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Federal Communications Commission
Office of the Secretary

From: Teresa Myers [Xmeybrlz@att.net]
Sent: Wednesday, November 17, 2010 2:55 PM
To: FCC504
Subject: CG Docate 10-210 "PN Comments Specialized CPE Distribution Program"
Attachments: Definition of deaf.doc

Definition of deaf-blind: not flexible enough. I can understand speech, with hearing aides, ONLY in quiet room with no background noise. I can not use regular phone even in a quiet room with hearing aides. Definition should be functional (I have major problems in any public setting, even with hearing aides). Can use talking computer with headphones turned up extremely loud and while wearing hearing aides. I am also totally blind. A more functional definition might include being unable to understand speech and participate in public activities, use of a regular phone, ect. I am considered deaf-blind by HKNC.

HKNC representative, councilors working for state agencies, and those at state schools for the deaf and the blind should verify deaf-blindness. Doctors should *NOT* be cause:

1. Aren't trained to deal with disabled people in medical school.
2. Both doctors consulting room and audiology testing lab fail to simulate public settings. They are quiet and people speak one-on-one. They do not work with deaf-blind people on job sites, try to teach us, or work with us in group settings.
3. Low income guidelines are good.

Amplification over phone or in person is adequate *IF* above comments are considered and it is understood that when electricity is interrupted neither landline phones nor computers without battery capacity work.

Applicant should submit proof of income, and disability related expenses for past five years. This number should be averaged out to see if person falls within the guidelines. Don't forget to count assistance such as tactile interrupters, household safety equipment such as vibrating or extra loud door bells, smoke detectors, ect. All of these are very expensive and communications equipment is usually more so. Averaging cost of needed personal assistance, plus the above, should be considered when determining deaf-blind person to be low income. Also, if deaf-blind person must pay for travel to another city for cochlear implant, training in tactile ASL or independent living skills, these expenses should be counted.

"Internet access service" definition is fine. With training, we can learn to use search engines.

CPE should include:

1. Cell phones with Braille displays for texting and large print displays.
2. High speed internet access should be available for both lap top and larger personal computers.
3. Computers may need Braille and large print displays. Speech amplified with volume control and headphone jack options. PDA type devices may need these same options to help deaf-blind people become employed.
4. Cell and other phones should have buttons with contrasting large letters (white letters on black backgrounds, for example) and numbers. They should also have buttons which are larger and slightly separated from one another rather than being a nearly flat keypad. Ideally, Braille Writer style keyboards and Quarty keyboards should be available for computers.

I do not know how much CPE exists as I cannot afford to purchase it.

For people with severally limited vision and hearing specialized equipment is often not available at retail outlets. My speech output program alone cost $1000 and this doesn't count the CPU, computer monitor, or scanner/printer/fax, which taken all together cost less than speech software. Instruction, maintenance, and repair for my computer can easily cost $75 per hour.

If it is possible for the Commissions to partially or fully fund equipment for deaf-blind people and

thereby cause the cost drop this would be very helpful.

If equipment useable by general public requires additions to be used by deaf-blind, such standardized equipment should either be purchased by NDEDP or services of a *qualified* assistive technology specialist should be paid for by NDEDP so that:

- DB (deaf-blind person) is sure to purchase equipment which is *compatible* with specialized equipment NDEDP.
- Such a qualified assistive technology specialist should be offered and paid for by your program or other agencies serving the DB population.

It is important to put non-specialized and specialized equipment together so as to best serve the needs of a particular DB applicant.

If cost of software and firmware is high then your program may need to pay for these low income deaf-blind people. Again a qualified assistive tech specialist can help choose compatible equipment. Such specialists have a working knowledge of the cost of upgrades and pieces of specialized equipment. They can help take the cost of *future* upgrades into account *before* equipment is purchased. This may save money in the long run.

Web content is often inaccessible to deaf-blind people. Government itself often sends totally inaccessible mail. Braille (my language of literacy) is not available. Major internet retailers should be required to have an *accessible* link as Amazon.com does. This would help with sites like Wal-mart, Target, Barnes & Nobles, ect.

There is not enough affordable tactile ASL teaching. Low income deaf-blind people can't always go to HKNC or afford transportation to and from ASL classes. We also need help in accessing the print books used in classes, an aide to physically demonstrate ASL signs, and the tuition and book costs for the class itself.

The phone use is a struggle for those who cannot afford cell phones or specialized cell phones. A good portable amplifier which could be attached to phones in medical buildings, hospitals, & doctor offices, would be very helpful. Public telephones have disappeared and deaf-blind people may not be able to use standard cell phones. Some deaf-blind people can use commercially available *amplified* cell phones, if they have enough vision to tell the buttons apart. These problems should be addressed by the FCC and the Department of ED whenever possible. *Qualified* deaf-blind people should be hired to teach ASL to both deaf-blind people and sighted-hearing people.

An assistive technology specialist can look at specs. for different pieces of equipment including their projective life spans. Equipment upgrades should be made when:

- A person's vision or hearing decreases quickly.
- When equipment in use is destroyed by a verifiable "act of god" such as natural disasters and house fires. Robberies which are verified by law enforcement officials and which destroy or steal such equipment should also be counted.

Conditions for equipment upgrades (above) should also apply to equipment replacement.

New equipment should be offered every four to five years when old equipment is no longer usable and applicant has not deliberately broken it. Old, but usable equipment should be cleared of personal data (cell phone numbers, old e-mails, ect.) and returned to the distributor to be inspected and then redistributed to another deaf-blind person.

New equipment as much as possible be created which is usable by both the general public and people with disabilities. For instance, an ATM with Braille keys, a headphone jack (for speech), and large print display with good contrast could be used by the general public, blind people, deaf people, and many but not all deaf-blind people.

I don't know your programs framework, but using monetary incentives could encourage companies already making specialized equipment to use more generally available technology. Once "universal design" became the accepted norm costs for equipment could drop due to its mass production. Disabled people would no longer be the captive audiences of a few companies.

In Missouri I have found the TAP (Technology Assistance Program) working through Centers for

Independent Living to be the best way of finding equipment suitable for the deaf-blind. TAP is very effective but more training should be given after equipment is distributed. This distribution system allows consumers to try using equipment before choosing what works best. I would like to see this option available for all deaf-blind people *instead of* vouchers, subsidies, ect. Demonstrative centers are needed.

I would like to see State agencies and programs become the primary sources of equipment distribution. There must be a Federal Program for states with no EDP Programs. This program should follow guidelines of the most effective state programs as determined by audits.

State programs should be considered as CPE, *but* only with training of the employees. If a counselor for the blind does not know tactile ASL (the primary language of Deaf-blind people) how can he/she be of any help? Interrupter services are expensive, who will pay the interrupter working with the non-ASL speaking counselor for the blind and the deaf-blind consumer? The agency should be the interrupter if they aren't willing to train an employee and make sure this person practices the new language.

Similarly, a capital VR counselor for the deaf should have at least a rudimentary knowledge of Braille such as the alphabet and numbers. Otherwise, how can training with a Braille display take place?

Partnering an organization experienced in working with deaf-blind people with a state agency responsible for distributing equipment might solve some of the above problems.

Relay services could be funded by adding an extra dollar or two everyone's phone bill.

The TRS Fund administrator's roll should be limited to compensating qualifying programs as directed by the FCC. Annual independent audits (or biannual audits) of funds dispersed and services provided by qualified providers should be done.

There have already been cases of video relay service fraud. Service providers could send an annual financial report to the FCC which could either be accountable for reviewing them or could send them to the Office of Budget Management.

Included in the approval process for state programs *must be* a working knowledge of ASL, low vision technology, and rudimentary Braille.

States with their own equipment distribution programs should not be overtaken by the capital commission. The capital commission's guidelines seem appropriate for determining who is low income. These guidelines should cover states with no equipment distribution program.

Qualifying programs should be eligible for yearly funding, but not for the same deaf-blind people unless through no fault of their own equipment is lost or destroyed.

If states don't have a telephone relay service then equipment may be needed in one state which isn't needed in another. The same equipment should be available to all states unless (as in the case of a telephone relay service) the needs of deaf-blind people in a particular state are already covered.

If a state has no Medicaid and a deaf-blind person has no insurance coverage for evaluations for hearing and site the Commissions Program should pay for such evaluations. Please remember the problem conducted with hearing evaluations in doctor's offices and audiology labs. A deaf-blind person's privacy should be protected but functional tests of hearing, such as conversing in a noisy restaurant or home, are a much better assessment of useable hearing than one-to-one conversation in a silent office.

Costs for training and training materials should be included existing state programs. Where no such program exists the Commission should assume the cost of training. Training should specify exactly what should be learned by a deaf-blind consumer. All uses of equipment may not be needed. For instance, I could be taught how to be played video games on my computer but the only thing I could do with this knowledge is pass it on to sighted-hearing friends. As I am totally blind, my training should also *not* include low vision applications of equipment. If training can not be completed in the time allowed a technology specialist must show *why not* before time is paid for by either a state of FCC program. Manuals readable by the deaf-blind consumer *must* be made available.

The cost of equipment maintenance should be weighed against the cost of replacing equipment. Although I hate the values of this "throw away anything which isn't perfect," it is sometimes cheaper to replace broken equipment (such as a printer) than it is to repair it. Upgrades should be covered by this program only when it can be demonstrated that existing equipment no longer meets consumer's needs or is no longer compatible with equipment used by the general public. When broken equipment is the fault of the deaf-blind

person, older equipment already in state offices maybe substituted. Otherwise the person must wait at least two years before equipment is replaced unless doing so would endanger his/her life (such as a doorbell or smoke detector).

For people who have never had special equipment before, basic training is essential. They may truly not know how important it is to keep children, pet, and unauthorized users away from their equipment even if it means closing off a room or part of a room. Also, basic instructions about keeping food and drink away from equipment should be given.

There should be a limit on equipment received by a household but many factors enter into this situation. The deaf-blind person may have new needs because:

- They moved to a new house and due to its structure an amplified phone or Silent Call can not work. The amount of metal and construction of a dwelling can affect the ability of a deaf-blind person to hear an amplified phone or receive signals from a vibrating pager.
- If a new baby becomes present in the household, a vibrating baby monitor may be needed.

A person familiar with deaf-blind person and their needs should evaluate such situations. A technology specialist *not receiving* gifts from any equipment company can help choose the best equipment. Qualified deaf-blind applicants *should* be hired for these kinds of jobs whenever possible. I know a deaf-blind lady who is teaching ASL to both deaf-blind and sighted-hearing people. She can speak well.

The cheapest equipment which will *truly* meet the consumer's needs should be purchased. This is all I can say about limiting the cost of a particular item.

Your program serving as an adjunct to state programs serving the deaf-blind can help buy making more funding available for *needed* equipment, paying to train state workers in the skills of Deaf-Blindness (especially Braille and ASL), and by helping with the cost of assistive technology specialist to train deaf-blind consumers. Companies selling equipment for the deaf-blind should be *required* to provide manuals in a format they can read.

If ten thousand dollars is the cost for a complete set of needed equipment for the deaf-blind maybe this should be the cap on equipment to a person from any one state. Unless it can be clearly shown that the person's needs has changed or that the equipment in lost in an "act of God," fire, or theft.

Another cost cutting measure is for the states to take back old equipment which a deaf-blind person can no longer use when it is to be replaced. Also when a consumer dies, equipment should be returned to the state. It can then be inspected and given to another consumer if it meets the person's needs. This can happen even if more fancy or more upscale equipment becomes available on the market.

Independent audits can determine the effectiveness of this program. Also records of appeals *against* state decisions should be kept to make sure equipment is distributed fairly. Programs must give deaf-blind consumers the right to appeal their decisions in an *accessible* media. An audit every two years should ensure that records are updated. Records explaining consumer equipment needs and uses should be kept for five years.