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**HLAA-LA MEETING
SHERMAN OAKS LIBRARY, CA
SATURDAY, JULY 28, 2018**

MEETING COMMENCES AT 10:03 A.M.

>> HEATHER LEHR: We are going to get started. I am so happy to see all of you here today. I want to say a thank you for coming. You know it takes a certain kind of person to roll out of bed on Saturday morning and come here and not only help yourself and to help others.

I am saying thank you that you will give that much of yourself. Thank you for coming to our meeting. We will have business at the end of the meeting. And we will jump right into a recap of the convention.

The National HLAA Convention was in Minneapolis in June, and we had a huge huge turn out as you can see. We were one of the biggest groups of people of chapters there.

People were in ah that people were there and learning about new technology and advocate to help hearing people. There was a ton of information. We can't give you all of the information.

We are trying to do today to give you a taste of some of the really great and cool stuff that we hope can energize this chapter and inform our advocacy and that we hope to make the world a better place with hearing loss.

Here's the gang that went. The big two big events that were so fun for us as a chapter. We had two big award winners and the initial award went to Lisa Yuan. And this was at breakfast where she received her award. And our webmaster Tim was the best chapter web site award.

He gets this award and everyone single chapter at the convention was coming to him and saying can you make our web site and can you do this and that to our web site. All these people were begging.

Sometimes an award is a little bit dangerous. We were grateful for that and really proud of how HLAA Los Angeles looked to us as an organization. We also had -- there was some fun things that we did.

A California mixer and Kay Wright from Long Beach and

I planned crazily. We had about 30 people, not all at once cram into my hotel room. Also, there was a fun thing and people would hangout and it gave people a chance to talk about anything HLAA and about our life stuff and things in our lives that we were trying to do. I learned so much about people's lives and it touched me greatly.

I will start with my -- who went to the conference and myself and John and Teri and Tim and we will give you a little taste of something that we learned. If these are topics that you are really interested in, please let us know.

>> HEATHER LEHR: These presentations can be much bigger and detailed. But what we want to do is help you make you aware of certain things and if you want to go into more depth, we can do that later.

The thing that I wanted to talk to you about is, I saw this really amazing session with an audiologist who, basically, has this company. You know how you work out to keep your muscles strong and every day you do a little bit more and you get better.

But the next day, you get better each day and over the course that helps you to be strong and flexible and moveable.

This audiologist feels that everyone with hearing loss, whether you have a CI or hearing aids or don't use any hearing devices that you should do some auditory training every week. Because the auditory training is the way of training your brain and training how your brain perceives sound and how you will hear better.

You will not improve your hearing enormously. You can keep it better and make yourself more efficient at hearing. I was flabbergasted to hear that. You know recently I got my CI in February.

And I am new to my cochlear implant. And I am doing training about an hour every day. I told myself a couple days a week I will do this. It is something that can help me in the long run.

And I wanted to share the ideas with you. She broke it up into five pieces. The first piece is she called it sensory management. Meaning that you need to use your technology to its best ability.

If your hearing aid is not working well or if you have pocket talker and you forget to bring it or whatever. You have to make a commitment to use your technology to the best of your ability.

Sometimes this is a huge pain. I know this. When I had my old hearing aids, I went back to my audiologist nine

times to get it programmed and reprogrammed and it was such a pain.

The thing is at the end, I had hearing aids that were working for me. When I went put those things in my ears, they were not working for me. And each time I improved this little tiny amount. You kind of feel -- I don't know. I felt -- I am griping about this and that.

The point of that Mary Kay was talking about sensory management. We have to make a commitment to use your devices and to reach out to other devices that might help us. I know it is a pain to keep things charged. It is a pain to try something and buy something that doesn't work and replace it.

She was talking about, if you need that pocket talker. If you need a microphone in the middle of your table at a conference or a conference table at work. You need to go up there and buy it and go through the pain in the butt to make sure those things are working for you to give you that tiny edge.

The idea she was talking about, even if it helps you 5 percent and this other thing helps you 5 percent and this other thing helps you 10 percent. That's 20 percent difference. That's a lot of understanding. That was one of the things she was talking about.

The second thing was perceptual training auditory practice. I don't know if some of you who have CI. One of the things that you can do to auditory practice and watch TED Talks, and they are captioned, and you can watch the person's lips and turn the captioning off to see how much you get and turn it back on and turn it off.

I have done a lot of these watching the TED Talks. They are nauseating. I hate them. It's a great exercise.

Also listening to books on tape where you watch the book and you see the words and your brain is putting the word on the sound. There is this really great thing on called Audible and it's on Amazon. And you buy the audio version of the book and you read the words.

I found it wonderful. I had to spend the money to do it. It's a little bit of money, but it's official. And we know about those and people use those. It's a passive way to do auditory training. And one of the things that Mary Kay was talking about. You need to do active training and not just passive training.

Active training when you are working with someone else and that someone else maybe your husband or your partner or a friend is working with you to understand speech patterns to pick out words to hear will have differences

in sound.

And she is supposed to be sending me a little booklet that have some of the customers that I will pass out to you. Unfortunately, I did not get them.

>> Is this what you are talking about?

>> HEATHER LEHR: The auditory practice was just -- we were writing down the sounds that we were hearing at the awards and picking out. She had a thing and she had the examples on that. The person that you are working with would know what to read. You get a book, any book.

Your partner can look at the sentences in the book and pick out, like, the key word. What is this really about? I am reading this river and how fast the water moves and the key word is water.

Then he will read a sentence and what is the key word. Or he will pick out words that he wants you to be able to hear. You are using the book.

You can do sound things and pick out the word that starts with an N or pick out the main word in a sentence. He will read for a little while and tell me what I am talking about.

This is more active and back and forth then just listening to a TED Talk. And I did some of this with my husband. It was actually kind of fun because he kept trying to trip me up. [Laughing.]

And I realized though when someone is speaking and moving their head around and looking down at the page, it is really different than looking at a TED Talk. It is a very different exercise. And a very valuable thing to spend time on.

And she wanted everyone to get involved in some kind of advance training. I don't know if you know about some of these web sites. There is one called iangel sound. You can load it on your phone. You can get it on your computer. And they have specific types of exercises that you can do.

All the words with SH. Is it she or he or T. And stuff like that. They are actually quite hard. When I put my CI in, I couldn't hear most of them and now I can pick them out. These are guide things. Anyone have any questions about that?

>> What is TED Talk?

>> HEATHER LEHR: What is a TED Talk?

>> Yes.

>> HEATHER LEHR: There was this organization in Minnesota 15 years ago, and they invite 500 of the smartest people in the country and, like, 20 of them would give them

15 minutes to talk about anything they wanted to talk about.

>> Like Brene Brown TED Talk. It's a good introduction for TED Talk to start with.

>> HEATHER LEHR: And then it got bigger and they still do it every year. They record every single talk that happens. And the talks are diverse. Some of them about science and disability and some of them are just motivational and hilarious and you get these amazing scientists and professors and they tell you something about they are excited about or interesting.

You can go on YouTube and search TED Talks and you will see a huge list. There are hundreds of them on YouTube. They are captioned.

They are truly captioned. It follows the person's voice. And the camera -- they stand on the stage and the camera is right in front of them. You can read their lips very easily.

If you want to do that practice reading lips, you can turn on or off the captioned to see how much of the presentation you are getting without the captioned.

Yes.

>> I can't think of the name right now. The name of the Apple. He gave a TED Talk dealing with -- it is interesting.

>> HEATHER LEHR: The woman had a brain tumor and how the brain tumor changed her life. It is very touching, some of them are. Some of them are science and you scroll through, and you put the topic and you pick the one you want. And it is an easy way to do the auditory training.

When I am waiting, and I put it on my phone, and I watch for a couple of minutes, and I did some auditory training.

Yes, Sharon.

>> SHARON: My question is: Do you know the science? What is the best way to do it? I listened to some of them. It's easier to do the captioned and follow with the captions. Do the captions and stop and go back and or in this reverse.

>> HEATHER LEHR: The good thing to do is try to watch it without the captioned. Just watch it for the five minutes and it is hard. You are sitting there and frustrated and turn the captions on and follow what they are saying.

I try not to lip read. I try not to pay attention to that. I try to make it about my hearing and turn the captioned on and do it again and turn the captions off, if I am doing a super training.

How much on that third pass? How much up are getting and closing your eyes reading the lips. Then I can start understanding that speech.

Yes.

>> TERI BREIER: I know we are short on time. I will be our speaking and if goes into depth on the rehabilitation, you will get more of the questions answered.

>> HEATHER LEHR: This is important. And we will go into depth in August on that. Great. I had two really quick things that I wanted to tell you about that I learned about that I wanted to pass on.

One is the Disability Rights Bar Association has a free service if you need legal help because of your hearing loss. If you have a job issue or an issue with your apartment building or something that you need some kind of hearing accommodation and you are not getting that accommodation and you need a lawyer to help you.

There is a Disability Rights Bar Association link that you can go on and get help from a lawyer. That was -- I will say web site thing. [HTTP//disabilityrights-law.org/assistance](http://disabilityrights-law.org/assistance).

I tried to think and went on there and it was amazing. They had templates that you can send and here's what I expect. You can take your situation and put it into a letter. You can send a letter on your own and try to solve the problem on your own.

And they have lawyers that you can connect with to help you go further. I never knew about that. I had to work issues that were difficult for me.

And one other thing was you know who John Waldo. He's a lawyer that works a lot with HLAA National. And he has a web site and its JohnWaldo.com. And you go back and it is still not working.

He has legal written letters templates that you can use and you put your name and send to the theater to make sure.

>> Is that spelled correctly.

>> HEATHER LEHR: JOHN.WALDO.COM. If you need help, on June 2nd, there is a big rule change in terms of theater and any theater that broadcast a version of a movie, which is all theaters, has to have every single screening captioned.

And they have 20 working captioning devices and working devices to handout to all the people there. You are within your rights to demand that accommodation.

>> I have a question about that.

>> Is it supposed to be now. Or supposed to be as of the end of the year.

>> HEATHER LEHR: June 2nd when the law went into effect.

>> They should be doing that right now.

>> HEATHER LEHR: Right now to caption every single movie. Some of the old theaters like the Rialto, and they are projecting movies with a film on a projector. Any movie theater, the AMC and the Regal.

They are getting their movies digitally. They have to caption that and have to offer you a caption device that works. That's all I have to say. I wanted to pass the baton to Jennifer.

>> JENNIFER NELSON: We had the health care seminar. There were five or six. And I went to most of them. This is a pet project that I am doing on my own. If someone wants to help me, I would love it.

Just some statistics. There are 300 million people worldwide with hearing loss and they are projecting there are 900 million as of the 25th. There is a lot of us out there.

The one thing that keeps coming up over and over again. That there is no assistance for us in health care. When you try to speak to your doctor or your nurse or your phlebotomist and you don't understand what that means. That's a problem when it comes to health care and you need to hear what is being said to you.

My question was: Why aren't hospitals equipped to help the hard of hearing and the deaf. This should be a no-brainer and it should be mandatory.

And the many is sadly, but it makes sense and it was a light bulb moment for me. Hospitals are a business. And for them it's not -- I was like why can't we come in and do education and the answer is they need our life.

They trained doctors for certain things and they train nurses. I said do you train a nurse to put on a prosthetic leg after surgery? Why don't nurses and nurses don't know how to put a cochlear implant back in.

It comes back to nurses and doctors have so much to learn which was really appalling to hear. There are a lot of actual health care practitioner and they are interested in bringing this into their curriculum.

One of the things that I am trying to do and they reiterated in this. We are costing hospitals money. We don't hear correctly and we might overdose because we didn't understand the directions for a prescription. And we are admitted and we have a surgery and we didn't

understand what the instructions were. We injured ourselves, and we had to go back to the hospitals.

We are costing the health care industry money by not having accommodations. This is the impetus to help them move forward to help us. It will then help them. The -- is this the right -- I guess it is.

The other way that we can try to convince people to help us is that when you go in for a surgery and you are asked how you are? Rated your hospital stay. And I went to the ER a year ago, and I got the survey that I had to fill out.

Apparently, Medicare gives hospitals money based on the surveys. If you have a positive stay and you were accommodated appropriately and you mark those on the survey. Medicare will go through. Encino Hospital will give you another thousand dollars. They give hospitals based on the surveys.

I would say anytime you are not accommodated or have anything to say, put them in the surveys. It works to the benefit of the hospital to help us accommodate us. It will help them make money. And that's the goal here. As horrible as it sounds, that's corporate America.

We need to understand how we get accommodated and how the hospitals help us and help us in turn. And the last thing is going back to what I was saying, hearing loss. Again it's costing money and people wake up from Delirium and someone -- and you wake up and nurses know how to -- a lot of times you don't know what is happening and you can't hear.

And having that education, I did raise my hand and anybody here know how to put back on a cochlear implant and hearing aids and maybe one person. It was pathetic and people didn't know.

One woman I spoke to she had to go get test and she had to take out her hearing aids and she came back and someone had thrown out her hearing aids. And people don't understand what the devices are and these are people in the health care industry. We have to advocate for ourselves.

>> I wanted to say something about that. Because I been to the hospital many times for procedures and whatever. And I have to take off my cochlear implant and they are adamant about them and don't display them and don't lose them. And I said no problem.

And they put them in a plastic bag and hang it up, up here by the, whatever, the machine. You have to really be verbal about it and let them keep reminding them.

>> JENNIFER NELSON: Keep reminding them and the greater goal and start here and start demanding that these health care workers get educated and it will help them. That's the key. That's what I learned about this. We all look to ourselves and what about me.

This is about me and I do get it. They are a business entity, and I did learn these ways of how it will help them. And that's the key to talking to any administrator person in a hospital.

This is how it will help you. Not only how it will help you save money and make money. That's all they really need to hear. My ultimate goal is to put in a plan and go to a clinic and speak to the person and have a presentation how we can help each other.

>> I feel like my whole world. This is an issue for me. My bug-a-boo and I spent the last two years in the hospitals and struggling with this. And my partner is a health tech.

And I asked him repeatedly and how many of the hospitals and clinics he designed to have loops in the case why the heck now.

Accessibility is a big thing for me. He said to me every time he goes to the things and they are talking about updating code, and he goes up to Sacramento and any changes to code regarding accessibility and they make so much noise.

And they are talking about doorways and ramps and we never hear anything about people talking about accessibility regarding this. And he was just telling me he was working on a project and he sent me the link and one of the clients sent me.

This company, the technology they are doing the loops for this project. And we started to talk and I was so excited and talking to the architectural firm and why they are so important and I push him.

And that is on your previous screen that is something that maybe we maybe need to do. California needs to do and educate the architectural firms and they care about that.

I don't know what the code is. It as far as accessibility when it comes to looping but that looping is kind of key. I had a procedure.

>> JENNIFER NELSON: The other key for looping. It goes back to education. Who can't know about T-coil and the audiologist never brought it back up to them and it never got activated. There is a series of problems and we have to tackle them.

>> That's something that we had should be asking at our health care places. You can have a loop. And I asked at my clinic and one of the doctors said probable cause of privacy.

I said you can do it and one said because of medical equipment and it doesn't interfere with medical equipment.

>> JENNIFER NELSON: What about medical equipment.

>> Looping doesn't interfere with medical equipment as far as I understand it. They do install it.

>> JENNIFER NELSON: There is a lot to -- let me try to get this. We are pressed for time. We can talk about it more at break. The one thing they wanted to say that is offered though. My question does the hospitals know about this. The communication access plan.

And, basically, you fill this out and you bring it in with you when you go to the doctor or the hospital. I won't go through it. Your name and hard of hearing, deaf-blind and you have hearing aids and cochlear implant and what you need in terms of accommodations.

This is on the HLAA web site and you can download it and I will ask Tim if this is on your web site. We will add it. And I think it is important. And download and fill it out and hand it to whoever you walk into a medical facility.

The problem which I raised my hand. Why fill this out and bring it in. Does anybody know about what the heck this is? There were members. By law they have to accommodate you. What I would recommend if you have someone that is in emergency. If you have a regular doctor bring this in and this is what I need when I come in to see you.

>> DIANE GROSS: A lot of medical charts and flag this information right at the beginning of your charts.

>> JENNIFER NELSON: A woman stood up and she was a nurse in Wisconsin. At this point how much of us go into the office and restate I am hard and hearing and you need to look at me.

We go through the whole thing. It should be in the chart so that we don't have to do this. And we were talking and the woman said that. This is an electronic. It should be in the charts and what we need and who we are and go from there.

This is something that I do believe that we can help to get going back. The other problem was they were hanging signs and saying deaf or hard of hearing and they stooped because it violates HIPPA.

You can waive your rights and say I don't care. I want

a sign behind me that says hard of hearing and deaf. If they bring up HIPPA, you say I am waiving my rights, and they have to accommodate you and put up a sign or a bracelet.

There are supposed to be people there to help you. And someone that is there to help you chart and I don't. How does this work when you are in an emergency situation and you need an ASL interpreter?

There is no system in place and that's the problem. Once we work and advocate to get this in place, this should be a non-issue. Anytime you go to a doctor or dentist and you will be accommodated.

Going back to what I said about the hearing aids being thrown out bring something with you. Something that is clearly marked. I said this should be provided. Bring it with you.

You should have something in your purse or man purse and that is clearly marked hearing aids or cochlear implant.

And, finally, ask for everything in writing. Even if you feel like you do hear well. At this point where my cochlear implant, I feel like I do hear really well. But just because I think I hear well, doesn't mean I am.

We will answer something and laughing and that's not what I said. Get everything in writing and if you get it in writing, if your eyes don't work well have a friend or family member and have it in writing and dosages. You can't misunderstand to take care of yourself.

And the last slide. Just to conclude on all of this. I went through some of this. They are -- I can't remember who it was. There is one -- want to say was hard of hearing something school is putting together a study to figure out how to help us. They are one small group.

My feeling is let's try. The VA is very interested in hearing loss. We can go to the VA. They offer brands and try to hit them up.

I think ultimately, we need to sit down and put together a business plan and that's how we need to present it to the hospitals and how it will benefit them. And that is really my biggest take away. I never understand why this was not happening. And it is really a shame. There are 50 million of us in the U.S. Far fewer people have prosthetic legs and wheelchairs.

Why are they being accommodated, and we are invisible. For hospitals, they need to be educated and find out they can make money by being educated.

Judy

>> JUDY: I understand the fact that this is a business, the hospitals. And I agree with that. I think on the other side, those of us who wear hearing aids need to advocate.

>> DIANE GROSS: Can we get the microphone to her.

>> When I was in the hospital none of the nurses could figure out how to put that spaghetti in my ear. And the other problems were that the nurses each day were different. We had to start all over again.

So you need to figure out for yourself, I think laying down in the bed how to put that hearing aid yourself in your ear. And it was difficult for me because my hand was shaking. I really couldn't do it for myself. It had to be with my husband or just a very astute nurse.

>> JENNIFER NELSON: The biggest, obviously, we have to advocate for ourselves. We all understand at this point the world is far behind. They are helping a lot of people out there, and we are not one of them.

We have to advocacy for yourselves while we are advocating for yourselves, I think this -- we slowly make the changes, and we can say guess what Encino Hospital was awarded a half million dollars, and they were accommodated and it is a long process.

We are but one city. I do believe the more we educate, the more people will catch on. And it really is unfortunate that it takes time that people don't know what a hearing aid is and they don't know how to put one in.

And that's my goal to put together the plan, not only to go to executives and fine you can speak to a nurse's convention and this is where they -- the end goal is to be able to go to a conference and nurses do continuing education and be one of those spots to teach people what are hearing losses and how to put these instruments in and make it a whole 90-minute presentation.

>> DIANE GROSS: It is not just nurses. It is people like extra technicians.

>> Of course, everybody.

>> DIANE GROSS: I go to frequent x-rays and I have to take my hearing aids out and the technicians try to yell and I can't hear you. You have to give me instructions now so that I have an idea what you are going to do and I can relax and know how you are positioning my head. Don't yell at me.

>> JENNIFER NELSON: We have all been there and something that I came up with a long time ago. It sucks to say this. People understand deaf and they don't understand hard of hearing. And deaf you need to face me

and I can read lips and suddenly that changed my life.

People are okay. And they were facing me and over enunciating and people understand deaf and that's what I tell people at this point. It is becoming comical. And the dentist took down his mask and was yelling at me.

It was like a scene out of a sitcom and that's not helping me. You don't need to yell. Anyway. That's what I tell them. I am deaf and I can't hear you. I can read your lips and people go okay.

They understand that. You tell anybody you are hard of hearing and they have no clue what that is. That is pretty much it. Anyway.

>> TIM BROWNING: That's your second one.

>> JENNIFER NELSON: Any questions. I will not go into this. We are pressed for time. Should I skip it?

>> You can do it next time.

>> JENNIFER NELSON: The only thing that I will say. I won't go into this Med-el. The reason that I attended this seminar was because I really believe in quality of life. And I really believe a lot of us don't have quality of life.

We talk about, if I was hearing, I would be going to parties and do this and that and depression and dimension is all sorts of negative things and I can talk about later.

If you feel like you are not hearing. If you feel like you are saying what after every single thing and find you are not doing things because of your hearing loss.

I would encourage you to -- it is called a sound quality index and it is a questionnaire how well you think you are hearing and I can go through it with you.

I can do it in a different one. I encourage you to do it. As you get older and you don't treat our hearing loss and chances leading to dimension and depression is really high.

And I don't think that needs to happen. I think you need to take charge and say okay. What am I not doing in life that I think I would be doing if I was not a hearing person.

And the person that gave this seminar is a scale of one to seven and she was a one. I couldn't hear on the phone and I couldn't have a conversation with someone in front of me. And literally 1, 1 and that's when she finally said hearing aids are not working for me anymore. And I need to change my life and she got a cochlear implant.

She said sixes, not everything is a seven. It changed her life traumatically and I can attest to that. You get to a point with hearing aids and they don't help you

anymore. And I couldn't be on the fun. I had to rely on captioned.

I will go through this in a different seminar. And I look at this. And try to assess your quality of life. It is important. We deserve to be happy. That's all I got. [Clapping].

>> TERI BREIER: That was a joke. [Laughing.].

>> We can't hear.

>> TERI BREIER: I am not one of the people and I ended up attending several of the sessions in the technology track. And it was fascinating. I am so far over. Right here. That's hot over here.

There were two that were very interesting and the first one, do we have anyone talking about the symposium. I will touch on the symposium everybody went to. Everybody could go to.

It wasn't like a break out session. And they had some researchers there from different universities. And some of the studies they are doing and they are trying to solve the cocktail and they are in a crowded room or a cocktail party or a social event and a restaurant and to help you resolve the issues how you in take sounds from the different directions. At some point, we will try to put something together.

And there were some researchers doing experiments with frogs and crickets and studying how their sounds are processed and how that might apply with people with hearing loss. Very scientific stuff that I can't go into. It was fascinating the way they went into.

The first seminar was the CTIA is basically the U.S. Trade Association for wireless communication industry. All the cell phone companies. Anybody having to do with telecommunications that are wireless.

Right now, in this country, there are 393 million active wireless connections serving 2 million people. And of those 99.70 percent are using the 4G access. And the big thing they are looking to create the 5G that will speed things up and make everything faster.

If you have a cell phone or smart phone, you probably have 4G. I am actually near-sided and not far-sided. Voice recognition plays a role in the wireless and that is realtime text which I will go into later.

There is a web site that they talked about if you want to right down and related information.
Accesswireless.org

And some of the applications of wireless communication includes smart that are connected digitally and education

and health care and mobility and video conferencing all of which can impact us with hearing loss.

The big thing they talked about in the discussion was RTT versus TTY. How many people here use TTY for any of their communication? It's up until now has been a major service for people that hear.

Deaf and hearing impaired and you get on the phone or, I guess. I don't know, if there is an application mostly for the phone.

This is now in the process of probably being replaced by something called realtime text RTT.

The first one to come out with that is AT&T. And how many people use AT&T for their phone? Are you, aware of them? They have something that launched last year called the AT&T realtime text app. I don't know if that is something that you will talk about.

It is a free IOS or Android app some of the other phone providers will come out with this as well. If you go into the app store or Google play and search for realtime play text app and that will give you an alternative and have text conversation. I am not sure how it works.

It basically helps customers with disabilities communicate with a wireless and it uses a free flowing mix of communication. And how fast you type, it types what the other person is saying. And SMS -- will skip all of that.

Next is something they talk about something hearing and compatibility rating. How many of you use hearing aids as supposed to cochlear implant?

Any phone, any wireless phone, will have a rating M3 or M4. M stands for microphone and the T stands for T-coil and the smartphone will rate how well they will have the accessibility that are using hearing aids and using it with a telephone.

The things that are going forward and I think we mentioned here or Facebook page or group. If you are not on our Facebook group, people post articles and they find out about text to 911. Instead of an emergency which one of us wants to be that person on the phone trying to talk to a person in an emergency trying to hear what they are saying. Now they have text to 911 and the wireless emergency stuff which has to do with presidential announcements and weather emergencies and tornadoes and now available by text. And soon we will be all on those networks.

The second session that I attended that was technology folks called wireless. There are some quotes that they

share in the beginning. And it was about how technology are designed.

And that is someone named Sarah Hendren. All technology is assistive technology. What technology that is not assisted. Your smartphone and eyeglasses. It is all designed for everyone to assist you in doing something.

Frances West, Chief Accessible for IBM. They are providing technology for the 100 percent or the one percent. And one more quote for Robin Christopherson for the Ability Net. Accessibility is no longer for disabled people but for all of us.

We are all using smartphones. We are using wearables. Everybody is using them, not just people who is disabled. And those are good solutions for people with hearing loss because they are recognizable and familiar.

They are pervasive and less of a stigma. If you are talking and you have earphones in your ear and so do 99 percent of hearing people. Nobody is listening.

Such as telephone, such as telephone conversations and alerting media like TV and audio and listening to talkers. Did you have a question? You are good.

With smartphone and a lot of smartphone are designed to be capacity with hearing aids and cochlear implant and that audio streaming and audio live listening Geotagging.

>> Can you repeat that and spell it. The word Geotagging.

>> Something about location. Find my hearing aids. Something around there.

>> Something that I found unfamiliar and we want to get it right.

>> It is called find my hearing. Was it echolocation.

>> There too many voices. The word that you used was it echolocation?

>> TERI BREIER: No. Adjust your devices from the smartphone and remotely and the telehealth and artificial intelligence. Bluetooth is a feature and included now in 100 percent of all digital devices that were shipped after 2018.

Anything that you purchased in the last year that is Wi-Fi has Bluetooth. And is there anyone that doesn't know what Bluetooth is? And that has a lot of applications for hearing aids and some cochlear implant and wearables and fitness trackers and that holds a lot of promise for the development of things that will support people with hearing loss.

And speech to text and Dragon and deaf assistance which is instant messages and text to text and text to speech

and speech to text and I believe it is only available for Android. I couldn't find an IOS.

And cloud base conversation and speech to RTT and others. If you want other information come and find me on the break.

And there was Wi-Fi Jacoti hearing suite app and I am not sure how that works and I will bring you more information. And the internet of saints and there was the internet of things and because of Bluetooth and Wi-Fi and how these devices and things are able to connect with each other. The next generation of that is called the internet of everything.

And which intended the internet of things and the machine and machine and encompasses people and processes. There are 30 billion devices with wireless connect to the internet of everything by the year 2020.

Technology is evolving towards something that techs us more and I think that has a lot of great implications for us that rely on communication.

>> TIM BROWNING: We will take a break and let our fabulous captionist take a break. How much time?

>> Ten minutes.

>> TIM BROWNING: Everyone take ten minutes.

Break 11:08.

Resumed from break: 11:30

>> JENNIFER NELSON: We will pass this around. If you can't give, that's fine too. These meetings are free. I wanted to let you know. If you feel like this was helpful or educational to you, and you felt, like, I am glad that I came today and worth \$1 or \$2, and we would appreciate the donation.

And where do the donations go to? They go to our wonderful captioner. [Clapping]. They go to coffee and goodies that we feed you with. And we appreciate people bringing goodies and they help us with supplies.

Heather ordered or new banner and that helps to attract the attention and see who we are and we are a young and vibrant group. And the money goes to that. And we will update you with that.

We are putting together a scholarship for a hard of hearing individual. If you want a breakdown of what is being spent and how and you were not an open book and you can ask for that at any time. That's where the money goes to and we appreciate it. Thank you.

>> HEATHER LEHR: I wanted to start right after the break our fabulous awards and everyone knows that deaf people, when they hear the world, wow. And we have two

awards for today.

Our first award is Malique. He stepped up to do the loop. And the rest of the steering committee was at the conversation and because of Malique and we appreciate you. [Clapping].

He has a lot on his plate as you can see with young children and a lot of work and we appreciate him taking time to keep our meetings going.

And the second one, and this is something that is to Diane Gross to her overall awesomeness. She did an incredible job planning the walk. And we had a good turnout and Gary. And we were the highest fundraising group for all of Southern California. [Clapping].

I don't know if you saw the pictures that were on the California web site of the walk. Practically, every picture had someone from L.A. in it. We over ran that organization. I wanted to give Diane our wow award. And she worked so hard. [Clapping].

>> DIANE GROSS: Thank you.

>> HEATHER LEHR: Tim, I am sorry that we are behind. Tim wanted to talk to you about some of the apps.

>> TIM BROWNING: Morning everyone. I know we are a little short on time. I wanted to talk about strategy to preserve the hearing. We spent a lot of time talking about the app and assisted listening devices and the way to help improve our hearing, we don't talk about preserving the hearing that you do have.

That's of interest to me. I was born with hearing loss and it is unknown to me what my future holds for me in terms of how will I sustain my hearing. What can I do to hearing to do that?

And there was a discussion that I thought was interesting and I wanted to share with you the strategy for preserving what hearing you to do have.

As you guys know hearing is important to us and important to maintain the quality of our lives and go on the day-to-day business and stress free as possible.

As you have been hearing throughout the presentation, it is a very likely potential association of dimension and other cognitive issues with hearing loss.

Preserving the hearing that you have and other assistive ways to help with the hearing. I wanted to go over the five strategies with you quickly and as we note in the future, we can elaborate on this further.

The first one is loud sounds. We all know going to a loud concert or hearing the jack hammer out there is loud and bad for hearing. A lot of time risk from hearing of

loud noises can come from unexpected places and situations.

And you go to the gym or a cycling class and they crank up the music and you walk out with ringing in your ears. And my wife likes to go cycling and her ears are ringing for over an hour. And she tries to get me to come, and I will have the ear plugs.

And people have that noted issues with their hearing after church. They go to church and they hear the music and the organ and blasting and they walk out of there and the ringing. And they suffered some negative impact to your hearing. Something to be careful of.

The speaker, Monique Hammond. She carries ear plugs with her and it helps to buffer your hearing. And they found interesting for people that don't have hearing loss and are a lot of times they think that you get used to them.

And they think I hear loud noises and I get used to it. It is qualitative. And the more exposure that you hear and the loud noises that can potentially damage your hearing and the more impact that is. You don't get used to it. It is something that continues to grow.

There is a lot of talk about apps that can monitor the apps. They are finicky and they are not always accurate and how to use the microphone and they have to be calibrated effectively. And people use the apps and to find out the phone is way out of calibration. There are good ones. You have to do your research.

The second one is: This one is important to me. I feel health and fitness and lower your stress and body and health is associated with hearing loss. And the ear is small. And some people think it is all significant.

The blood supply compromise or plaque development in your ears and you hear with your heart. It deteriorates your hearing and the blood vessels are restricted and compromise and the hearing is deteriorated quickly.

The cardiovascular risk of blood pressure and cholesterol and puts pressure on your ears. If they find plaque on the ear, that means it is the potential -- the plaque in the blood vessels like you can in the part of the body.

Diabetes is a risk that produces blood supply and issues for people that are diabetic have two times or risk of hearing loss and prediabetic have 3 percent. And sleep apnea and stop breathing at night for numerous occasions and that reduce the blood supply.

And they found issues that people with sleep apnea reported sudden hearing loss. And apparently it will

reduce blood supply. When you stop breathing and people open it and it doesn't come back.

The hearing conditions are depended on how well you prepare yourself. Obviously, if you trying to improve your health or think about it, check with the doctors and ensure that what you try to do is in agreement and exercise and relaxation and eating right and medication is found to be helpful to help with your hearing and slow it down or even potentially reverse it a little bit.

Over the counter products, that one hit me hard. The product such as Ibuprofen and they are not meant to be taken for years. And my mother was on Advil every day. She took Advil and she started to get sickly and she's in her 80s and found hearing loss and the doctors were not sure why that is.

There is a possible connection that she took a lot of pain medication and quite often she didn't need to, but she felt good. And the doctor connected the fact that could be impacting your hearing.

Because certain products are pain medications can reduce the blood flow on the ears and reduce the hearing. And the pain product -- and making it easy for the captionist.

There are some complicated ones. And those that thin the blood. Something to be careful of. Another one where it is recreational substances, and I am not talking about cocaine and smoking and vaping and alcohol.

Those kinds of things such as smoking and nicotine and carbon dioxide will constrict the blood vessels and damage them. And will likely increase the hearing loss.

Vaping is a big thing now. And that can cause hearing loss and it is so new and they are waiting to get more data. And alcohol has a lot. It is a poisoning environment within a year and it can really cause inflammation and reduce the oxygen in the ear to protect it and so forth.

The last one is hazardous chemicals. These are things such as turpentine and paint products and paint thinners and glue. And they use these things in an enclosed area without proper ventilation and chemicals get in the brain and into the ear and deteriorate the nerve endings and they have coverings that protect them.

These chemicals will damage it and deteriorate. Working on a house or painting or so forth make sure you wear a mask and ventilation and take breaks and reduce your exposure as much as possible. There is a lot more to this. In the interest of time, I will stop there.

The other one, I will touch on this for one minute.

I think a lot of you know Tina Childpress (spl). She's an audiologist. Very good speaker. When I went to her convention, it was standing room only.

She was very popular and she covered things like apps and Katie she covered a lot of things. What I will touch on here really quick. There are over 400 apps out there to help you. And they are ever changing and it is pretty amazing what they can do.

Accessibility and if the blogs out there to share your story. You have a wealth of information and in the interest of time, I wanted to tell you. I am working with Tina Wright now to plan a strategy to get it on the web site and the resource session is light.

I will try to do is see if I can get the information on the web site so that you can see some of the latest and greatest things and try it out and download it on your phone and there are some amazing things and try to use it here. There is a lot to cover.

And we have more business. If you have questions, you can see me afterwards. And I will take it back.

>> HEATHER LEHR: I think she has a lot of those apps on her web site.

>> TIM BROWNING: She has a lot on her web site. And you can see is automatically. And on that she tests all these out. She will make comments about what they are. If she thinks they are good and some things to think about how to test them. [Clapping].

>> HEATHER LEHR: I had a great chance to hang out with Tina and I want to add one thing and it was exciting and so many members here. She was talking. She is a theater nut. She goes to the theater like twice a week and she loves to go to live theater. And she talked about in detail this the app Gala Pro.

And apparently there is now a huge push to caption every single live theater performance and it is on this app called Gala Pro.

You have to tell the theater ahead of time that you are coming. You have to give them a two-week notice. They download the script in Gala Pro and it has a voice recognition. Your phone is listening to the performance and scrolling the captions at the appropriate time.

And you have to be closer to the speakers or close to where the microphones are. They have to seat you properly and you have to work that out with the theater.

To me when she was talking about it, it's called Gala Pro, and she said the one thing that is hard. You have to hold your phone for 2 hours. She said my arm was

falling off. And they won't allow you to bring a stand. Fire marshal things and they don't want something in the middle.

You can buy the clamps and the snaky thing and you can stick your phone on it. She bought one of those and clamps on the arm of the theater and the snaky thing come up and that's how she holds her phone. I wanted you to continue about that. I know a lot of you are theater goers.

Let's talk about some of the things that are coming up I wanted to talk about. Do we have the dates up there?

>> TIM BROWNING: The dates for November.

>> DIANE GROSS: September 22nd is the September meeting and November 3rd is the November and the others are to be arranged.

>> HEATHER LEHR: In August like Teri said, we will be doing a thing how your brain processes a sound and we will have Tony. And she will talk about some of the things that you need to do. And I think about when you are buying your hearing aids.

>> That will be great for tracking new members. We know that you know about that. We are trying to get new members. This is something that we will promote.

>> HEATHER LEHR: And then October is the library has a big Halloween thing and when we normally have our party. We can't have our meeting here in October.

In October, we will have a rap session and things to host. The rap session at their house on a Saturday morning.

>> DIANE GROSS: We talked about a social outing than a rap session. That is something that you had brought up.

>> HEATHER LEHR: All right.

>> JENNIFER NELSON: What Diane is referring to you said your husband is part of a group that will bring us to a field trip.

>> HEATHER LEHR: On a field trip. My husband, he works at Dolby sound. You know what Dolby is? They do theater and the sound in theater and the really cool technology. And they have a room that you can go in and when you stand here and there is a sound that goes around the room and it feels like it is flying around your head.

You are watching a movie and there is a plane coming and you can hear the plane go over your head and pass over you.

And one of these days, I like to plan a field trip, if people want to go and have the opportunity to be in that room and enjoy some of the really cool sound technologies they are working on.

Is there anyone interested in doing that? Who wants to do a field trip to Dolby? Let me talk to them and see if they have availability in October. We can do a rap session in October, if they don't have the availability.

I will be happy to have you at my house and have wine and a rap session. I know my house is far away for a lot of you. And any other ideas what you might want to do? I will get back to you on that on the Yahoo groups and if we need to have someone help us out, I will have a question for that.

And November because we are not doing a meeting in the October. The library has graciously given us November 3rd as a time to use the space.

Instead of October, we will do some kind of social thing in October and November. Our meeting will be on the third. And that will be our annual coping the holidays.

And then, of course, December will be the holiday party. If anybody would like to host the holiday party, we need a holiday. If you have your place for the holiday party.

>> I could host it, if nobody else wants to.

>> HEATHER LEHR: Grace is -- Grace you are so generous with your beautiful home and a house in Pasadena with artwork.

>> If you can't find a place, I can host the rap session. Whenever you have the rap session, I will have it at my house, if you can't find a place. My place is small but cozy.

>> HEATHER LEHR: Thank you Georgia. If we do a rap session, I am bringing my bottle of wine to Georgia's house. And our holiday party, I will bring my wine to Grace's house.

>> Let me know.

>> HEATHER LEHR: I think the Dolby thing is happening. In September we are going to have our steering committee elections. And you remember the way it works. Everybody elects the six members of the steering committee.

And the steering committee will decide who will be president and vice president. That will be in September. We had the election in March and we had to add some people that were lost.

The actual elections are in September and that will be happening then. If you are interested in helping with the steering committee, we can put your name out there for the steering committee elections.

And we need to get a signup sheet for this. Maybe we

can do it on Yahoo groups. I will put out a blast.

Friday, September 14 and Saturday, September 15 in Anaheim is the Academy Audiology Convention. That encompasses the entire state is paying for a booth for HLAA. They think this is an important place to be.

Apparently, all the young audiologist goes to this thing. The young people that are eager and the people that are starting out, they want to learn.

They are situated in their booth like you are going into the exhibit hall. We have a really good location. And the idea is for us to reach out to audiologist to get them to be a recruiting arm of our organization.

And they should be sending people to HLAA and they should be saying, you have hearing loss and you have these difficulties in the workplace and here's a place that you can get help.

And some of the audiologist are not helping or sending us enough people. And we are hoping with the booth to reach out and to get more membership that way. I am going to be at convention. And everyone works a two or three-hour shift. And I will put a sign up on the Yahoo groups. And tell me if you are available and what time.

I have not gotten -- you know Zena? She's the head of the organization. She has not sent me how many people she needs on the days. It is supposed to be all the chapters in California, not just our chapter. It will be only Southern California people showing up. I hope you will help me and come along with me and work on that.

And lastly we are really moving forward on the scholarship for our HLAA Los Angeles and the scholarship for the outstanding high school student with hearing loss going on to college.

I have been working with the Oklahoma chapter. They do tons of scholarships and they do three scholarships a year. And they are so generous to me. They have given me all the paperwork and how they file the paperwork and how to set up the standards and the practices.

I had a good start. What we really need is a committee to, first of all, decide what the standards are for the applications. And have a committee who are going to look at the application when we choose that person.

The way that HLAA does it, they do two steering committees and two people from the general membership. Obviously, I will be doing that and I will recruit one more steering committee member to help. Anyone out there interested and helping to work on the scholarship?

Michael. Gary, you can be the other steering

committee member and Michael. And if any of you, please, these kids -- I was looking at some of the applications that they got from Oklahoma and it was just heart breaking.

They are in high school and trying to fit in and the struggles they have with the hearing aids and trying to get the school to accommodate them and how nervous and scared they are to go on to college by themselves.

Most of them are going to the big universities where there are 45,000 students. I am very excited that this chapter has decided to support these kids and given them a little help financially and give them not just the financial help, but the knowledge that you know.

And the group out there that want to help them get through their education. And thank you Michael and Gary. I am putting you down.

I wanted to talk about Starbucks.

>> I am happy to help, if you need another person.

>> HEATHER LEHR: You want to do it. Sharon and Michael and Gary. Yay. Thank you guys.

Jenna has something. This is a CNN breaking news. We got an email about this morning.

>> JENNIFER NELSON: I will make this quick. People want to get out of here. I know you heard of Starbucks opening an all deaf coffee shop in D.C. Have people heard about that?

They are hiring people that use ASL and hiring deaf workers which is great, right.

I am on Twitter and you don't want to know me on Twitter. You can look at me on my Facebook page. I am an animal on Twitter. I Tweeted to Starbucks. It is great that they are doing this. There are 1 million deaf people in the U.S.

There are 50 million hard of hearing people in the U.S. That's a radical difference. And while we appreciate that they are doing this. The 50 million population fewer than 5 percent of us know ASL. We need help to. We would really like to have coffee shops looped and captioned for us.

I sent this out in a series of various Tweets and someone from Starbucks Tweeted me back and said contact this group. Deaf and hard of hearing Starbucks at something.com. And I emailed them and said, basically, the same thing.

I get an email from Lisa Ouan. She didn't know I did this. And she said have you heard about the Starbucks in D.C. And it pissed me off. Apparently the president of the D.C. chapter -- this was in the Washington Post.

The president of the D.C. chapter responded and said that's great. Basically what I said. That's great you are doing this. How about helping the rest of us? And she sent out a piece, and I will post it the Yahoo groups.

Apparently, someone responded and said we are probably going to caption the order. And but it is -- it was never mentioned in the Washington Post piece as if the captioning was a secondary thing and it was about ASL.

What I wanted to bring up today. I was sick of doing it. And Lisa emailed me at 5:30. What I would really like to do is contact -- continue to contact Starbucks and really maybe put together a committee about if they are going to do this for the deaf committee, they should be doing it for the hard of hearing committee.

And they have the money and resources and they are a progressive company. Because they made the first stride with the coffee shop and put together a committee and hound Starbucks. And we want captioned and looped venues and if they do that people will follow suit.

People follow up with Starbucks. Anybody interested in following up. I have been doing it myself. And anybody interested for a committee, please come and see me.

I think that is super super important and we need to do something right now while it is happening.

Heather do you want to sign off.

>> HEATHER LEHR: Thank you Jen. As you can see our chapter which I am proud of, we are moving more in an advocacy role. We are trying to become advocacy and push for changes so our lives and people with hearing loss can be easy and better.

It's a lot of hard work and it takes a lot of time. I really appreciate you guys stepping up, and I hope we can make things better for everyone like us.

I do have a shout out for the fabulous captionist, Felicia and it would be hard to have this if it wasn't for Felicia.

And everyone remembers the best thing that you can do with people with hearing loss, tell people I am hard of hearing. Let someone know I know someone with hearing loss and if they start realizing it with everyone, every person that had hearing loss and told people they didn't hide their hearing.

And people started to realize how large of a group it is. I think we will get a lot more respect and a lot more accommodations. Try in your mind every day when I go out there in the public, I will represent. I will say I am

hard of hearing and this is what we need to do.

If you represent, you are making better for another person that has a hearing loss that is a little bit shier than you. Get out there and represent. And thank you so much for coming to this meeting.

MEETING ADJOURNED AT 12:07 P.M.