**LOUISIANA COMMISSION FOR THE DEAF**

**Board of Commissioners**

August 18, 9:00am-1:00pm

Minutes

**I. Roll Call & Introductions**

a. Meeting called to order by Chair Dr. Delgado 9:06 am

b. Members Present: Dr. Ashley Argrave, Melissa Bayham, Brad Wellons, Sajata Varner, Sherry Crosby, Jason Isch, Sherry Powell , Davondra Brown, Denise Crochet proxy Lynne Gomez, Marissa Ramos, Cammy Gaspar, Bambi Polotzola, Dr. Megan Wimberly, SSD rep Dr. David Martin, LDOE rep Meredith Jordan, Dr. Natalie Delgado

c. Members Absent: Representative Scott McKnight, Senator Sharon Hewitt

d. LCD Staff: Jana Broussard, Jazmyne Lemar, Victoria Regueira, Brittany Welch

f. Ancillary support: Interpreters: Malachi Mooney, Sylvie Sullivan, Annette Poche, Lissa Gill; Remote Captionist provided by CC Group

**II. Approval of Agenda** (Isch, Wellons)

**III. Approval of Minutes** (Isch, Crosby)

1. April 21, 2023
   1. Space between Isch and asked on line IV, i,i,

**III. Public Comment:**

1. Confidential: 1. Increase the need for SSP hours. Current 25-40 hours and not sufficient for DB individuals which leads to isolation and limited support. Please consider increasing hours to meet diverse needs. 2. Need for tactile interpreter via video phone. Increase tactile interpreter and not reply solely on SSP. 3. It sometimes is confusing to switch between tactile interpreters and SSP because of the time sheet.
2. Brandi Bordelon: Apologizes for not being present. I appreciate you sending my name for the award I received last meeting. I applaud LCD for partnering with Disaster Relief to better prepare. Next Emergency preparations meetings: Shreveport August 17&18, Monroe September 15 &16, Baton Rouge October 7&14, Lake Charles November 4&11.
3. Peter Broussard (PJ): DB individual who has an idea to compare from SSP services for Oklahoma and Louisiana. We do not have any vocational transportation and I would like to set up transportation for work for DB individuals. The current SSP hours are limited to use for vocational transportation. We need transportation from home to work. Perhaps we can use funds from our taxes that are separate from our regular SSP hours.
   1. Comm.Isch: I agree with PJ. We should establish a program for transportation to jobs. Deaf Focus pays for our DB employee to go to work everyday and I do not think that is fair to businesses.
   2. Comm. Bayham: LRS can pay for transportation while we are receiving services and short term. We cannot pay for transportation long term.
   3. Comm. Polotzola: Are we still servicing DB employees equally to even find work? Perhaps we need to look at that as well. 2. Response to confidential comment: I think we need to work with home services and to continue to work with LDH to include specialized training for those people to provide those services.
   4. Comm. Dr. Wimberly: We have data collections for SSP hours and why we need those hours and how many hours we may need. Many public transportation is only provided within city limits where it is more expensive to live and you have to change your lifestyle. I support what has been mentioned in the comments regarding more transportation for DB individuals to attend work. We will add this for our agenda for the DB advisory committee.
   5. Comm. Martin: In Nashville, our blind individuals partnered with Access Ride that was more affordable.
   6. Comm. Wellons: As LCD, we need to assign this to look at needs, gaps, and budget. Where will funding come from? We have LRS for short term transportation, but there is a gap for long term transportation to work. If we can identify Budget and gap, we should have a plan.
4. John Golden: I want to recommend a Deaf Senior Citizen program. In Texas, we have one that I was involved in. We partnered with the Dept. of Aging under the Dept. of Health Services. The city council provided transportation to and from the events as well as workshops regarding health and other issues. I have a copy of all the events and costs I can share with LCD.
   1. Comm. Isch: Can you expand how the entire thing worked?
   2. Mr.Golden: Health related activities, entry level would be $5 a person and the state paid for that. Another example would be life enrichment seminar, cost was $150/hr for the presenter. We also had a newsletter.I did look at the Council of Aging but they didn’t have anything for Deaf or hard of hearing.
5. William Bell: I graduated from 1974 from LSD and moved to Texas. After retirement I moved back to Louisiana. I saw a Deaf woman in the Assisted Living center who is very isolated and has no communication. I wish I had Deaf focused retirement home. Dallas has Deaf activity center. We don’t have anything. I would like to set this up for the future.
   1. Comm. Brown: I appreciate the last 2 comments and we at LDH have been looking into the isolation issues. I know it's on our agenda and wanted to let you know we are continuing to work on this.
   2. Comm. Crosby: I went to the Deaf SC Center in Florida and I was astonished and I am working with LAD to have these discussions as well.
   3. Comm. Wellons: We need to partner with the Dept. of Aging and maybe explore even some federal funding as well.
6. Dan Arabie: I want to reiterate the DB needs. Most of you have been on the board for more than 4 years but I have seen very little solutions. I feel that everyone is in agreement but everyone is passing the blame around. I ask you please to stop and dont be idol. You say you hear our concerns, but nothing gets done. Please help us. Perhaps we need to look into a Co- Navigator program. 2. Ambulances: On mother’s day, a DB person had to use an ambulance but it was a really awful situation because the DeafBlind wasn’t sure what was happening. EMT’s need training.
   1. Comm.Dr.Wimberly: We have a letter that we sent to the LCD Director Ms.Broussard and to the board for approval. Director Broussard clarified that she sent the letter to the board for review on June 23, 2023.
7. Jimmy Gore: I want to discuss Amelia Manor. We have been asking LCD and LDH for support in this facility. Situations have happened in this nursing home where someone was left on the floor and the hearing health provider was unable to communicate with that person.

**IV. Reports (Hold board additional reports till after new business)**

* 1. Director’s Report: Jana Broussard,
     1. Welcome to our New Commissioners. Ms.Meredith Jordan, David Martin, and Ms.Sherry Crosby. We are sad to see Ms.Devondra Brown leaving but we appreciate partnering with LDH in recent months. Congrats to Dr.Delgado in her new role as LSD Director.
     2. We sent new contracts to all of our vendors as we had some changes in our contracts related to our Telecommunications Equipment Program.
     3. We have been working with Ms.Brown and the Heath Equity team and we will expand more on that shortly. Related to Health Equity, we have a new partnership with Chamberlain University which is an accredited nursing school. Vanessa Magnon, the LCD outreach coordinator, has already shared a Deaf sensitivity training to their students. They then reached out on how we could partner together in establishing a curriculum within their nursing program and perhaps with their partners in the state for current nursing staff. Partnering with them and providing training, we will be able to work with 95% of the health care workers in Louisiana.
     4. We have been working heavily on the interpreting system, standards, and guidelines. We have also been working to set up an interpreting mentorship program. We don’t have a proposal yet but it will be ready for October.
        1. Comm. Isch: Which state’s mentoring structure are you referring to?
        2. Director Broussard: Nevada specifically we are mimicking their structure
     5. Budget: 1st quarter report
        1. Revenue: 3.698 million which is more than we have ever received. Account balance: 5.697 million. There are a few reasons why we didnt spend what we budgeted for; example: didn’t hire as we expected to, someone resigned; part time staff variances, travel, training, supplies, etc. Professional services are often the biggest variances and largest line item.
           1. Hearing Aid program: The goal for last year was to give 3 million dollars to the hearing aids program to reduce the hearing aid wait list. That would serve 2,000 people. We actually spent 2.8 million which was 1,881 hearing aids. Our goal was a 2 month wait. Our results were NO: 3 months wait, BR: 2 month wait, Monroe: 4 month wait, Lafayette: 3 week wait, etc. Previously the wait was over a year in most regions.

Comm. Dr.Martin: Question on budget process. Does the appropriation come from the legislature? How is that decided?

Director Broussard: Funds are solely from tax. No general funds. On average about 3.6 million collected. The money we don’t spend, stays with us. It doesn’t go back to the state. The 5 million is rollover of what has not been expended to date.

* + 1. AdHoc committed report Lynne Gomez: The interpreting adhoc committee has 7 members. There is a certification requirement for adhoc members which was a 4.0 EIPA or national certification. There are no Certified Deaf Interpreters in Louisiana so we invited someone who is in that process. We also tried to include different areas. The first meeting is August 23, 2023. July 19 we were informed by Dept of Health’s Legislative Deparment that some rules for interpreters needed to be finalized by Nov.10, 2023. The members include Denise Crochet, Lynne Gomez, Leslie Knowles, Earl Harden Jr., Melissa Welch, Natasha Ayamni, and Walker Estes.

**MOTION**: to approve the list (Isch, Gaspar) Motion Carries

* + 1. LDH: Comm. Davondra Brown: As part of the (Health Equity Action Team (HEAT) is incorporated of different representation across the Dept. of Health. We have been working with HEAT to make some moves in some of the issues brought up in our meetings. We currently only facilitate making sure facilities are abiding by federal guidelines. So now we are talking about equity and quality of care. Sometimes this is tied by LDH so HEAT is working on equity of care more in depth. This conversation will continue.
       1. Comm.Isch: You mentioned VRI has satisfied ADA requirements but I disagree as there are issues such as internet issues and other issues. It does mention that you are supposed to ask the patient. For example, VRI is not appropriate for a DB person.
       2. Comm.Crosby: Does LDH have people in each group to help push those issues along for example DHHDB? Or is it only this group? I mean do you have someone who is Deaf internally?
          1. Comm.Brown: we have 6600 employees. That is an internal work group because whether someone identifies as DHH it is not identified from HR. We do have Deaf employees but these people are not active in these discussions willingly. I do agree with Comm.Isch that there is more work ahead to make sure ADA is understood fully.
       3. Comm. Isch: ADA says “reasonable” accommodations. But this is often misleading and needs some cultural sensitivity. I appreciate the work but I am still dissatisfied with the progress. We need to disseminate trainings to the LDH.

**V. New Business**

A . Impact of SB98-Decisions regarding Act 128 on the LA omission for the Deaf Program and Board Structure: Innivee Strategies, Shane Feldman and Davin Searls

1. Overview of Issue and History of Advocacy and Act 128
2. Review of Act 128:
   1. The board has 2 responsibilities 1. Work on behalf of the DHHDB community and their best interest. They do this by 1. Making recommendations on program improvements and ideas and bringing attention to specific issues within LDH - but they can take or leave their recommendations. 2. To advocate for the DDHHDB and make recommendations to state or local programs to increase their capacity.
   2. Changes: The board is now a separate and distinct entity from the historical LCD. Now responsible for setting up their own meetings, leading advocacy efforts, and any other endeavors created by the board (no longer shared by LCD staff). Explanation of the changes in detail. Depending on structure, the search for the Executive Director may need to be postponed.
   3. There are a few choices needing board vote. (Powerpoint explanation shared by Innivee Strategies)
      1. **Option A: (Current structure)** Executive Director (ED) oversees LCD programs/services. Board provides advisory support for LCD and its programs and services as volunteers. Board responsible for advocacy, facilitating board meetings, and carrying out all action items designated by/assigned to the Board. LDH/OPH/BFH oversees LCD.
      2. **Option B: (Fully functional separate structure: board/program)** LCD commits to securing funding for staff resources/funding for the Board. ED (or similar paid staff) responsible for carrying out Board’s efforts in operations, advocacy, and educating others. LCD programs/services and staff remain unchanged. Board continues to advise on LCD’s programs/services within their advocacy role.
      3. **Option C:** (Independent structure) As an independent agency, LCD functions as a whole entity with a board, program, staff, services, etc. Board becomes responsible for hiring, evaluation, and termination of ED. ED oversees LCD programs/services and carries the activities of the Board. Board provides governing oversight for LCD and its programs and services as volunteers, plus is responsible for approval of budgets, new programs/services, etc. A state department may provide admin/fiscal/HR support.
   4. Questions and Comments:
      * 1. Comm. Wellons: 1 question related to the budget: Under Act 128 the Board does not have the authority to approve the budget. I don’t see that we can or can’t in Act 128. Whose interpretation of that?
           1. Innivee: Our understanding is that the staff is under LDH. The Commission/Board has an advisory role but decisions rest to LDH.
           2. Comm. Wellons: I just wanted to clarify that control of the budget is a lot of power.
        2. Comm. Isch: About 8 years ago, I mentioned LCD commission should be independent because it is being controlled by hearing people. I think we should be independent and I think it would give us the ability to make our own decisions. I think we should choose Option C.
        3. Comm. Polotzola: Slide 18 regarding funding. I think there would need to be a line item that needs to be appropriated and put to LCD.
        4. Comm. Isch: When we discuss budget, I know we need additional funding for things that we need to do. I wonder if we can double the tax for our funding.
        5. Comm. Dr. Wimberly: I am the DB rep on the commission. Under option C, would we have the opportunity to change funding for those specific programs?
           1. Innivee: With Option C, the board would be more directly involved in the decisions as now we can only advise or recommend. The relationship would be different.
        6. Comm. Dr. Argrave: Are we allowed to accept funding from other agencies or receive other funding from different sources?
           1. Innivee: Based on current law, Yes

**MOTION: extend motion 1 hr. (Isch, Crosby) 1 opposed (Wellons)- Motion passes**

**MOTION: set up a committee to discuss this in further detail (Isch, Gomez)**

**REVISE MOTION: vote on option C and establish a committee to discuss further? (Isch, Polotzola)**

Discussion:

1) Comm. Dr.Martin: It looks like the secretary for LDH to make decisions. It seems that Option C would need new legislation so that the Board would be separate. I think Option C sounds like a great idea but we need more discussion. I would have to abstain today if we voted today.

2) Comm. Brown: In all options, are these additional funds required by the same rules if we collected funds outside of the tax?

Innivee: We believe so

3) Comm. Polotzola: We have a great example of Option C with the Developmental Disabilities Council (GODA) I have heard that this commission wishes to have more autonomy. This seems like Option C.

4) Comm. Dr. Wimberly: When speaking on autonomy? Have you seen other states go from Option A to Option C?

5) Comm. Isch: One of the very first things I said 8 years ago was that we (the commission) need to be independent. We need to pick Option C.

6) Comm. Ramos: If someone feels confident about a specific option then I feel that we need to look more further into that. So I feel that I need more

7) Comm. Crosby: I need more information.

**MOTION ROLL CALL VOTE: DOES NOT PASS,** 11 abstain (Argrave, Bayham, Martin, Powell, Brown, Delgado, Gomez, Ramos, Gaspar, Wimberly, Jordan) 3 no (Wellons, Varner, Crosby), 2 yes (Isch, Polotzola)

**MOTION Establish a committee to discuss A, B, C in more depth (Ramos, Gomez)**

Discussion:

1) Comm. Wellons: Yes I believe we need more autonomy but I believe why many people abstained and voted no is because we need more information.

2) Comm. Ramos: I believe we have to vote very intentionally but many of us may be new and need more information. I believe in more autonomy but we need more discussion.

**Amendment to Motion: to eliminate Option A ad form a committee to research structure B and C further (Isch, Wellons) Roll Call Vote, MOTION CARRIES** 14 yes (Argrave, Isch, Delgado, Bayham, Wellons, Polotzola, Wimberly, Crosby, Gomez, Ramos, Powell, Jordan, Martin, Gaspar) 2 abstain (Varner, Brown)

B. SB 201-Act 393: Information for meetings of boards and commissions via electronic means: Presented by Shane Bates and Ayesha Urimar, BFH Legislation and Policy Team - To clarify new open meeting laws including virtual meetings and how this may impact the LCD.

C. LCD Leadership Cohort: 10 month long program intended to develop leadership skills.

1. Amy Shamburger: I applied to this program but I know I had leadership potential but I didn't have tips or resources to guide me through the process. I have learned to look at the bigger picture of things and work together to strengthen the Deaf community. We have been given a toolbox of how to be effective leaders. I hope we continue with this leadership program.
2. Nigel Burkhalter: As a group, we need more DHHDB leaders. There are 11 of us who meet 1 time a month ran by Innivee strategies. I have learn my Why? It is to build a Deaf ecosystem. We also discussed looking at a larger picture. We discussed technical and adaptive solutions. Now, I feel like I can better identify my challenges and even some solutions. I am excited for what I have learn and what I plan on learning in the future.
   1. Comm. Isch: I am thrilled to see progress and look forward to more leadership programs in the future.

D. LCD Logo. **MOTION**: **To approve: (Isch, Crosby)** None opposed. **MOTION CARRIES.**

**VI. Old Business**

A. Recruitment and Objectives for DB Advisory Council: Comm. Dr. Wimberly:. Objectives and duties of this committee have been created. It will consist of 11 people with various representations that meet the needs of serving the DB population. We hope to have this created and finalized by October 20,2023.

**MOTION:** defer all undiscussed items to the next meeting. (Isch, Gaspar) None opposed. MOTION CARRIES

**VII. Adjournment** – 2:04 pm by Chair Dr. Delgado