**Minutes Draft**

Name of Organization: Nevada Commission for Persons Who Are Deaf, Hard of Hearing or Speech Impaired

(Nevada Revised Statute [NRS] 427.750)

Date and Time of Meeting: June 20, 2018

 9:30 am

This meeting will be a Video Conference between the following:

Reno: Nevada Disability Advocacy and Law Center

 1875 Plumas St., Suite 1

 Reno, NV 89509

Las Vegas: Nevada Disability Advocacy and Law Center

 2820 W. Charleston Blvd., Suite 11

 Las Vegas, NV 89102

To join this meeting by phone, dial 1-888-363-4735 then enter Access Code 1228133 when prompted. Sign language interpreters will be available at both locations, and CART will be accessible by following this link:

<https://captionsunlimited.1capapp.com/event/adsd>

According to NRS 241.020, Meeting Materials Available at:

<http://adsd.nv.gov/Boards/NCPWADHHSI/Nevada_Commission_for_Persons_Who_Are_Deaf_Hard_of_Hearing_or_Speech_Impaired/>

**Agenda**

1. **Welcome, Roll Call, and Introductions**

**Eli Schwartz, Commission Chair**

Members Present: Jeff Beardsley, Mike Eifert, Sal Fiorentino, Maureen Fradianni, Eli Schwartz, Cheyenne Pasquale, and Eric Wilcox

Members Not Present: Alison Berman, Betty Hammond

Present In Las Vegas: Beth Jones, Sal Fiorentino, Jeff Beardsley, Abby Magtoto, Christa Cervantes, Cheyenne Pasquale, Eli Schwartz

Present in Reno: Gary Olsen, Diane Miller, Perry Smith, Eric Wilcox, Mike Eifert, Maureen Fradianni

Phone: Kristen Shelton, and Candace McDaniel

Staff: Wendy Thornley

Interpreters: Kim Johnson, Kalen Beck, (Reno) & Stephanie Gardner and Debbie Scott (Las Vegas)

CART: Becky Van Auken

Eli welcomed the newest Commission member, Eric Wilcox, who represents the position of “A Parent of a Deaf or Hard of Hearing Child”. He also welcomed the three new state interpreters: Debra Scott, Stephanie Gardner and Kalen Beck.

Eli provided a brief history: SB481 created the Commission and tasked to review services and practice of government entities for information concerning government services and resources. The Commission is here to implement the five‑year strategic plan and does not consult or advise the State on any fiscal items.

Cheyenne Pascale noted she is serving as the Interim/Acting Director to the Commission and addressed concerns expressed during the April 11, 2018 Commission Meeting. She stated, “On behalf of ADSD and the Commission, I'd like to say that we never intended to limit the voice of the Deaf community. Hearing the public comments speakers are urged to avoid repetition of comments and encouraged to add their names to the public record in support of common issues. In addition, a person may also have comments added to the minutes of the meeting by submitting them in writing either in addition to testifying or in lieu of testifying. It truly is the goal of Commission to partner with the Deaf community and to be an advocate for timely access to information, effective communication, education, and services. We look forward to continuing our efforts as a community, as we work towards this goal. Thank you.”

1. **Public Comment** (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. Please state and spell your name for the record. Public comment may be limited to three minutes per person at the discretion of the chair.)
* **Gary Olsen,** community member, I will keep my comment brief. I do think it's important that all the Commissioners understand that many Deaf people are not capable of writing and submitting their testimony or their comments. I think it's important that we allow them to use the interpreting services when they're available and be able to register them on the record as having made testimony rather than the suppressive movement of having Deaf people not wanting to come and being forced to write their testimony. I do want to stress that.
* **Jeff Beardsley**, Commission Member, I’d like to add to Gary's statement. It is very true that English is the second language of the Deaf community. So Deaf individuals may feel their English is not clear enough that people will understand what their trying to say in writing. I really hope, Cheyenne, that you can be a little bit more sensitive to their needs because their expressive language will be best through an interpreter. Thank you.
1. **Approval of Meeting Minutes from April 11, 2018** **(For Possible Action)**

 **Eli Schwartz, Commission Chair**

Sal proposed to approve the minutes, Maureen seconded the approval. **Motion carries.**

1. **Discussion and Approval of Proposed Website for Information related to Deaf and Hard of Hearing Services in the Nevada Care Connection site. (For Possible Action)
Cheyenne Pasquale, Chief I of Planning, Advocacy and Community Services Unit**

Cheyenne Pasquale spoke about the new website. Nevada Care Connection has a general informational website where we can build a sub-site for specific needs or specific populations. They should be ready for a mock-up of some of the pages for a future Commission meeting.

We have identified six categories that might be useful on the site:

* Interpreter Information
* Relay Nevada
* Advocacy
* Equipment and Assistive Technology
* Communication Disability
* Communication Etiquette

**Interpreter Information** page would include how to get and use interpreters, what you need to know when you hire an interpreter and an overview of the different types of interpreters. Additionally, it would include how to file a complaint against an interpreter.

The **Nevada Relay** page would include information about relay services and how to access them. **Advocacy** would include several sections within that page such as: self-advocacy, parent advocacy and educational advocacy. **Assistive Technology and Equipment** page would show different types of assistive technology and the variety of interventions for things such as language pathology and adaptability limitations. **Communication Disability** section would describe the various types of hearing loss and deafness. This information is geared to be helpful for the general public. Lastly, the section I’m calling **Communication Etiquette** would look at etiquette language, lip reading FAQs, information about sign language and other forms of communication.

Sal suggested having a person signing the information that is presented on the website so Deaf individuals are not dependent upon English. Cheyenne responded that was their plan. Eli added that the plan was to have someone signing all the information for each section for every page. Once the website is finalized and approved by the Commission, it will be sent to the Deaf Center and they will videotape everything.

Jeff added his support for this and to ensure the site is visual for Deaf individuals to easily navigate. For the Interpreter / CART Registry page – please be sure to indicate whether the person is certified or not. Previously, we could see if someone was certified – now the site is not user friendly.

Mike Eifert added that he supports the idea of having a central location for all information. It currently lives on multiple sites and not always easy to find. Mike asked if the build of this site would be done by the State due to the constant need for maintenance and need for quickly updating as necessary. Additionally, Mike asked what the plan for was advertising the new website.

Cheyenne replied the website would be built in-house using an existing platform. That makes it easy to build, maintain and update by myself and my team. We brainstormed the idea of a card that will have information about the site, a QR code, and the website URL for marketing. Eli added that they are hoping the Deaf Center would do an email blast to all their members because we know that getting the word out is very important. I'm not sure if there are any marketing funds to help with that.

Jeff suggested that there should be Deaf individuals who are on the website committee to be able to view the project from a visual perspective as well as taking into consideration Deaf people with visual problems such as Usher’s Syndrome (we have some Community members with Ushers). Sal suggested to the group to tap into the community partners to see if they want to have their organization’s link on our website and vice versa.

Eli indicated that Sal’s suggestion was already discussed within the website development group and once the website is up and running, we can link to the Deaf Center, AG Bell and Hamilton Relay’s sites. Also, on the website, we would have a page for the Commission where we can upload our strategic plan, information about Commission members (with email links for people to contact us) and so forth. Eli asked Cheyenne if she could have a mock-up completed by the next (August) Commission meeting.

(There was a brief discussion about when the next meeting was among Commission members.)

Cheyenne indicated that she could have an initial layout (without full content) for the August meeting. She acknowledged and appreciated all the help and support from the Commission on the website development and will look to them for content since they are the experts.

1. **Hamilton Relay – Relay Traffic Report and Outreach Report**

**Christa Cervantes, Hamilton Relay and Abby Magtoto, Hamilton Relay**

Sal asked about phone calls and the trends - as an example, January 2017 – what factors cause the fluctuation in call volume?

Christa responded there are a lot of different factors. Sometimes the number of days in the month makes a difference. A good example is the difference between February and March, those extra days in March make it look like it's a huge jump. What also affects the numbers is the different times of year. Holidays and people traveling can affect the numbers. Events where people are trying to get other people to know about and to come to can affect numbers. Also, weather events such as hurricanes can affect number and performance of calls even when the weather event isn’t in Nevada. People are calling to see if their loved ones in Florida are safe and things like that.

Eli asked specifically about the spike in May for interstate calls. Christa stated that sometimes spikes occur when new people are learning about the service and/or are new users (who may use it a lot in the beginning). However, we can’t look at specific users to see their usage.

Jeff asked if the reports were TTY users or CapTel users? Christa showed that the different slides indicate at the top if the report was for TRS or CapTel. She went on to clarify that Nevada TRS includes traditional relay and speech-to-speech relay calls. TRS stands for Telecommunications Relay Service, but some people call it “Traditional Relay Service”.

Christa added that we don’t know if spikes are related to new users or not, but we look at other factors such as, where Abby has been (i.e. to an event with hundreds of people) and if the service has a spike in that month. We don’t always know the reason for the spikes, but we do some research to see where Abby has been (and things like that) to tell us what is probably causing those spikes.

Eric noted that in addition to the month-to-month variation, there’s a clear trend over time (3-4 years) that indicate a decrease in usage. Is that a common trend nationally and if so, does that reflect a larger trend towards changing technology? Do you have any sense as to what is causing this downward trend?

Christa stated that this was a national trend because a lot of signing Deaf people don’t use TRS relay as much because they use video relay more. A lot of young Deaf people don’t even know what a TTY is, really. Also, there is a technical aspect to the decline - a lot of the telephone providers are changing their services to digital only. That affects the numbers because it makes TTYs (and the other equipment that is used with TRS) not function as well or at all with analog lines. Another factor is that more people have access to internet service so we see them move to more internet‑based services.

1. **Presentation on the work of Early Hearing Detection & Intervention Program (EHDI)**

**Perry Smith,** **EHDI Program Director**

Mr. Smith shared that he is the coordinator for the Nevada Early Hearing Detection and Intervention Program (EHDI). The EHDI program is within the NevadaDivision of Public and Behavioral Health under the Nevada Department of Health and Human Resources. All states have EHDI programs. Our funding is from two federal sources: Center for Disease Control and Prevention (CDC), and Health Resources and Services Administration (HRSA). We function completely off those two federal grants and do not receive State funding. Our goals and objectives are set by those two federal programs.

The purpose of the EHDI Program is to ensure all children in Nevada are screened for hearing loss at birth and those identified with hearing loss receive timely and appropriate audiological, educational and medical intervention. We **ensure** three things happen:

* Infants are screened before 1 month of age,
* If they do not pass the screening, then they are seen by a qualified audiologist for testing,
* Those that have a confirmed hearing loss are enrolled in early intervention services.

We do not perform any of those screenings or tests; instead, our goal is to **ensure** everyone else is doing their part. We work with all the hospitals in the state, with audiologists and with early intervention services. Contracts with these entities allow for data sharing.

The goals and timelines are developed by the Joint Committee on infant hearing.

On the top righthand side of the handout is a graphic with the numbers 1,3, and 6 theymean:

* 1: infants should be screened before **one** month of age.
* 3: those who did not pass the hearing screening, should have a diagnostic audiology evaluation prior to **three** months of age.
* 6: before **six** months those who have been identified with a hearing loss should be enrolled in early intervention services.

We do a good job here in the state of meeting those goals.

Next Mr. Smith walked the group through the data on the handout from 2016(most recent data we have from the federal government) - here is a synopsis of the data:

* 35,927 births and 96.4% screened (that % is in line with the national average)
	+ (\*\*Note\*\* 307 of those not screened were home births – that’s down from approx. 500 due to education and outreach to midwife groups)
* 667 were LTF (loss to follow up/documentation) We know majority of those were born in the State's federal hospital and are screened - but we do not have that documentation.
* 1.4% (495) of those did not pass the screening
* 54% (269) received audiological evaluation
* 49 had confirmed hearing loss
* 81.6% (40 of the 49) enrolled in early intervention services

The pie chart looks at the number of ears, not infants, and what was the diagnosis on each one of those ears. For example, we have 49 infants who had confirmed hearing loss – so a total of 98 ears – here is their findings:

* 16% had normal hearing
* 8% had mild hearing loss
* 16% had moderate hearing loss
* 22% had moderate to severe
* 16% had severe
* 22% had profound hearing loss

Most infants’ ears are not necessarily the same for example, one ear may be profoundly deaf and the other ear may be normal or mild. For the 49 infants who were diagnosed with a hearing loss – not all were profoundly deaf. Of the babies who did not pass the hearing screen, 75 to 80% of those did have normal hearing since the hospital screening is not a diagnostic test. Prior to EHDI, the average age of hearing loss identification was about 2.5 years. Since EHDI programs have come on board, that number has decreased to an average of 4.5 months. Within Nevada, very few children slip through the cracks - the system works very well in early identification, early diagnostics, and early intervention services.

Then the last part of the handout looks at early intervention. Some of the infants that were not enrolled in early intervention, were because they had a mild hearing loss, or one ear was normal and the other had a mild to moderate or unilateral hearing loss, or it could be a parent's choice as to not enroll them in early intervention.

We work with ADSD, the Part C office, NEIS, many state nonprofits, Hands & Voices, AG Bell Association, and the Deaf Centers of Nevada. We also work with midwives and serve on the Nevada Newborn Screening Advisory Committee.

Jeff asked about the data which states those with normal hearing is at 81.8% - I feel that is low because I'm seeing more Deaf and hard of hearing people and I've seen more cochlear implants than before. Mr. Smith responded that these numbers correspond with what the numbers are nationally in terms of percentages. Remember, these are testing of newborns. There's been data to suggest that by kindergarten age that number is doubled. Just because an infant may pass an early hearing screening does not mean they could not develop deafness within the first five years of life.

Maureen asked about early intervention services – of the 9 that don’t access early intervention services – do you track those and follow up with the families who may not be aware of early intervention services? Mr. Smith indicated that they do track even more information than is shown on this graphic. We do know a lot about those that were not enrolled, for example, many are unilateral hearing loss, while other parents may choose not to enroll in NEIS but in some other program.

Maureen asked a follow up question about children who may not have been born with both ears – how do you evaluate those children? Diane Miller, an audiologist who contracts with the EHDI program, stated that condition is called atresia. Atresia is where the visible outer portions of the ear are atypical or potentially missing altogether and it causes hearing loss. However, those ears can be tested. They can be assigned a degree of hearing loss and they are included in this graphic. Most of the ears that have atresia tend to have a moderate to moderate-severe hearing loss while the other ear has normal hearing.

1. **Presentation regarding the work of the Nevada Hands & Voices Organization (NVHV)**

**Eric Wilcox, President of NVHV**

Eric thanked the Commission for the opportunity to be a part of the Commission as a parent representative. Eric first introduced a few members of Hands and Voices who were at the meeting: Amy Swanson, a parent guide from Reno and Beth Jones, the coordinator of the parent guide program in Las Vegas. Eric also acknowledged Maureen Fradianni who has been a long-serving member of the Board of Directors in the role of a Deaf Adult Perspective.

Eric referenced the Hands and Voices handout and read their mission statement which as a parent-driven nonprofit organization exists to support, encourage and educate families of deaf and hard of hearing children so they can be empowered to make choice that will enable their children to achieve their full potential. He went on to explain that Nevada Hands and Voices is a statewide chapter of the national organization which is becoming an international organization since they have chapters in Canada and other countries. Eric gave a brief history of the organization and their founding 20 years ago by a group of parents in Colorado who were tired of being caught in a “tug-o-war” over modes of communication and use of technology.

Since most Deaf kids (90%) are raised by hearing parents, often times their deaf child is their first exposure to the Deaf community. Eric shared that his experience was the same – he had no experience with the Deaf community until his six-year-old was born. This group sought to provide peer-to-peer parent support and Hands and Voices was formed.

This peer-to-peer concept has been turned into a formalized program called “Guide By Your Side”. The handout has more details about the program. Hands and Voices partners with other organizations and we are a sub grantee to the EHDI program with allows us to outreach to families and to provide that support. We are also a grantee to the Deaf Centers of Nevada that helps supplement the Guide By Your Side program.

Beth Jones (Las Vegas) is the program coordinator for Guide By Your Side and is also the parent of a hard of hearing child. Beth recently took over the position from Cindy Roller. Beth continued to provide a programmatic overview of Guide By Your Side. There are currently five parent guides throughout the state – two in the North, two in the South (one of which is trilingual: Spanish, ASL and English) and the fifth one is Beth who serves as both the coordinator and a parent guide.

The program adopted a system where we provide support to families throughout the continuum and reach them at their own level. Many families upon first diagnosis of their child’s hearing loss are not ready to ask for help because they don't know what they need. We divide our support among the five guides (who are required to have a deaf or hard of hearing child to be a guide). Between the five guides, there is a total of seven of our own children that are deaf or hard of hearing, and all of them use different modes of communication and devices. However, we do not assign families to a guide based on how the guide chose services for their child(ren). We support all

families regardless of their choices for communication.

We communicate with our families in many ways. One way is through what we call passive communication. When parents are not ready to hear about available resources, they may check out things like our website, welcome letters or they may receive information from our mass email lists. The EHDI program sends them resources, we have a parent letter that is included in all of that so every child that has a diagnosed, confirmed hearing loss in the state gets those resources automatically.

We also have a social media presence: Facebook, Twitter, Instagram, and Pinterest accounts. Pinterest is one of our newest accounts a with over 130 resources for families to use. Many of our families surf the web in the middle of the night looking for answers, so we have a condensed resource list our families can access. It is difficult to track data on passive communication, but we know it is effective and is being used by families.

Another way we support families is through what we call anonymous interaction. That is done through a Facebook chat session. We are seeing younger families heavily rely upon technology, and these families with young children are often not able to come to a meeting at night. So being able do this electronically, throughout the state, people can join in from anywhere and at any time.

The participation we are having from these chats are more than we could do in person. We have held four 1.5 hr. chats where we post questions and then people throughout the state answer the questions which leads to interactive dialogues with among the participants. Each chat has ranged from 32 to 202 participants. The participants are not always just parents, but other family members, deaf individuals and even professionals in the field. We can further analyze the data – for example, in one chat, we had 132 people logged on and participating. Of the 132 logged on, 41 individual people made comments, liked a comment or shared a comment. The other 90 participants still had access to the information. On of the benefits of the Facebook chat is that individuals can read through the chat dialogue after the chat is closed. For the example given, we had 132 people logged on live, but an additional 241 people access and read the chat after it closed within the next five days.

The last form of contact is at the heart of what we do, which is our one‑on‑one interaction with families and clients. We meet with families any time of day – not just standard business hours – as to meet the families’ needs. We text, call, email and exchange letters – whatever works best for the families. Many families have small children and the best time to contact them is after the children are in bed. Other families live in rural parts of the state and are not able to meet in person, so we communicate via email or phone calls.

An additional way we support families is by group interactions. We do this through language play groups, parent connection meetings (educational training for parents and professionals), social events, and we also make sure that our families are aware of the other social events throughout the community. We also partner and collaborate with different organizations such as Nevada Early Intervention, the Deaf Centers of Nevada, and AG Bell and share their activities calendars with our families.

The last type of support is for our leadership opportunities which allows families move into leadership roles for other families. Many families never had this kind of support, but two of our guides and two of our board members (including Eric) were originally families participating in receiving services. Not only are they becoming leaders in our community, but they are submitting articles for national publications, attending conferences, and sitting on committees.

**15 MINUTE BREAK**

1. **Recommendations for Commission Vacancies and Election of New Officers** **(For Possible Action)**

**Betty Hammond, Social Services Program Specialist III of the Planning, Advocacy and Community Services Unit (PAC)**

Cheyenne (filling in for Betty) stated that there is one vacancy for “User of telecommunications relay services for the services or persons engaged in the practice of interpreting or the practice of real time captioning” and is not aware of any applicants for that position; therefore, recruiting for the position is needed. If you know of anyone who qualifies and would be interested let us know and we can reach out to them.

Maureen expressed a desire to have the current “relay user position” be able to be someone who could work on the five-year strategic plan and she asked Jeff if he knew of anyone down in Las Vegas that would be a good fit.

Jeff indicated that since so many of the Commission members were already in Las Vegas, he would suggest looking for someone in the North to help balance the geographic demographics of the Commission members.

Eric inquired as to if the Commission is obligated to advertise when there is an open seat. Eric heard about his position through networking with others. Mike indicated he did not believe the Commission was legally obligated to advertise according to SB481 and the Commission’s Bylaws. That being said, we should discuss how we get the word out to more organizations when we have an open seat.

Cheyenne commented that since the agenda item is recommendations for Commission vacancies, we could discuss ways that we would like to advertise this open position since we don’t have any specific names to recommend today. Maureen indicate she may be aware of someone who would be a good fit but would like to talk to the person first.

Mike added that as we think about the website (that was mentioned by Cheyenne earlier in the meeting), that we consider adding a section of job announcements and we can put future open Commission positions there, too. Jeff agreed.

Sal made a motion to advertise the open position on various websites and community partners. Mike interjected that a change to the motion should reflect that this responsibility should be that of the Director. Sal amended his motion that the Director advertise the open position on various websites and community partners. Eric seconded. **Motion carries.**

Cheyenne announced only one nomination was submitted for the Chairperson office and that was Eli Schwartz. Sal made a motion that the Commission members elect Eli Schwartz to remain as Chairperson. Maureen seconded. **Motion carries**.

Cheyenne led the Commission members in voting for either Sal or Jeff as Vice-Chairperson through confidential ballots. Maureen interjected that she wanted to hear from both Sal and Jeff as to if they were actually interested in the position. Both stated they were. Eli instructed everyone to cast their ballots. A vote was taken, and Sal Fiorentino was selected to remain in the position of the Vice-Chairperson.

1. **Reports from ADSD**
* **Reporting newly hired Interpreter Pool personnel to the Commission –**
* **Informational report on ADSD’s budget process**

**Betty Hammond, ADSD Staff**

Cheyenne (speaking on behalf of Betty) announced that ADSD has filled three of the four interpreter positions and all three of those interpreters are working this meeting today. Cheyenne asked each interpreter to quickly introduce themselves. The first is the interpreter in Carson City: Kalen Beck who is a certified interpreter and just relocated to Nevada from Portland, Oregon about two weeks ago for this position. Kim Johnson (ADSD Contract Interpreter and Coordinator in Carson City). From Las Vegas we have Debra Scott who was originally from Scranton, Pennsylvania and comes from a four-generation deaf family. I started my interpreting with Hawaii 5-0 and on rotary phones – I was the original relay. I worked at the Scranton State School for the Deaf and moved out to Las Vegas in 2002. Lastly, Stephanie Gardner has been interpreting since she was 17 and has Deaf parents. I have been interpreting professionally for about 18 years and is the oldest of four siblings. My husband is Deaf, and he teaches at the Clark County School District and we have four beautiful children in which I call my second-generation CODAs because their father is Deaf and they all sign. I lived in Vegas for ten years and then moved to California a year ago. I moved back here when Deb told me about this position.

Cheyenne then shared an informational report on the ADSD budget process following the handout in the packet provided. Basically, building state budget is a year-long process that starts in February. The phases look like this:

* Agency preplanning (March-April) – looking at our current budget, programs and any expected changes to those.
* Budget Concepts – presentation(s) to leadership about our budget
* Tweaking of the concepts based on feedback
* Budgets sent to DHHS’s Director’s Office
* Director makes any changes (May timeframe)
* Budget Building (which takes several months) – and includes two categories:
	+ Maintenance: maintaining programs
	+ Enhancements: requesting new positions or new programs

This year is called the base year of funding, which was for the Commission was the time period from July 1, 2017 to June 30, 2018. Our fiscal year.

* August – Final budgets are sent to the Budget Division
* September – December the Budget Division and Governor’s office reviews
* January – final recommendation to the legislature

We receive guidance from the Governor's office on budget priorities; therefore, decisions that are made in terms of what to include in our agency budget are based on those priorities.

Outside of the state budget process is when advocacy groups and the public work with legislators to educate them on their needs. When legislative session starts, legislators are able to introduce concepts and what we call Bill Draft Requests (BDR), that may or may not have a financial impact with them.

Eli stated that at a recent CSPD meeting, a representative from the fiscal office came and spoke about the process and I learned a lot and thought it would be beneficial information for the Commission, too.

1. **Presentation on the activities of the Deaf Centers of Nevada (DCN) activities**

**Kevin Carter, Executive Director of DCN**

Eli asked if Kevin Carter from DCN was present – he was not.

Maureen indicated that she had several questions about Kevin’s report. Eli suggested that if she has questions, she can either email Kevin directly or contact Betty who keeps in communication with Kevin.

Maureen stated that she didn’t understand some of the numbers in Kevin’s report such as there are 17 families on the waitlist for early intervention services, but there are no individuals on the waitlist for Deaf adults. When looking at the number of clients and general staff, I notice the numbers are quite high. There are 95 active clients. That's a high number of services to deaf adults. While the early intervention program has 17 families are on waiting list and the SKI‑HI program also had four families on the waiting list – that is a lot of families who are waiting. So why are those numbers so high? Jeff agreed with Maureen and wondered why the early intervention families were not being referred to programs like EHDI and Hands and Voices?

Eric replied that Nevada Hands and Voices does not receive funding sufficient enough to implement a deaf mentor program or Ski-HI service program. While other Hands and Voices chapters may provide that service, we do not have the funding to do so at this time. Some families receive those services (deaf mentoring and SKI-HI) through NEIS which is a state agency and has funding through ADSD. If the Commission is interested in finding out why these families are on a waitlist (which I think would be good to know), we might want to look at NEIS and their case loads and their staffing. My family received these services through NEIS, but my understanding is that those services are provided differently in Reno vs. Las Vegas.

Jeff indicated that it was not clear why Nevada Hands and Voices was not receiving funding to provide those services – doesn’t Hands and Voice receive grant money from DCN? Eric replied that the funding they receive from DCN is for the Guide By Your Side program only according to the scope of work in the grant. The amount we get is just a small fraction ($49K) of DCN’s budget of $1.6M.

1. **Overview & discussion regarding Draft annual report to the Governor (For Possible Action)**

**Eli Schwartz, Commission Chair**

**Cheyenne Pasquale, Chief I of Planning, Advocacy and Community Services Unit**

Eli gave the Commission members a few minutes to read a draft copy which is in their packet. This is due on September 1, 2018. Since we have a Commission meeting in August, I would like to have it finalized by that time. Mike asked for clarification about the Commission member positions – the report doesn’t align with our recent discussions.

Cheyenne indicated that there are proposed changes:

* Member who is an employment specialist
* Member who is the parent of a Deaf child (birth to 5 yrs. of age)
* Member who is hard of hearing

Eli stated that he thought based on the last meeting that one still needs to be a relay user, the second is an employment specialist ad the third one is birth to five and that two of those positions were not filled as an oversight.

Mike stated that the group is confusing two different proposed changes. One of the proposed changes TWO of the existing relay positions. The second proposal is asking for TWO ADDITIONAL Commission member positions. My understanding is that it looks like this:

* Change two of the EXISTING relay positions into:
	+ One member is hard of hearing
	+ One member is an employment specialist
* Propose two NEW positions:
	+ One member from a Deaf advocacy nonprofit organization member
	+ One member is the parent of a deaf or hard of hearing child age birth to 5 yrs. of age.

Maureen expressed a concern that limiting the last position of a parent from birth to five is concerning – what if the child is older than 5yrs. old? Cheyenne noted that the reason we wanted a position the board with that specific age range was to have a parent who has experience with early intervention services.

Mike added that understands Maureen’s position since that is a closed-ended position the way we have it worded. At this point the current wording insinuates that moment the child turns 5 years of age; the parent cannot be a Commission member.

Eli indicated that this discussion needs to be put on the next meeting’s agenda so that we can discuss it further. Jeff agreed. Mike added that all the Commission members have term limits so maybe this position terms out when the child reaches age 5. I just don’t think we need to add another agenda item if it’s not really needed.

Cheyenne noted that there is an agenda item on today’s agenda to discuss BDR changes to NRS 427A.750 and this discussion fits with that item. Also, please take some time to review the draft letter and send your comments to me and I will incorporate them.

(LUNCH)

1. **Public Comment:** Eli indicated that there were two individuals in Las Vegas that didn’t have a chance to introduce themselves earlier and would like to make public comments and are not able to stay until the end of the meeting.

(No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. Please state and spell your name for the record. Public comment may be limited to three minutes per person at the discretion of the chair.)

* **Libby Hathaway and Suzanne Ayers,** Deaf community members, (Libby) I interact with the Deaf community a lot here in Nevada. I found some information about the Deaf Centers of Nevada. It talks about their salaries and what they pay individuals, people are finding out that the hearing individuals get paid way more than the Deaf individuals. I understand that this may be hearsay, but if it is true, then something is amiss, and this does not send out a very good picture to Deaf workers. We know that the Deaf workers at DCN work very, very hard and if it is true that they make less than the hearing individuals that work there, that would be a shame. I am hoping that we can calm the Deaf community and, DCN improves their services and keeps all of this in mind. The other issue is with 911 services for Deaf individuals who use it on their mobile devices, I know one person who worked with the legislature in another state and they got it passed and of its law and in use and I will give you the name of a person that you can talk to them so that we can possibly also utilize those types of services here in Nevada. Thank you.
1. **Discussion and approval regarding outreach for the Commission and developing a standard letter to use to send to public partners about the Commission and its Strategic Plan (For Possible Action)**

**Maureen Fradianni, Commission Member**

Maureen stated the purpose of the letter was to reach out to our partners to let them know about our strategic plan. We need final approval of the letter from the Commission. Once approved, it will need to be sent out on official letterhead to our partners. There are 48 entities listed to receive a letter and we need to collect addresses and point of contacts for each entity.

Eli noted that there would be two different versions of this letter (the only difference will be the opening paragraph): one sent to our partners already identified in the strategic plan and the second one sent to organizations we would like to include in our plan. Sal noted that this would be nice to have on the new website. Cheyenne stated that they could put a link to the letter on the current website. Maureen urged them to get the letter out ASAP since its already the second year of the 5-year strategic plan. Eric mentioned a few grammatical changes and they were accepted by the members. Jeff made a motion to move forward with this letter. Sal seconded. **Motion carries**.

Maureen indicated that we needed to match up the partner with the strategic plan. Eli agreed and will look at those partners who are in the strategic plan as the first ones to send letters out to. All responses will go to Eli because his name is on the back of the letter.

Eli mentioned that as we are all doing outreach on behalf of the Commission, please let myself, Cheyenne or Betty know so we can make sure you are in compliance with the ethics and laws.

Maureen wanted to make a motion for an outreach specialist which is listed in the strategic plan and it is a time-consuming position and none of us has time to do it all. Eli indicated that an outreach specialist needed to be tabled due to funding concerns.

Jeff stated that Deaf individuals in the community are frustrated. They go to different agencies and they don't get the help that they need because the system has failed. I believe that the Commission should have a position, outreach specialist, to ensure police officers, hospital personnel, doctors, and lawyers are trained in how to work with Deaf individuals. Mike added that this goes beyond the budget – the Commission does not have the authority to grant new positions.

Eli stated that we could considering doing the same thing as we are considering with the Director position – go to the legislature and see if we can get a position. This isn’t on today’s agenda, but it can be added or another meeting.

Cheyenne added that we could look at our natural partners who could do some of the training. We can look at some of the programs through ADSD where they already have advocacy and training efforts that we could leverage for the time being. The legislative process is very long to get a new funded position.

Jeff spoke up and stated that the problem with outsourcing to our partners is that they are all hearing. Deaf people have had years of oppression and frustration and while hearing people can empathize and “take care of it” for Deaf people – we do not want to be “taken care of”. I want a Deaf person to be the outreach specialist, so they can speak from their own experiences.

Maureen added that outreach is a big need. Additionally, it is very taxing and needs to be a full-time position. I’ve done it before as part of my job and it really needs to be full time. The other consideration is making it a contracted position if getting a full-time position is too difficult.

Cheyenne added that we could explore the options, but the budget for the Commission is currently only $25,000 a year – and that doesn’t go very far. We will explore options and get back to you at the August meeting. Jeff agreed that having a consistent outreach specialist would be best.

1. **Report, discussion and approval of language for BDR suggesting changes to NRS 427A.750 regarding the Commission’s name, expansion of member positions, title changes to positions and the function of the Commission & the Commission Director (For Possible Action)**

**Mike Eifert, Member of the Commission**

Mike mentioned the letter to the Governor and much of the suggested changes are in that letter. Eli and I have been trying to determine if we will put in one or two bills for this next session. A gentleman named Eric Jimenez who lobbies for nonprofits met with Eli and I and it was very educational to us. He mentioned the budget reserves and how we could tap into those funds. Those funds might be as high as $500 million. One idea was to make a pitch of our ideas (outlined in Exhibit B of the Governor’s Report) to Mike Weldon, who is the Chief of Staff of HHS in the Governor’s office. We will also meet with the Governor’s Chief of Staff, Andrew Clinger. Eric believes that we have a strong case since we have documented our successes with the Commission and have documented some of the challenges we are currently facing and have suggestions on how to overcome them. We have already impressed a number of individuals with all of our accomplishments thus far.

Additionally, Maggie Carlton seems to be very supportive of what we are trying to do. Another person on our side is Senator Spearman – since she did not win her bid. We have identified Joyce Woodhouse from the finance committee and then we have a list of additional senators we will be reaching out to, as well.

Due to where we are in the budget cycle, Eric suggested that ADSD do an agency request for the director position in the amount of $250,000 - $500,000 (whatever we decide) that way the agency would have the request in front of the legislature immediately and that could be seen as more positive. Senator Carlton said we have proven that we can be judicious with our $25,000 – so even if they gave us a bit more (like $100,000) that is money we could use toward a Director position.

As far as the request for the name change – that was seen in a positive light, too, because it would simplify the name. It appeared to be a no-brainer. Also, I don’t think there would be any hesitation in granting two more Commission positions since we have identified the specific needs. Eli seconded what Mike said about Maggie Carlton being impressed with all the accomplishments we made in our first year. They have heard great things about our Commission – so kudos to all of us!

Cheyenne noted that earlier we spoke of changing the Commission position description of a parent of a Deaf or hard of hearing child age birth – 5 yrs. old. Now would be the appropriate time to discuss. We could say the child is between the ages of birth – 5 at time of appointment; therefore, the parent could stay on the Commission for their full 3-year term. Mike added that Legislative Counsel Bureau (LCB) will look at this and they can help us figure out the language that would help us meet our needs in that position.

Eric suggested that instead of putting an explicit age restriction on the child, it could require somebody who has used early intervention services or received early intervention services in the state of Nevada. That way our goal is met, and the position is not too restrictive. Additionally, remember that these parents are just learning of their child’s hearing loss and may not be ready or able to join the Commission and have input within the first five years of their child’s life. It takes a while for parents to learn the systems while at the same time learning to parent your new child. My fear would be that there would be few (if any) parents able to contribute and have the time to sit on a State Commission that early in their child’s development.

Mike agreed that stating it in that manner meets our intent. We can give this language to the LCB and let them help us decide exactly how to phrase it. I like the idea of having a position such as “A parent who has been the recipient of early intervention services”. I’m happy to work with the LCB in creating language that reflects our intents. I don’t believe we need a motion to move forward with that – it would fall under my work with the LCB. Jeff wanted to note this parent position could include either a Deaf or hearing parent.

1. **Informational report regarding results of LEAD-K meeting on June 9, 2018**

**Jeff Beardsley and Maureen Fradianni**

Jeff shared a summary of the Language Equality and Acquisition for Deaf Kids (LEAD-K) presentation by Sheri Farinha. The goal of LEAD-K is for Deaf children to have access to language (either spoken English, ASL or both) from birth to five. Research has shown that past strategies for educating Deaf children have not been successful and has had a negative impact on their academics and employment. Research shows that language development happens between birth to 5 years. LEAD-K offers parents information about language milestones for their child.

LEAD-K does not promote any particular language or communication method. AG Bell has fought with states saying that LEAD-K supports only one modality - ASL. Additionally, LEAD-K encourages language assessments to be done by DHHEI or educators to help families make the right language decision for their child.

To date the following states have passed LEAD-K legislation: California, Hawaii, Oregon, South Dakota, Georgia, Kansas and Louisiana. Many other states have current bills that are trying to pass LEAD-K legislation. LEAD-K has developed national partnerships with the National Association of the Deaf, the Nyle DiMarco Foundation, American Society For Deaf Children, CuedSigns Incorporated, National Black Deaf Advocates, and the Deaf Grassroots Movement. The national core team co-chairs are Sheri Farinha and Julie Rems Smario.

For Nevada, we are working on the following:

* getting information on national training
* learning the legislative process
* assistance with team organization/building our local networks
* consultation on issues with legislators
* building relationships with impacted communities, our state legislators, opposition groups, and many more
* getting more resources to advocate for Deaf children to have full access to both ASL and English

We need more research; information and dialogue about language deprivation; more partnership opportunities to change public policies; more literary resources for language acquisition and development of both ASL and English; and to create a strong support system for families and the time is now.

Eli asked what is the next step? Do we contact the Department of Education or get a BDR to do a legislative change? Obviously, we demonstrated there's a need for it but how do we start the implementation of the program?

Jeff stated that there are established groups in both Reno and Las Vegas who meet monthly. I am willing to represent the Commission on both groups. Gary knows a lot of legislators and he's willing to work with us on this. Mike asked about the states that passed legislation, is it the Department of Education that implements LEAD-K requirements? Eric replied that this is similar to early intervention in that the children from birth to three are within the health system, and from three and beyond, they are handed off to the education system. My understanding is you need to write a law that affects the both state agencies. This requires a piece of legislation that mandates tracking the language ability of Deaf and hard of hearing from birth to five against pre-set benchmarks and record/report that data to the public where the benchmarks are not tied to a specific language – which is the key difference between LEAD-K and similar laws.

Mike expressed concern because previously there was strong, quick discussions in this very room about LEAD-K and its use and one person as I recall, it's abuse. When these benchmarks are being made, is it an and/or condition or is it an option for the families. My concern is that a family is being forced to do something that they don’t want to do for their child.

Jeff stated that part of the problem is previously, parents had no way to know what was best for their child. So, the child suffered language deprivation until they were much older (3-5yrs) and are already language delayed; therefore, LEAD-K was established to help parents get language to their babies earlier. Eli asked Jeff, Maureen and Eric to work together on LEAD-K and report back at the next meeting.

**5 MINUTE BREAK**

1. **Discussion and recommendations to update the Commission’s Strategic Plan (For Possible Action)**

**Eli Schwartz, Commission Chair**

Eli stated that we need to identify what we want to accomplish for next year. I’ll start with the items we identified for this past year:

* Emergency Responders
* No Wrong Door
* Nevada Care Connection
* Education
* Legislative
* Employment

We have not made much progress on employment, so we should continue that into next year. Maureen indicated she wanted to continue with Education into the next year with all the work on LEAD-K plus we need to focus on communication plans (under IEPs) and the Part C administrator – Candace McDaniel for children birth to age three. Jeff added to Maureen’s desire to continue education – he has a meeting with Antoinette Lewis from CCSD around IEP processes.

Sal commented that the Commission should focus on access to interpreters in healthcare. Jeff added that the job of the Outreach Specialist would take on this type of education to healthcare entities.

Eli asked about using the State interpreters to help in these areas. Jeff replied that the State interpreters only work for State agencies and that healthcare organizations need to know how to access interpreters. Sal added that many hospitals either don’t provide interpreters or rely only on video remote interpreters (VRI). Sal stated he thinks the Deaf patient should have the right to choose between VRI and on-site interpreters. Eli asked Jeff if this is an ADA issue.

Jeff indicated that VRI can be conforming to ADA standards – but if we want to make a policy change to where patients have a choice – that would be a legislative proposal like other states have passed.

Eli asked if the Commission really wants to tackle this topic? Mike replied that if we want the hospitals to comply with something like this and pay for it, then it would need to be legislated – especially when we are talking about someone’s rights vs. an entities responsibility.

Jeff clarified that hospitals still pay for VRI which is not always effective communication due to choppy video streaming and small monitor screens. If you look at the total cost – then VRI can add up and be more expensive than on-site interpreters. I’d think we’d want to advocate for a change in legislation.

Eli added that the Commission was mandated to make recommendations to policy changes – so we could initially start by writing a letter to the Department of Health and Human Services expressing our concerns and that we would be willing to work with them on a solution. Who is willing to work on this letter? This falls under 1.1.1 of the strategic plan for 2019 – do we want to move it up or wait until then to address it?

(there was confusion among members are re-doing the strategic plan or changing priorities)

Cheyenne suggested that we have a lot to do with this strategic plan. We want to identify priorities going into the next fiscal year. But we also have a lot of outstanding items it sounds like from fiscal year 18. Do we want to have a discussion right now and do we have the capacity to take on new objectives or do we need to focus on wrapping some things up from the first year rather than starting something else? Jeff agreed to finish up things before we added new things.

At our April meeting we intended for this meeting to be a brainstorming session, but we filled up our agenda with other things.

I can work with everybody that has specific assignments and create a summary document of the status of each item. We can use that document and put agenda items under specific objectives that support the strategic plan that we need updates on in August. Then we will be able to look at any adjustments to the strategic plan that we need to make.

Mike felt we needed a separate meeting since 2019 starts July 1 and we have stuff from 2017 we haven’t even touched yet and many things in 2018 that need to be completed. We are either going to have to shift the strategic plan by two years or move things to a different year and eliminate things in that year, so we don’t get behind even more. Jeff agreed and said that Eli had tried to get us started on a clean slate.

Eli reminded members that the strategic plan is a living document and we can change anything at any time. I will work with Cheyenne to figure out what has been completed and what has not from 2017 & 2018 and come to the August meeting with that list and we can discuss then.

1. **Discussion and Determination of Agenda Items to be Considered at the Next Meeting
(For Possible Action)**

 **Eli Schwartz, Commission Chair**

Cheyenne suggested we only focus on three things: the strategic plan review, legislative update, and the report. Keep it to those three items, because as we do the strategic plan review, we can invite others to speak on specific objectives. Rather than filling up our schedule with many items, let's focus on the strategic plan.

1. **Confirm Dates for Future Commission Meetings and Workgroups (For Possible Action)**

**Eli Schwartz, Commission Chair**

Eli stated that the next meeting is scheduled for August 22, 2018 at NDALC locations. This will be our last time here before moving back to the Deaf Centers of Nevada.

1. **Public Comment** (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. Please state and spell you name for the record. Public comment may be limited to three minutes per person at the discretion of the chair.)
* **Perry Smith,** EHDI Program Director, I want to make an additional comment in relation to my message I gave earlier about the state EHDI program. In addition to all the state partners we work with, there are a number of federal partners which work alongside us and promote the same EHDI processes. The American Association of Pediatricians advocates for the EHDI processes. There's also the national organization which represents audiologists, American Speech-Language-Hearing Association (ASHA). They also advocate for EHDI processes plus the hospitals are on board also in promoting the complete EHDI processes where infants are screened at an early age, the hospitals are encouraged to then refer to qualified audiologists and then the audiologists are taught to then promote and push and refer kids to early intervention services. Another comment I have is in relation to what one of the agenda items had to do with your letters to your partners. In your partner list you had a number of them listed there. A large majority of those are already partners with us. I can give you the names, addresses, phone numbers of those key individuals within each of those organizations. If you just tell me who you want to have me send that to, sounds like Maureen seemed to be involved with that to a certain degree, so I can pass that along. Plus, I have additional partners that you might want to add to that list. I will give that to Maureen. Under your conversation about LEAD-K, there was some information on there that I think is, perhaps, slightly misleading or inaccurate. I won't go into everything, but I do want to make and comment concerning the mentioning of AG Bell association. I am not a spokesperson for that organization, but we do work with them, and I am aware of some of the things that they do. As a general guideline, AG Bell is not against LEAD-K. And so that should not be promoted. I know of one situation where A.G. Bell was against the LEAD-K legislation in one state, and it was because of the wording of the legislation, it was not because they were anti LEAD-K. I think that's an important designation that ought to be made. The last portion of my public comment is, I don't think I will be out of line in this public comment, but according to Nevada open meeting law, there are two options related to the requirements for public comment. I would suggest that the Commission look at both of those options in handling that requirement. In my limited understanding, I think this Commission is compliant with the public comment open meeting law requirements. But there are two options there. And I would suggest you look at the other option in how you handle the public comment sections within the meeting, and that is, instead of having two public comment sections one at the very first and one at the very end, you can have a public comment section under each agenda item that you feel is important so that the public comment is allowable under each agenda item if you so choose. I think that would be very important for this Commission because I have heard the Commission talking about particular items, and I hear sometimes inaccuracies among the commissioners about a particular item, but yet no one outside of the Commission is allowed to raise their hand or provide comment. I think it would be very important and beneficial to this Commission if public comment sections or times were allotted under each agenda item. Thank you.
* **Christa Cervantes**, Hamilton Relay, I wanted to add a couple of things. First of all, I wanted to offer to put the information regarding a relay user for the commission on our website since we do have a Relay Nevada page. I think that would be beneficial if you would like us to do that, we would be happy to do that. I also wanted to make sure that I clarified a little bit what I talked about before.

I didn't want to leave anybody with the idea that Relay Nevada and TTYs are no longer viable options for communication. That's not true. For some people, TTY is their only way right now to communicate because they don't have internet and things like that. I want to make sure I didn't leave anybody with the impression that we didn't think Relay Nevada is viable. It definitely is. It's just changing a little bit due to technology and things like that. I wanted to make that clear.

* **Cheyenne Pasquale,** Acting Director, I just wanted to say again thank you to the commission, to the members of the public for educating me as I take on this new role of director. I have a lot to learn, and I'm looking forward to working with all of you, and I just want to kind of throw out there, if I have a faux pas, please know that I don't mean any disrespect or any harm. I'm learning, and I'm looking forward to getting better and building really good relationships with all of you.
* **Libby Hathaway,** Deaf community member, I think Mike just left. I'd like for this to be shared with Mike, Eli, if you could share this. When I first started coming to these meetings several years ago, I can see that there was animosity between commission members. I've got to be honest, I can see improvement and the most important part of all of this is a to have a Deaf commission, a Nevada commission like Maureen on this board. And that brings us together. That means we get to work together. And my hope is that this commission will truly listen to Maureen, because Maureen knows what the Deaf population needs. And whatever the Deaf people share with her, she's more than willing to work at. And I just hope that nothing bad happens, and like I said, I see improvement. I feel warm and welcome, I see improvements happening, more so than a few years ago. I'm sorry to say but I do see a difference between today and previous with all these new people and I am elated. And I just want to say thank you, everybody, and keep going. And I'm going to share with the Deaf community what's been going on.
* **Jeff Beardsley,** Commission Member, when it comes to LEAD-K, I think that there's a lot of misunderstanding. We are not against A.G. Bell. A.G. Bell has issues with LEAD-K. We're trying to work collaboratively, but there's some push back. And it's not a matter of ASL or spoken language. It's just language acquisition and access from birth to five. That is the goal that we strongly believe in. We want to help parents give language from birth to five. That is all that matters to us and I just want to make sure that's clear and there's no misunderstanding.
1. **Adjournment**

 **Eli Schwartz, Commission Chair**

Meeting Adjourned at 2:11 PM

NOTE: Items may be considered out of order. The public body may combine two or more agenda items for consideration.  The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time.  The public body may place reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint.

**NOTE:** We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. ASL Interpreters will be available at the meeting. If special arrangements for the meeting are necessary, please notify Wendy Thornley at (775) 687-0551 as soon as possible and at least **ten business** days in advance of the meeting. If you wish, you may e-mail her at wthornley@adsd.nv.gov. Supporting materials for this meeting are available at 3416 Goni Road, D-132, Carson City, NV 89706, or by contacting Wendy Thornley at 775-687-0551, or by email wthornley@adsd.nv.gov.

**Current Commission Members**

Eli Schwartz (Chairperson), Sal Fiorentino (Vice Chairperson), Jeff Beardsley, Allison Berman, Mike Eifert, Maureen Fradianni, Eric Wilcox, Betty Hammond.

**Acting Director**

Cheyenne Pasquale

NOTE: To provide a safe environment for Aging and Disability Services Division meetings, please refrain from wearing perfume, scented hairspray, cologne, scented deodorant, essential oils, aftershave or any other scented products when you attend. Scented products contain chemicals which can cause migraines, nausea and even breathing problems for people with asthma, allergies, and environmental illness.

**No Scents is Good Sense!** If you are unsure if a product is safe to wear, a good rule of thumb to just not wear it.

***Agenda Posted at the Following Locations:***

1. Aging and Disability Services Division, Carson City Office, 3416 Goni Road, Suite D-132, Carson City, NV 89706
2. Aging and Disability Services Division, Las Vegas Office, 1860 East Sahara Avenue, Las Vegas, NV 89104
3. Aging and Disability Services Division, Reno Office, 9670 Gateway Drive, Suite 200 Reno, NV 89521
4. Aging and Disability Services Division, Elko Office, 1010 Ruby Vista Drive, Suite 104, Elko, NV 89801
5. Nevada Community Enrichment Program, 6375 West Charleston Boulevard, Ste. L200 Las Vegas, NV 89146
6. Southern Nevada Center for Independent Living, 6039 El Dora Street H-8, Las Vegas, NV 89101
7. Disability Resource Center, So. E. Greg St., Suite 102 Sparks, NV 89431
8. Nevada State Library and Archives, 100 North Stewart Street, Carson City, NV 89706
9. Desert Regional Center, 1391 South Jones Boulevard, Las Vegas, NV 89146
10. Sierra Regional Center, 605 South 21st Street, Reno, NV 89431
11. Rural Regional Center, 1665 Old Hot Springs Road, Carson City, NV 89706
12. Northern Nevada Center for Independent Living, 999 Pyramid Way, Sparks, NV 89431
13. Dept. of Health and Human Services, 4126 Technology Way, Carson City, NV 89706
14. Early Intervention Services, 2667 Enterprise Road, Reno, NV 89512
15. Deaf Centers of Nevada, 6490 S. McCarran Blvd. Bldg. F Suite 46&47 Reno, NV 89509
16. Deaf Centers of Nevada, 3120 S. Durango Drive, Ste. 301 Las Vegas, NV 89117

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