

# MINUTES | Community Advisory Group | Meeting 13

## 10 June 2021

Meeting 3:30 pm – 5:30 pm

Location: Zoom Meeting

Present: Craig MacLean (Lower Mainland), Dan Braun (Lower Mainland), Gordon Rattray (the Interior), Leanor Vlug (Lower Mainland), Monika Lane (Vancouver Island), Sarah Taylor (Lower Mainland), Kiran Malli (Provincial Language Services), Amar Mangat (Lower Mainland).

Facilitator: Scott Jeffery (Provincial Language Services)

Note-Taker: Chelsea Numanga (Provincial Language Services)

1. **New Team Member Welcome**
* Introduction of all participants and welcome to Chelsea Numanga, Provincial Language Services (PLS). Chelsea will be a note-taker for Community Advisory Group (CAG) meetings.
1. **Review Action Items and Approve Community Advisory Group Meeting Minutes**
* Page 3, Objective 2.b. – spelling error: change “deadf” to “deaf”.
* Minutes from meeting #12 involving the winner of Request for Proposal have since been officially announced, and will stay as they are.
* Concerns raised about 911 Video Relay Service
	+ What does the committee feel?
	+ What does the community feel?
	+ Video Relay Service is for interpreters, but have they been screened for medical interpreting work?

**Minutes approved for posting.**

Action Item: Leanor to send grammar edits to Scott; however, minutes will be posted if edits are not received in time.

1. **Update on Virtual Town Hall**
* This event had some technical difficulties but was successful overall.
* 87% of registrants attended for the whole time.
* The Deaf-Blind Group had their own meeting room.
* Question: Will the minutes be on the website? Will the minutes be in American Sign Language? The presentation was edited to fit the schedule. What will it look like?

Answer: Scott summarized the information on the presentation for brevity and sent it to registrants and Facebook and YouTube. People who did not register can find the presentation on Facebook and YouTube.

* Question: Where can the Deaf, Deaf-Blind and Hard of Hearing (DDBHH) community find Provincial Medical Sign Language Interpreting Service (PMSLIS) information online, e.g. Virtual Town Hall recordings, what to do in an emergency, blog posts?

Answer: [www.facebook.com/pmslis](http://www.facebook.com/pmslis)

1. **Update on Clear Masks**
* Transparent (‘clear’) masks are now federally and provincially approved and available for order.
* We will work with facilities to inform staff of the availability of the clear mask so they can order them for staff, patients, and interpreters.
* The clear masks are single-use/disposable.
* Scott has been working with Doctors of British Columbia (DOBC) to discuss access to clear masks in private facilities.
* Question: Will there be clear mask access in dentists’ offices? There are concerns for patients who are unable to lip-read.

Answer: Dentists do not fall under our jurisdiction.

1. **Update on Zoom Access (Video Relay Interpreting)**
* We are working with Doctors of British Columbia (DoBC) to encourage awareness of Zoom accounts for private medical facilities for DDBHH access.
* Other platforms have surfaced that are not always Deaf/interpreter-friendly.
* We are working on a top-down approach with the leadership of DoBC to improve access to video platforms for DDBHH access.
* Right now, our target audience is the rural/remote groups, doctors’ offices who are not willing to set up video platform access; those who do not have the equipment; whether they have DDBHH individuals or not.
* With over 200 doctors’ offices in each division, the best way will be dealing with the leadership of DoBC. The information can then be disseminated throughout those divisions.
* Question: What is Wavefront saying? My understanding is that if the doctor provides a platform, then Wavefront provides a platform, it gets confusing.

Answer: Doctors’ offices would provide Zoom links for scheduled appointments to interpreters and patients. Wavefront provides Zoom access for their interpreters.

* Wavefront would provide Zoom for urgent care, not including the emergency room.
* Video Relay Interpreting is provided for emergency care.
1. **Update on Video Relay Interpreting (VRI) Access**
* VRI is available mainly in Fraser Health and Vancouver Coastal facilities.
* VRI is an app on iPad, on a cart on wheels.
* VRI would bridge the care for patients while they wait for in-person care.
* Patients may need to wait for hours for in-person interpreters, so VRI would prevent delay in access.
* Question: How would this work with WorkSafeBC and Telehealth?

Answer: WorkSafeBC and Telehealth are under different jurisdictions and not covered by us. We deal with Health Authorities.

* Question: Will interpreters or VRI be provided at vaccination clinics? Do patients get to choose? Is that Provincial Health Services Authority (PHSA) or Wavefront’s responsibility?

Answer: Most vaccination clinics within Vancouver Coastal Health and Fraser Health have VRI available, provided by those Health Authorities and a few outside the Lower Mainland.

* Patients need to give brief comments at the registration desk of clinics to let them know if VRI or interpreters are needed.
* Question: Wavefront offered intervenor services for Deaf-Blind individuals. Could I get an intervenor to take me from my home to the vaccination clinic and back again?

Answer: We could have intervenors meet patients at the facility and navigate with them within the facility. We are still working on access to intervenors between patients’ homes and the facilities they are travelling to.

* Question: Can we follow up on the lack of availability of interpreters and intervenors for daytime emergencies? Intervenors offer tactile, environmental information that interpreters do not.

Answer: Availability will remain as it is for daytime emergencies. Wavefront should have a list of on-call interpreters for nights. Video Relay Interpreting should help bridge the gap while patients wait for in-person interpreters. If there aren’t enough interpreters during the day, we want to hear about it. There is no emergency standby for intervenors, and there are no 24/7 intervenors available. If needed, patients should ask.

1. **Update on Service Mapping**
* The content is ready but yet to be uploaded.
* The translation is ready to begin, but the issue is where to put it online to make it as friendly as possible.
* We are currently working on colour contrasting for Deaf-Blind individuals.
* Videos, text and American Sign Language translations for community and professionals are there for when interpretation services are provided.
* We will use green screens to create different background colours for American Sign Language, including blue backgrounds for those who may need that colour contrast.
* Suggestion: It would be nice to have an icon or logo indicating where the Video Relay Interpreting is located, similar to Closed Caption signage in movie theatres for films showing with Closed Captions.
1. **Update on Community Access Cards**
* We have decided to create something digital that can be downloaded to devices to match the community.
* Digital Community Access Cards are more environmentally friendly than physical cards.
1. **Update on Provincial Language main focus for FY2021-2**
* Creating ease of access for virtual interpreting.
* Creating education for healthcare providers on how to access interpreters, and understanding the need and cultural piece that goes with that.
	+ Concerns were raised about the crossover and confusion between ease of access and education for healthcare providers.

Response: The dispatcher must be the first to recognise that a patient is Deaf, so that they can pass that information down the line. We are creating visuals that Deaf can show to BC ambulance services to indicate they need American Sign Language.

* Community outreach
* App for communication cues/preferred methods
* Videos in Facebook/American Sign Language Provincial Language Service – updates/new services/new features (e.g. Virtual Visit Interpreting/Video Relay Interpreting etc.).
* Place a logo in place where portable video interpreting is available (e.g. Vancouver General Hospital, Urgent Care, etc.).
* Emergency Medical Technician & Dispatchers – communication, visual cues and video relay interpreting.
* Set up a letter template to explain to family physicians how to arrange the appointment by choice: remote or in-person interpreting.
* We want BC ambulance service workers to learn words like ‘interpreter’, ‘ASL’, ‘Sign Language’, so they are familiar.
* Question: Concerns were raised about who takes responsibility for VRI - is it Provincial Language Services or Wavefront? One patient was told to use Facetime, and then they were told that Facetime was disallowed, which caused anxiety when the patient was trying to arrange an interpreter. There is concern that there was no community announcement about Facebook being removed from the list of approved platforms. Could Wavefront do something about this?

Answer: VRI is not part of Wavefront. The VRI platform comes under contracts that are provided through the Health Authorities.

* Definitions:
	+ VRI = Video Remote Interpreting aka Interpreter on wheels. This service is on-demand for immediate need.
	+ VVI = Virtual Visit Interpreting (provided by Wavefront). This service is pre-scheduled virtual appointments.
	+ PMSLIS = Provincial Medical Sign Language Interpreting Service
	+ PLS = Provincial Language Services
* Question: Who is responsible for arranging the VVI service?

Answer: Responsibility for the setup of the VVI service falls on whoever made the request. We prefer that Health Authorities make requests because then it falls under Information Privacy & Security (FOIPPA) and HIPA privacy/confidentiality for approval. It can be arranged if there is advanced notice, but it is tough to determine if it is urgent care.

Action Item: Scott and Kiran will put strategies to the three focuses suggested and present these at the next Community Advisory Group meeting.

These three focuses are:

* Community outreach
* Creating ease of access for virtual interpreting
* Education for healthcare providers to access interpreters, and understanding the need and cultural piece that goes with that.
1. **Review of Terms of Reference**
* All present members will receive an honorarium.
* Those present for the full duration of the meeting will receive the full honorarium, those present for half the meeting will receive half the honorarium.
* Those not able to attend a meeting will not receive the honorarium.
* This has been added to the terms of reference for clarity, highlighted in yellow.
1. **Wrap-up**
* The next official meeting will be on October 14th 2021.

*Meeting adjourned at 5:28 pm.*