ADA Audio Conference Series
June 25, 2019

This session is scheduled to begin at
2:00pm Eastern Time

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• Webinar participants may type and submit questions in the Chat Area Text Box or press Control-M and enter text in the Chat Area. You will not be able to see the question after you submit it but it will be viewable by the presenters.

• If you are connected via a mobile device you may submit questions in the chat area within the App

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Customize Your View

• Resize the whiteboard where the presentation slides are shown to make it smaller or larger, by choosing from the drop down menu located above and to the left of the whiteboard. The default is “fit page”.

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Customize Your View, continued

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  • In webinar platform: Send a private chat message to the host by double clicking “Great Lakes ADA” in the participant list. A tab titled “Great Lakes ADA” will appear in the chat panel. Type your comment in the text box and “enter” (Keyboard - F6, Arrow up or down to locate “Great Lakes ADA” and select to send a message ); or
  • By Email webinars@ada-audio.org; or
  • Call 877-232-1990 (V/TTY)
Effective Communication: What does that mean?

Great Lakes ADA Center
Presented by: Shannon Moutinho

Agenda

- Orientation of Laws
- Deaf Populations
- Accommodations Options
- Effective Communication in Practice
- Conclusion

Shannon Moutinho, M.S.
Accessibility Law

Americans with Disabilities Act (Titles II & III)
Rehabilitation Act
Section 504
Affordable Care Act
Section 1557

Effective Communication

1. When is communication effective?
   When the patient understandsthe information.

2. How do you know that you have achieved effective communication?
   Ask the person to repeat back to you what they have understood.

Effective Communication Fact Sheet:
Americans with Disabilities Act (Titles II & III)

The Americans with Disabilities Act of 1990 (ADA) prohibits discrimination of disabilities in employment, state and local government services, public accommodations, transportation, and telecommunications.

Title II: State and local government services (includes Primary Consideration)

Title III: Private businesses and nonprofit organizations that serve the public

Rehabilitation Act Section 504

Section 504 of the Rehabilitation Act of 1973 (Section 504) forbids public and private entities that receive financial assistance from any federal department or agency (Medicaid, Medicare, and ACA insurance) from excluding qualified individuals with disabilities or denying them an equal opportunity to receive program benefits and services.
Affordable Care Act (ACA) Section 1557

- Section 1557 is the civil rights provision of the Affordable Care Act of 2010.

- Consistent with existing requirements, Section 1557 requires covered entities to take appropriate steps to ensure that communications with individuals with disabilities are as effective as communication with others. Section 1557 also requires covered entities to provide appropriate auxiliary aids and services, such as alternative formats and sign language interpreters, where necessary for effective communication.

Primary Consideration

Public entities are encouraged to honor the choice of the individual with a disability. The individual with a disability is in the best position to determine what type of aid or service will be effective.
Exceptions/Limitations

Fundamental Alteration

A change that is so significant that it alters the essential nature of the goods, services, facilities, privileges, advantages, or accommodations offered.

Undue Burden

Gerena v. Forgari - In a 2008 New Jersey, a physician refused to provide an ASL interpreter claiming undue burden since the interpreter’s fees were higher than the physician’s hourly rate. Undue Burden was not found and the physician paid a $400,000 jury verdict in addition to $200,000 in punitive damages to the patient.

Surcharges

The Rehab Act, ADA and ACA all prohibit the providers from requiring a patient to assume any of part of the cost of providing auxiliary aids and services used as accommodations toward achieving effective communication. 28 CFR 36.301
Deaf Populations

- deaf
- Hard of Hearing
- Deaf
- DeafBlind/Low Vision
- Deaf Disabled
- d/Deaf ASL-SL/ESL

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Deaf Populations

<table>
<thead>
<tr>
<th>deaf 📞</th>
<th>Hard of Hearing</th>
<th>Deaf 🦠</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Do not use sign language.</td>
<td>- Have some hearing with assistive device (hearing aid, implant, FM system, etc).</td>
<td>- Primary/preferred mode of communication.</td>
</tr>
<tr>
<td>- Do not identify as culturally Deaf.</td>
<td>- Might prefer captions.</td>
<td>- Visually oriented.</td>
</tr>
<tr>
<td>- Often raised with oral method.</td>
<td>- Often use sign language.</td>
<td>- Identify as culturally Deaf linguistic minority.</td>
</tr>
<tr>
<td>- Maybe late-deafened.</td>
<td>- Often identify as culturally Deaf or Hard of Hearing.</td>
<td>- Straight forward communication</td>
</tr>
<tr>
<td>- Might identify as hearing impaired.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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### Deaf Populations

<table>
<thead>
<tr>
<th>DeafBlind</th>
<th>Deaf Disabled</th>
<th>Deaf ASL-SL/ESL</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Tactile/Pro-tactile Interpreting.</td>
<td>● Physical, Intellectual, etc</td>
<td>● Often immigrants.</td>
</tr>
<tr>
<td>● Might use Braille.</td>
<td>● Language Deprivation</td>
<td>● Neither ASL or English are the native language.</td>
</tr>
<tr>
<td>● Environmental adjustments</td>
<td>● Might work with advocate or social worker.</td>
<td>● Deaf interpreter strongly encouraged.</td>
</tr>
<tr>
<td>● Service Support Provider (SSP)</td>
<td>● Sometimes isolated from common knowledge</td>
<td></td>
</tr>
</tbody>
</table>

### Considerations

- **Illiteracy**
  - “I’m not so great with English…”

- **Limited Peripheral Learning**
  - Information that seems common in the hearing mainstream is not necessarily common for a Deaf person.

- **Family Networks**
  - Among the signing Deaf community, family networks are often comprised of other community members who sign but are not necessarily blood relations.
Accommodations for effective communication:

It depends...

Myth

Lip reading is an effective mode of communication for most if not all Deaf people.

Fact

➔ Average rate of accuracy = 12.4%
➔ > 30% is an outlier

Requires:
- Contextual knowledge of the subject
- Residual hearing
- One-on-one setting
- Communication with eye contact
- A clean-shaven face
- No accents
- Standard mouth shape and speech production
- Excruciating amount of patience.
## Getting Started

<table>
<thead>
<tr>
<th>Who &amp; What</th>
<th>How Often</th>
<th>How Soon</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who is requesting?</td>
<td>Is the event ongoing?</td>
<td>Emergency request strategy in place?</td>
</tr>
<tr>
<td>What are they requesting?</td>
<td>How many consumers are requesting the same service?</td>
<td>Is your requesting policy clear and easy to find?</td>
</tr>
<tr>
<td>For what kind of an event?</td>
<td>Seasonal?</td>
<td>What does the landscape of service providers in your area look like?</td>
</tr>
<tr>
<td>Gender specific?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can services be remote?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A “qualified” interpreter means someone who is able to interpret effectively, accurately, and impartially, both receptively (i.e., understanding what the person with the disability is saying) and expressively (i.e., having the skill needed to convey information back to that person) using any necessary specialized vocabulary.

The ADA purposefully leaves “qualified” vague so that states and regions can decide what best serves their needs. Also the needs of each individual and situation is unique and credentialed does not always mean qualified.

Credential requirements differ state by state. Find your state’s requirements here: [https://www.rid.org/advocacy-overview/state-information-and-advocacy/](https://www.rid.org/advocacy-overview/state-information-and-advocacy/).
Sign Language Interpreters

1. Agency or direct contract - RID.org
2. Does the d/Deaf person have a preferred interpreter?
3. Provide prep material to the agency/interpreter.
4. Don’t engage the interpreter on the job.
5. “Don’t interpret this…” - rude and inappropriate.

Sign Language Interpreters

- Say your name before you speak in group discussion.
- Always use the microphone.
- Caption your videos.
- Careful with lighting.
Deaf Interpreter

Deaf Person → CDI → Interpreter → Hearing Person
Deaf Interpreter

Good opportunities to use a Deaf interpreter:
- ASL-SL/ESL
- Intellectual disability
- Deaf people with CP or other
- Language models for children
- DeafBlind
- Emergency briefings

Video Relay Service (VRS)

**Video relay service** (VRS) is live interpretation on a phone call. The hearing caller dials the d/Deaf person’s video phone phone number. This number is registered with FCC as a video phone and will be automatically routed to an interpreter (relay service). The interpreter will complete the connection to the video phone and proceed to simultaneously interpret the call. This service is public and automatic; it does not require the entity to prearrange service with a service provider.
Video Remote Interpreting (VRI)

Video remote interpreting (VRI) is interpretation between two or more people in the same room with the assistance of an interpreter on a video phone who is in a remote location. VRI is not an interpreted phone call.

In the absence of an on-site interpreter, the opportunity to utilize video communication technology to obtain interpretation services improves care for patients who are Deaf and hard-of-hearing.

This service must be prearranged with a VRI service provider, set up within the entity and staff trained on how to use it.

VRI - Getting Set Up

- Screen
  - Computer/Laptop
  - Television
  - Videophone
  - Tablet or iPad
- Mobile device – not a smart phone
- Webcam
- Microphone/Speakers
- High Speed Internet Access
VRI

If VRI is used as an accommodation, **all** of the following specific performance standards must be met:

- Real-time, full-motion video and audio over a dedicated high-speed, wide-bandwidth video connection or wireless connection that delivers high-quality video images that do not produce lags, choppy, blurry, or grainy images, or irregular pauses in communication;

- A sharply delineated image that is large enough to display the interpreter’s face, arms, hands, and fingers, and the face, arms, hands, and fingers of the person using sign language, regardless of his or her body position;

- A clear, audible transmission of voices; and

- Adequate staff training to ensure quick set-up and proper operation.

CART

**Communication Access Real-time Translation**

- Comes with equipment.

- Not as mobile as interpreter.

- Can be remote.

- Always use the microphone.

- Human service.
FM Loop System

- For large auditorium/conference style rooms
- Can connect with hearing aids/implants
- Can connect with provided listening devices
- Needs to be installed structurally

Open/Closed Captions

- If you show films in presentations, classes, cultural events, etc.
- If you make films for your business, organization, etc.
- Plays/scripted live performances can be done for free.
- Third parties can caption videos for you.
Visual Aids

- Visual charts
- Imaging
- Medical
- Scientific
- Etc.

Written Communication

- For short communication needs only.
- Can people read your writing? Can you read theirs?
- It is slow - how much time do you have?
Conclusion

1. Who is your Deaf client and what are their communication preferences?
2. Strategic planning of accommodations services.
3. Work with the accommodations provider prior to the event.
4. Effective Communication is case by case.
5. You are responsible for ensuring that communication has been effective.

Questions!

You may type and submit questions in the Chat Area
Text Box or press Control-M and enter text in the Chat Area
ADA National Network

info@adata.org
www.adata.org
1-800-949-4232 (V/TTY)*

Several Centers have Video Phones, check website for published video phone #’s

Thank You!

Next Session: July 16, 2019

ADA Anniversary Update: 29 Years Burning Down The Road

Register at: www.ada-audio.org or call 877-232-1990 V/TTY