICHELLE RISKE-MORRIS: Yes, and we will be combining it within each site visit as a region, there will be site visits with the DCF direct-service facilities as well as with contract providers. There will be both.

>>CINDY SIMON: Okay. And then my other question is, have you you considered -- because you this is the one thing I didn't hear -- sending someone in like a rater for services? It is one thing if you go in and everyone is on their best behavior, even on a surprise visit, they change behavior when they know who you are, but if you send someone in looking for services to see how they were treated?

RICK KOTTLER: Let her answer, one of you guys.

MICHELLE RISKE-MORRIS: I think that's a good idea. I did have that, mentioned that before, testing the, for example, the TDD systems to ensure that, you know, calling in and seeing how they are working and if people are utilizing those. I would have to talk with DCF about actually sending in clients to do that as well. If it's feasible, I'm for it.

>>CINDY SIMON: Thank you.

>>RICK KOTTLER: One quick question. How much information are you going to give them about your file? Are you going to be telling them we are going to be looking at this, that, and the other thing? Or "we're just coming"?

CAROLYN DUDLEY: I think Michelle will probably be able to answer it more how she wants to set it up. When we are calling you, we basically just do the entrance interview let them know why we're here and what we're going to be looking at. There is certain information when we do our monitoring from the agency, we may look for names, we may ask for your policies, those types of things, ahead of time. But as far as what we are going to be doing, no.

MICHELLE RISKE-MORRIS: I will just say, I second that. I was explaining yesterday that when I wept on site visits in Ohio, unfortunately, they would say, well --
the state would say, we have to give the agencies all the case files because they have to pull them and sometimes they are in record retention, in a different storage facility. And I really strongly suggested to you that they not do that. And this is -- this was another instance where they put it in their monitoring plan and that’s what they said they were going to do so they had to do it but it was one where, I mean, you know -- I'm not saying that the agencies went through their files ahead of time, but because they knew what file was being pulled you, and it did happen, where they would go through their own file and they would review it, put a little stamp on it and said, we reviewed it according to what you are going to look at and we pass.

So I suggest not telling them which case files. So you go in there, and you say, you know, entrance conference day, these are the files that we want to see. So they have no idea. Don't tell them who you are going to interview. I get focus groups at state agencies or county agencies with personnel as well as focus groups with clients. And for some of the focus groups with personnel, don't you know the agency had a training for the staff two weeks before I came out there on the requirements to implement the terms of the settlement agreement. So everybody was fully aware of what I was monitoring because they had just received refresher training, coincidentally right before I came to do the focus group. So who you interview, that should be kept confidential. The only ones who should know they are going to be interviewed and they are going to be put under the spotlight are the SPOCs because they are an essential person in that agency so they will understand that they will be interviewed, they will have to answer questions and provide information.

>>RICK KOTTLE: Valerie?

>>VALERIE STAFFORD-MALLIS: I think maybe I am getting lost in the details, not seeing the forest for the trees, so I am asking a question for my clarification. We’re working on policies and procedures and all that kind of thing, and so by definition, that means it's not set yet. Right? Policies and procedures? All these things that we're developing and training are not set yet, but yet we are going to the start site visits to evaluate policies and procedures and trainings that are not set yet. So I am a little confused yes as to what we're going to find that's useful when we don't have anything in place yet.

>>MICHELLE RISKE-MORRIS: One thing to keep in mind that ( ) policies and procedures are in place.

>>VALERIE STAFFORD-MALLIS: Can anybody tell me when those were put in place?

>>CAROLYN DUDLEY: We put ‘those in place back in May of last year. Now what we are going to do is, the ones we currently have now, we are going to put those on the Internet as well, so that they will have the most current ones so by February 28th when we have the final policies they will have the final policies so there is information out there for them.

>>VALERIE STAFFORD-MALLIS: Thank you. That was the piece I was forgetting.

>>CAROLYN DUDLEY: Also because we have been training, staff has been out doing monitoring. We have conducted our own monitoring, so we have been training providers, training our staff, about the agreement and their requirements. So they are aware.

>>MICHELLE RISKE-MORRIS: And another thing is, the monitoring plan is finalized in August. We are having a site visit in June. We're also going to have another site visit in August, but many of these things will have been implemented, staff will have been trained -- maybe not on the final policies and procedures, but they still have been trained. Or they still have been providing those services, so we're going to be monitoring how they're doing. And the overall monitoring plan, though, will be a document that will exist after my term ends and then DCF 504 coordinators take over the actual monitoring and do the compliance reports to OCR for years after, I think three years after they complete those complaints reports.
And another thing, I suggested to DCF that the monitoring report not remain stagnant. Although you may develop the monitoring plan, develop your review tools, periodically through each cycle you will want to revisit those. Technology will change, insights will come up during site visits, you may have ideas and say, have you thought about looking at this? Have you thought about doing this, as another means of monitoring the agency? So always having that ability to grow and improve upon your process.

>>SHANA WILLIAMS: This is Shana. I just want to reinforce what Cindy was kind of saying. I certainly value an administrative monitoring. There is no way around it. We need to do it. It's very useful. It helps us, but if you really, really want to know an agency, you have a lot of contract agencies, a lot of ground to cover. Then send a deafblind client, send a Deaf client. This can be an employee. You know, just ask for a simple service, and you are going to run into everything you need to know to develop this that tool.

>>MICHELLE RISKE-MORRIS: Okay of the thank you.

>>MARC DUBIN: I just wanted to make a few suggestions. First I also noted that we need to be testing about deafblind consumers as well. And can we start by identifying who the deafblind clients of DCF and the contract agencies are so that you know that those files need to be reviewed to see how they are being served? There are probably not that many of them compared to the number of deaf clients, but those files probably are the ones that will identify systemic issues.

I want to talk about testing for a moment. You talked about clients going in as testers. I still think that puts them at some risk, because if they find problems, they're not going to be rewarded by the staff, necessarily. And this may feel at risk. Why don't we consider falsifying some records? It is maybe a harsh way to phrase it, but here's what I have in mind.

>>RICK KOTTLER: We'll break you out of jail.

>>MARC DUBIN: I (-)

>>MARC DUBIN: I think we should be creating some tests. We had a gentleman who was deaf and homeless coming to the Keys in the last few weeks. He was a great tester because he actually needed the service. I would like to know how he was served. I have heard some things but I would like DCF to hear how he was served. I have heard some things but I would like DCF to hear how he was served and make their own assessment. It seems to me a new client walking into a DCF office or contract agency for DCF is a great tester. I'm deaf, you got two hours to get me an interpreter, I have read the settlement agreement. Let them test whether they are complying with this as a new client. You can also test hypothetically by making phone calls. Simply say, "Hi, I work at the local CIL, I have a Deaf consumer, I have considered getting services because they're homeless. They will be there at 3 o'clock. It's now 12 noon. Will you have an interpreter available? "Yes" or "no" of the write it down.

Then you call, and they say it's not going to be available, let's reschedule it, before we invest the money again.

I have walked in and asked people.

Without identifying myself, just say, I work with a deaf constituency, and can you tell me what your procedure for getting a Sign Language Interpreter is? I have often been met with hostility, what's your agendas, why do you need to know? That too is a cultural change that needs to be made. They should be welcoming clients, not feeling as if we are trying to catch them at something. That too bothers me. That needs to be tested and that needs to be trained.

I would also kind of just like to know, who are the contract agencies? I mean, if I am running across a contract agency, I may not know they have a DCF contract. And it would be helpful to know. It would be helpful for the public to know, so that if somebody has a problem, they know it's a DCF issue, and they can alert you, and say, this is my experience. It doesn't have to be negative experience. It can be a very
positive experience, but the idea that you can walk into a nonprofit organization and not know that they're contracting with DCF troubles me. I would like to see them have a sign on the door saying we are a DCF contract agency, so that people who know that they have a problem know to whom they can turn with that problem. I would like to see Michelle's name and an 800 number plastered all over the place so that people know there's an independent consultant to whom they can turn.

Some ideas.

The other questions I had are, these are face-to-face meetings that we're all describing and Michelle mentioned the TTYs, but I think we should have a systemic testing of how people who are deaf communicate with DCF and DCF agency, contract agencies, over the phone. Not just the TTY call, although I have done that testing and half the time, more than half the time, they don't have a TTY. Or they have it in the closet because nobody ever calls them.

These are -- and a I know you all know this as a common problem.

Do you know if there are any county agencies that contract with DCF? Or is it all private?

> CAROLYN DUDLEY: There are county agencies.
> MARC DUBIN: Do you know if the Veterans Affairs in Key West contracts with you?

> CAROLYN DUDLEY: No, I couldn't tell you that.
> MARC DUBIN: Here is one point that I would like to make in terms of testing and monitoring. I have asked the office of Veterans Affairs, a county agency, I asked the director about Sign Language Interpreters services and he said we don't provide them because they don't have the money for it and he referred me to the federal D. A. Well, if he is a DCF contractor, that's a DCF problem, because his violations are your violations. And therefore, all of these three entities and Title II entities with whom you contract, they all need to be on the same page on this. Because we are trying to develop that page and it seems to me that the more the public is aware that they're contractors, whether it's county or a private organization, the more comfortable everybody will get with understanding that this is the real world that applies to all of you, whether it is veterans or homelessness or anyone else you serve.

I also wanted to ask the difference between ADA coordinators you are referring to and SPOCs. Are they two different?

> CAROLYN DUDLEY: The ADA coordinators and the 504 coordinators are employees of the department. That is what we also call the civil rights officers. They are my staff. And we are responsible for doing ADA, 504, Title VII; Title VI, we have HIPAA, we have all those responsibilities throughout the state of Florida. The SPOCs are the individuals that each program office identified who would be responsible for getting the information or getting the equipment to the clients. If the SPOCs can't get that information, they're going to call the civil rights officers -- I have two of them here -- they are responsible for getting that information that the SPOCs can't get.

> MARC DUBIN: Are any of your ADA or 504 coordinators serving as SPOCs?

> CAROLYN DUDLEY: No.

> MARC DUBIN: Okay. So I noticed -- I know this is unlikely to be happening at DCF but I think it might be telling -- in many, many agencies, ADA coordinators are the guy who last used to do EEOC work or architecture work and I don't mean to suggest that this is happening in this agency, but the point I am making is that many, many times, those designated as ADA coordinators didn't volunteer for the job necessarily and don't get adequate training and I am worried about SPOCs and how they were selected and what training they get. Because it's such a very important position. I'd just like to ask you to share with us how were they selected, what training did they get, what retraining do they get, and what do they do when they have a question?

> CAROLYN DUDLEY: First of all, the ADA coordinators, civil rights officers, are not selected. They apply for these positions. We have real position descriptions that
they have to apply for, because they go through a rigorous process to get the job.

As far as the SPOCs, they have been trained. We did a Webinar back in April. Since that time, staff has been out in the field basically at least every month or so visiting each one of the SPOCs, talking to them, finding out what questions they have; it's been a constant training with them.

Now, they were selected -- and when we first started this process, the settlement agreement with Gail Hoffman, they asked that we take it up to one of the highest levels, up a level, and let them select those employees who they felt -- they wanted it to be at the program managers level because those are the persons that's over our program -- so the program managers selected employees who they felt would be available to the clients when the clients came into the agency.

>>MARC DUBIN: Might it be possible at some future date to have some of the SPOCs come in and meet with us and have us learn from them how they feel it's going and have us ask them questions?

>>RICK KOTTLER: How about May 18th?

[ Laughter ].

>>MARC DUBIN: Another five minutes? I can do that.

>>RICK KOTTLER: That's who's going to be training on the 18th -- trained.

>>MARC DUBIN: They will be receiving the training. Will we have time to have a discussion with them as opposed to just training them? It doesn't sound like we will have time on the 18th.

>>RICK KOTTLER: Probably not.

>>MARC DUBIN: I am just suggesting. It doesn't have to be June. Could be July. After they get some of the training and this process is developed a bit, I think, I would like to know if we can make our own assessment of what they know about this settlement agreement, what kind of problems they are experiencing, and help DCF have a more independent assessment of how it's been going with the SPOCs. Do they get pointy ears when they are appointed?

[ Laughter ].

>>MICHELLE RISKE-MORRIS: One thing I would suggest is, prior to the SPOCs coming in in July, DCF's first statewide self-assessment is due -- I know mine is due August 28th, and theirs I think is due July 28th. They do their self-assessment and I kind of assess them through an assessment.

Since the statewide self-assessment, one of the individuals completing that is each SPOC, and each contract provider agency, and each DCF facility. What the committee -- I would suggest maybe once those assessments are completed and the information is pulled from those assessments, summarized, provided to the committee, we maybe look at the November agenda as a time to talk to or bring in SPOCs.

>>MARC DUBIN: About the open community meetings where you are talking about bringing them in, who is going to be paying for the auxiliary aids and services for those meetings?

>>CAROLYN DUDLEY: The regions where they are located, we already have contracts with the interpreter services, those individuals we will be using who we have on contract.

>>MARC DUBIN: So if you hold it at private, nonprofit agency, the private, nonprofit agency will be told they will not be liable for paying for any of it?

>>CAROLYN DUDLEY: That one I am not sure I can answer exactly, but if it's in our region, and if the region has a contract with that particular provider, then the region will look at -- because it will be one of our contract providers. And if that nonprofit already has a contract with that particular agency, then yes, they would -- as far as I know, I would probably have to work that out and be more clear, because I don't want
to give you an answer and they say, no, that's not how we are going to do it. So I will follow up with you.

>>MARC DUBIN: May I share with you what I think the answer should be?

>>CAROLYN DUDLEY: Sure.

>>MARC DUBIN: Title II says this is a program or service of DCF and DCF is liable for paying for effective communication and a appropriate auxiliary aids and services. And if, for example, our CIL says, it is important to get more Deaf consumers to come to this; we will host it at our CIL, that does not make it our event, and we should not have to pay a dime to assist DCF in fulfilling its obligations of the program or service under Title II. So the right answer is in my opinion, without question, that DCF should fund it. But if the right answer is something other than that I think you will find that many non-profits are going to say that they are not going to be able to afford it and you are not going to be able to hold it at those facilities. That's my take on it.

>>RICK KOTTLER: Lois?

>>LOIS MARONEY: Also have CART at these meetings too, not just the interpreters, but you have to have CART. Thank you.

>>VALERIE STAFFORD-MALLIS: I have two questions. Any agency or entity that's contracting with DCF to provide services also has to have a single point of view contact. Right? I wanted to make sure I was right on that.

>>MICHELLE RISKE-MORRIS: (Nodding head.)

>>VALERIE STAFFORD-MALLIS: The other thing, in Manatee County, some of our other provider agencies have had these discussions about unfunded mandates. So that is still under discussion? According to Marc's question, who ultimately does pay for these auxiliary aids and services for accommodations? Because that's a huge concern.

>>MARC DUBIN: The concern I have is that whoever DCF contracts with, so that nonprofit, homeless shelter program, if they don't have the money for the Sign Language Interpreter or for CART, and DCF does not want to pay for it, then that nonprofit runs the risk of either being terminated from DCF's list, which means that that service in that community will be diminished, which no one wants, or they will violate Title III of the ADA and Section 504 of the Rehab Act. They will be subject to litigation and whoever lit gates that issue with them will bring DCF in as well.

So again, I am just trying to suggest, in my view, it is in DCF's best interest in the long run to find the funding to help its clients ultimately get what they are entitled to, without harming the service provider that's finding itself in financial difficulty. That's really where I'm coming from.

>>RICK KOTTLER: Any more questions, comments? Well, I guess we are getting a little tired.

>>MARC DUBIN: I do have a couple. What are the consequences if you find a violation? What do you anticipate will be the consequences? If somebody -- you review a record, interview a consumer, you find out they were entitled to the an interpreter or CART, and the agency said it is non-essential, wasn't provided, I mean, where does it end up at the end of the day? I mean, so what? You found out some homeless shelter didn't provide interpreters, and they promise to be better in the future. But what does it leave DCF with under the settlement agreement? What do you anticipate to be the consequences?

>>MICHELLE RISKE-MORRIS: Well, in my experience from doing site visits when there have been violations, they have been done in one of two ways. One is if they did things but did them incorrectly, they didn't follow the policies and procedures, so, you know, the end result is okay, but the way they got there wasn't necessarily appropriate but if there was a violation that doesn't amount to discrimination then they can put it on their corrective action plan. Then you also have to look at when you work with clients, if they feel that they have been discriminated but they didn't know about the complaint process, giving them the opportunity to file a complaint, and that would be handled
according to the policies and procedures, the complaint resolution policy. Because I
had done that previously with, for example, focus groups. If somebody comes up to
me and says, I feel that I have been discriminated against, I didn't know I could file a
complaint, I get them the information and work with them to provide that.

> CAROLYN DUDLEY: Also, in the settlement agreement, Michelle will be
providing compliance reports through the Department of Health and Human Services
monthly or quarterly, and she will be reporting whether or not we are in compliance,
and if we are not in compliance, then the Department of Health and Human Services
will review the settlement agreement and make other determinations at that time.

> MARC DUBIN: If you do a.

> RICK KOTTLER: If you do a corrective action, what is your follow-up? If you find
them in violation of whatever, we want a corrective action here and this is how we want
it done, are we talking weeks, months, or coming back in two months and doing this all
over again?

> CAROLYN DUDLEY: That will be explained in the corrective action plan so
whatever corrective action is needed, we will follow up to make sure we are following the corrective action planning. Also HHS has the
option of coming in and doing that. So those are some of the options we have.

> MARC DUBIN: Providing a consumer client with option to file a civil rights
complaint is a fine idea. But here's my hesitation. The ADA is violated if one is not
provided effective communication. That is defined as discrimination. We should be
making our own judgment of whether the ADA was violated without sending them
through a set of hoops to jump through to finally reach that conclusion. So I guess my
question is, in a case in which they're supposed to get, if it's an emergency situation,
it's an aids-essential moment, they don't get the interpreter for another three or four
day, it's a violation.

What are the consequences there? And I don't necessarily mean that they have
to be negative consequences. One of the consequences may be, you know, they are
just never going to be able to do it. We are going to have to set up video remote
interpreting and cover cost because they are never going to be able to do it and we
don't want this to happen again. I am just wondering what the thoughts are on seeing
a pattern like that. I think it is going to be happening in rural communities mostly.
What can we do in order to ensure that the next client doesn't experience that same
discrimination that occurred under the hypothetical I just gave you?

> MICHELLE RISKE-MORRIS: I think in those instances that's where they will be
put under a corrective action plan. So in that corrective action plan, that agency is
going to have to put in a process to address that deficiency so that it will not happen
again. Then the role will be to DCF to monitor that agency or that contract provider to
ensure that they're meeting those corrective action plans. I recommend when you do
corrective action plans that it's not something that they respond back to you, this is
what we are going to do and you have it on file and you don't really touch it again until
you go back out. I am glad to see Carolyn is nodding her head, no, that's not what we
do. It does happen other places unfortunately: But that they follow up with that
periodically and that would be an instance where you would want to do an
unannounced site visit and possibly do this testing. So you bring somebody in, go in
and test them, so to speak, to ensure that they are supposed to be doing this, are they
doing it?

> RICK KOTTLER: Will it be the ADA coordinators who have oversight when this
happens?

> CAROLYN DUDLEY: Yes, they will be responsible for monitoring those
corrective action plans.

> RICK KOTTLER: Marc?

> MARC DUBIN: Two quick questions. First, will DCF -- does DCF have any
plans to have any kind of a media effort to educate consumers about these new efforts
to enhance services?

>>MERLIN ROULHAC: Not at this time, but that is something that we can certainly take into consideration.

>>MARC DUBIN: I wanted to suggest perhaps public service announcements, which are free. Getting out ahead of negative publicity by doing some public stories of successes would be something to consider, see if we can start collecting stories from Deaf clients and deafblind clients who have been served and who are pleased, and interviewing them, getting them to start talking up how the culture of DCF is a welcoming culture for the Deaf community.

>>RICK KOTTLER: Any more comments? So now you need to hire a PR person. (Carolyn points to Merlin.)

>>RICK KOTTLER: Cindy, do you you have any comments?

>>CINDY SIMON: I'm still here, just watching, I was thinking of another public service announcements we have done with the Council and I am wondering if we need to put this as a reference in there, but I need to think about it.

>>MARC DUBIN: The one thing that I think we have not talked about at all is captioning of videos, TV spots, negative that is in film, for which captioning would be necessary for effective communication needs to be reviewed and tested. And have you given any thought to a budget and hiring? It occurs to me that -- I got an announcement that the public library in my community was having a film night, and they were going to show a commercial film. I wrote to them and said, what if you're deaf? Is it going to be captioned? DCF has the same concern, I would have the same concern about anything produced, shown, provided. And maybe lots of health training videos and AIDS prevention videos and all these other videos that might be used by DCF and DCF contractors for public education; does anybody review how to ensure that that information is effectively communicated, and the whole captioning question, which again, people around this room are far more familiar about that concern than I. But I'd just like to raise it from the perspective of someone who wants to make sure that we get ahead of this stuff and not learn about it as a result of complaints.

>>CINDY SIMON: I would also wonder if as an attachment to that, if you would want someone signing it, so others could follow that if it was too hard to follow the captioning?

>>MARC DUBIN: That's actually an excellent point, because for the late-deafened, they're going to want captioning, and for somebody who is prelingually deaf and doesn't read well, they are going to want Sign Language. So you are probably going to wind up needing to ensure that you have both on the film, and that's not free. So --

>>RICK KOTTLER: And that leads to a whole new can of worms, because you you have to have monitors big enough that you can see the Sign Language Interpreter on it. You can't do that on a 13-inch screen. So there's all kinds of things that have to -- thought processes that have to go on.

Back to the monitoring, though.

Do you have any more questions about the monitoring program? None? Okay. Why don't we go ahead and go into the general discussion section. There was one that I wanted to bring up and I know Marc has a couple of things he'd like to discuss. But let me start with, besides all the things that we're going through, there are some systems within DCF which are totally almost unusable by someone who is Deaf. Case in point is the food stamps. I know Kim has 'em, I have 'em, they're in the office, they can't figure out how to for food stamps. When they do and there's a question, you can't get an answer.

I mean, I have sent e-mails and I'm still not getting answers. And I had a Deaf lady in my office wanting to know if her -- she had a statement for her food stamps which lasted one year, July through June. Well, May, something like that. Well, when it gets to that end point, what do I have to do? Do I have to refile everything? I said I don't know. So I sent out an e-mail. Can't get an answer.
So I thought, well, since I can't get an answer on the phone and I can't get an answer to the e-mail, I look at the back of her statement, and it has, if you are a TDD user, dial this number. It's a nice 1-800 number. I dialed it, thinking I was going to get a DCF person. I got the Florida relay. Had no idea -- it's the 800 number versus the 711 number. So if you are Deaf and you you see that and you try to do that, all it gets you to is the relay, and you go, what do I do now? And if you dial the DCF number, all you get is the recording, which doesn't answer your question in the first place. So it's a loop there that -- I know it's tough for those of us who are hearing, but it's really impossible for someone who is Deaf to use that system. And hard-of-hearing people. I know Kim's got a lot of those. They're not computer savvy, and we were discussing earlier, they don't want to Griff you the information that you need to put in there. They don't want to give you their social security number. I say, I can't read your mind, I have to have it to put into this computer. Well, I have been told not to do that, they say. So there are some issues that we deal with on the front lines that all the policies in the world still aren't going to address. And sooner or later we are going to have to work working, filtering through those things. Marc, you want to comment?

>MARC DUBIN: I will pass for a moment. Is there anybody else who wants to raise something?

>RICK KOTTLER: First of all, Shana.

>SHANA WILLIAMS: I was wondering. We are going to do the training May 18th. I have several Deaf staff members, case managers, people who work directly in the field and I would really love their feedback on the training. But what I was thinking about it, a cost-effective way for me to have my staff involved in feedback might be to videotape the training. I could have take it back and have the staff around it, get their feedback, synthesize it, and get it to you. Is that possible?

>MERLIN ROULHAC: That sounds reasonable. I will check on that and get some information out.

>RICK KOTTLER: Lois?

>LOIS MARONEY: If you you videotape it, will it be captioned? Okay.

>On the agenda, it might be a good idea, on the very bottom, to, where you say the Web link to CART for this meeting, to put a reminder that after breaks, that people who use this are to use the refresh button. Because I have been on lots of calls and then I forgot to do that and it is starting again and I don't know it is starting again. So I think it is a very good thing to do and if Ed indicates as well to remember to do that.

Without giving away too much information, because of confidentiality with this client, what I experienced one time when calling DCF, the father was there and calling and the person who spoke to me, I explained that I had a Deaf client with me and that I was Deaf but I was voicing Deaf. And I had the interpreter introduce herself, a video relay interpreter, so the person talked to me just fine, and then it was time for the father to talk. The person would not talk to the father. They did not believe that the father was -- that that was really the father. They would not even talk to him. But there was a difference between me voicing myself. Well, the interpreter said, I can see that there's another person there, and when I voice, I will be voicing for him. But the person just totally refused. Okay? And this was a DCF employee.

>CAROLYN DUDLEY: Can you tell me what city this was in without divulging confidentiality? And that way I can know what region I need to address this issue with.

>LOIS MARONEY: I was calling from St. Petersburg and the call was going to -- the call was going on to -- well, I think it was the Miami area, to be honest with you. Okay? I believe that person was in Miami. But I feel that I'd like to give people the benefit of the doubt, so maybe they had other things to consider. But I don't think so in this case. Okay? And I think that they could at least talked to this person and kept explaining if that was the case. But it was just in my opinion just total lack of understanding that some Deaf do not voice, one, and they will call through video relay.
Okay? Now, this person said, I prefer to interview this person in person. Well, guess what? That never happened. So then this person never had the opportunity to talk and get information and give information.

>>CAROLYN DUDLEY: Was this the Access program where they were trying to obtain services from the Access program? Which is food stamps.

>>LOIS MARONEY: No, it was not.

>>CAROLYN DUDLEY: Family safety? Could you tell me what program they were trying to --

>>LOIS MARONEY: No, no, no, it was -- I think it was more about making -- well, I don't want to say too much if that's okay, but it was DCF. Mainly what I can do is, I can ask this client if they would like to make a complaint, and then I can get that okay from that client. Okay?

>>CAROLYN DUDLEY: Let me ask you another question. Is the client located in St. Petersburg or is the client located in Miami?

>>LOIS MARONEY: The client is located in St. Petersburg.

>>CAROLYN DUDLEY: Okay. Would you please have the client contact Sharon Pimley-Fong? Sharon will give you her information before she leaves. Okay?

>>LOIS MARONEY: Okay. Thank you you.

>>MICHELLE RISKE-MORRIS: I was just wondering, because me, myself, looking at assisting DCF in monitoring, trying to think of a way -- I don't know, when there are problems and clients are having difficulty, so that there is some type of number or way that they can reach the 504 coordinator or Carolyn to say that when something like this occurs (pointing to Lois) you can call this number, and I know that you don't want to have where everybody calls you because they know they can get you, and they're going to complain about not getting a service or not getting what they want -- not that they're not getting the appropriate auxiliary aid or service. But there's got to be something so these problems can be addressed as soon as they come up.

>>CAROLYN DUDLEY: Most times clients will call the client relations office. They have those numbers published. Also the civil rights officers numbers are also published. So they will contact them. As well as it relates to Access, the civil rights officers numbers are on all those Access applications. So we receive calls daily. It may not be as it relates to a deaf or hard-of-hearing issue, but we do receive those calls daily from clients.

>>MICHELLE RISKE-MORRIS: Are those put on those forms that, for example, your young lady that received that form -- was that information on there for her as well? When she had that notice about her food stamps, that wasn't on there?

>>RICK KOTTLER: No.

>>MICHELLE RISKE-MORRIS: See, that's one where I'm thinking --

>>CAROLYN DUDLEY: On the application, did she have a --

>>RICK KOTTLER: This wasn't the application. This was her statement that came in the mail.

>>SHARON PIMLEY-FONG: Recertification.

>>RICK KOTTLER: Yeah. All it showed was the term. And it said if you have any questions, call this number. You call that number and you get the voice recording. That's all.

Shana first and then Marc?

>>SHANA WILLIAMS: Just quickly, I know that there's been a lot of discussion about the TTY and the TDD numbers not going through easily. But video phone really is where deaf people are using technology now, so I think that becomes more important. We don't need to make policy and procedure that is five years behind where we're going.

>>RICK KOTTLER: Agreed. Marc?

>>MARC DUBIN: Many persons in the Deaf community do not yet have access to the Internet. And don't have access to the technology that would replace TTYs. So as
much as I agree that we should be conscious of the need to train about 'receiving relay
calls -- that's essential as well -- I respectfully disagree that we don't need to focus on
training about TTYs, because if you are homeless, if you you are in poverty, if you don't
have access to the Internet, you are not going to be using video phones. You are
going to be using a TTYs. I see people shaking their head, but I would love to hear
that discussion. But I am of the view that TTY’s are still essential and those numbers
need to be tested and staff need to be trained to use them but I would like to hear the
other side of that debate.

If you are going to make a video of a training, you need captioning but I also think
you need to have a Sign Language Interpreter in the video for reasons that we
articulated before.

If you are late-deafened, you don't know necessarily Sign Language; and if you
are prelingually Deaf, you won't be able to read the captioning fast enough. So you
need both modalities in order to effectively communicate, is my suggestion.

I also want to point out that this is an ongoing educational effort. I mean we are
still learning how DCF works, what some of the challenges are. One of the
commonalities that I have observed over the years with ADA coordinators has nothing
to do with who you sign to be ADA coordinators. The reality that es very challenging
for public to know who I is and how to reach them. That is across agency as. It is
across programs. And sometimes the ADA coordinator is readily available and
sometimes less readily available.

What I would like to suggest is that we gear up and try to get the Deaf community
and hard-of-hearing community to understand that they have a right to ask to for this,
that they have a right to receive these services, that DCF consider taking the risk and
you will get more calls that are not directly related to this; and nevertheless, identify as
much as you can the name and phone number of the ADA/504 coordinator so that
people with disabilities and their advocates don't have to go through so much trouble to
contact you about an ADA question or request for services; and that that ADA
coordinator be immediately prepared to say who the SPOC is, so that for every one of
the contracted agents so you can turn this over to the people who are trained to do
this.

Another agency, another state agency, that I worked with in the past in Florida,
sent out notices about a series of public meetings and never mentioned the ADA
coordinator, never mentioned who to ask for where to get interpreters or materials in
Braille. When I contacted them, it was a daylong effort to just find out who the ADA
coordinator was. In Key West, I asked who the ADA coordinator was from the police
department and invited him to breakfast. And having breakfast, I asked him about how
a police officer can get a Sign Language Interpreter if they need one. And he said,
"Why are you asking me?" And I said, "Because you are the ADA coordinator for the
Key West police department." And he said, swear to god, "I am?

Okay, we will go on to something else.
That is my concern here.

DCF needs to do a public service announcement on that.
This document here, goes to us, I get that. That's not a big deal. But you this is
a perfect opportunity of the we are handing this type of thing; to say you want to find
your ADA coordinator? Call this number. And I just think we can do that. We can find
a better way to educate people about how to get this system down to a situation where
it's much, much simpler for clients with disabilities to be able to get what they're due.

>>CAROLYN DUDLEY: The ADA coordinators, their names are with each client
contract service agency provider that we have. The last CSA that was submitted by
our contract agency, they were listed. We also had it with our client realizes and when
you go into the DCF offices, their names are available there also. So if there's
something, you know, if there is additional information we can do, but their names are
out in the community.

>>MARC DUBIN: May I suggest a small poster that goes on the wall of every DCF office and every DCF contract office saying, this is our ADA coordinator. Fill in their name and their phone number. This is our SPOC. Fill in their name. So that when a client walks into the office, assuming they don't have a vision disability, they can find it. But I don't think this is going to be that difficult to do, and lots of, I'm sure, good ways to come up with getting the names and phone numbers out there, whether had it's on documents or television or whatever it might be. But it does seem to me that until you have real confidence that clients know how to ask for what they are entitled to, that the demand will be decreased, because you they will assume that they can't get it because they have never gotten it before.

>>CINDY SIMON: Can I ask a question?

>>RICK KOTTLER: Sure, Cindy, go ahead.

>>CINDY SIMON: Marc, in that same vein on getting word out, would it be helpful if some of the other professional organizations in the state that also service these people have this information as well, to give the client's last patient, whatever you want to call it? For example, I am thinking maybe a small article from this group that could be put in the professional publication so it goes out to everybody at once, such as an audiology group, hearing instruments organization, et cetera.

>>MARC DUBIN: I think it’s a great idea. I think we should consider a press release about the hiring of an independent consultant, a brief summary of what the settlement is about, the history of the settlement, and how to get more information about it, and perhaps just regionally put the information about the ADA/504 coordinator in there, so that they can contact somebody for further information. I think that's great idea.

>>RICK KOTTLER: Any more comments? Do you all have anything for us? We have been picking on you for hours now.

>>>(Laughter.)

>>CAROLYN DUDLEY: We're still waiting for the list from the committee regarding the advocacy groups. I have only heard from one person, so I need the list so that I can send the advocacy surveys to them. So if you would, please.

>>MARC DUBIN: She immediately came up with a deadline requirement.

>>VALERIE STAFFORD-MALLIS: Can you you refresh? I have seen some blank faces. Can you refresh our recollection on that?

>>CAROLYN DUDLEY: Okay. We have to do an advocacy survey. So in order for us to do a survey, we need to have identified the advocacy groups in the state for the deaf and hard-of-hearing community. So I am depending upon you to provide me a list of advocacy groups.

>>JUDY MARTIN: Do you need the names of the head of the groups? Do you need e-mail contact?

>>CAROLYN DUDLEY: Yes, all of it.

>>JUDY MARTIN: Everything?

>>CAROLYN DUDLEY: Everything.

Okay. Merlin’s deadline is Friday, May 6th. Please. (:-)

>>RICK KOTTLER: Anything else? Go ahead, Susan.

>>SUSAN HERRING: Who do we send that list to?

>>CAROLYN DUDLEY: You can send it to Merlin.

>>SHANA WILLIAMS: Do you want mail address or e-mail address?

>>MERLIN ROULHAC: Physical address too.

>>LOIS MARONEY: What is coming to my mind like Deaf service centers. Right?

>>RICK KOTTLER: Yeah, I will take care of those.
LOIS MARONEY: Not necessarily Association of Late-Deafened Adults, something like that?
RICK KOTTLER: Sure, sure, ALDA is an advocacy group. Even when they educate they advocate.
LOIS MARONEY: I mean like take on a specific -- they do general education; general education is considered advocacy? Okay, thank you.
VALERIE STAFFORD-MALLIS: I don't think there is anything -- such a thing as too much information right now. Send anything and everything and let them decide whether it meets their needs or not. Don't filter it. Generate it.
MARC DUBIN: Part of it is, whoever a Deaf person comes in contact with service, they may complain about what they experience else where, and that's what we need to be hearing about. So if you you know of doctors that serve the Deaf community more than other doctor, or lawyers, whoever it might be, we want to at least let them know about the settlement, about this process, and let them know if they have concerns or suggestions, DCF wants to hear from them. Do you think that's about right? We want to give them as many as we can. They will only say nice things, Carolyn. Nothing negative about DCF. We know that. :-)
JUDY MARTIN: Are you going to be sending these to audiologists as well as hearing aid instruments?
RICK KOTTLER: They're not advocates.
JUDY MARTIN: Okay.
RICK KOTTLER: Cindy, what do you you think?
CINDY SIMON: I trying to keep all the noise of my phone from bothering anybody. I have the turn on my phone.
JUDY MARTIN: I just say that because our Hearing Loss Association --
CINDY SIMON: I know I try to be advocate for my patients.
RICK KOTTLER: Judy?
JUDY MARTIN: I just say this because the Hearing Loss Association of Florida is collaborating with the Florida Academy of Audiology, and we put an article in the Advocate, their quarterly newsletter, we're trying to really work together. So that's where I am coming from when I am wondering. So if you are going to do that on the Florida government Web site, you can get the addresses of all 900 hearing aid dispensers and 800 audiologists in the state of Florida. And you can make a list. I don't mean you have to physically type it, just download it and it's available. :-)
RICK KOTTLER: Hold on one second. Susan?
SUSAN HERRING: I was just wondering if I could request, if you could shoot an e-mail out with a brief description of what it is that you are looking for. In other words, I am trying to figure out how am I going to figure out -- I lose my memory from here to home.
MERLIN ROULHAC: I would be glad to.
MARC DUBIN: The more education we do, anyone serving the Deaf community, about what we are trying to do here, I think the better. If someone is selling a hearing aid and that person is going to eventually come into contact with the DCF office -- and we don't know whether they will or not -- what's the downside of making sure that they know DCF is committed to serving them? It's a very positive step forward and I think the wider we can get that message out the better it will be for DCF because it will be perceived in a very positive light. So that is my statement on it.
CINDY SIMON: Marc, that is exactly what I was trying to say before. We could put this information in the Florida academy newsletter, the FLASHA newsletter. I am sure the hearing instruments specialists have a newsletter. Maybe we need to put it, if there's a Deaf Ed newsletter or group, so that the information is out there.
MARC DUBIN: And if DCF could develop a one-pager, we could put it on
newsletters and could archive that and everybody else we send it to we could forward it to. It would be done in e-mail in large part and the message would get out there. The key elements from our perspective is contact information for further information as well as information about how to raise concerns so that DCF knows what's going on. But in summary, that we can all utilize and share would be very helpful to everyone.

I want to talk about something that everybody knows B. It kind of relates to DCF because DCF serves veterans. I want to make sure everybody knew about a recent event that is of significant importance to Deaf veterans and veterans who are hard of hearing.

I received a complaint two weeks ago from a veteran who is deaf, late-deafened, that they received a letter from -- he received a letter from the veterans add in mention that there's a national suicide hotline and wanted to make sure that the veterans knew about it. So I have been training people to be doing testing, and he tested it through his TTY. And it didn't work.

And he contacted me and said, it doesn't work. Can you you deal with it, address it?

So I contacted the voice number for the national suicide hotline and spoke with a staff person, explained that I was calling on behalf of a Deaf veteran who was not suicidal and merely let them know that the TTY line was not working and ask to speak to someone and they put me in touch with a social worker who was in charge of a portion of this of the and I spoke her about it, sent and e-mail to her about it. And it's now been two weeks and it's still out of order.

I have written four letters and had two phone conversations with them. Their position is a varying one. One position was, it's fixed; and when we tested it, it wasn't. And the second position was, nobody uses TTYs anyway and we have a test chat option on the Internet on our Web site.

And so they can just use that. And I explained that from my perspective, that would not work for a large number of late-deafened veterans.

Now, you should know also that this is something which they're going to have to take seriously because it's such a serious issue, and that I have contacted a variety of different agencies, organizations around the country who are interested in the outcome of this. I am asking for your guidance and your involvement in this. I mean, the reality is, I did not know this before I did some research, but in the war on terror, that's the Afghanistan war and the Iraq, now I guess Libya, the number one -- but not Libya for injuries yet. But the number one injury to soldiers in Iraq and Afghanistan is deafness.

It's because of the bombs that they are exposed to. And if the veterans are experiencing tinnitus, ringing in the ear, and they are late-deafened, so they don't consider themselves culturally Deaf. They don't necessarily use TTYs, many of them will use other mechanisms but the large number of homeless and at-risk of homeless vets that are out there, that unless the VA issues them telephones that can serve their needs -- the CapTel phones -- TTYs are always going to have a role to play in this for this population, and it's very hard to know how to serve them since they are not coming forward necessarily to disability organizations. But I wanted to share that with you; that this is an ongoing issue, that I am struggling to fix, but I think that the more alliances we have about this. So if you could please send an e-mail to me, and it will not be -- see, the reason I am saying it up here is because of our Sunshine Act issues. I need to have partnership about this with you but I can't talk about any of that with you when we are dealing with the DCF settlement agreement under the Sunshine Act.

I also want to ask you if I may, Rick sent out that e-mail, I responded by hitting reply all. And somebody asked was that a Sunshine Act call. And I got to tell you, I just don't know the answer to that of the but more importantly, Carolyn and Merlin, how do you want us to communicate with one another, both about Sunshine Act issues that
would be impacted by the sunshine is act and if we talked to one another about non-DCF issues, could we do a mini training on where we stand? Do we have to send it to Carolyn or Merlin? I mean, how does one communicate with one another? Does anybody have that question in their mind?

> > JUDY MARTIN: No, I don't have that question. Because volunteering for the Florida Coordinating Council, we have very definite rules, and we cannot talk about anything at any time regarding any business before the Council privately.

If I just talked to like Carolyn or any one of the other staff members, that would be okay.

> > MARC DUBIN: Can they send out that question to the rest of us?

> > JUDY MARTIN: Then we would have to send our response back to them, not to you.

> > MARC DUBIN: That's fine. Having someone serve as a conduit to communicate with one another is perfectly fine. I am not trying to have secret conversations.

> > JUDY MARTIN: I knew that. I didn't realize that you hit reply all by mistake.

> > RICK KOTTLER: One at a time. You got the floor, Judy.

> > JUDY MARTIN: I was yelling, wasn't I?

I didn't realize that you made a mistake when you hit reply all, but rather than having everybody start a conversation, I'm the one who said, you know, sunshine? Question mark? So that's it.

And later can we get back to veterans after you finish this?

> > MARC DUBIN: Sure.

> > RICK KOTTLER: Susan?

> > SUSAN HERRING: I was going to share how I understand how that works. The way I understand that works, if you have a question, like on FCCDHH, I can see Rick sending that issue to Mary Grace who is our administrator operator there and she would send it out. But that is his issue only. We have that issue, think about this, and there is no discussion after that point. So you can address either Merlin or Yasmine, I am not sure who the appropriate person is here, and you can send a question for information. But as far as that, it cannot be discussed beyond it. You can't say, well, okay, this is my opinion. And this is where I get confused. Because with the procedures and the policies and procedures that we did prior to this meeting, way back six months ago or whatever, we sent all our comments in by e-mail and I wasn't quite sure it was appropriate. But I did it. And I would assume that everybody else did it too.

(Carolyn and Merlin nod.)

But with this revised comments, I made notes but I didn't send them out. I thought we are not supposed to do that because it is more discussion at the meeting.

> > RICK KOTTLER: Well it's okay to send them in to them. You don't want to broadcast yours.

We had this discussion many, many times with the Deaf Service Center Association because when we first started the Council we had three members of the Council who were also members of the Deaf Service Center Association. At any time anything was present beside the Council, we could present it but we couldn't discuss it. And that's really the key is you can't discuss it. It can be presented. It you just can't discuss it.

Lois first, then Marc.

> > LOIS MARONEY: I am on the Florida Coordinating Council for Deaf and hard of hearing and also a city committee. And we even had strict rules about the Sunshine Act. I don't know if they were more strict or a what. But my understanding is communications go to the staff but we can't use them to then forward it out to other people. So I know that I would like it to be understood what we all agree upon so that it's not uncomfortable
when we don’t respond. But I know that if I did something that I wanted the committee
to know, I would not send it to the whole committee. I would just send it to Carolyn, to
DCF, and ask that it be placed on the agenda. It feels more comfortable for me. So
that’s my thinking.

>>RICK KOTTLER: You had some, Marc?

>>MARC DUBIN: Okay, I am perhaps more confused than when I walked in. (-:)

But I will share with you, I thought first that the Sunshine Act requires public
notice of the meeting, there has to be an agenda and there has to be a record kept of
the meeting. Those three pieces. So there are multiple members of the deaf and
hard-of-hearing coalition here. Correct? So why is it okay for them to have
participation in this meeting about something that might be -- I am only asking as sort
of a hypothetical, certainly not accusatory way. But isn't it possible that what we talk
about here about DCF will be on their agenda? And it’s not publicly noticed about it
being on their agenda, and yet they are having a discussion about it. So how is it
different?

>>RICK KOTTLER: First of all, it is publicly noticed. Their agenda.

>>MARC DUBIN: I’m talking about their discussion here.

>>RICK KOTTLER: Right. But both meetings are publicly noticed. I think there is
a little confusion, and I don’t know that there is an answer between those two groups
as to what can be presented at a Council meeting and discussed at a Council meeting,
if it is DCF-related. I think you can -- you know, I don’t know! Because we are talking
about two public groups, two voting meetings, and discussing back and forth. It would
be like us discussing Council business here. Can we do that?

>>CAROLYN DUDLEY: This is Carolyn. If you don’t mind, if you could just put it in
a question form and I will take it to John Jackson, who is our attorney that handles this.

>>RICK KOTTLER: And John is on the Council.

>>CAROLYN DUDLEY: Yes.

>>RICK KOTTLER: So can you discuss this with John? Because he’s on both of
these groups.

[Laughter ].

>>CAROLYN DUDLEY: Right, that's what I said.

>>MARC DUBIN: My work here is done. I confused everyone, got everyone in
trouble.

>>RICK KOTTLER: Ask John, what are our limitations here? And we would
appreciate that response. Valerie first.

>>VALERIE STAFFORD-MALLIS: I just wanted to advise the advisory committee
that John Jackson does do a quarterly report to the Council on the activities of this
advisory committee and it is an information-only report. The Council does not vote,
they don't discuss. They might ask questions if they don't understand something. And
John makes the point when he gives that report that he does not participate on this
advisory committee as a voting member; he's merely serving as a liaison. So that's
how -- to answer that question, that is how that information is currently being conveyed
to the Council. And also, John has given the Sunshine law and public meeting notice
both to this group and our council, and any event or gathering or meeting where two
people are discussing business that comes before the Council, whether it is this
advisory committee or our council or anything, that is considered in the eyes of the law
a meeting, it must be publicly noticed. So that's why we do not discuss. Because just
asking a simple question about something that may pertain to the business of this
advisory committee outside of this publicly-noticed meeting, is a violation of the
Sunshine, according to what I learned from John Jackson, and I could be wrong.

>>JUDY MARTIN: I don't think you are wrong. There's another part of this also. I
can go home and tell my husband everything that went on here and I would not be
violating the Sunshine Law. And I also can make a report to my Hearing Loss Board
and not be violating the Sunshine Law. So it is just our interaction. And we do have a close relationship with the Council, so I can understand your question. Totally.

>MARC DUBIN: I want to go back to the e-mail question which was the one that I am still struggling through. Which is, what's wrong with sending something to Carolyn, for example, and saying, okay, that's retrieval by the public, it's a public record; could you share it with everybody else? The group? And then having everyone in the group send their response back to Carolyn to send it out? It is different than my sending my response directly to another member of the committee. It is made public record, it is retrieval by the public. Is permitted or not permitted? And can you explain why?
>
>RICK KOTTLER: Susan?
>
>SUSAN HERRING: It seems a similar question was asked of John and I think John responded that that would be okay as long as there was no discussion on the comments that were sent out. In other words, that would create room for discussion.
>
>MARC DUBIN: You can ask a question but can't respond with an answer?
>
>SUSAN HERRING: Right, because that assumes discussion which is out of the public arena. It can be put out there for comments I guess to bring to the meeting. I may be totally wrong on this but it seems to me that I remember him saying something like you can do it up to a point but you have to have a stopping point. Information can be shared, but there cannot be any discussion.
>
>RICK KOTTLER: Not to cut this short, but we are going around in circles. Let's do this. From here on out, everything that we want to send out informationally to the group goes to Merlin, and Merlin will send it out. Okay? If there is a comment to be made on it, something in the order of, we need to put this on the agenda, send that to Merlin. She will contact me and say, we need to put this on the agenda, and we will put it on the agenda. But any other further discussion from that point on needs to be held in the meeting.
>
>SUSAN HERRING: Also, Rick, the other key word was, we're communicating strictly through Merlin.
>
>RICK KOTTLER: Yes. That is what we are saying. Everything is going to go through Merlin. Anybody have a problem with that? We are all good with it? Okay. Is there any other business?
>
>JUDY MARTIN: I just wanted to touch briefly on this veterans issue, is that the Hearing Loss Association of America has been working with that for the last two years, and if you go to their Web site, hearingloss.org, and click on the veterans section, you can see some of the things that are being done and have been done, and the other thing is that our own state organization offers to all veterans of all wars with a hearing loss, a year's membership in the Hearing Loss Association of America, which is very helpful in the support that they need. So we're with you when it comes to helping veterans.
>
>MARC DUBIN: I also want to point out that Rensselaer -- no, Rochester, has a program for veterans also.
>
>JUDY MARTIN: Yes, they do. That is listed on the Hearing Loss Association -- I think they collaborated with them.
>
>MARC DUBIN: Thank you very much.
>
>RICK KOTTLER: Anything else? Once again, next meeting, you got to be here ready to go at 8:30. Lunchtime is going to be quick and dirty and we are going to get back at it, and we will be open from -- well, we will see what the agenda says -- from 4 to 5 is going to be for public comment. Okay?
>
>VALERIE STAFFORD-MALLIS: And Rick, Wednesday May 18.
>
>RICK KOTTLER: Yes.
>
>JUDY MARTIN: I am so happy we are having of this training session on a month that I can come. I cannot come in June, and I was so scared that you were going to change the date and say oh, we can't do it until June. So thank a you.
>
>RICK KOTTLER: Prepared to take notes. Come prepared to critique. But
it's going to have to be a written critique. Okay? So they will compile all the 
information for us, but this is going to be a tough one. It's going to be the a long day 
affair.

Shana, we can talk with you about the taping, what we will need to do before we 
run out of here.

>>CINDY SIMON: This is Cindy. I just want to say that whoever set up the sound 
for this, it really worked well. I heard almost everything very, very clearly. (Applause 
for Coda sound.)

>>RICK KOTTLER: Cindy, are we going to see you next time?

>>CINDY SIMON: All of a sudden my sound went dead after I said that. Yes, I will 
be there at the next meeting.

>>GAYL: Will I be CARTing the training?

>>MERLIN ROULHAC: Yes.

>>MARC DUBIN: The reason I was asking about rescheduling is because my boss 

wants me to work on a day where politicians are going to come in and have a debate, 
in Miami Dade. Because as you may know, the Mayor was recalled. So we have an 

election the following week. So I will just point out that I will be here, but if they elect 

the wrong guy, it's your fault. Anything else?

>>RICK KOTTLER: That being the case, this meeting is closed.

>>(Concluded at 2:21 p.m.)