What it means to you

The Board of Hearing and Speech

By Penny Allen, Public Member of the Board of Hearing and Speech

The Board of Hearing and Speech was created by the Washington State Legislature to protect the public. It oversees the licensing of fitter/dispensers, audiologists, and speech-language pathologists. It also investigates complaints, is charged with credentialing and disciplining providers, and it establishes policy.

Board members are appointed by the Governor to serve three-year terms. There are ten volunteer members: three public members, two fitter/dispensers, two audiologists, two speech-language pathologists, and one physician.

Hearing aids purchased in our state must be bought from either a Washington State licensed audiologist or a licensed fitter/dispenser. Out-of-state sales (including Internet sales) are not permitted.

Audiologists dispensing in Washington State must hold a minimum of a Masters Degree from an accredited university, have supervised clinical experience, and pass a national examination.

Fitter/dispensers practicing before January 1, 2003, have completed on-the-job-training, an apprenticeship, or some higher academic level preparation. They have also passed a national examination. As of January 1, 2003, all newly-licensed fitter/dispensers must complete a Board approved two-year degree program. Washington is the first state to require a two-year program and Spokane Falls Community College the first school in the state to initiate it. Currently, Bates Technical College in Tacoma has the only other two-year program in our state.

You have the right to ethical and professional treatment, regardless of your age, sex, race, color, religion, national origin or disability. In addition, you have the right to a clear written description of the services, fees and billing information. The contract concerning your hearing aid purchase must be in writing and must include such details as serial number, make and model numbers, circuit options, and name and license number of the seller. Costs must be detailed and include charges for testing, cost of the hearing aid and ear mold, and the terms of the sale.

(Continued on page 3)
Where can you go for hearing care?

Where excellent care and nonprofit status add up to a rewarding, “service over sales” experience...

Where licensed audiologists provide a range of hearing aid options, customized to meet clients’ individual needs...

Where the revenue generated enables deaf & hard of hearing children from low income families to try their first hearing aids...

That provides seminars to businesses on hiring and serving individuals with hearing loss...

That features a specialized store for amplified phones and TV devices...

That offers sign language and lipreading classes...

That’s been a fixture in the Puget Sound community since 1937...

That opened an all-new, comfortable facility just three years ago...

HEARING, SPEECH & DEAFNESS CENTER

Seattle 206.323.5770 V/TTY

www.hsdc.org
A trial period (called a “rescission period”) of at least 30 days is required by law. During this time, you can return your hearing aid for reasonable cause (in its original condition, less normal wear and tear) for refund. The provider has a legal right to keep 15 percent of the original purchase price, or $150 per hearing aid—whichever is less. If you return the hearing aid for repair during this period, the repair days are not counted in this trial period. Not all providers deduct the allowed fee. The ones who do may opt to apply it towards another hearing aid, as long as you purchase it from them.

If you have a complaint against a provider, contact the Board of Hearing and Speech, not the Attorney General’s Office. Reasons for complaint may include being lied to, financial problems, abuse, negligence, and treating you while the provider is under the influence of alcohol or drugs.

For more information see the Board of Health web page: https://wws2.wa.gov/doh/ha/ha -licensing/hps7/Hearing_Speech /default.htm. It includes a Consumer Rights brochure, a list of current Board members, and information on how to file a complaint. You may also call 360-236-4700 or FAX 360-236-4818.

---

**EARS HEARING BEYOND**

**April 1, 9:00 am-3:30 pm**

This annual free conference, sponsored by the Virginia Merrill Bloedel Hearing Research Center, will be held this year at Benaroya Hall/ Illsley Ball Nordstrom Recital Hall, 200 University St., Seattle. An assistive listening system, real-time captioning, and ASL interpreters will be provided. SHHH will have a table in the exhibit hall, so stop by and say hello.

8:30 Exhibits open and registration begins

9:00 Welcome and overview of VMBHRC Jay T. Rubinstein MD, PhD, Director, Bloedel Hearing Research Center, Professor of Otolaryngology and Bioengineering, UW

9:15 "Hearing aids: frequently asked questions" Tom Rees, PhD, Associate Professor, Audiologist, UW Harborview

9:50 "Disequilibrium and the ear: I’m not dizzy, I just fall down!" Jim Phillips, PhD; Director, Dizziness and Balance Center, Research Associate Professor, UW

10:35 "Behind the laboratory doors" Ed Rubel, PhD, Bloedel

Professor of Hearing Science, Professor of Otolaryngology, Physiology and Biophysics, and Neurological Surgery


12:00 Lunch (Restaurants are conveniently located nearby or bring your own lunch)

1:00 "Genetic evaluation of hearing loss: past, present and future" Val Street, PhD, Research Assistant Professor, UW

1:45 "Universal Newborn Hearing Screening works: Early identification and intervention for children with hearing loss and their families" Susan Norton PhD, Chief: Division of Pediatric Audiology, Professor of Otolaryngology, UW Children’s Medical Center

2:30 "Auditory educational options for children with hearing loss" Maura A. Berndsen, MA, CED, Educational Director, Auditory-Verbal Therapist, Teacher of the Deaf; Listen and Talk, School for the Oral Deaf

3:30 Program closes

4:00 Exhibits close

---

**Note:** A $10 donation is suggested. Parking information: see http://www.wasa-shhh.org/EHB_brochure.pdf.
Advocating for captioning

A Quiet Revolution?
By Jenny Cummins, Seattle

Many years ago I realized that I had quit watching my favorite television shows and wasn’t going to the movies as much, because I just couldn’t understand enough of the dialogue to stay interested. So I finally learned that, yes, my TV did have closed captions and with the help of my husband and children, I even learned how to turn them on. But going to the movies was something else.

Then I started to see here in Seattle actual movies with open captions. I still remember the first one we saw, October Sky. From then on, I signed up for every e-mail listing that I could find that would alert me to the all-too-irregular appearances of such movies. When Rear Window Captioning (RWC) arrived on the scene, I remember standing in line with my daughter, both of us on crutches from separate accidents, to get those funny plastic windows for The Phantom Menace, the most current Star Wars flick in 1999.

I began to lobby the theaters and the newspapers for more shows and for more obvious notification, but to no avail. Slowly, slowly I started to get more e-mail messages about both open caption and RWC films appearing in the Seattle area. Judi Carr, in particular, was great at surveying the local listings and updating us on a weekly basis. That was my lifeline to getting to the movies. My family members were always willing to try to go with me if I could find such a feature.

So who was the most surprised when one Saturday morning my daughter pointed out to me that The Seattle Times was listing a selection of films with cc (closed captioned) or oc (open captioned) or descriptive video icons? Granted, the icons are microscopic for those of us with old eyes, but they are there. So I began to rapidly review both local papers daily, contacted people on staff in marketing and entertainment, as well as theaters, and now think I have it figured out.

Every Friday, Saturday, and Sunday—in both The Times and The Post-Intelligencer—look for the blocked off sections in the middle of the movie ads. These blocked off sections are titled “Now Showing.” There are usually two of them in each paper. One includes the Meridian 16, usually advertising an open caption feature on Tuesdays, as well as the Cinerama 1, Pacific Place 11 and the new Kent Station, which almost always have ongoing features with closed captions (i.e. RWC) and descriptive video. The other “Now Showing” block of ads includes the Bella Bottega Stadium 11 in Kirkland, which frequently lists an open-caption feature as well.

I have once again written these theaters and papers and received some very positive feedback from Dan Glennon, Managing Director of Pacific Place/Cinerama and Jason LaFavor, Cinerama Manager. Both pointed out that they are dependent on what the studios release to them, but they are indeed receiving more and more first-run films playing in RWC/DVS format. Go to their website, http://www.movietickets.com, and you can always find the most up-to-date information on which shows are playing in the RWC/DVS format.

Needless to say, now I have a much wider choice of movies to see, and I eagerly open the paper on weekends to the Entertainment Section first. It does seem that a “quiet revolution” is taking place for those of us who want to enjoy the theater. I look forward to seeing and learning more.

I am also very interested in any feedback that anyone has about this, so please feel free to contact me: jenny@epiphanyschool.org. Just put “captioned movies” in the subject line so I won’t miss you.

Editor: Receive e-mail notification of open-captioned and RWC films.

- Open-captioned films: www.insightcinema.org
- RWC films: http://ncam.wgbh.org/mopix/
- WASA Board member Judi Carr will be pleased to add your name to her e-mail distribution list of open-captioned and RWC films in the greater Seattle area: jstarbright@wasa-shhh.org
We appreciate you!
Your donations help us fund projects that benefit people with hearing loss. These contributions are for the last quarter:

- Judy Barnes, Portland, OR
- Lyla Brown, Gig Harbor
- Sue Campbell, Seattle
- Nita Christoe, Marysville
- Janet Dahl, Montlake Terrace
- Gertrude Glad, Bellevue
- Cibyl Kumagai, Snohomish

**United Way**
You can make regular United Way contributions and help hard of hearing people in our state. These readers have supported this newsletter throughout the year through United Way:

- Judy Barnes, Portland, OR
- Lyla Brown, Gig Harbor
- Sue Campbell, Seattle
- Nita Christoe, Marysville
- Janet Dahl, Montlake Terrace
- Gertrude Glad, Bellevue
- Cibyl Kumagai, Snohomish

**Microsoft Matching Program**

- Mark and Susan Svancarek—Redmond

**Double your donation!** Many employers will match their employees’ donations to non-profit organizations. If you are planning to make a donation to WASA-SHHH, please ask your employer if your company has a matching gifts program. We are a 501(c)3 nonprofit organization.

- Della Ramsden, Seattle
- George Ross, Seattle
- Lilia Smith, Camano Island
- Timmie Mauck, Poulsbo
- Bev Ziarko, Kent
- United Way Kitsap Co., unknown donor

**HAIL (Hearing Aid Insurance Legislation)**
We introduced bills this year to mandate insurance coverage for hearing aids. Neither the House nor the Senate held hearings, and the cut-off date has passed. Next year is a new session and should produce a better outcome. If you would like to be involved in HAIL or receive notification of progress, please contact Penny Allen, HAIL Chair: Pallen@wasa-shhh.org.

**Cruise the Mexican Riviera—January 28-February 9, 2007**

Deaf Educators Carol and Bill Beitzel are working with Celebrity Cruises to host a 12-day cruise to the Mexican Riviera. The cruise will be tailored to people with cochlear implants and hearing aids, spouses, and friends. Included will be group discussion/interaction on topics of interest to people with hearing loss. The cruise is accessible, but you must request accommodations (captioning, ALDs, alerting system, amplified phone, TTY, sign language interpreter). The cruise, which leaves out of San Diego, will make stops at Cabo San Lucas, Mazatlan, Puerto Vallarta, Acapulco, Zihuatanejo/Ixtapa and Manzanillo. For details and prices, contact Bill Beitzel: winnipegauditoryeducation@shaw.ca or call Carlson Wagonlit Travel, Canada, toll free: 1-800-715-8747.
A telecoil (often referred to as a “telephone switch,” a “t-switch,” or a “telecoil”) is simply a metal rod inside a hearing aid, encircled by many turns of a copper wire. When the switch on the hearing aid is set to the “T” position, the hearing aid microphone is turned off and the telecoil is set to detect only an electromagnetic energy source. This bypasses noise that interferes with comprehension.

Although a telecoil is useful for the telephone, it also improves speech comprehension when using an assistive listening device (ALD).

Only about 30% to 40% of the hearing aids sold in this country have telecoils, whereas 85% to 90% of hearing aids sold in Europe have telecoils.

The benefits of telecoils are frequently not explained as an option to the hearing aid buyer.

Telecoils can be fitted in all but the tiniest hearing aids.

Telecoils can be retrofitted in most hearing aids. The cost is about $75 per aid.

Telecoil strength differs by manufacturer and size of aid.

Telecoil orientation may vary according to hearing aid manufacturer, which explains why some people don’t hear well with induction loops that work best when the telecoil is horizontal.

Some telecoils are programmable, and the volume can be adjusted.

Automatic telecoils, which work for the phone, are not strong enough to work with ALDs.

### Captioned telephone on the horizon

Thirteen national consumer organizations, including SHHH, recently petitioned the Federal Communications Commission (FCC) to mandate captioned telephone relay service and to approve Internet Protocol (IP) captioned telephone for cost recovery through the Interstate Telecommunications Relay Service (TRS) Fund.

Ultratec’s CapTel is currently the only captioned telephone on the market, and the phone service is available in 32 states. Unfortunately, Washington isn’t one of them. CapTel is also available to current and retired federal employees, veterans, and U.S. Tribal members in all 50 states, as well as individuals having business with the Federal Government through the Federal Relay Service.

Although Washington had a captioned telephone trial, it was terminated as a result of budgetary constraints on the state’s limited TRS fund. Eric Raff, Director of the Office of Deaf and Hard of Hearing (ODHH), plans to start captioned telephone service in our state by the summer of 2007. It is likely, however, that the FCC will mandate it before that.

The Federal Government currently pays just a portion of the federally mandated relay service. Our state funds the service with a small surcharge on landline phones, which are dwindling. ODHH is considering asking the Legislature for a surcharge on cell phones.
Some people break out in a cold sweat every time the phone rings. Are you one of them?

I'm a contract trainer for our state Telecommunications Equipment Distribution Program (TED), and my job is to help people use the phone. Well, actually it's to deliver their equipment, but I like to think I solve problems too. Each month I receive a list of clients, and then I visit them with their selected equipment. Sometimes it's a simple matter of plugging in a phone—most of the time it isn’t.

I encourage clients to use their hearing aids with the phone—aids provide added volume and contribute to comprehension. It's also easy to misplace hearing aids removed in haste. Sometimes I need to ask clients to retrieve their hearing aids from the dresser drawer just to have this conversation.

Some hearing aids have a telecoil feature (t-coil, t-switch, telephone switch), which improves phone comprehension. When the telecoil is activated, the phone receiver should be moved around the hearing aid to pick up the strongest signal. With a behind-the-ear aid, this means angling the receiver behind the ear, not over the ear canal.

The TED program provides a good amplified phone, which has volume control, an extra amplification boost button, and a tone (or frequency) selector to enhance clarity. Some people, however, even with properly functioning hearing aids, still can’t understand well on the phone. That’s when I suggest listening with both ears using a neck loop. One end is plugged into the audio jack in the phone base and the loop of wire is placed over the head. Both hearing aids are turned to the telecoil position. The telecoils will “pick up” the sound coming through the neck loop and voila—surround sound. For some people with very severe hearing loss, the neck loop signal is not strong enough. Dual silhouettes, purchased from a hearing health provider or online, are a better choice. They hook over the ears, between the hearing aids and the head, and bring the signal close to the hearing aid telecoils. Some people also report better comprehension with a speaker phone because they can use both ears. Personally, I don’t like being on the other end of a speaker phone.

If phone comprehension still hasn’t improved with the neck loop, we go to Voice Carry-over. This is a special method of making calls with a text telephone that includes a third party, or a communications assistant (CA). All incoming and outgoing calls are placed through the relay system. The hard of hearing person voices the call but reads the response that the CA types back. Since it is not possible to hear and read simultaneously, this can be a bit disconcerting. However, it is a viable way to communicate.

Poorly maintained hearing aids (or none at all) is probably the number one reason many people do not do well on the phone. Hearing aids should be checked frequently, ear tubes replaced about every six months, and ear molds replaced every year. Ear wax and dirt can also wreak havoc on phone comprehension. Often I see people with malfunctioning or weak telecoils (or none at all), as well as underpowered hearing aids or weak batteries. I occasionally suggest they return to their provider.

Many people with hearing loss report difficulty accessing voice menus. Instead of screaming, try punching in “0” for “Operator.” Most of the time, that will bypass the menus to get a real live person. Another problem area is unintelligible messages left on the answering machine. If your outgoing message asks callers to speak slowly and clearly, this should help.

Don’t be afraid to let people know you have a hearing loss. Ask them to slow down or repeat or even ask for a different person if it’s possible to speak to someone else. Often a different voice will improve your comprehension considerably. Be sure to verify crucial information, especially numbers, by repeating.

Caller ID is great for verifying phone numbers left on the answering machine. It also helps with the fear factor just to know who is calling before picking up the phone.

Above all, take charge of your own communication—it’s empowering.
Cochlear Implants: expanding criteria
By Allison Zarkos, implant audiologist at Virginia Mason

Cochlear implants first became commercially available in 1985. At that time, the FDA determined that only post-lingual adults (adults who developed speech and language prior to their hearing loss) with bilateral profound sensorineural hearing loss and 0% speech discrimination could be considered as cochlear implant candidates. In the last 25 years, these guidelines have expanded allowing a broad spectrum of candidacy, including more liberal standards for adults, as well as allowing children to be considered candidates.

Under current FDA guidelines, adults with bilateral severe to profound sensorineural hearing loss, who receive limited benefit from hearing aids, are considered candidates. They must have aided (with hearing aids) speech discrimination scores of less than 50% in the ear to be implanted, 60% or worse in the non-implanted ear, or the best-aided condition on recorded tests of sentences. These regulations are applicable to all three cochlear implant manufacturers, (Cochlear Americas, Advanced Bionics and Med El). In addition, the candidate must be free from middle ear infections and lesions in the auditory nerve or central nervous system, must have a desire to be in the hearing world, and have realistic expectations about his or her potential outcome. In addition, there must be no contraindications for surgery, as determined by the candidate’s doctor.

Medicare covers most of the costs associated with adult cochlear implantation. However Medicare’s approval criteria does differ from the FDA’s. According to the most recent decision memo from the Centers for Medicare and Medicaid Standards issued in April 2005, to be approved, candidates must have bilateral moderate to profound sensorineural hearing loss with scores of “40% or worse on open set sentence recognition tests in the best aided condition,” in addition to the other guidelines listed above.

Current FDA criteria for children ages 12 to 24 months require, at minimum, that the candidate exhibit bilateral profound hearing loss with lack of progress in auditory development and a highly motivated family with realistic expectations in regards to the implantation process. The FDA criteria for children ages 24 months to 11 years and 11 months requires—at a minimum—a bilateral severe to profound sensorineural hearing loss, with little to no benefit from hearing aids and a showing of lack of progress in auditory development. Speech discrimination scores for this age group are device and age dependent. Also, to qualify, every child must go through a mandatory, three-month hearing aid trial period if he or she is not already wearing hearing aids.

Of course, enrollment in a clinical trial or study is an exception to these current guidelines. This exception is specific to each project’s design and allows individuals who

UW research study
If you are a cochlear implant patient implanted as an adult, are a native speaker of American English, and you are implanted with the Clarion Hi-Focus I or II or HiRes90k device, you might be a candidate for a research study at the University of Washington. The study is entitled “Channel Interaction in Cochlear Implant Subjects.”

We would like you to listen to some sounds and to tell us how loud and how similar the sounds are. You will also be asked to determine which of two stimuli sound louder to you for a series of stimuli. Participation in this study would require 5 to 10 visits over a 6 month period to the UW. Each visit will last 2 to 3 hours. You will also be asked to fill out a questionnaire about your hearing history, lasting 5 to 10 minutes. The goals of the study are to determine if there is a way for cochlear implants to hear music and speech better. The results could lead to improved cochlear implant designs and improved speech processing strategies.

You will be reimbursed for your time spent participating in the study: $15 for each hour of your participation and $50 for completion of all 5 to 10 sessions and reimbursement for parking or travel. You will be paid by check after you complete each session.

To learn more, contact Julie A. Bierer, Ph.D: (206) 543-6640 or jbierer@u.washington.edu
Getting the most out of his implant

Tom Weicht, a retiree living in Auburn tells how he gets the most out of his implant. He explains that he and his wife “do travel some and I spend as much time on the golf courses as my wife will let me.”

I was implanted in October of 2001 by Dr. Gates at the UW, and Tina Worman is my audiologist. With my first program, I was completely happy with my decision, because I could hear all the sounds I had lost. With time, the program became less and less effective, and over the years I have had to be reprogrammed about 12 times to keep up with everything.

My last program allowed me to increase the volume, as well as the range, and it has worked out to be much more durable for me. I have tried to use my hearing aid in the other ear, and it does make some difference in meeting situations; but I prefer the implant for most applications.

I still struggle with the phone, even though the ear-level processor has a telecoil. I have to depend on my wife to take care of the phone calls. I have had some success in emergency situations with using an amplified phone at the airport to call my wife, but I think that it was because I was familiar with her voice and was able to understand her.

trweicht@netzero.net

A CI moment: hearing a whistle

Mary Steinmeyer, a Fife resident, has had a cochlear implant for 18 years.

As a user of the Nucleus 22 system for almost 18 years (surgery and hook-up 1988), I’m surprised by an occasional CI moment when I hear a new sound. By now I would think I hear everything, so it’s always a pleasant shock when I do hear something new!

The other night when I was working outside, I heard this whistle. Now, I can hear whistles if they are close by, but this one came from two houses away and across the street! The only person I could see that could be whistling was a professional painter who was painting the house. I couldn’t believe I was hearing this whistle, especially at that distance! Sure enough, as I got closer I saw he was whistling away! Wow! After almost 18 years of hearing, I’m still hearing new sounds. Especially to those of us who didn’t have much hearing to start our lives with, it shows that the possibility is still there...you could be hearing new sounds over a very long period of time!

Depending on the hearing environment I’m in at the moment, when the three warning beeps signal the end of the batteries’ life, sometimes I hear them and sometimes I don’t! Sometimes I think it’s someone’s cell phone. I’m looking around to see whose it is, when I realize I’m not hearing anything—my batteries have died.

Recently I had my two young grandsons over for a sleepover. I wore my Esprit 3-G during the night so that I could hear them if something happened. I usually don’t wear it at night because I LOVE my sleep! Sometime in the wee hours of the morning, when I was sound asleep, I was rudely jerked awake by the three warning beeps. I opened my eyes and thought, “What the heck was that?” Then I realized I couldn’t hear a thing because the batteries were dead! It never occurred to me that I could possibly hear those darn warning beeps when I’m asleep—but I’m awfully glad I do!
Prefer to use your own voice over the phone?

**use VCO!**

dial 1-800-833-6386

With Voice Carry-Over (VCO), you speak directly to the person you’re calling. A relay operator types that person’s replies to your TTY or VCO phone for you to read.

- Dial 1-800-833-6386.
- Washington Relay will answer with the operator’s number, gender, and “VOICE (OR TYPE) NOW GA.”
- Voice or type the area code and phone number of the person you want to call.
- The operator will type “GA” as your cue to speak.

Visit [www.sprintrelay.com](http://www.sprintrelay.com) or [www.washingtonrelay.com](http://www.washingtonrelay.com) for more information.

Washington Relay is provided by Sprint, in partnership with the Department of Social and Health Services.
Support and education

Chapters in Washington

Meeting times and days sometimes change, and most chapters take a vacation break. See our website for program listings.

BELLEVUE—2nd Sat. 1:00 pm; Lake Sammamish Four Square Church, Rm. 104, 14434 NE 8th St., Bellevue; amplification, FM. Prudence Clem: 425-746-1074 or e-mail chapter coordinator.

CRISTWOOD—Time/location in retirement complex varies. 350 N. 190th St., Shoreline; amplification, infrared. Rose Inouye: 206-542-5541 or e-mail inou@wasa-shhh.org.

DOWNTOWN SEATTLE—4th Thurs. 6:00 pm; HSDC, 1625 19th Ave., just off Madison; amplification, FM. Focus is on issues in the workplace. Judi Carr: 206-250-5252 or jstarbright@wasa-shhh.org.

DES MOINES—New!—Starting in April: last Thurs. 1:30 pm; Wesley Gardens, 815 S. 216th St., Des Moines. Doug Gray: 206-870-2029 or Elaine Maros: elainemarosi1@juno.com.

EAST JEFFERSON COUNTY—4th Mon. 1:00 pm; Pt. Townsend Community Ctr., 620 Tyler Street, Pt. Townsend; amplification, FM. Emily Mandelbaum: mandelbaum@olympus.net or 360-379-4978 or Sandy MacNair: 360-385-1347 or smacnair@cablespeed.com.

EVERETT AREA—2nd Sat. 11:00 am; Snohomish Co. PUD Commission Rm., 2320 California, Everett; amplification, FM, real-time captioning. Dave Pearson: 360-653-6746 or DCPearson@wasa-shhh.org.

GRAYS HARBOR—Aberdeen. Meeting times irregular. Contact Wes Brosman: 360-537-0456 or wesbro@olympnet.com.

IDA CULVER HOUSE BROADVIEW—2nd Thurs. 2:00 pm, 12505 Greenwood Ave. N. Seattle; Michael Craig: 206-368-3713 or MCraig@ERACARE.com.

KITSAP—4th Sat. 1:00 pm; Iris Room at Silverdale Harrison Hospital, 1800 N.W. Myhre Road; amplification, FM, real-time captioning. John Allen: 360-871-0997 or jcallen@wasa-shhh.org.

ORKAS ISLAND—Meetings times irregular; Orcas Senior Ctr., 62 Henry Rd., Eastsound; amplification, FM. Susan Kosior: 360-376-574 or swkosiur@aol.com.

PORT ANGELES—3rd Tues. 10:00 am; Pt. Angeles Senior Ctr., 328 E. 7th, Port Angeles; amplification, FM. Gladys Snyder: gladysja@olympen.com or 360-683-9887.

RENTON—2nd Fri. 12:30 pm. Renton Senior Ctr., 211 Burnett Ave. N., Renton.; FM, real-time captioning. Mary Hollenbeak: 425-430-0594 or Sandra Bunning: Sandrab@wasa-shhh.org.

SHHH KIDS—Just for hard of hearing children and their families. South King County area. Time and location change due to scheduled activities. Sidney Weldele-Wallace: (wk) 253-833-9111, ext. 4705 or 253-833-6487 (h) or swelde@greeneriver.edu.

SHORELINE—1st Wed. 9:30 am; Shoreline Sr. Ctr., 18560 1st Ave. NE, Shoreline. Scott Theisen: 206-365-1536 or ScottTH@seniorservices.org.

SKAGIT—2nd Tues. 1:00 pm; Fidalgo Ctr., 1701-22nd St., Anacortes; amplification, FM. Danny Beatty: 360-293-2793 or dflyb@telcomplus.net.

SOUTH KING COUNTY—2nd Fri. 6:45 pm; Auburn Regional Med. Ctr., Rm. 327, 202 N. Division, Auburn; amplification, FM, real-time captioning. Valerie O’Connor: 425-226-8399 or valerie.oconnor@gmail.com.

SPOKANE—2nd Sat. 9:30 am at Rock Pointe-East, 1313 N. Atlantic, Spokane, in the DVR conference room; amplification, FM. Please be sure to arrive at 9:30 am or doors will be locked. Barbara Brassard: sina@icehouse.net or 509-326-6712.

TACOMA—2nd Sat. 10:00 am at TACID, 6315 S. 19th St., Tacoma; amplification, FM, real-time captioning. Bill and Camille Pedersen: 360-491-7441 or woodsylsfolks@yahoo.com.

THE HEARTSTONE—2nd Tues. 10:30 am; 6720 E. Green Lake Way N, Seattle; amplification, infra-red. Donna Leggett: 206-517-2204 or ilactivitiescord@hearsthorne.org.

WEST SEATTLE—3rd Wed. 1:30 pm; Fauntleroy Church, UCC Lounge, 9260 California Ave. SW, Seattle; amplification, induction loop. Elaine Maros: elainemarosi1@juno.com or Doug Gray at 206-870-2029.

WHATCOM-BELLINGHAM—3rd Sat. 10:00 am; Christ the Servant Lutheran Church, 1600 Lakeway Dr., Bellingham; amplification, FM. Bert Lederer: 360-319-4540 or bertlederer@msn.com or Charlene MacKenzie: 360-738-3756 or CharMacKenzie@cs.com.

2006 WASA-SHHH Board meetings

Board meetings are scheduled four times a year. Meetings are open to SHHH members and the public. Real-time captioning and assistive listening devices are provided. Check our web site for updated information:

March 25 10:30 am - 4:00 pm Cedar Conference Ctr., Highline Community Hospital, 16251 Sylvester Rd SW, Seattle 98166

June 24, 10:30 am – 4:00 pm Hearing Speech & Deafness Center, 1625 19th Ave., Seattle 98122

Sept. 23, 10:30 am – 4:00 pm Rock Pointe-East, DVR conference room, 1313 N. Atlantic St., Spokane 99201

Dec. 2, 10:30 am – 4:00 pm General membership and Board meeting (election of new Board) Hearing Speech & Deafness Center, 1625 19th Ave., Seattle
Visit our state website at http://www.wasa-shhh.org

WASA-SHHH, Washington State Association of Self Help for Hard of Hearing People, is affiliated with the national organization of Self Help for Hard of Hearing People, Inc., headquartered in Bethesda, MD. SHHH is an educational organization devoted to the welfare and interests of hard of hearing people.

Subscription Order Form

Don’t miss a single issue!

Name______________________________________________________________

Business name (if applicable)________________________________________

Address____________________________________________________________________________

City________________________________________State____________________Zip________________

E-mail (optional)_______________________________

Amount enclosed: $10 subscription_______ Donation_______ Projector Fund Donation_______

Subscription renewal is January of each year and runs through December. We will gladly provide back issues if subscription is made during the year. WASA-SHHH is a 501(c)3 organization and relies on your support to fund outreach projects that help people with hearing loss. Please make checks payable to WASA-SHHH and mail this completed form to WASA-SHHH, PO Box 4025, Kent, WA 98089. Note: names and addresses are strictly confidential. We do not sell or distribute this information.