

Response to FCC 13-82 (Section V; Paragraph H)

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With special thanks to Jason Burnley.

I. DETRIMENTS OF THE CURRENT SYSTEM OF EMERGENCY COMMUNICATIONS RELAY

- *From an interpreter's perspective, an emergency call is mixed in with regular traffic. There is no knowing whether you'll receive one on any given day; when you do, the surprise can set the entire process off on the wrong foot.*

For a number of valid reasons, the first available VI or CA may not be comfortable processing an emergency call. In some cases, simply being presented with the situation produces acute anxiety—I've witnessed this multiple times as a VI.

When a call comes through VRS for someone who would rather not take it, one of two things happens:

1. The call is declined by the VI and re-enters the queue at the top slot, per FCC rules on prioritizing emergency calls; or
2. Afraid of being perceived as incompetent by his or her peers, the VI takes the call against their better judgment; with backup from a second interpreter, the VI processes the call.¹ Should it be determined that the first interpreter is unable to continue, the two switch places.²

In the worst-case scenario, how long could an emergency call bounce around until it finally finds a willing VI or CA? Is that VI/CA, despite being willing, capable? Could critical time be lost because a call was not processed immediately or continuously?

- *The current system does not have a mechanism to develop industry-wide standards for best practices in emergency communications delivery based on the collective experience of those who have processed emergency calls.*

Any developments arising from company-funded activity are considered intellectual property, or proprietary. Best practices can originate from the

¹ As far as I'm aware, all VRS companies require that 911 calls be "teamed"—one interpreter handling the communication, with another set of eyes and ears for backup and, possibly, to switch with the other interpreter.

² At this point, the original VI sometimes finds a more capable replacement to serve as backup for the remainder of the call. From my experience, this is a matter of individual discretion and not standard operating procedure.

interpreting community—workshops by individuals or a committee established by RID. In either case, it's tasked to a small group of people.

To the best of my knowledge, there are no training materials or *regular* workshops available to interpreters that discuss this subject outside of provider-sponsored offerings for internal staff.

Should information with the potential to raise standards for emergency communications delivery industry-wide be considered private property?

- *The current system lacks standard operating procedures that address issues of job-related stress or vicarious trauma as a matter of routine.*

Current supports range from open door policies for center management to Employee Assistance Programs [EAPs]. Each of the options presented to me were self-initiated processes; none were proactive on the company's part.

What happens to a VI or CA struggling with job-related stress or vicarious trauma that opts not to take advantage of the Employee Assistance Program and goes unnoticed by center management?

II. Disaggregation of Emergency Communications Delivery

I stand behind the EAAC's suggestion to disaggregate emergency communications delivery from mainstream TRS. By designating responsibility to a sole provider, you ensure a single standard of service delivery and a coordinated effort at analysis of and improvement upon that standard.

As a matter of corporate responsibility, TRS providers could and should share in its execution on a rotating basis. However, a continued long-term effort by a single entity outweighs any modification to the current system.

A. Basic Structure

Imagine a project (pilot or otherwise) established under the auspices of a Federal agency.³ Positions in the workgroup would be advertised to interpreter candidates as set term (renewable) "Fellowships".⁴ Enough are selected from the applicant pool to provide adequate staffing for three call

³ See Appendix A.

⁴ In consideration of the fact that no examination exists that serves to gauge an interpreter's ability to function adequately in an emergency situation, task EAAC with establishing criteria for the selection of the inaugural cohorts. I would advise against minimum certification requirements—a more holistic approach may draw out excellent candidates who would be otherwise rendered ineligible. For example, I'd consider myself an excellent candidate but I don't meet the certification standards outlined in the EAAC report.

centers, each with a single team working all shifts, thus allowing the project to process a maximum of three calls simultaneously 24/7/365.⁵

B. Best Practices and Certification

Fellows would be tasked with not only facilitating emergency communications but also developing best practices to be shared with the community. Through regular analysis of recorded calls by the workgroup using Demand-Control Schema⁶, it can create and improve upon its models. Information learned is then presented to the appropriate stakeholder groups (i.e. First Responders, interpreters, TRS users).

As a condition of employment, Fellows could be required to regularly present workshops to the interpreting community and compose articles for scholarly publications (i.e. RID Journal of Interpretation) on subjects related to emergency interpreting.

After a certain point, the workgroup should be able to identify the key competencies required of an interpreter working in an emergency situation. Rather than spawning a certification from within the Government, the project can contract with a third party testing company to design an exam and administer certification.

C. Support Services

Having a specialized workforce housed in a single division allows for a focused approach to managing employee issues arising from job stress or vicarious trauma:

- *All hands group therapy meetings with a dedicated therapist both before and after shifts.*
- *Dedicated therapist available for crisis consultation 24/7/365 and outside appointments.*
- *Above-average number of vacation and sick days.*
- *Comprehensive Employee Assistance Program.*
- *Workgroup outings promoting recreation, wellness and team building.*

⁵ See Appendix B for a suggested interpreting model.

⁶ See <http://www.urmc.rochester.edu/deaf-wellness-center/demand-control-schema/overview.cfm>

D. Overflow Controls

The initial number of centers suggested is purely arbitrary. If and when the Government is able to obtain statistics on emergency calls, it will be possible to determine the minimum number of centers required to meet demand.

To prepare for the event of a mass emergency (a large number of emergency calls that exceed program capacity), teams of TRS interpreters can be selected and trained by Fellows using models developed by the project. These teams would be called in to handle call overflow out of their local centers, with project Fellows at the helm.

III. CONNECTION TIMING

The time to establish a connection between an emergency caller and a PSAP using TRS can vary according to interpreter availability and the speed of a third-party intermediary.

Although over four years have passed since I last worked in the industry, it is my understanding that a TRS provider is connected to a PSAP by way of an operator representing a third party who, using ANI/ALI information passed through by the TRS provider, determines the appropriate “back door” telephone number used to connect to the PSAP and forwards the call.

The idea of functional equivalency established in the ADA means, in my opinion, that the time needed to connect a TRS caller to a PSAP should be equivalent to that for an average person to connect to a PSAP by dialing 911 from their telephone. Given a centralized ANI/ALI database, the connection should be automated in a manner similar to that already in place for VoIP.

IV. RECOVERING STATISTICS ON PAST EMERGENCY CALLS

I've always been of the opinion that both the FCC and the public are entitled to access general statistics regarding the number and frequency of emergency calls. Providers can't be the only ones that document such things—maybe an informal inquiry of municipalities conducted by the Department of Justice of municipalities would yield some insight.

V. COST RECOVERY IDEAS

A. MCLS

- *Grant Funding⁷*
- *An increase in the amount collected from States to run TRS that reflects the cost of providing enhanced emergency communications delivery.*
- *Income from training and administering continuing education for auxiliary interpreter teams.*

B. Central TRS User Registration Database

- *Funds already collected for E911. (?)*

⁷ See Appendix A.

APPENDIX A

Why a Federal Program?

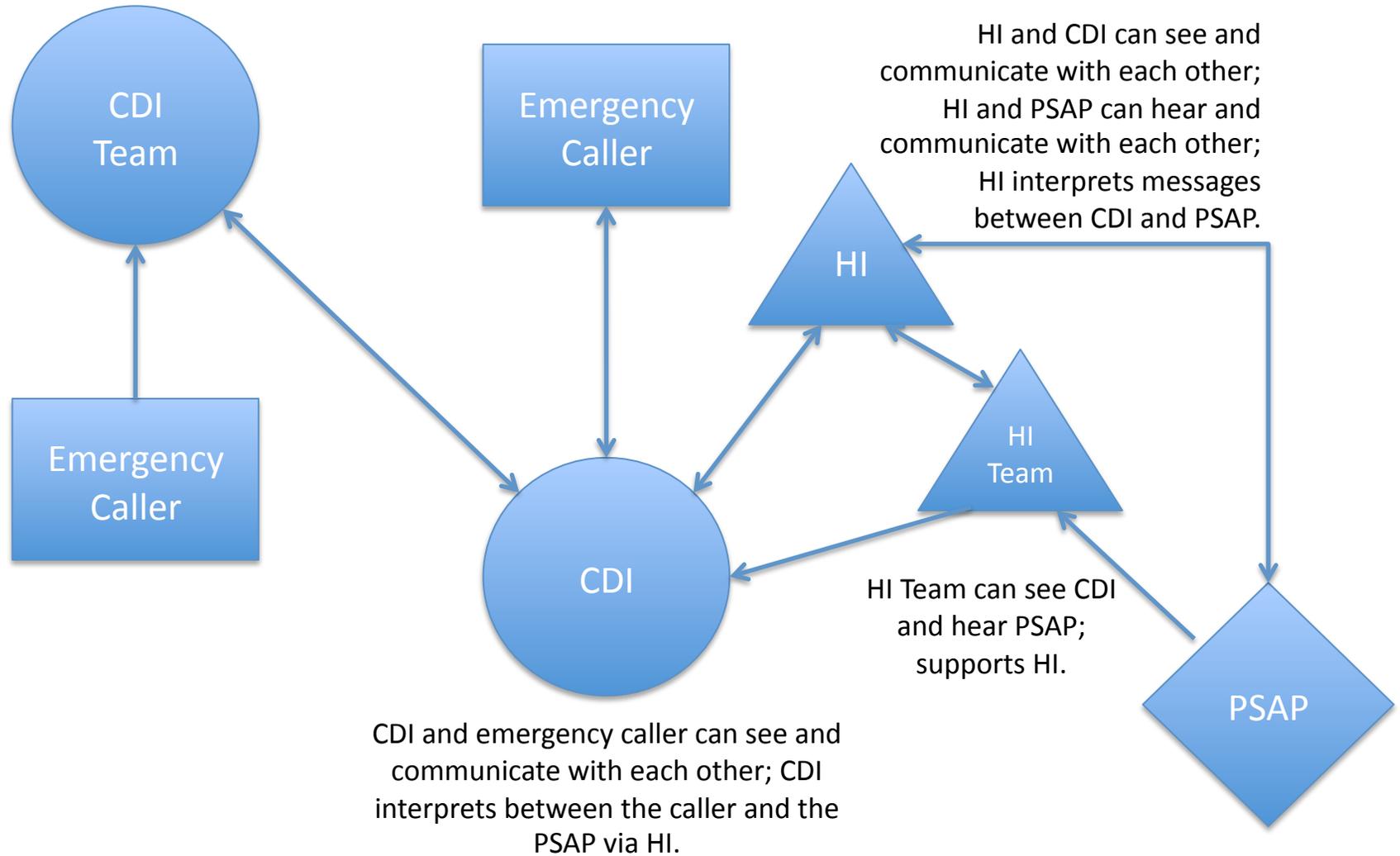
With preparations for NG911 underway, it's clear that TRS end-users are early adopters of a technology that will eventually grow to widespread use in the mainstream. One indicator—the sudden popularity of the SnapChat app on Apple and Android devices—is particularly poignant.

- Given the specifications for the project (specifically communication with PSAPs and the ability to send and receive internet-based multimedia), it could serve a purpose beyond the immediate needs of the TRS end-user community by also functioning as a proving ground for Government R&D on NG911 [i.e. DOT NG911 pilot]—a benefit to the general population in the long run.

For example, by passing through video and audio to the PSAP from the TRS end-user, the NG911 developer community can assess the efficacy of protocols for media transmission under. Of course, this implies a system that would function despite pass-through failure, but discussions on this subject are premature, at best. Considering the potential benefit to other agencies, it seems reasonable that the project could secure grant funding to shore up a portion of its operating budget.

- Also, consider the following: From the perspective of the FCC, 911 is a sliver of TRS. From the organizational perspective of municipalities, emergency communications delivery is an auxiliary function under the Emergency Services umbrella. Emergency Services aren't private companies—they're municipal services. Interpretation of emergency calls should fall under that same municipal jurisdiction, the authority for which in the case of emergency communications delivery has been passed along to the Government by States that choose not to operate their own relay services.
- As a government-sponsored project, nothing can be held back from supporting agencies as "proprietary". Information on everything from costs to call statistics will be available in regular reports.

CDI Team can see emergency caller and CDI; supports CDI.



Appendix B: Suggested Interpreting Model

HI – Hearing Interpreter; CDI – Certified Deaf Interpreter*

*(see http://www.rid.org/UserFiles/File/pdfs/Standard_Practice_Papers/CDISPP.pdf)