

Before the
FEDERAL COMMUNICATIONS COMMISSION
Washington, D.C. 20554

In the Matter of:

Structure and Practices of the Video Relay Service

Telecommunications Relay Services and
Speech-to-Speech Services for People with
Hearing and Speech Disabilities

**CONSUMER REPRESENTATIVES OF THE EMERGENCY ACCESS ADVISORY
COMMITTEE (EAAC) OF THE FCC
COMMENTS IN RESPONSE TO CG DOCKET No. 10-51 AND No. 03-123 FROM
THE REGISTRY OF INTERPRETERS FOR THE DEAF, INC. (RID) AND
COMMENTING MEMBERS**

September 18, 2013

Deaf and Hard of Hearing Consumer Representatives of the EAAC would like to respectfully respond to the concerns of RID and its members about the implementation of guidelines to improve emergency telecommunications for people with disabilities and how it relates to the structure and practice of VRS. Such comments, as well as any other feedback received, will be reviewed and taken into consideration by Working Subgroup Three: Media Communication Line Services (MCLS) and the EAAC. However, we do not believe such comments warrant rejecting the EAAC's proposal for this or any other approved Working Subgroup.

RID's summary addresses the issue of defining "functional equivalence." This is our biggest concern when comments go on to say: "In essence, the document suggests creating a group of "super-interpreters" that is able to provide a multitude of competent, functionally equivalent communication services in addition to their roles as a sign

language interpreter.” This suggestion is NOT accurate or intended for the following reasons.¹

1. The main focus of the MCLS document is intended to be delivered with functional recommendations as a stepping stone during migration toward the implementation of NG (Next Generation) 9-1-1. The main goal of MCLS is DIRECT via video, point to point call connected to a Public Safety Answering Point (PSAP) for people with hearing and speech disabilities in the same manner as any other caller. Also these callers have the options to express their communication preferences which may have one or a combination of communication modes. Additionally, the proposed role, training, and requirements for an MCLS Video Interpreter (VI) are possessed by many VRS professional interpreters working today.
2. RID addresses many specific concerns, including (some details and responses are combined):

a. No VRS or interpreter representation on the EAAC

The purpose of EAAC was to develop recommendations and solutions for people with disabilities to call directly to 9-1-1 in the NG9-1-1 environment. Congress requested that a national survey was to be developed and distributed to people with disabilities about their experience with 9-1-1 calls as well as their preferences on ways to call 9-1-1 as well as their communication modalities preferences. The MCLS work group was not established until one year later, after the report & recommendations based on the survey results were submitted.

The proposals of the EAAC and the Working Subgroups were intended to be recommendations for starting points toward implementation. Additional input and representation of various stakeholders can be added before implementation without rejecting this proposal (MCLS). Finally, there was no or very little representation from other stakeholders such as, a caption provider, an individual who is Deaf-Blind, or a TRS representative even though there was a representative from one of the VRS providers. Lack of this representation does not mean discussions or gaps analysis will stop occurring before implementation.

Additional worthy mention is the fact that RID’s point regarding the need for appropriate representation is a guideline which is not followed within their own organization. Unrelated to MCLS and 911 calling, but similar is RID’s Emergency Management Task Force (<http://www.rid.org/content/index.cfm/AID/136>). This task force does not

¹ See *Registry of Interpreters for the Deaf (RID), Inc. Comments to FNPRM [CG Docket No. 10-51 and CG Docket No. 03-123] on Structure and Practices of the Video Relay Service (VRS) Program*, at 15 (August 19, 2013), available at <http://apps.fcc.gov/ecfs/document/view?id=7520938754>

contain any recognized Deaf or hard of hearing individuals who are experts in the aspects of access to emergency services, preparedness, response, and recovery.

b. Creating “super-interpreters”

The MCLS proposal does NOT imply dual or multiple roles for Sign Language Interpreters (SLIs) and Communications Assistants (CAs). We are not clear why RID has used this phrase, “Super-Interpreters” in quotes, as it did not originate from the MCLS proposal.

Simple requirements for “minimum typing”, awareness of “etiquette” and “culture”, and interpreting in various modes and styles are all requirements that exist for current VIs of Video Relay Service, an indirect means for users to contact 9-1-1 which should also be part of the call center’s platform for direct contact with NG9-1-1. The goal of the EAAC is to ensure that the direct communication is effective for any caller with varying disabilities such as people who are deaf, hard of hearing, oral-deaf, deaf-blind, late-deafened, or speech disabled. Hence, the role of the “Telecommunicators”, in some cases, may involve communication processes such as typing or mouthing words. There may be a possibility that the telecommunicator and SLI/CA share responsibility in providing effective communication access to a caller. Therefore, typing requirements are to perform tasks such as typing phone numbers, addresses, or proper names for prompt, accurate verification purposes in an emergency situation. Typing abilities will exist on both ends of the call. This is to assist callers with varying skills in fingerspelling and sign language reception and in various traumatic states. The goal here is NOT to make a SLI perform dual or multiple roles.

It is important to understand that in order for the Deaf, deaf-blind and hard of hearing consumers to have true access to NG9-1-1, there must be a way to accept and to process calls directly via text, video, voice, and data. This will give the caller the opportunity to use more than one way to communicate at the same time. In general, the expectation is that there will be a combination of language needs and communication modalities used by callers with disabilities. SLI/CAs need to be highly trained to make snap judgments on the communication needs and modes of callers, and to be prepared to deal with the unexpected.

Moreover, the length of time for call process varies from one call to another call – it could be short or long. It is critical that the SLIs and CAs be flexible to meet communication preferences or needs of callers in order to receive appropriate assistance.

According to Code 2.3 in the NAD-RID Code of Professional Conduct², the interpreter is to “render the message faithfully by conveying the content and spirit of what is being communicated, using language most readily understood by consumers, and correcting errors discreetly and expeditiously.” Also if the interpreter finds challenges in providing effective communication services, s/he can “request support (e.g., certified deaf interpreters, team members, language facilitators) when needed to fully convey the message or to address exceptional communication challenges (e.g. cognitive disabilities, foreign sign language, emerging language ability, or lack of formal instruction or language)” in accordance to Code 2.4.³

c. Certification Requirements

A Certification requirement of the EAAC Working Subgroup proposal’s main goal is to focus on “qualified” interpreters which provides for the option of “certification from state agencies” or we may move forward to promote DOJ’s definition of “qualified interpreter”. Interpreters must adapt to each individual’s communication mode and style. If an interpreter cannot adapt then he or she is not qualified to interpret. “Qualified” is especially important since we have no way to foresee what certifications RID or other interpreter professional organizations will exist when NG9-1-1 is implemented (Master Advanced, CI, or otherwise were merely examples).

The MCLS document does not include functional requirements for SLIs and CAs and has noted that there is a “need for standard personnel qualifications (operational training, Sign Language Interpreters’ & Communication Assistants’ skills qualification, etc.) to be developed for handling NG9-1-1 calls.”⁴

The EAAC has recommended that the “FCC work with the U.S. Department of Transportation (DOT) and U.S. Department of Justice (DOJ) to take appropriate steps, wherever necessary, to ensure that

² See *NAD-RID Code of Professional Conduct*, at 3 (2005), available at http://www.rid.org/UserFiles/File/NAD_RID_ETHICS.pdf

³ *Id.*

⁴ See *Emergency Access Advisory Committee Working Group 3 Recommendations on Current 9-1-1 and Next Generation 9-1-1: Media Communication Line Services Used to Ensure Effective Communication with Callers with Disabilities*, at 9 (March 1, 2013, available at http://hraunfoss.fcc.gov/edocs_public/attachmatch/DOC-319394A1.pdf

PSAPs utilize trained and qualified SLIs and CAs with emergency expertise via MCLS during NG9-1-1 emergency calls.”⁵

Even though PSAP personnel are to be trained to provide effective communication including MCLS services, it is emphasized that “SLIs and CAs must be able to handle NG9-1-1 calls and to interpret or assist parties effectively, accurately and impartially in emergency situations as well as use a combination of communication modes accessible to individuals with disabilities.”⁶

The MCLS document has indicated, “additional certification and training criteria should be established for MCLS call centers.”⁷ However it is recommended to have a team of subject matter experts knowledgeable in sign language and communication assistance to evaluate prospective SLIs and CAs for skills and qualifications and to ensure that they are qualified in handling 9-1-1 calls.⁸

d. Well-being of Sign Language Interpreters

The basic points, including qualifications, providing critical incident stress management services, resources, etc. were derived from NENA VRS IP Relay Services Interaction OID (Operations Information Document) and are all included. We concur that the details of specific curriculum related to mental health, vicarious trauma, and stress management will need to continue to be refined based on ongoing research up to and throughout the implementation of NG9-1-1.

“An additional benefit of having direct video call to 9-1-1 is telecommunicators will be able to provide visual information on callers and their surroundings to first responders. This will help to minimize frustration and problems for both callers and first responders.”⁹ This action also helps reduce the burden of SLIs to provide visual information to telecommunicators in order to minimize liability risk for misinterpretation. Thus, it would help to reduce stress on SLIs and CAs.

RID’s comments indicated that this “issue was almost entirely disregarded in the recommendations of Working Group 3.”¹⁰ It is inaccurate. The Section XIV *Critical*

⁵ *Id.* at 4.

⁶ *Id.*

⁷ *Id.* at 16.

⁸ *Id.* at 16 and 17.

⁹ *Id.* at 27.

¹⁰ See *Registry of Interpreters for the Deaf (RID), Inc. Comments to FNPRM [CG Docket No. 10-51 and CG Docket No. 03-123] on Structure and Practices of the Video Relay Service (VRS) Program*, at 15 (August 19, 2013), available at <http://apps.fcc.gov/ecfs/document/view?id=7520938754>

Stress Management (CISM) in this MCLS document has pointed out that “SLIs and CAs (Communication Assistants) are potentially exposed to traumatizing events and strongly emphasized that stress management training including scenarios and support should be offered to help SLIs to deal with trauma.”¹¹

e. Addressing Calls initiated from a VRS Call Center

Invoking an MCLS call from a VRS call center is addressed in the Technical Standards¹² of the MCLS document. We acknowledge this is a work in progress and that it will require, as the Technical Standards section points out, study of “ongoing activities in standards development by such work as 3GPP, ETSI, and SIP Forum Video Relay Service Working Group.”¹³

VRS providers should always still educate VIs to process emergency calls. There will always be incidents where a VRS operator may need to dial 911. However, currently VRS training for emergency call processing is not consistent nor have rules been established with standards by the FCC. MCLS will provide training and support for any and all emergency situations.

RID has pointed out that “RID interpreters felt fearful, unsure and hesitant about accepting emergency calls and felt less than confident.”¹⁴ Also, these interpreters “were not provided support protocols and they need to have counseling support.”¹⁵ Further, it was “strongly suggested that these calls be handled by an 'Emergency call CA team' that has specific experience, credentials, and training.”¹⁶ Also, currently Video Interpreters don't receive the same level of specialized in-depth training and support like other 9-1-1 telecommunicators.¹⁷

¹¹ See *Emergency Access Advisory Committee Working Group 3 Recommendations on Current 9-1-1 and Next Generation 9-1-1: Media Communication Line Services Used to Ensure Effective Communication with Callers with Disabilities*, at 22 (March 1, 2013), available at http://hraunfoss.fcc.gov/edocs_public/attachmatch/DOC-319394A1.pdf

¹² *Id.* at 7.

¹³ *Id.*

¹⁴ See Registry of Interpreters for the Deaf (RID) response to ANPRM 28 CFR Part 35 [CRT Docket No. 111] *Nondiscrimination on the Basis of Disability in State and Local Government Services; Accessibility of Next Generation 9-1-1*, at 2 (Jan 24, 2011), available at http://www.rid.org/userfiles/File/pdfs/Government_Affairs_Program/RID%20Response%20DOJ-CRT-0111.pdf

¹⁵ *Id.*

¹⁶ *Id.*

¹⁷ *Id.* at 1 and 2.

Video interpreters have been in the front line handling 9-1-1 calls for over ten years. Often, “interpreters’ ability to process 9-1-1 call effectively can be negatively affected due to limited experience & insufficient training.”¹⁸

The aforementioned concerns have to do with indirect calling to 9-1-1 via VRS. Again, for emphasis here we restate that it is important to consider that anyone regardless of their disability will be able to call 9-1-1 directly using video when NG9-1-1 is activated. Individuals who are deaf, deaf-blind, late-deafened, hard of hearing, or who have speech disability will have the same opportunity to call 9-1-1 directly using any video program rather than limited to a VRS program. Having MCLS ready with intensively trained SLIs and CAs will allow telecommunicators to connect callers to them like they usually do with non-speaking English hearing callers to language services in order to have effective and equal communication access using any type of communication modalities.

f. Cost effectiveness of MCLS Call Centers vs. “911 VIs Co-Housed within local PSAPs”

Invoking a video phone conference to specialized call centers (three or four) for MCLS is more cost effective than trying to determine where to place VIs in “over 6,400 PSAPs, and in all of our nation’s PSAPs 70 percent have fewer than 10 telecommunicators.”¹⁹ Also, some PSAPs have telecommunicators who perform other duties such as dispatching to first responders, taking care of intakes in jails, or handling front desk in her/his building (e.g., police station, city hall, court house, etc.). Is RID suggesting having a VI in every PSAP? Training can and should occur for MCLS VIs in conjunction with PSAP telecommunicators for hearing callers. However, for training and best practices to be most effective for video emergency calls, specialized call centers would allow the best methods for dissemination of information to benefit MCLS callers (people with hearing and speech disabilities).

It is a common knowledge that communication technologies are rapidly changing. It is not surprising that people with hearing loss and speech disabilities are following these trends. It is recommended that “MLCS must be established to facilitate 9-1-1 calls in the NG9-1-1 environment in

¹⁸ *Id.* at 2.

¹⁹ Leggiere, Philip. “Interoperable Communications Emergency Communications: Is It Finally Time for Next Generation 911?”. *HSToday.US*, June 27, 2011. <<http://www.hstoday.us/focused-topics/interoperable-communications/single-article-page/emergency-communications-is-it-finally-time-for-next-generation-911/4a5208006df22ea6fb593c93242ccf4d.html>> (accessed September 15, 2013)

order to allow individuals with disabilities to make direct 9-1-1 video calls using different communication modalities. Both MCLS call centers and PSAPs need to adhere to pertinent standards for NG9-1-1 to be fully interoperable.”²⁰

There is a “need to establish standard operating procedures for PSAPs to handle calls from individuals with disabilities who have voluntarily identified their communication preferences and modes”²¹ aligned with technology trends in NG9-1-1 environment. Not only PSAPs, but this also applies the same for SLIs and CAs. Once the recommendations are adopted by the FCC, such procedures will need to be developed jointly with Department of Justice as well.

Furthermore, the EAAC recommends the “implementation of a national Media Communication Line Services (MCLS) through either a national entity or through regional entities.”²² Therefore, “criteria for technical requirements, operational requirements, training requirements, and funding continuity must be considered prior to establishment of MCLS.”²³ Specifically, EAAC recommends that the “FCC to work with:

US DOJ, DOT, and appropriate federal agencies to take the appropriate steps to expedite any regulatory changes needed to adopt the recommended solution. Among regulatory changes include: a) Policies, procedures and practices relating to ASA between callers and PSAPs; b) System redundancy; c) Contingency and back-up plan; d) Call-back procedures; e) Qualification of SLIs and CAs for handling emergency calls via relay services; f) Training requirements for SLIs and CAs including varying communication methods to accommodate needs of callers; and g) Certification for MCLS call centers”.²⁴

In the case of an emergency call where time is of the essence, it would be most effective for ANY telecommunicator to conference call in an MCLS video interpreter (VI) who receives a high volume of calls. Every Second Counts! It should not be every minute counts.

Although VIs housed within local PSAPs might observe plenty of emergency calls, he/she would not act on calls in high volume for people with disabilities. Finally, if VIs were housed in local PSAPs, there may be a possibility that s/he would be asked to assume another role as a telecommunicator like any other telecommunicator who

²⁰ See *Emergency Access Advisory Committee Working Group 3 Recommendations on Current 9-1-1 and Next Generation 9-1-1: Media Communication Line Services Used to Ensure Effective Communication with Callers with Disabilities*, at 9 (March 1, 2013, available at http://hraunfoss.fcc.gov/edocs_public/attachmatch/DOC-319394A1.pdf

²¹ *Id.*

²² *Id.* at 14.

²³ *Id.*

²⁴ *Id.*

handles other duty and would no longer focus on high volume calls from people with disabilities.

Conclusion

When the Communications and Video Accessibility Act of 2010 was passed and implemented, the EAAC had representation from different disability communities. The EAAC goals include improving our emergency telecommunications infrastructure moving forward to include people with disabilities to have a direct and equal access to 9-1-1 and to have a choice to choose specific communication modalities to meet their preferences or needs. The EAAC stresses the importance of building bridges and working with consumers, industry, and service providers. All EAAC proposals with recommendations, including the MCLS document, are intended to be starting points. Every issue could not be addressed in a single document or within the time restraints that the committee was required to act.

Deaf and Hard of Hearing Consumer Representatives recognized that sign language interpreters are service providers who's main goal is to facilitate communication for people who are deaf or hard of hearing, facilitating essential effective and transparent communication to and from the hearing caller, and in this case, the 9-1-1 telecommunicator . The input from RID is surely welcomed, but should not supersede the opinions of advocates and experts as individuals with disabilities, especially individuals who are Deaf, deaf-blind, late-deafened, hard of hearing and/or who have speech disabilities. RID may represent a segment of the workforce and could communicate their issues with the providers of the service, however RID should not represent deaf, deaf-blind or hard of hearing individuals, their needs and expectations.

Therefore, needs and expectations of the individuals with disabilities for direct and equal communication access to and during 9-1-1 services should be defined by the community itself and not by its service providers. We strongly encourage the FCC to move forward with the implementation of all EAAC proposals and continue needs assessment into NG9-1-1 implementation.

Respectfully,

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