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Time Marches On...

Bringing Change Along With It

Happy 1998 to one and all! We wanted to take this opportunity to tell you about some new developments related to the DATI project. For starters, two new faces will frequent the hallways of the Assistive Technology Resource Centers. We are thrilled to have Tracy Bombara join the staff as the new Assistive Technology Specialist in Sussex County and Nancy Ranalli join us as the Assistant Coordinator of the Easter Seal ATRC network. They replace Don Erhart and Patty Hove, who gave tremendous energy to the DATI before moving on to new challenges. Both Tracy and Nancy have extensive AT experience, and their involvement will certainly enhance our ability to “bring technology to you.”

If you missed the statewide conference in November, you missed the debut of the new *Guide to Funding Resources for Assistive Technology in Delaware*. This volume contains detailed information about the many funding sources for AT devices and services, including specifics about eligibility and contact resources. It offers a wealth of information for only \$20, and they are selling like lemonade on a hot summer day. You can order yours using the order form on page 13 of this issue.

In regard to the newsletter itself, you will notice that the large calendar of events is no longer included as our “centerfold.” While we will continue to bring you news of upcoming events, the DATI is now publishing a comprehensive workshop schedule containing all training events through May 1998. Everyone who regularly receives a copy of *The AT Messenger* should have received a copy of this booklet. If you have not received one, or you would like additional copies, please give us a call at the Central Site.

With every issue of *The AT Messenger* we will continue to bring you...

- a new Financing Assistive Technology column, authored by Ron Sibert, the DATI’s very knowledgeable Funding Specialist

- a column contributed by our legal experts at the Community Legal Aid Society, Inc.
- the latest developments in assistive technology, as well as articles that help us become more well-informed consumers of AT
- an updated equipment recycling list.

Please let us know if there are features you particularly enjoy, or if there are additional items that you would like to see addressed in the newsletter. Contact Sonja Simowitz at the Central Site with your comments and suggestions. n

Another Success Story!

This year's annual conference was held at the Clayton Hall Conference Center in Newark on November 12. It attracted approximately 250 attendees, 32 exhibitors, and 16 presenters.

Responses to the question, "What did you like most about the conference?" were:

- *info from sessions*
- *well organized*
- *variety of presenters*
- *vendor setup*
- *networking*

Attendees would like to see more about:

- *educational software*
- *what schools are doing to provide students with appropriate AT assessments*
- *appealing Medicaid decisions*

Thanks to all who participated in this year's conference!

Voice Organizers

Ed Salisbury, AT Specialist, Kent County ATRC

Voice Organizers, also called memo or note recorders, have become very popular over the last several years. The first memo recorder was sold more as a novelty item than as a useful piece of personal electronics. If all one needed to remember was where the car was parked while in the mall or a short shopping list, this was a valuable purse/pocket accessory. Although very limited in capacity, this simple recorder catapulted the advancement of digital audio recording technology into the 21st century. Many companies including Voice It, Voice Powered Technology International, Machina, Sycom. and even familiar names such as Olympus and Sony have jumped on the bandwagon to produce a line of next-generation voice organizers. With more features than early desktop computers, more recording capacity than many answering machines, and sizes small enough to comfortably fit into a pocket, these voice organizers no longer fall into the “novelty” category of personal electronics. Memo recorders are ideal for anyone who has difficulty effectively utilizing a paper “to do” list, as well as those who absolutely cannot remember verbal directions from a gas station attendant, and even, as the advertising suggests, those who lose the car in the mall parking lot.

Before purchasing a voice organizer, several factors need to be considered. In reviewing the many brands and models, one must take the time to ask the following questions: **How many messages can I record?** Most recorders allow between 15 minutes and one hour of reasonable quality voice recording. Individual message length will determine the total number of messages that can be recorded. **Can I categorize the messages?** Most machines allow the user to define categories such as home, office, urgent, and miscellaneous. Sometimes called files or channels, these categories allow for fast and efficient message retrieval. **Does the device stamp the message with the time and date of recording?** This can be especially helpful when one is using the memo recorder to keep track of a “to do” list. **How is the machine accessed?** Some models have easy to use buttons or even respond to spoken commands, while others require one to scroll through a series of modes to access a particular feature. **How big is it and how do I carry it?** One must remember that in order to take full advantage of the recorder in all situations, it must be portable. Some easily fit into a shirt pocket while others can be carried using a belt clip. **Does it have a display?** Most all models have a built-in LCD display. Some even include a back lighting feature for increased visibility in low light conditions. **Can the buttons be locked out to avoid accidental activation and possible deletion of messages?** This is a helpful feature if the recorder is going to be carried in a pocket. Unfortunately, no one product incorporates every feature.

Some include additional features such as a phone dialer or calendar functions, as well as storage allocated for expenses, phone numbers, and addresses. With added features comes added cost and generally added size and weight. To help with the selection process, listed below are several fully-featured models with their approximate costs.

Voice It VM-15

- 15 minute high quality recording capacity
- 22 minute reduced quality recording capacity
- 30 minute version (VM-30) available
- LCD display with time and date stamp
- 5 channels at the touch of a button for categorizing messages
- Skip, forward, back, repeat, and erase messages selectively
- Alarm feature for scheduling messages to be played at a certain day and time
- Stores up to 100 names, 3 phone numbers per name.
- Phone dialing capability
- Dimensions: 4.25" x 2.5" x .75"/3.9 oz.
- \$69.99 (Available at most office supply and retail stores)

Voice It VR-1000/2000

- 50 minute digital recording capacity
- Slot for additional 50 minute memory cards
- 4 channels for categorizing messages
- LCD display with time and date stamp
- Insert and delete functions for editing individual messages
- Advanced recording and navigation controls including: play, skip, search and erase
- PC Link to download voice files to a Windows computer
- Dimensions: 4.75" x 2.25" x 1"/3.5 oz.
- \$299.00 (currently available at "The Sharper Image" only)



Voice It VR-1000 / 2000

IQ Voice Organizer 6215 by Voice Powered Technology

- 15 minute high quality recording capacity
- 22 minute reduced quality recording capacity
- 20 channels for categorizing messages
- Backlit LCD display with time and date stamp
- Calendar with 200 appointments
- Phone directory for 640 phone numbers
- Expense function with 12 categories
- Access messages and phone numbers by voice
- PC Link to download voice files to a Windows computer
- Charging base for battery charging
- Dimensions: 4" x 2" x 11/16"/3 oz.
- \$99.99 (Available at Radio Shack and most office supply and retail stores)

+

Machina Cardcorder 3000

- 50 minute recording capacity
- 100 minute recording capacity on Model 6000
- 4 channels for categorizing messages
- Backlit LCD display with time and date stamp
- Skip, forward, back, repeat, and erase messages selectively
- Variable speed playback of messages
- Voice/tone alarm
- Combination carry case/business card holder
- Dimensions: 3-3/8" x 2-3/16" x 1/2"/2 oz.
- \$200.00 (Available from Machina)

Sony ICD-30

- 16 minute recording capacity
- 2 channels for categorizing messages
- Backlit LCD display with time and date stamp
- Insert function for editing individual messages
- Alarm feature for scheduling messages to be played at a certain day and time
- 2-1/8" x 3-3/8" x 7/8" / 2-3/4 oz.
- \$129.95 (Available from most office supply stores)

There are many brands and models of voice organizers on the market that are not listed here. Be sure to do some comparison shopping before making a purchasing decision. n

Program to Make Web Friendlier

By Jeri Clausing, The New York Times

WASHINGTON—Because she uses a wheelchair, Judy Brewer says, her college research was often a series of exhausting trips and challenging acts of lifting heavy books from high shelves.

With the invention of the World Wide Web, she says, “I can go flying all over the world. I can do in one hour what used to take a week. The change is phenomenal when you have access to the Web.”

And so she hopes to bring that change to more disabled people in her new role as director of the World Wide Web Consortium's International Program Office for the Web Accessibility Initiative.

At a news conference on October 22, 1997 announcing creation of the program office, Brewer outlined plans for developing guidelines, ratings and education programs on Web barriers and alternatives for the 750 million people, or about 20 percent of the population, with disabilities.

Tim Berners-Lee, who invented the Web and is director of the World Wide Web Consortium, also known as W3C, said: “The power of the Web is in its universality. Access by everyone, regardless of disability, is an essential aspect. The IPO will ensure the Web can be accessed through different combinations of senses and physical capabilities, just as other (consortium) activities ensure its operation across different hardware and software platforms, media, cultures, and countries.”

The program is being sponsored by a partnership of government, industry, research, and disability organizations. The program was endorsed by the White House and has received \$1 million from the National Science Foundation. Other financing is coming from the Department of Education's National Institute on Disability and Rehabilitation Research, the European Commission's TIDE Programme, and consortium industry members, including IBM/Lotus Development, Microsoft, NCR and Riverland Holding.

“Through the IPO,” Brewer said, “we will be coordinating to ensure that needs related to accessibility are addressed through the consortium's work, and that the message of an accessible Web is carried as broadly as possible.”

The most obvious Web barriers are to the blind. Though Web browsing software exists for the blind, existing versions don't read many Web sites, Brewer said. But as technology changes and more audio, video, and complicated charts and flashing pictures and

graphics are used in Web design, more barriers are being created to those with hearing, speech, and learning disabilities.

This is not only about ensuring that Web publishers offers a text-only alternative. "It's much broader than that," Brewer said, noting that common and easy alternatives like captions of audio, descriptions of video, and options to multi-key commands need to be built into Web programs.

"The biggest barrier is going to be the awareness barrier—getting guidelines and the message out to the extent of people involved in the Web," Brewer said. "The message we have to spread is that accessibility is vitally important. It's feasible and will in fact be easy."

She added, "We have a lot of work, but I'm confident we have a program that will help us acknowledge greater Web access for everyone."

The program will focus on five areas—data formats and protocols; guidelines for browsers, authoring tools, and content creation; rating and certification; education and outreach; and research and development.

Brewer said she intended to start spreading the message immediately and hoped that her office would have some initial written guidelines ready within a few months. The accessibility project has already reviewed the format and protocol elements to HTML 4.0, the upgrade to the Web's hypertext markup language, and will be offering feedback on ways to make things like images, audio and video more accessible to the disabled.

Brewer said that with legislative initiatives like the Americans with Disabilities Act, software and hardware manufacturers need to be aware of the need to make the Internet and computers more accessible in the workplace.

Tom Kalil, senior director of the White House National Economic Council, said that the administration strongly supported the project and was looking forward to the group's issuing guidelines that the federal government could use to make its own sites and equipment more accessible.

"When we have formal guidelines, the federal government will be in a much stronger position to require those in the procurement process," he said.

Brewer has a background in applied linguistics, education, technical writing, management and disability advocacy.

She previously was project director for the Massachusetts Assistive Technology Partnership, a federally-financed project that promoted access to technology for people with

disabilities. She serves on a number of advisory committees and boards, including the National Council on Disability's TechWatch Task Force, the Bell Atlantic Consumer Advisory Board, and the Board of Directors of the Adaptive Environments Center.

The World Wide Web Consortium was created in 1994 to develop common protocols that enhance the interoperability and promote the evolution of the World Wide Web. It is an industry consortium operated jointly by the MIT Laboratory for Computer Science in the United States, the National Institute for Research in Computer Science and Control in France, and Keio University in Japan.

Related Sites

Following are Web sites mentioned in this article.

World Wide Web Consortium's International Program Office for the Web Accessibility Initiative—<<http://www.w3.org/WAI/>>

W3C—<<http://www.w3.org>>

National Science Foundation—<<http://www.nsf.gov/>>

Department of Education—<<http://www.ed.gov/offices/OSERS/NIDRR/>>

TIDE Programme—<http://www.lu.se/intsek/EU/Ovriga_RTD-program/TIDE.html>

MIT Laboratory for Computer Science—<<http://www.lcs.mit.edu>>

French National Institute for Research in Computer Science and Control—<<http://www.inria.fr/>>

Keio University—<<http://www.keio.ac.jp/>>

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Agent Orange Act Provides AT Funding

Frances Ratner, Community Legal Aid Society, Inc.

Thanks to an act of Congress which took effect on October 1, 1997, some individuals with disabilities have another source of funding for assistive technology.

The Agent Orange Benefits Act of 1996 provides for health care (including assistive technology), vocational training, and monetary allowances to individuals with spina bifida whose parents served in Vietnam. The Act represents the first time in which the Veterans Administration (VA) will provide benefits to a non-veteran based on a possible relationship between that individual's disability and a veteran's service. VA benefits for dependents have historically been based on the death or disability of the veteran.

Historical Background

The Agent Orange Act grew out of a long-standing belief among many Vietnam veterans that birth defects in their children may have been caused by chemicals used during the war. In 1991, Congress mandated further study of a possible link between exposure to defoliants such as Agent Orange and the occurrence of adverse health effects. That study, released in 1996, showed evidence suggesting a link between exposure to defoliants in Vietnam and the occurrence of spina bifida, a birth defect resulting from the failure of the spine to properly close early in gestation. It can cause impaired mental capacity, impaired mobility, and/or incontinence, among other conditions.

Eligibility

The Agent Orange Act covers Vietnam veteran's natural children (regardless of current age or marital status) with spina bifida (except spina bifida occulta) who were conceived after the date on which the veteran first entered Vietnam. Vietnam veterans are not required to prove exposure to Agent Orange; the law presumes that all military personnel who served in Vietnam were exposed to the substance. Congress recently proposed an amendment to the Act stating that an individual is eligible for the Act's benefits regardless of how his or her parent was discharged from the service (e.g., honorable, dishonorable).

Benefits

The law provides for three areas of assistance. First, individuals can receive health care benefits needed for the spina bifida or for any disability associated with the spina bifida. Health care means home care, hospital care, nursing home care, outpatient care, preventive care, habilitative and rehabilitative care, case management, and respite care. It also includes training members of the individual's family in the care of the individual,

and the provision of such pharmaceuticals, supplies (including continence-related supplies such as catheters, pads, and diapers), equipment (including durable medical equipment), devices, appliances, assistive technology, direct transportation costs to and from approved sources of health care, and other materials as are determined necessary.

The second form of assistance provided by the law is vocational training and rehabilitation. An individual may receive vocational training if it is determined that the achievement of a vocational goal by the person is reasonably feasible. Any vocational training program must be designed in consultation with the individual and shall be set forth in an individualized written plan of vocational rehabilitation. The training program should include vocationally-oriented services and assistance, including such placement and post-placement services and personal and work adjustment training as are determined necessary. The program may include education at an institution of high learning if the content is predominantly vocational. The vocational program may not, however, include any automobile adaptive equipment. The vocational program generally may not exceed 24 months, unless an extension is granted.

The third form of assistance provided by the Act is monetary. Individuals may receive a monthly allowance for any disability resulting from their spina bifida. The monthly allowance may not be considered as income or resources in determining eligibility or benefits under any other federal program. The amount of the allowance is based on the degree of disability. The law provides for three levels of disability, with those at the lowest level receiving \$200 per month, those at the intermediate level receiving \$700 per month, and those at the highest level receiving \$1,200 per month. The VA has promulgated regulations specifying the three levels of disability in more detail. However; these regulations have been criticized as placing some individuals at an inappropriately low level and as failing to take into account dozens of serious disabilities associated with spina bifida, such as blindness, limb deformation, mental disorders like depression, and life-threatening heart or respiratory conditions.

Applications

To apply for benefits under this act, you can contact the VA's Delaware office at 998-0191 (New Castle County) or 800-827-1000 (Kent and Sussex Counties). Callers should ask for VA Form 21-0304. For further information about these benefits, you can contact the Spina Bifida Association of America at 800-621-3141.

Sources: 38 U.S.C. sec. 1801; 142 Congressional Record S9295, S9926, S11540; 143 Congressional Record H10435, S11192; 62 Federal Register 51274, 51281; VVA Veterans Benefits News, September-October 1997. ⁿ

Under Pressure

Michael Meyreles, ATP, New Castle ATRC

In a recent two-part article, *The "Wheel Deal:" Wheelchair Considerations*, written by Nancy Ranalli for the **AT Messenger**, she discusses the components that make up a wheelchair and the importance of receiving a proper wheelchair assessment. One area that needs to be assessed when a seating evaluation is performed is looking at whether the client is at risk for skin breakdown. One tool a clinician might use in determining whether a seating system is sufficient to protect against skin breakdown is a pressure mapping system called the Force Sensing Array (FSA) from Vista Medical. This article will focus on the FSA and its features, both as a diagnostic tool and as a biofeedback/client education tool.

The FSA is a computerized pressure mapping system that is made up of three components: the pressure sensing mat, the interface box, and the software. The pressure sensing mat is the interface between the FSA and the client. It is typically made up of a 15 x 15 array of pressure sensitive sensors. When pressure is exerted on these sensors, the resulting electrical information is sent to the interface box. The interface box takes in the electrical readings from the pressure sensing mat and sends these readings to the computer in a manner that the software can interpret them. The software allows the clinician to access the information gathered by the sensors. The software is available in both Windows 3.1 and Windows 95 versions, with the newest upgrade due out within the next month.

Typically, when using the FSA to gather information about a client's seated position and pressure distribution, the clinician will obtain a baseline reading of the client's typical seated position with his/her usual cushion. If skin breakdown is a concern, determining the proper seat cushion is essential. The clinician will then be able to try different cushions with the FSA to assess which seat cushion is best for the consumer.

There are other features that make the FSA an excellent tool for therapists. The FSA can also be configured to take remote readings. After some initial setup while the FSA is connected to the computer, the pressure sensing mat along with the interface box and a small power supply can be disconnected from the computer. The FSA will then take a series of "snapshots" at a time interval specified during the initial setup. The clients can go about their normal routine and the information gathered during this time can be downloaded and read at a later time. Another feature of the FSA is that a hard copy of the readings can be printed. This hard copy of the results of the assessment can be

used as documentation to support recommendations for seating inserts or other equipment.

Another feature of the FSA, unrelated to seating and positioning, is that it can be used as a biofeedback/education tool since near instantaneous visual feedback is available on the computer screen. With the display on the screen, clinicians can determine if the client is getting enough pressure relief while they are doing weight shifts when sitting in their wheelchair. The FSA is also an excellent tool for therapists wishing to train clients in weight shift activities. Since the computer screen is readily visible, clients are able to shift their weight and get visual confirmation.

This is just a brief overview of the FSA. For more information about this system, contact your local ATRC or call Ray Whittenberg at Vista Medical 800-563-7676. n

Financing Assistive Technology

Recovering Kids' Lost SSI Benefits: The Advisability of Appeal

Ron Sibert, DATI Funding Specialist

Many families of children who have disabilities struggle financially due to the extra disability-related costs. Even inexpensive technology can be challenging for such families to obtain...even more so when the child is uninsured or when the devices simply are not covered by insurance. When family resources are limited, every dollar counts.

Until recently, the children's Supplemental Security Income (SSI) program, an important Social Security benefit for youngsters with disabilities and their families, provided additional income to help pay for food, clothing, shelter, and some of those "extra costs" associated with caring for a disabled child. The average benefit amount is \$436 per month, or \$5,232 annually. Unfortunately, the program underwent significant changes with the passage of the Welfare Reform Act in August of 1996.

In order to qualify for benefits, children must now meet much more stringent disability criteria than they did before. The child's disability must match or closely approximate (in terms of functional severity) one or more of those on the Social Security Administration's list of allowable impairments. State disability examiners no longer can qualify children under a wide range of unlisted functional limitations (previously done through the Individualized Functional Assessment [IFA]). If the child fails to qualify for SSI benefits, Medicaid coverage also may be lost when the child does not qualify under other Medical Assistance Program eligibility categories (such as low family income).

The new federal regulations, which took effect in February of 1997, affected more than a quarter (263,000) of the estimated one million-plus children who were receiving SSI benefits at that time. According to Social Security Administration (SSA) estimates, more than half of those, or approximately 135,000 children, were expected to lose their benefits. In addition, they expected to deny half of the new cases reviewed during the six-month period following initial implementation of the changes.¹ When the rules were first executed earlier this year, some advocates were concerned that the SSA had significantly underestimated the number of children that would actually be affected. Since most eligibility redeterminations were to have been completed by August 1997, we can now take a retrospective look at the impact—and we'll see that the advocates definitely had cause for concern. According to a recent article in the *The New York Times*,

1. Children's SSI: New Rules for the Children's SSI program, *Tech Express*, Spring, 1997

236,586 children have been reexamined, and 142,395, or 60% of them, lost their disability benefits. In addition, 225,578 new claims, or 68% of those filed since August 1996, were denied.²

The good news is that many of these denials are being reversed on appeal. Benefits, including Medicaid, may be retained during the appeal process and restored with a favorable decision. The denials themselves appear to be a product of poor decision making and implementation by SSA employees. As a result, children have prevailed in 57% of the 10,508 appeals decided across the nation to date. The numbers are even more encouraging when we look at individual states. In Illinois, where Social Security officials terminated benefits for 8,625 children, or 70% of those reviewed through November 8th, children won back their benefits in 100% of the 799 cases filed for appeal. Similarly, children have regained benefits in 100% of the appeals decided in Michigan, 92% in Louisiana, 89% in New York, and 88% in New Jersey.³

The SSA has issued new forms which clarify points of misinformation, but they were not sent out until August, 1997—too late for many who had already lost benefits and/or missed their appeal deadlines. (Under normal circumstances, parents must file their disputes within 60 days after being notified of termination of benefits in order to appeal. They must file within 10 days of notification in order for benefits to continue over the period in which the appeal is being decided). Since there was no sure way to identify people who had lost benefits because of bad information, Social Security officials say that the agency probably will offer another chance to those who were cut from the rolls and did not appeal.⁴

If your child's SSI benefits have been denied or discontinued, contact your local or national SSA office to explore your appeal options. If you suspect that the information you have been provided over the phone is inaccurate, request written clarification and/or a copy of the appeal policy itself.

2. Disabled Youths are Wrongly Cut from Aid Program, *The New York Times*, November 16, 1997

3. Ibid.

4. Op. Cit.

The SSA's national toll-free number is **1-800-772-1213**. The locations and telephone numbers of the local county offices are:

New Castle:	92 Reads Way New Castle, DE 19720 323-0304
Kent	300 South New St. (voice) Dover, DE 19901 674-5262 (voice)
Sussex	600 N.DuPont Hwy. Georgetown, DE 19947 856-9620 (voice)

People using telecommunication devices for the deaf/text telephones may call:

1-800-325-0778
(weekdays 7 a.m.-7 p.m.)

Social Security information is also available to Internet users at the following address on the World Wide Web:

<http://www.ssa.gov>

The ADA Information Center for the Mid-Atlantic Region: *Overview*

The ADA Information Center for the Mid-Atlantic Region is one of ten regional centers established to provide training, information, and technical assistance on the Americans with Disabilities Act (ADA) to businesses, consumers, and state and local governments.

Funded by the National Institute on Disability and Rehabilitation Research under the U.S. Department of Education, each of the regional Disability and Business Technical Assistance Centers has a toll-free hotline staffed by specialists who can answer specific questions on the ADA. Private businesses, individuals, schools and local or county governments can call for advice and information on what is required, who is covered, and how to work through a disability-related questions in employment, architectural access, public services, and other areas.

Callers also may order materials from the Center's extensive library of ADA and disability-related publications. Provided free or at low cost, these materials include the full regulations, technical assistance manuals, architectural guidelines, easy-to-read fact sheets and summaries, advice on how to make different types of businesses accessible to the public, and consultation on employment issues, such as reasonable accommodations. All materials are available in alternate formats such as large print, Braille, tape, and computer disk.

The ADA Information Center also works with its local affiliates in Pennsylvania, Delaware, Maryland, the District of Columbia, Virginia, and West Virginia to provide free or low-cost training programs to help employers, service providers and businesses understand and comply with the law. A training or presentation can be tailored to the interests of the audience, and can be a simple overview or an in-depth review of a particular area of the law.

For further information contact the ADA Information Center for the Mid-Atlantic Region toll-free at 800-949-4232 V/TTY or email <adainfo@transcen.org>. n

HELPING HANDS

The Christiana Care Visiting Nurse Association (VNA) is pleased to announce the introduction of HELPING HANDS, a new respite service. Made possible by a grant from Delaware Health and Social Services, Division of Aging and Adults with Physical Disabilities, this program will provide an occasional break for caregivers of persons living with physical disabilities.

Respite care has been identified as an essential community service by many families, and service providers. Respite care provides caregivers with planned time off to attend to personal business, to spend time with other family members or to allow for a much needed break from the demands of continuously caring for their loved one. Respite care can reduce the stress and exhaustion experienced by the caregiver and can reduce the likelihood of earlier institutionalization of the client as a result of caregiver “burnout.”

HELPING HANDS provides respite care to eligible families throughout the state of Delaware in two settings—clients’ homes and extended care facilities. To participate in this program, individuals must be caregivers for persons living with physical disabilities between the ages of 18 and 59. If you have any questions regarding the HELPING HANDS program, please feel free to call Jim Daliege, Assistant Director to Supportive Services, at 302-323-8692.

Individuals who might be interested in utilizing this service should call VNA at 1-888-VNA-0001 (888-862-0001) to find out if they qualify to participate. n

Seeking Input

The National Institute on Disability and Rehabilitation Research (NIDRR) at the U.S. Department of Education is interested in gathering information from States, consumers, families, service providers, advocacy organizations, community groups and other stakeholders on existing needs for AT services and devices, systemic barriers to meeting those needs, and successful approaches that have removed barriers to AT for individuals with disabilities. NIDRR is interested in identifying those issues that need to be addressed in the future in order to help fully achieve the objectives of the Technology Related Assistance for Individuals with Disabilities Act.

There will be a public forum on January 15, 1998 from 10 am to 3 pm at the Crystal Gateway Marriott Hotel in Arlington, Virginia. Any interested person may attend, and written comments may be submitted at the meeting or sent directly to NIDRR, 600 Independence Avenue, SW, Washington, DC 20202-2705, MES 3420, attention Carol Cohen. Comments may also be sent electronically to carol.cohen@ed.gov or faxed to

202-205-8515. For more information on the public forum, contact DATI or the RESNA Technical Assistance Project, 1700 North Moore Street, Suite 1540, Arlington, VA 22209; (703) 524-6686 (voice), (703) 524-6639 (TDD). n

The Playroom

Imagine your child's delight when s/he can play in the playroom without having to put the toys away! The Playroom from Broderbund satisfies your child's curious nature, and makes learning about basic math, reading concepts and computers fun. Join Pepper Mouse at the cuckoo clock that helps a child learn how to tell time (to the nearest hour) in analog time, digital time, and in words. The cuckoo clock also places the corresponding number of musical notes above the clock. An individual will learn about 12 in the afternoon and 12 at midnight, depending on whether Pepper Mouse is eating or sleeping, and whether it is light or dark outside.

Elsewhere in the playroom, the Spinner toy teaches children how to count and recognize the numbers one through twelve, and also provides a visual representation correlating numbers to objects. Your child won't be afraid to go to the Mousehole in the playroom and try a board game, in a fun noncompetitive way, that teaches counting. If board games are too "low tech" for your child, and since computers are indeed here to stay, what better way to introduce the young child to them than by familiarizing your child to the position of letters on the keyboard? In the same activity, Pepper Mouse will also enjoy giving you the gift of words that he will help you spell, one letter at a time. The Playroom is available for Mac and PC, and is accessible through alternatives to the mouse and standard keyboard. n



Delaware Recycles AT

If you are interested in an item, please call the number listed next to the item.

If you would like to add or remove an item from the list, call 800-870-3284, press 1 for English, and then press 3 for the DATI Central Site office. All prices are negotiable and all area codes are 302 unless otherwise noted.

Devices Available:

Ambulation/Mobility

Brace, Child, one-unit, Free, Rosemary, 366-7553

Cane, 4-leg, \$20, Connie, 653-7341

Cane, (2), Free, Evelyn, 994-0485

Crutches, Free, Evelyn, 994-0485

Gait Trainer, Rifton, adult-size, adj., \$150, Sheila, 697-8404

Walker, \$50, Connie, 653-7341

Walker (2), B/O, Sheree, 798-5572

Walker, Child's, Stabilizing, Free, Robin, 479-7801

Educational

Hooked on Phonics, books & tape, \$150, Donna, 337-7642

Hearing

Telecaption II Decoder, \$25, Donald, 892-9038

Personal Care/Home Management

Bath Chair, w/commode, arm rests, back support, \$100, Catherine, 652-6641 after 5 p.m.

Commode, portable, arm rests, back support, neg., Maryanne, 737-6215

Geriatric Chair, BioCare 5000, 3-position, neg., Carol, 610-358-2137

Hospital Bed, Electric, \$200, Richard, 610-565-3636

Hospital Bed, Electric, 3-position, \$600, Stephen, 947-1637

Hospital Bed, Manual, Free, Harry, 855-1692

Hospital Bed, Electric, B/O, Sheree, 798-5572

Hospital Bed, Electric, adj., traction bar, \$1,500 or B/O, ask for Michele only, 368-8864

Hospital Bed, Electric, \$1,200, Billie, 322-7863 after 6 p.m.

Hospital Bed, Fully Adj., \$350, Ray, 738-1271

Hospital Table, B/O, Sheree, 798-5572

IV Pole, \$15, Sheila 697-8404

Knee Immobilizer, new, \$30, Dick, 239-4243

*Linear Pump, Wright, aids circulation, Free, Lucille,
836-1283*

Oxygen Concentrator, w/Alarm and D tank, B/O, Robert, 325-4063

Oxygen Machine, \$1K, Millie, 800-982-2248
Peristaltic Gradient Sequential Compression Pump, Negotiable, Joanne, 658-5878
Potty Chair, Child's (under 6) w/desk top, Free, Robin, 479-7801
Pulmo-Aide Compressor, \$40, Millie, 800-982-2248
Restraint Belt, neg., Maryanne, 737-6215
Shower Chair, extended seat, no wheels, back, \$25, Sheila, 697-8404
Shower Chair, nylon mesh seat, adj., reclines, \$50, Sheila, 697-8404
Stair Glide, Bruno, \$999, Gordon, 674-1264
Stair Glide, (2) Cheney, perfect condition, neg., Sandra, 239-7440
Stair Glide, Liberty Special, excellent condition, \$1.5K
or B/O, Joan, 239-4976
Stair Glide, Silver Glide II, neg., Jay, 734-8400
Stair Glide, \$300, Richard, 764-1714
Stair Lift, Silver Glide, 250lb load, at least 13 steps, \$2K, Elizabeth, 239-5064
Stair Lift, \$2,500, Brad, 517-773-2158
Suction Machine Carrying Case, Free, Lisa, 410-893-8614
Traction Belt, Foam Padded, neg., Maryanne, 737-6215
Transfer Belt, new, \$40, Dick, 239-4243
Transfer Board, new, \$30, Dick, 239-4243

Three/Four-Wheeled Powered Scooters

Explorer Motorized Cart, Model 4246, Ortho-Kinetics, Inc., used one year, many extras,
\$2,500, Alan, 610-970-1381
Ortho Kinetic Lift for Scooter, fits back of van, hatch back, or station wagon, \$600 or B/
O, Michael, 478-7401
Scooter, Omega, \$2K, Brad, 517-773-2158

Vehicles/Accessories

Braun Swing Lift for full-sized van, \$2,200, Ginny, 234-1512
Braun Power Door Opener w/remote control for lift and door, \$600, Ginny, 234-1512
Hand Brake/Throttle, new, GM, \$375, Barbara, 678-0515
Ramp, permanently attaches to a van, \$60, Elizabeth, 422-2896
Van, '88 Dodge Maxi Van, 2-tone brown, 50K, lift bed, toilet, storage, electric, \$20K or
\$12K to qualified buyer, Franklin, 368-4675
Van, '88 Ford E150 Van Ricon, sidedoor w/c lift, driver hand controls, remote control,
91K, \$6.5K or B/O, Jean, 325-2528
Van, '89 Ford E150, blue, Braun w/c lift, automatic, \$4.5K, Richard, 610-274-0242
'91 E-150 conversion van, handicapped equipped w/lift, swivel seat, hand controls, new
engine w/warranty, \$14.9K firm, Greg, 328-4500

Vision

CCTVs, may need some repair, Free, Carol, 737-6808

Voyager CCD, Telesensory, \$1,500, Nicholas, 645-6797

Wheelchairs/Accessories

Adult, Electric, w/recharger, E&J, \$1,500, Mary, 984-1225 after 6 p.m.

Adult, Electric, Joystick Hoveround, reclines, hi-back, video and manual inc., neg., Josephine, 764-5324

Adult, Electric, new w/battery & charger, reasonable offer, Albert, 738-0422

Adult, Electric, w/charger, manual inc., std, \$900, Dolores, 856-3261

Adult, Manual, \$550, Dick, 994-5565

Adult, Manual, Invacare, Jay Back, \$600 Firm, William, 652-1914

Adult, Manual, w/tilt & space w/headrests, \$300, Sheila, 697-8404

Adult, Manual, Invacare, \$150, James, 764-8008

Adult, Manual, large, B/O, Sheree, 798-5572

Adult, Manual, standard, almost new, \$200, Bert, 529-9005

Adult, Travel, lightweight, 17", w/footrest, \$200, Connie, 653-7341

Child, Quickie, Manual, w/tray, \$275, Vernessa, 655-9840

Child, Quickie P10, Electric, \$1,200, Richard, 610-565-3636

Child, Zippie by Quickie, Manual, Pink & Black, tilts, \$500, Jamie, 945-8668

Children's, variety, Free, Kristen, 672-1960

W/C Arm Rest, \$20, Dick, 239-4243

W/C Full Tray, \$30, Dick, 239-4243

Devices Needed:

Barrier Free Lift, Herb, 610-667-5051

Bike, Adult, 3-wheeled, Sandra, 875-8095

Hoyer Lift, Ralph, 368-5550

Lift for Rascal Scooter, Dawn, 738-5336

Lift Chair, willing to pay reasonable price, Sharon, 832-8356

Lift Chair, willing to pay reasonable price, Chris, 834-8734

Shower Chair w/back, wheels, and opening for commode, Herb, 610-667-5051

Tumble Forms Ready Racer/Star Car, willing to pay reasonable price, Katherine, 219-277-5849

Wheelchair Cushion (Roho), Herb, 610-667-5051

Wheelchair, 22", collapsible, Barbara, 834-2267

Wheelchair Parts, Meyra brand, Lisa, 410-893-8614

Wolf Communication Device, Kim/Karen, 323-9732

Note: If you are looking for items not on the list, please contact the Central Site office at 1-800-870-DATI. New items are added to the list regularly.

If there has been no activity or interaction with the contributor to the list within six months, items are automatically removed from the list. n

Third Annual AT Photo Contest: AT at Work, School, and Play

The RESNA Technical Assistance Project recently announced that it is again sponsoring an AT Photo Contest. They are looking for photographs illustrating the use of AT at work, at school, or at play. The following rules apply to all entries:

- Black and white or color photos only (no slides)
- Signed release form (all identifiable subjects) with each photo (copies of the release form can be obtained from DATI's Central site office)
- Winners must supply original negative or transparency
- Entries become the property of RESNA and will not be returned
- Label: name, address, phone, title, and brief description of AT

Mail entries to Photo Contest, RESNA Technical Assistance Project, 1700 N. Moore St., Ste. 1540, Arlington, VA 22209.

Last year's prizes included a round-trip airline ticket to the RESNA '98 conference in the Twin Cities (donated by Alexis Travel), a Sega Genesis 2 Sonic Spinball System and Bugs Bunny in Double Trouble game (donated by Sega Foundation), a \$100 gift certificate (donated by Circuit City Stores), a subscription to the *AT Journal* (donated by RESNA) and more!

Winners will be announced at RESNA '98 in Minneapolis. n

**To contact DATI's Central Site office
or the ATRC closest to you...
Call 1-800-870-DATI**

Press #1 for English
or
Press #2 for



#3 for the Central Site office or
#4 for the New Castle County ATRC or
#5 for the Kent County ATRC or
#6 for the Sussex County ATRC

TDD callers—If you do not press #1 or 2 your call will be answered on a TDD line by someone at the Central Site office.