



**State of Rhode Island and Providence Plantations**  
**Public Forums**  
**To identify the concerns of people**  
**with**  
**disabilities and their families**

**Monday July 23, 2007 3 – 5 pm**  
**Middletown Library's Community Room,**  
**700 West Main Road, Middletown**

**Governor's Commission on Disabilities**  
**John O. Pastore Center – 41 Cherry Dale Court, Cranston, RI 02920-3049**

**Transcript**

CARRIE: I would like to go ahead and welcome everybody. I am the executive director of Looking Upwards, a local nonprofit agency providing supports to adults and children with developmental disabilities; and the state government and the sponsoring organizations want to hear from people with disabilities and their families, their concerns and ideas for improving the lives of all Rhode Islanders with disabilities. That's why we are here today.

I am going to just explain the rules of the forum this afternoon to ensure that everyone who wants to speak has a chance to speak, there will be a time limit of five minutes each. When the timekeeper, Linda, announces your time is up, please finish that sentence. If there's time after everyone has spoken and someone wants to speak again, they may. We are going to ask if you state -- that you state your name and if you are affiliated with an organization that you state that as well. And the panelists may ask you questions to help understand your concerns better.

Okay.

Just -- okay. We are going to in one minute introduce our panelists here. And if you have not signed in, please sign in right over at this table over here. And we will -- you will be able to note whether you want to speak or not speak. And we are going to follow the list in the order of which people have signed in once we introduce the panelists.

TIMOTHY: I guess --

CARRIE: We will let Linda start. We are just rearranging a little bit. Linda, you can begin.

LINDA: I am Linda Ward executive director of Opportunities Unlimited a small nonprofit agency with adults with developmental disabilities.

TIMOTHY: My name is Tim Flynn. I am a commissioner on the Governor's Commission on Disabilities, Chairman of the Legislative Committee. And what I sort of want to say is what we -- we derive our whole legislative agenda over what happens at these five public forums conducted by the commission. So really, what you say here is taken to heart and really -- we want to get your input. And we will take what we hear, create some sort -- create legislation that can address the various needs of whatever comes up at this meeting. So I thank you for coming and I welcome you.

BRYAN: Bryan Hudson attorney with the Rhode Island Disability Law Center. For those of you who don't know, we are the state's designated protector advocacy system for people with disabilities. We, due to Congressional mandate every year, set our priorities. So if you have any ideas that you would like to put down, forms are on the table and I will collect them afterwards.

MARIKA: Good afternoon. My name is Marika Terlecky. I am representing the Brain Injury Association of Rhode Island. I'm also on the Governor's Advisory Commission for Brain Injury and I'm a brain injury survivor as well.

DOUGLAS: I am Doug Wood, director of the RIDE program. We work closely with the Governor's Commission -- since the inception of the program, I am happy to be here and answer questions.

MIKE: Mike Montanaro. I am supervisor of the east bay region.

CARRIE: Okay. Also I want to make a note that there are a list of the legislative accomplishments on that table over there. And we also have someone over here who will be able to assist you to register to vote, if you are not a registered voter at the end of the meeting. Feel free to see Amy.

Okay. We are going to start with our first person listed and that would be John Pimentel.

AUDIENCE MEMBER: If I may, I am going to pass for now.

CARRIE: And we also have Cheryl Grove. Cheryl.

AUDIENCE MEMBER: COPD is the second leading cause of disability and the fourth leading cause of death in the U.S. 11.4 million persons are diagnosed with COPD in the US with at least as many undiagnosed. COPD mortality rates are rising. Now claiming over 120,000 lives per year. 120,408 Rhode Island adults or 13 percent of the total population are diagnosed with COPD and asthma in the three Rhode Island counties with pollution monitors, compared to 2 percent or 19,278 children under 18 reported to have asthma. According to the world health organization's bold report, the global initiative obstructive lung disease quote tobacco smoking is not the only cause of COPD. COPD is generally a progressive disease, especially if a patient's exposure to noxious agents continues. Stopping exposure to these agents, even when significant airflow limitation is present, may result in some improvement in lung function and slow or even halt progression of the disease. However, once developed COPD in its comorbidities cannot be cured. Causes of death in patients with COPD are mainly cardiovascular disease, lung cancer, and in those with advanced COPD respiratory failure end of quote. In the three pollution monitor counties in Rhode Island, 25 percent of the population or 232,942 persons have cardiovascular disease. Lung cancer is the leading cancer killer in the US causing more deaths than the next three most common cancers combined, colon, breast, and prostate. In 2007 estimated 167,000 persons will die of lung cancer and 213,000 will be newly diagnosed. The cure rate is under 15 percent. No one, Tammy Fay, Dana Reeves, Peter Jennings. Or my never smoker uncle is exempt. The national academy of sciences and the California air resources board quote having recent years conducted major studies of indoor air pollution and concluded that indoor air can have a major negative impact, not only on the lungs of those with asthma and allergies but on those people with healthy lungs who are not normally at risk for lung disease, end quote. On April 23, 2007, at the fair housing, it's not an option, it's the law. 39th anniversary of the fair housing act, the executive director of the commission for human rights confirmed the right to habitability protection from neighbor nuisance fumes including secondhand smoke and other consumer product VOCs through walls, floors, ceilings in HUD financially qualified apartment. It is a disability fair housing right. He confirmed this in front of Noreen Shokras and Richard Godfrey at the seminar that featured Kim Kendrick for fair housing and equal opportunity. The 2007 healthy housing Rhode Island investment vision report identified some practical ideas for general population improvement. But completely neglects the handful of Rhode Islanders critically in need of this disability fair housing protection today. As representatives of the two disability agencies involved with this report indicated, both a lack of interest and knowledge as recently as April of this year, this deficit is predictable. A year ago I offered my extensive knowledge at this forum on public record. My offer was not accepted. My offer is once again extended on public record with greater urgency and greater disappointment at this ongoing travesty of justice and humanity. Other communities have addressed this special needs disability health and safety issue, cost efficiently since the early 1990s. I can be reached at CG\_006@yahoo.com and don't need to find a funding source for my knowledge. That's CG\_006@yahoo.com. Thank you.

CARRIE: Thank you.  
Any questions from our panel?

TIMOTHY: I have a question. What are you looking for? What would you like -- I will look at your testimony and what I heard was you are seeking sort of federal protection in Rhode Island housing. What specifically --

AUDIENCE MEMBER: I'm looking for the type of accommodation that has been accomplished in other communities that provides protection from neighbor nuisance fumes through the floors, walls and ceilings. That typically --

TIMOTHY: --

AUDIENCE MEMBER: -- requires a weighing of segregated housing specifically for this special needs community. As the special needs community in the state that needs this kind of accommodation, it's probably less than 5, maybe 2. It's something that could very practically be accomplished.

TIMOTHY: Less than five -- I don't know --

AUDIENCE MEMBER: Quantity. Number of people.

TIMOTHY: Less than five people and there are two people. And so you are looking for sort of indoor air quality assurances in public housing?

AUDIENCE MEMBER: No. It doesn't need to be a general cover the entire population. It needs to be specific segregated housing where the people with the disabilities in that housing have a commitment to specific things like no smoking, no VOC disinfectants, very practical solutions. And I would be happy to meet with you, Tim, to discuss it in further detail.

TIMOTHY: I am just trying to get sort of a grasp on sort of similar legislation that you know about that's happened in other states where we could look at.

AUDIENCE MEMBER: I don't think it's required legislation. It's required a couple of people that are interested in meeting in on that need. I mean, you came to my house in Middletown two -- three years ago. That fellow that was a smoker and strong VOC user is now dead of cancer. And my diagnosis has been upgraded to COPD, which is irreversible because of that year of secondhand smoke and VOCs. That's unacceptable.

TIMOTHY: I am just trying to get an understanding as to -- you want sort of a community of individuals such as yourself --

AUDIENCE MEMBER: The special forum that was run in 2005 there were two people identified in the state as needing a protection from their neighbor nuisance through the walls and ceilings and floors. That could be a duplex in a low pollution area like Charlestown, Narragansett, or Newport.

TIMOTHY: So where do you see sort of enforcement coming from?

AUDIENCE MEMBER: It's not enforcement. It's simply somebody addressing it like you addressed special needs housing for developmentally disabled and other special needs communities. Is that legislation?

TIMOTHY: I think -- you know, there are certainly state funding that is incorporated in those kind of efforts. I just would like to sort of get an understanding as to what the road map to accomplishing this endeavor.

AUDIENCE MEMBER: Well, the first thing would be to meet with people that are knowledgeable and see what's happened in the two years since that special forum is. They set up a data base that has -- of course we know who the participants were and who identified that they were under HUD qualifies housing necessity. And we could find out who needs it. I mean, as I said, it could be as simple as a duplex where both people are bound by an agreement that they will lose their place in that property if they offend the rules agreed upon, like smoking.

TIMOTHY: Let's talk afterwards.

AUDIENCE MEMBER: Sure.

TIMOTHY: I am very interested in this. I don't want to hold up the whole forum.

AUDIENCE MEMBER: Thank you.

LINDA: I would be curious if you could share some states that have done something like this, you mentioned --

AUDIENCE MEMBER: I brought it to the home access seminar in -- I brought all the data to the home access seminar in Warwick in April and was told by the ADA coordinator that we are not going to replace all the vinyl siding in the state of

Rhode Island. I don't know what vinyl siding has to do with secondhand smoke, but that was the response that I got.

LINDA: But what states do you know of have done something to accommodate this need? Again just because I would like to do a little research myself and if you put me in a direction of a state --

AUDIENCE MEMBER: Off the top of my head, there was a specific HUD funded project in the early 1990s in California. There's been private projects that were coordinated through independent living centers in Canada, you know. I can't -- I'm not -- you know, I brought reams of data to one of these -- and no one has been interested. So I didn't bring it with me.

CARRIE: Any other questions from the panel?

MARIKA: Just clarification. Can you say what COPD stands for?

AUDIENCE MEMBER: Chronic Obstructive Pulmonary Disease. It is -- well of course you are familiar with emphysema which smokers get but it is also from nonsmoking pollution types of things. And now there's a category which is chronic bronchitis. And oftentimes the asthma will lead into that with the triggers, the pollution, indoor and outdoor pollution triggers are not controlled and managed. You are welcome.

CARRIE: Our next person requesting to speak is Pat Colt.

You pass?

AUDIENCE MEMBER: I pass.

CARRIE: Okay. Thank you. I don't have anyone else listed here to speak. But if there is anyone that is interested, if you could please raise your hand and share your name.

Okay.

Richard Costa.

AUDIENCE MEMBER: Yes.

CARRIE: Go right ahead

AUDIENCE MEMBER: Okay.

Um --

TIMOTHY: Spell your name.

AUDIENCE MEMBER: Costa.

TIMOTHY: Thanks.

AUDIENCE MEMBER: There is a talking book program that every state in the country has but the state of Rhode Island does not have a descriptive video program in conjunction with that talking book program. And we are one of only four states in the United States that does not have that program. And I just wish that the state of Rhode Island could and would do something about that.

AUDIENCE MEMBER: Perhaps you can explain (inaudible)

AUDIENCE MEMBER: Would you like me to explain what the talking book program is?

LINDA: Sure.

AUDIENCE MEMBER: I'm sorry. The talking book program is a federally funded and state funded also program that -- where the blind and visually impaired and dyslexic can receive audio books, you know, for reading pleasure. Some school books can be obtained. The books that actually you can order through the talking book library and they are sent directly to your home. And then you can redeposit them once you finish reading them back into the mail and they are sent back. It's as easy as that. The descriptive videos are movies or documentaries that are just that. They're movies for -- again the blind, vision impaired where the movie is narrated. So that a blind person could watch a movie, per se, and know what's happening in the movie because the movie is again narrated.

TIMOTHY: Now, brief clarification. What -- so there is in Rhode Island access to talking books but there is no access to descriptive videos?

AUDIENCE MEMBER: Right. And most times the programs coincide with each other. So for a few more pennies -- because there is some funds involved to service these books -- but for a few more pennies -- and that's what it really basically comes down to -- the two programs could be coincided together.

TIMOTHY: Currently they don't coincide in Rhode Island.

AUDIENCE MEMBER: Currently they don't. And again we are just one of four states that does not have this program.

TIMOTHY: I would be interested in know -- have you sort of asked any -- have you gone to the -- who sort of runs this? Who sort of manages the --

AUDIENCE MEMBER: The talking book library of Rhode Island.

TIMOTHY: And so have you spoken to them and --

AUDIENCE MEMBER: Yes, I have.

TIMOTHY: And what kind of response did you get --

AUDIENCE MEMBER: That's why I am here today.

TIMOTHY: Do they say we just don't have the funding? Do they say what needs to be done?

AUDIENCE MEMBER: Yeah, part of the problem is that because of the funding in the state of Rhode Island as it is today is just a small part of the problem.

TIMOTHY: And so --

AUDIENCE MEMBER: A lot of the asking seems to fall upon deaf ears.

TIMOTHY: So -- who have you -- who have you approached that sort of has not responded?

AUDIENCE MEMBER: I called the governor's office.

TIMOTHY: Yeah.

AUDIENCE MEMBER: And I have gotten absolutely no response from them.

TIMOTHY: So, you are asking us to find the funds in order to fund this -- not talking book but what's the other --

AUDIENCE MEMBER: Descriptive video.

TIMOTHY: Descriptive video program.

CARRIE: Any other questions from the panel? Okay.

Any other questions from anybody in the audience? Betty.

AUDIENCE MEMBER: My question is about the handicapped placards that we get for the automobiles. They are only good for two years. It costs somebody with a disability \$10 a page at a doctor's office to have those filled out. After the first one, why can't it be a permanent, if it's a permanent disability?

AUDIENCE MEMBER: Can I add something to that?

CARRIE: Yes. Can you state your name again?

AUDIENCE MEMBER: Cheryl Grove.

Additionally on top of that, I have a permanent dis -- adult onset permanent disability. I've gone through two renewals on my placard. Apparently the same doctor filled out the renewal application last year. And perhaps he was rushed on way to vacation or something, didn't fill it out the way it was wanted to be filled out. And my renewal on my permanent placard was denied. As a result, I went for six months and ended up having to go to a second doctor before -- without my placard, I ended up getting chronic bronchitis, very severe acute occurrences of it because I was not able to park in disability parking at Rhode Island Hospital for an appointment on an O zone day. I don't understand why that should be -- that kind -- it's a permanent disability. COPD is irreversible. Why did I have to go through that?

TIMOTHY: So, what I'm understanding here is you want people with what are classified as permanent disabilities --

AUDIENCE MEMBER: Right.

TIMOTHY: -- to receive permanent parking placards without having to renew them?

AUDIENCE MEMBER: Right. People with permanent disabilities are usually living on Social Security disability. So every time you go to have something filled out, that's taken money that you need to live on out of your pocket.

TIMOTHY: So you would like to see a -- again, what we are doing is we will create legislation here. We are not -- we can't talk to municipalities. We are creating legislation. So you would like to see legislation that states if someone has a chronic disability --

AUDIENCE MEMBER: Yup.

TIMOTHY: Then he or she should receive a parking placard that does not have to be renewed?

AUDIENCE MEMBER: Right.

TIMOTHY: That's what you would like to see?

AUDIENCE MEMBER: Yes.

TIMOTHY: I want to be clear. Same thing with you, Cheryl?

AUDIENCE MEMBER: It was my understanding that the blue placard was a permanent placard. That was my understanding that the red one is a temporary. And the blue one is supposed to be a permanent. So why do we have to go through this exercise and deplete limited funds?

TIMOTHY: Well, you know, I can't answer necessarily for -- why the rules are the -- perhaps, perhaps maybe they anticipate maybe some people move out of state and so, you know, people have to renew every now and then. There could be any number of reasons, not really clear. But --

AUDIENCE MEMBER: When they lose their license in the state, wouldn't they automatically trigger --

TIMOTHY: Not necessarily. You know how bureaucracies work. Oftentimes left hand doesn't know what the right hand is doing.

AUDIENCE MEMBER: Even if you lose your license and you can't drive, you still need to go places. You still need to be closer than --

TIMOTHY: This is all true.

MARIKA: So I understand, presently every two years you have to pay \$10?

AUDIENCE MEMBER: \$10 a page to a doctor to fill out the forms to renew the placard. And I was told that they are only good for two years. The most is three years on the placards.

AUDIENCE MEMBER: Can I suggest that maybe you want to talk to a doctor who's not going to charge you \$10. That's -- it just requires a signature that you still have the same disability. The renewal is a very simple thing and I think that you are probably getting ripped off.

AUDIENCE MEMBER: They told me I had to fill out a whole new form.

AUDIENCE MEMBER: You shouldn't have to fill out a new one. And also I know that one of the reasons is people do move out of state. People die and other people use their placards. So it is a way to keep control over, you know, the legitimacy of the placards. Maybe legislation that says every five years or something like that might be worth considering. But I think that maybe you are really getting a bad job when somebody's charging you that amount of money, knowing that your income is limited.

CARRIE: Can you just state your name for the record?

AUDIENCE MEMBER: Annette Bourbonniere.

TIMOTHY: Thank you, Annette. I appreciate your input there. Does that answer your questions?

AUDIENCE MEMBER: Yes but I still think --

TIMOTHY: But this will be -- we will certainly discuss it and we will take a hard look at this. I appreciate it.

CARRIE: Do you have another question from the -- could you state your name?

AUDIENCE MEMBER: Kristin Prerini. I want to know why -- I had one of those blue placards for a good 20 years, never needed it replaced. It got so brittle from being hung up all the time that it cracked. I called to get a replacement. Of course my local DMV they said, no you have to call the state. I called the state. The state told me I had to go to Cranston, thus take a day out of work, or I could mail them my broken one and be without for at least a week. And they would mail me one once they received my cracked -- and I just want to know if -- who do you -- how can you fight that? How can you get around that? How can somebody who's disabled and trying to make a living be without such a thing for a week or more?

CARRIE: Comments from the panel?

TIMOTHY: I certainly hear what you are saying. I certainly understand the difficulty of missing that week and perhaps a better solution can be worked out. Can you think of one?

AUDIENCE MEMBER: I mean they should have -- the state should have records. If we applied -- we have been approved. Why can't they just mail us one? Then we can mail them the cracked one. If they are worried about fraud, that's fine. I understand

that. But we can mail them -- and they can come after us if they don't have the broken one or what have you. At least we won't be without.

AUDIENCE MEMBER: Temporary -- (inaudible) you would have to mail your other one in, in a certain time frame to -- the other one would be void like your --

CARRIE: Can you repeat your suggestion and your name?

AUDIENCE MEMBER: Robin Burgess, East Bay Mental Health. I suggested like the temporary license plates on cars. When you buy a new or used cars, these temporary plates that they could mail out or cards could have dates on them at which time they would expire and the permanent one would need to be in its place. That would give someone time to mail their old one and receive a replacement and not be without this desperately needed card.

CARRIE: Thank you.

Another question? Just state your name again.

AUDIENCE MEMBER: Cheryl Grove. I'm wondering, being on a limited Social Security disability income, I don't get any of the discounts that seniors get. And I'm wondering why because Social Security income is Social Security income. It's as limited for me as it will be for me when I'm 65. So, it seems to me that's an oversight that could be addressed and hopefully starting at this state level is, you know, everything. You know the entrance into the beaches and the discounts and all of that, if -- right down to the prescription. Why are there varying rules between a Social Security recipient of 65 and a Social Security recipient of 55 or 50? If that's their -- if they are a low income -- it seems like it could be so much cleaner if we could just have a low income Social Security recipient across the board consistency of assistance. Do you understand what I'm saying?

TIMOTHY: I'm just trying to put it into sort of -- um -- so you would want to see all senior -- sort of senior citizens discounts extended to persons who are recipients of any kind of disability --

AUDIENCE MEMBER: Low income Social Security disability recipients.

TIMOTHY: And you would want to see them receive any kind of discounts that are extended to persons who are 65 and over?

AUDIENCE MEMBER: Their green is the same as my green. Limited.

TIMOTHY: Is that a yes?

AUDIENCE MEMBER: Yes.

TIMOTHY: I guess we can take a look at it.

CARRIE: Any other questions from the panel?

MARIKA: I just want to add to that, that the question -- the issue that was just raised right now, it varies state to state. And for example, just speaking on this issue, as a survivor now of, a brain injury survivor. When I was looking for supplemental health insurance and being that if you have a disability for a long time you have any number of preexisting conditions. So new -- getting proper insurance is difficult because they don't want to take you any more. So when I'm looking into supplemental health, whether it was with AARP or -- I looked all over on a variety of levels. If I had lived in Massachusetts, as I did for a number of years, I would have been able to qualify for services that people got at age 65. Because you are disabled. And that is your retirement plan. You are just getting it earlier, whatever you are getting for income.

AUDIENCE MEMBER: Exactly.

MARIKA: Low or regular. But here in Rhode Island the law says you have to be 65 and it doesn't matter that you got disabled. You have to wait until the age limit. And in most other states, that is not true. And certainly it is not true in our neighboring states because I did my homework on that four, five years ago. And I know I raised it then and nothing has changed in that time. So whether it's trying to have a disabled person use their money more cost effectively, there does seem to be a discrimination on the age and the disability. And most of the states don't have that. Once you are disabled, you are basically getting your pension, whatever it is, how little or how much it is early. That's all it is because that's what you are living on. But when it came to health issues, I was really surprised because that's health insurance. That's not even saving \$2 at the movies or a parking thing. It's like if you are going to

get health services to try to maintain some level of life for yourself after being disabled seriously, that's a lot of money we are talking about. So disability -- not trying to say it's any greater but I just wanted to raise it because I believe it falls in the same category because the insurance company sets it by age and in this state it's 65.

TIMOTHY: I would be interested in talking to you about that later on.

MARIKA: All right. Thank you.

CARRIE: Any other comments?

AUDIENCE MEMBER: What splinters to me, what talked about, politician -- politics?

CARRIE: This is the Governor's Commission on Disabilities. And this is a forum here for people in Newport County to share any concerns or --

AUDIENCE MEMBER: People, like disabled people.

CARRIE: Whether it's a physical disability or developmental disability.

AUDIENCE MEMBER: People at the (inaudible) center.

CARRIE: Yes, exactly. So we are here to share any comments or concerns or ideas.

A question in the back. Sir, if you could state your name for the record.

AUDIENCE MEMBER: My name is Pat Cole. What about the -- getting into restaurants. Some places like -- lifts and all that. Any possibility?

CARRIE: So your question is about the accessibility in the restaurants in Newport, that they are very hard to get into some of the restaurants?

AUDIENCE MEMBER: Yeah.

CARRIE: Any questions or comments from the panel?

TIMOTHY: Well, you understand how accessibility works?

AUDIENCE MEMBER: Pardon?

TIMOTHY: A lot of times, you know restaurants all -- if they are newly constructed, they have to be made accessible. Old restaurants, as we have a lot in Rhode Island and especially Newport, need to be made accessible only if making the place accessible does not place an undue financial burden on the owners of the said establishment. So a lot of times, you know, it costs a lot of money, as you can imagine, to make a restaurant accessible or build an elevator. Sometimes the cost of making a place accessible puts an undue burden on the owner of the establishment to make themselves accessible and that is -- they are then exempt under the Americans with disabilities -- that is the reason why you see it in a lot of places. Now it is also complaint driven. You can pipe up and sort of hire a lawyer and sue if you think that creating a -- making the place accessible would not in turn cause an undue financial burden on said establishment. But you have to prove that the cost of renovating a place does not put an undue burden on the owners of the establishment, which makes it very difficult. I'm not saying it's right or wrong. I'm saying that's the law.

CARRIE: A question in the back, your name?

AUDIENCE MEMBER: Joy Bensen. I am just curious who -- after something is made accessible, like streets or whatever, who actually comes around and checks to make sure they are? I don't know if that makes sense. But what department inspects those because so many times a parking spot will be accessible but the cut in the curb will be maybe right in front of the van. I just didn't know. Does somebody actually go around and approve those, what department?

TIMOTHY: I know that the governor's -- the commission itself has in the past advised businesses and schools, public entities as to whether a place is accessible or not, what it can cost to make the place accessible. So, you know, the governor's commission does that type of work. We hire state inspectors who go out and look at places, find out ways to make it accessible if a business comes to us --

AUDIENCE MEMBER: I don't mean a business. I just meant on the street, like parking places, say. After --

TIMOTHY: I assume there is some sort of inspection process for any kind of work. Either it's municipal, de -- I imagine who does the work.

CARRIE: I would say the best people to be able to give feedback about the practicality of any type of accessible modification would be people that are using

them. I think what able bodied people find to be okay can be clearly not the case when somebody's independently trying to maneuver around, as we learned when we had the accessibility activities in Newport where people were touring about. People learned quite a bit about what actually wasn't so accessible that was touted as accessible. Any other questions or comments?

We have nobody else signed up to make comment at this point in time. The panel will remain here until 5:00 to receive any further comments for the commission. But we would like to thank you for joining us today and appreciate to have such a good size group, I think, for our Newport forum here.

AUDIENCE MEMBER: I have one comment.

CARRIE: We have one more comment. Can you state your name for the record, please?

AUDIENCE MEMBER: Steven Pratt. The sidewalks in Newport and (inaudible) wheelchairs.

CARRIE: The sidewalks in Newport? I'm sorry. I missed the second piece of it.

AUDIENCE MEMBER: Disabled for the wheelchairs. They go up --

CARRIE: So they are not designed so the wheelchairs can go along the sidewalks?

AUDIENCE MEMBER: Yeah. I have a hard time going anywhere. You know --

AUDIENCE MEMBER: Not even --

AUDIENCE MEMBER: It's not designed for wheelchairs.

CARRIE: Right.

AUDIENCE MEMBER: The only one -- you know, the only comment I have.

CARRIE: Thank you. Any comments from the panel?

MARIKA: Only to say that is quite an accurate statement here in Newport. And it must be terribly frustrating not only to not have the access but it limits your ability to live life.

AUDIENCE MEMBER: It is.

MARIKA: If you don't have the access. Case in point, and this was raised just recently last week. I think it's worth mentioning here because I'm also a Newport resident. But we have the music festival here in Newport. People come from all over to it. One of the events was held on goat island, a brand new building, totally renovated, made beautiful, expensive. But it didn't have proper access for wheelchairs.

AUDIENCE MEMBER: Right.

MARIKA: It didn't even have a ramp. A brand new building and it just opened up. It didn't have a ramp. And I, along with others, was volunteering that day. We had nine wheelchair people come to that concert. Had we not been able to ruffle up friends of friends that we knew to either bring the wheelchair in, assist the person, or carry the person in the wheelchair because over a half of them could not even stand. They wouldn't have been able to go to the concert that they already prepaid their tickets for.

AUDIENCE MEMBER: That's what I mean.

MARIKA: And this is new and so --

TIMOTHY: Where was this?

MARIKA: This is bellmaire on goat island. I went to talk directly to the manager. I raised it with the city council member who I happen to know is on the city council here because it was a real concern that if I new buildings are doing this, as you already stated, we have many that are older and are protected. But when you add up all of them, there's very limited access here in this area for just what this gentleman is saying. And it greatly limits their ability to live life on this island.

TIMOTHY: What kind of feedback did you get when you approached the owners?

MARIKA: That they are going to look into it. They are going to look into it. You know. Again I'm -- you know, sometimes when we wear many different hats and you have causes, it's hard not to. But it's like I didn't have the time to pursue it. But I wrote a letter to my own senator and Congressman stating this is a clear-cut example because I didn't have to hear it hearsay. I was there to witness it, and was just so happy that I could get some friends to help people come in or they would have had to have been rejected. And in this day and time there should be no reason. That's a -- that is a federal violation versus I understand, Tim, what you raised earlier about

the protection of the older ones and the cost -- I do understand that. I know that law. But here we have a new situation. The other thing that was raised --

TIMOTHY: Well, I also can say though, you can sue.

MARIKA: Yes. Everybody can -- everyone can sue. But keep in mind --

TIMOTHY: I understand. I know what you are saying. A brand new thing --

MARIKA: It takes money to sue for people who don't have the money to sue.

TIMOTHY: That's just the way the law is written.

MARIKA: Right.

TIMOTHY: I understand that.

MARIKA: But there should be enforcement in that. Just -- for example, it is the law to have handicapped parking for people. All right. We have all the signs. And I know this from being on another board. The state wide independent living council has nothing to do with Newport in this state. It's a statewide issue.

TIMOTHY: What did they --

MARIKA: No one is enforcing when people who are totally capable to park elsewhere. It's rare to get a ticket or anything on that when people pull in a car. Meanwhile, if you are in a small town and you only have one or two handicapped spaces for people who really need it, they don't have anyplace else to go. I think we -- we need to pay attention to that, as we are looking to form -- it's one thing to form a law. The second part of that is to monitor and to enforce the -- if we are going to go through the money and hassle to create a law, let's protect the law and the rights that apply that originated.

TIMOTHY: Enforcement issue.

AUDIENCE MEMBER: And just another interesting aside on that, for a person like myself who had a permanent placard and went through a period where it wasn't renewed. I understand it would have been a \$500 fine if I had parked in a disability space with my invalid placard. Although I think that just a regular person coming in, parking, something like a \$25, \$50 fine. So I just found that to be a very interesting --

TIMOTHY: --

AUDIENCE MEMBER: That's not true at all.

TIMOTHY: Say that again. If you have a placard, you park in a handicapped --

AUDIENCE MEMBER: If you have an expired placard but you use that and you park --

TIMOTHY: It's a \$500 --

AUDIENCE MEMBER: It's considerably -- the fine was considerably higher and I am happy to get my research and show it to you.

AUDIENCE MEMBER: The way that works is if you were to loan your placard, valid or not, to another person who did not have the right to use it and allowed somebody else to use it, then you are fined \$500. If you have an expired one, that's the same as not having one, and the fine is \$100 across the state. It's no longer \$25 or \$50. It is \$100. But the \$500 fine is for fraudulent use when you are giving your placard to somebody who has no right to use it. That's the \$500 fine.

AUDIENCE MEMBER: Well, if that's the case, then it was misleading and thank you for clarifying that because that is much more comforting.

CARRIE: Okay. If we have no more comments, I would like to thank everybody again for attending today. And as I said, the panel will be here until 5:00 to receive any further comments. And if you have not signed in, if you came in and didn't have a chance to sign in, if you could please sign over at the table. And just a reminder that Amy is also at this table to assist anybody in registering to vote that has not registered to vote at this time.

TIMOTHY: Yes, please sign in.

CARRIE: Yes. Thank you very much.

TIMOTHY: Thank you, Annette. You want to switch places?

AUDIENCE MEMBER: No. It's okay. It's your turn.

CARRIE: The panel is going to be able to take a ten-minute break right now until 4:00 and we will regroup here at 4:00.

TIMOTHY: Thank you, Carrie.

CARRIE: You are welcome. Anything else I can do?

(Break)

CARRIE: May I have your attention, please. I would like to call the meeting back to order. If anybody has any last questions, comments? Well, with all that said, I would like to thank you and adjourn the meeting. Thank you.