



The AT Messenger

bringing technology to you

Delaware Assistive Technology Initiative (DATI) • Volume 8, No. 4 • Fall 2000

Assistive Technology and the IDEA: New Revisions Mean a Greater Role for Technology in IEPs

Penny Reed and Gayl Bowser, Reprinted from Exceptional Parent Magazine, Sept 1999, pp. 54-58.

Although school districts have been required to provide assistive technology devices and services since 1990, in many cases assistive technology was treated as a “special area that was separate from the general delivery of services.” In some cases assistive technology was only thought about for children with very severe disabilities or only for those with physical and speech disabilities. The 1997 revision of the Individuals with Disabilities Education Act (IDEA '97) included

many new requirements for school districts.

One of those new requirements is the group of “special factors” which each IEP (Individual Education Plan) team must consider.

Assistive technology is one of those special factors. The requirement states simply, “In developing each child’s IEP, the IEP team shall consider whether the child requires assistive technology devices and services.” Now each IEP team in every school district is specifically required to focus on the need for assistive technology. So what should be different in your IEP meeting now that your IEP team is required to consider your child’s need for assistive technology? You can request that the IEP team consider assistive technology for your child.

What to Expect on Assistive Technology Consideration in the IEP Meeting

Generally, the discussions about assistive technology should come after you have agreed upon

the goals that your child will be expected to attain in the next 12 months. It is not possible to make a decision about assistive technology until you can talk about the specific tasks that your child will be trying to accomplish. According to IDEA '97, an assistive technology device is defined as “any item, piece of equipment, or product system, whether acquired commercially off-the-shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of a child with a disability.” The functional capabilities of the child in any situation are directly related to the tasks that he or she is trying to accomplish. There is different assistive technology to be considered for your child in meeting a goal in arithmetic than in meeting a goal in writing.

“Considering” assistive technology should involve some discussion and examination of potential assistive technology. It should not be someone saying without discussion, “No, he doesn’t need ‘assistive technology.’” Consideration is defined in the American Heritage Dictionary as “to think carefully about, to form an opinion about, or to look at thoughtfully.” Congress did not choose that word by accident, but clearly intended that there would be some thought about whether assistive technology may be needed. Even

continued on page 2

Mark Your Calendars!

• Inclusion Conference, Nov. 15, 2000, Sheraton Dover Hotel

• LIFE Conference, January 25, 2001, Sheraton Dover Hotel



Assistive Technology and the IDEA (continued)

though assistive technology may not have been discussed for your child in the past, it should be discussed from now on at each IEP meeting.

A brief discussion of which assistive technology might be useful and whether it is needed should be included in the consideration. In order to do that, someone on the IEP team will need to be sufficiently knowledgeable about assistive technology. This person may bring along specific resource information about assistive technology to help the team members focus on what assistive technology exists for the tasks that are challenging to your child. That information might be books, catalogs, printouts from a Web site, or actual hardware or software for you to see.

The discussion should be brief, lasting at least a minute or two, but no more than 15 to 20 minutes. Congress intended that we could do this within the confines of an IEP meeting, so it should not add appreciably to the length of that meeting. If understanding and agreement cannot be reached in 20 minutes, then it is possible that there are questions that need to be addressed in another forum such as an assistive technology evaluation.

After discussing the use of assistive technology itself, you should then talk about assistive technology services. School districts are required to provide both the devices and the services. Specific assistive technology services may include:

- An evaluation of your child's need for assistive technology; training of your child, members of your family, or staff on how to use the assistive technology;
- Technical assistance about its operation or use;
- Modification or customization of the assistive technology; and
- Other supports for the school personnel that might be necessary for the assistive technology to be appropriately used.

What those other supports might be is not specified in the law. It could include any-

thing that is needed, for example, putting new vocabulary in an augmentative communication device, or scanning new materials into a software program that reads the text, or the planning of how and when these things will happen and who is responsible.

You should expect that someone on the IEP team will know how to access assistive technology services within your school district. In a small district it may be that the direct service providers who work with your child (i.e. the teachers, therapist, and aides) will need to provide all of the services themselves. In a larger district, there may be individuals whose entire job is assistive technology and they need to be contacted through appropriate channels so they can help your child's service providers.

Indicators of Appropriate Assistive Technology Consideration

In 1988, a multi-disciplinary group of assistive technology service providers came up with descriptions of the characteristics of appropriate AT services in schools. Called "Quality Indicators," these descriptions can be found on the Quality Indicators for Assistive Technology Web site: <http://sac.uky.edu/~jszaba0/QIAT.html>. As part of this work, the group developed specific quality indicators of appropriate assistive technology consideration.

They are:

- The IEP Team has the knowledge and skills to make informed decisions about assistive technology.
- A continuum (continuous range of choices) of AT devices and services is explored (considered).
- The IEP Team uses a decision making process when deciding.
- Decisions are made based on IEP (or IFSP) goals and objectives.
- Team decisions are made in compliance with federal and state statutes.
- Determination of the need is based on data about the student, his or her environment, and tasks.

**Full-day session
on Quality
Indicators for AT
featured at the
November 15
Inclusion
Conference!
See page 9 for
details.**

continued on page 3

Assistive Technology and the IDEA (continued)

- Decisions and supporting data are documented.

Using Quality Indicators in Your IEP Meetings

Quality Indicators are somewhat general. However, they provide guidance for the IEP team as they reflect on their own processes and what they might do to improve those processes. They give you some idea of what your IEP team might need to do to appropriately consider your child's need for assistive technology. One of the most common results of consideration is the decision to try some things to see if they work. This trial period, or extended assessment, is one of the key factors in successful and effective decision making about assistive technology. No IEP team should ever write down the name of any assistive technology as the specific item a school district will provide, unless that assistive technology has been tried first to determine that it performs as intended and has the desired effect for the child.



guide them through the consideration process.

It asks the team to answer these questions:

- What task(s) is it that we want this student to do, that s/he is unable to do at a level that reflects his/her skills and abilities?
- Is the student currently able to complete tasks with special strategies or accommodations? If yes, describe them for each task.
- Is assistive technology currently being used? If yes, describe it.
- Would the use of assistive technology help the student perform this task more easily or efficiently, in the least restrictive environment, or perform successfully with less personal assistance? If yes, list that assistive technology.
- Are there assistive technology services that this student needs? If yes, describe.

First Steps

The requirement for every IEP team to consider the need for assistive technology is a step forward. In many cases this is a giant step forward, because it has caused school districts to “break out of the box” and begin to think about assistive technology for many children who had previously been overlooked in the provision of assistive technology. It is an opportunity for parents to encourage a thoughtful discussion of the potential use of assistive technology for their child. From these first steps, the road to success may be much more accessible. ■

This article appeared in the Exceptional Parent Magazine, Sept. 1999, Penny Reed and Gayl Bowser, pg. 54-58. Reprinted with the expressed consent and approval of Exceptional Parent, a monthly magazine for parents and families of children with disabilities and special health care needs. Subscription cost is \$36 per year for 12 issues, Call 1-877-372-7368. Offices at 555 Kinderkamack Rd. Oradell, NJ 07649.

Using a Form to Guide Consideration of Assistive Technology

Some school districts and state education agencies have developed specific forms to assist the IEP team as they consider each child's need for assistive technology. One example, the “AT Consideration Guide,” can be downloaded from the Wisconsin Assistive Technology Initiative's Web site: <http://www.wati.org>. This form was developed as a tool that IEP teams could use to

Technology to Benefit “Homebound” Students

*Brian J. Hartman, Esq., Project Director,
Disabilities Law Program*

Recent developments in Delaware hold great promise for “homebound” students. Students unable to attend school for extended periods due to illness or injury have typically been offered instruction at home. School districts generally followed Delaware

Department of Education guidelines and provided 5-10 hours of such instruction on a weekly basis. For example, a student recovering from surgery would receive 1-2 hours of individual instruction from a visiting teacher in late afternoon from Monday through Friday. The teacher would check with the student's classroom instructors, offer tutoring following the class-

continued on page 4

Technology to Benefit “Homebound” Students (continued)

room curriculum, and administer and grade assignments and tests. This approach was adopted for *both* special education students and those lacking special education eligibility.

In the Spring of 2000, the Department proposed revisions to homebound regulations which provided an exciting opportunity to enhance homebound students’ instruction. The Disabilities Law Program (DLP) prompted several amendments, including upgrading the traditional homebound model with technology.

Special Education Regulations

Previous versions of Delaware special education regulations in the late 1970s and early 1980s authorized a home-school telecommunication system for homebound students. However, it was rarely, if ever, implemented and the authorization had been deleted from the regulations by the early 1990s. In the Spring of 2000, the Department completely rewrote its special education regulations and once again omitted any authorization for use of telecommunication technology. The DLP, with the support of several councils, advocated for a regulatory “comment” endorsing a classroom-home telecommunication system. The DLP noted that advances in technology had made videoconferencing commonplace, colleges were successfully offering “live” remote site access to lectures, and homebound students would benefit from classroom “hook ups” to their current teachers and classmates.

The Department ultimately agreed and added the following official comment to the regulations:

DOE Note: The IEP team may find that such modern telecommunication technology as videoconferencing allows for medically fragile students or those with contagious diseases to “participate” in classroom activities. —Administrative Manual for Special Education Services (AMSES), Section 6.8.5 (effective July 1, 2000)



Non-Special Education Regulations

At the same time, the Department also issued proposed “homebound” regulations applicable to all students, not only those eligible for special education.¹ These regulations had several deficiencies. First, they adopted a “cap” or upper limit on hours of homebound instruction. Second, they authorized no accommodations for students with disabilities eligible for special education under federal laws such as Section 504 and the Americans with Disabilities Act (ADA). Third, they repealed a requirement that the homebound instruction follow the student’s curriculum. Fourth, they disallowed homebound for chronic conditions or illnesses. Finally, they repealed an authorization for “a home to school telephone instructional system.”

The DLP once again rallied the opposition to the proposed regulations.² The Department deferred to the DLP’s recommendations and completely rewrote the regulations to address all concerns. First, the “cap” or upper limit on homebound hours was deleted. Second, a section was added to clarify a district’s duty to accommodate students covered by Section 504 or the ADA. Third, homebound instruction was once again linked to the student’s curriculum. Fourth, homebound instruction was authorized for chronic conditions. Finally, an explicit authorization to use technology was added:

Section 3.1. Supportive instruction shall adhere to the extent possible to the student’s curriculum and shall make full use of the available technology in order to facilitate the instruction.

The amended regulation was formally adopted by the State Board of Education on July 20, 2000.

The Next Step: A Pilot Project

Although the regulations *authorize* home-school telecommunication systems, districts may realistically lack the expertise and resources to *develop* such systems. The DLP is attempting to

continued on page 5

Technology to Benefit “Homebound” Students (continued)

bridge this gap by promoting a pilot project.³ On July 12, with the endorsement of the Department of Education, the DLP promoted approval of funding by the Delaware Developmental Disabilities Council for a demonstration project. The Council was asked to solicit proposals to research available technology, establish a pilot home-school telecommunication system in conjunction with 1-2 school districts, and assess its effectiveness. Unfortunately, the Council was constrained to defer consideration of all new projects pending a review of available funds. Hopefully, funding will be available through either the Council, a foundation, or alternate source to demonstrate the viability of enhancing the education of homebound students through technology.

Conclusion

In conclusion, recently adopted regulations

authorize the use of home-school telecommunication systems for homebound students. With advances in technology, access to such systems should eventually become commonplace. In the meantime, a pilot project is needed to demonstrate the pros and cons of such a model. ■

Notes

¹ The proposed amendments were published at 3 DE Reg. 1338 (April 1, 2000) and republished at 3 DE Reg. 1661 (June 1, 2000). The regulations can be viewed on the Web at www.state.de.us/research/assembly.htm by clicking on the link for “register of regulations.”

² The DLP’s analysis was adopted by the State Council for Persons with Disabilities and incorporated in an April 18, 2000 memorandum to the Department. The letter is available on the Web at www.dedisabilityalerts.org/position/homeboundregs.html.

³ The use of telecommunication systems to assist students with disabilities is highlighted in some recent articles. See, e.g., L. Kinross, “Technology Breaks Down Barriers,” 30 *Exceptional Parent* 56 (June, 2000); and V. B. Ira, “Katie’s Amazing Videoconferencing System,” 30 *Exceptional Parent* 40 (June, 2000).

AT in Delaware Schools

The majority of educators responding to a DATI/DE Department of Education (DOE) survey agreed that AT is often the key to successful education outcomes. The DOE is supporting AT availability for students through several important activities. First, it has funded a pilot project in three districts aimed at familiarizing educators with AT options and the ways they can be used to promote access to the curriculum. Teams in Red Clay, Caesar Rodney, and Milford districts have worked with DATI to design training and technical assistance programs that meet the unique needs of their districts. Two of the districts intend to build teams with AT expertise at a district- and building-level. Districts will schedule activities to raise the AT awareness of all staff—not just special educators—and all districts will conduct targeted trainings for staff. DATI hopes to expand this program to include other districts in the coming years.



The DOE is also helping DATI make the “latest and greatest” equipment and software available through the AT Resource Centers statewide. With financial support from DOE, DATI will add cutting-edge access technologies, software, and communication devices to its existing inventory. These will be available for no-cost demonstrations and short-term loans to educators, parents and students so that they can make sure a product meets their needs before they invest in its purchase.

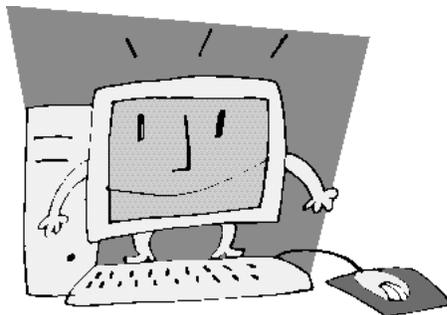
Finally, the new statewide form for the IEP (Individualized Education Program) prompts the education team to think about the accommodations—including AT—that a student might need in order to be successful in school. DATI is in the process of developing materials that will help the IEP team identify and implement tools to further learning and participation.

You’ll hear more about this in a future issue of *The AT Messenger*. ■

Learning Disabilities and Assistive Technology: How Can AT Help My Child?

by Dan Fendler, Assistive Technology Specialist, Kent County

Children may have difficulty learning because of any number of “learning disabilities” (LD). This article will focus on some assistive technology (AT) that may be useful for children with LD. First, some basics about learning disabilities.



NCLD’s website: www.nclld.org.)

If you suspect that your child might have a learning disability, it is important to speak to school personnel. They will arrange to have your child evaluated by the appropriate professionals. The presence of one or more of the symptoms described does not necessarily mean that your child has a learning disability.

What Is a Learning Disability?

According to the Individuals with Disabilities Education Act (IDEA), a learning disability is a “disorder in one or more of the basic psychological processes involved in understanding or in using spoken or written language, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations.” According to the law, learning disabilities are *not* learning problems caused solely by visual, hearing, or motor disabilities; mental retardation; or environmental, cultural, or economic disadvantage.

What Are the Signs of a Learning Disability?

According to the National Center for Learning Disabilities (NCLD), some indicators to look for are: preschool children may have pronunciation problems, slow vocabulary growth, or trouble learning numbers, letters or days of the week. They may also be extremely restless, have difficulty learning right from left, or have trouble interacting with playmates. School-age children in lower grades may have trouble reading, spelling or following directions. They may be slow to recall facts, easily distracted, or have poor spelling or trouble with letter formation. Children in middle school may exhibit poor reading comprehension, have trouble with word problems, or have poor, illegible writing. Those in upper grades may have a poor written expression, trouble studying for tests, or poor grasp of abstract concepts. (Learn more from

Getting Evaluated—the Individualized Educational Program (IEP)

If the results of testing show that your child does have a learning disability, your child will be eligible to receive special education services. Every child who is classified as learning-disabled must receive an IEP, which is a written statement describing the approach designed to meet your child’s special needs. The law requires that every child receiving special-education services have an IEP, and states that parents have the right to participate in the development of this document.

My Child Has a Learning Disability; What Can I Do?

One of the first things you should do is find out more about learning disabilities and the IEP process. A good starting point is **LD OnLine** (www.ldonline.org), a service of The Learning Project at WETA, Washington, D.C., in association with The Coordinated Campaign for Learning Disabilities. The more you know, the more you will be able to help your child.

Assistive Technology Products for Students with Learning Disabilities

If your child has difficulty with reading or writing, you may find one or more of the following products— available in the DATI Assistive Technology Resource Center (ATRC) near you—to be helpful.

continued on page 7

How Can AT Help My Child? (continued)

Reading

CAST's **eReader** is designed to support all readers in school, at home, and at work. It has particular applicability for non-readers and readers with learning disabilities, visual disabilities (for example, low vision or difficulty tracking), mobility challenges, or those who use English as a second language. With Windows **eReader** you can have any text read aloud (with a voice you select), see text highlighted as it is being read, control the way reading voices sound, enter text and have it read back to you as you type. **eReader** also works with Internet Explorer to assist with "surfing" and reading web related text.



Another product, **L&H™ Kurzweil 3000** reads scanned or electronic text aloud using human sounding synthetic speech (**L&H™ RealSpeak™**). Words are highlighted as they are spoken. The biggest difference between the two software packages is that, with Kurzweil, you can scan printed matter and have it read aloud. This feature would be particularly useful for scanning pages of a school textbook.

Writing

Word prediction programs are designed to help those who struggle with writing due to language delay and learning or physical disabilities. Word prediction packages facilitate the writing process. As you enter text, word prediction software prompts you with word choices

that fit logically into the sentence. They work well with most text-based packages (word processors, email, etc). These programs can also help reduce the number of keystrokes needed to type complete sentences.

The ATRCs have two word prediction packages, **Co:Writer** (by Don Johnston, Inc) and **EZ Keys** (by Words +), which have similar features but a slightly different appearance. Both work with any word processor or text program. Both have built-in intelligence that predicts logical word choices. Both "remember" frequently used words and include them in the choice list.

Note taking

If your child has poor handwriting, note taking devices allow users to type, edit, and electronically store text (for example, reports, essays, email messages or notes) without being at a computer. The text can be transferred to any computer for formatting, or directly to a printer. Most devices also include a spell checker. They are relatively inexpensive (most sell for around \$200) and fairly rugged. The **AlphaSmart 3000**, the **Laser PC6**, and the **QuickPad** are common note taking devices.

If you think your child might benefit from the use of any of these devices, discuss them with his or her teacher or therapist. Stop by the ATRC, and one of our AT Specialists will be happy to talk to you about options and show you how the various products work. ■

Adapted Physical Education

By Amy Bowles, AT Specialist

Federal Law (PL 94-142, PL 101-476, PL 105-17) mandates that physical education be provided to students with disabilities.

Adapted Physical Education (APE) adapts or modifies the curriculum, task, and/or environment so that all students can participate fully in physical education.

The following suggestions give ways that

teachers can modify different sports so that students with special needs can participate with regular education students.

Basketball is a popular sport for students of all ages. A more brightly colored ball or a ball that makes noise allows a student with a visual impairment to locate the ball during play. If a child in a wheelchair is part of the class, the rules could be modified to allow the student to

continued on page 8

“dribble” the ball by carrying it in his/her lap since propelling the wheelchair down the court takes both hands. Other adaptations might



include lowering the goal or making it larger.

A student with a weak grasp or a lack of fine motor control could be excluded from the sport. The club grip could be adapted by making it smaller as necessary.

Or a club with a larger head might be another option. Tees could be used for all shots, and the distance to the hole could be shortened if needed.

Volleyball can also be adapted for people with varying disabilities. The teacher could hold the ball and have the student hit it. Additionally, having the student stand closer to the net to serve and reducing the playing court are other possible adaptations.

Adapting softball for people with varying disabilities offers many different options.

Again, for someone with a visual impairment, a ball that makes noise or that is larger or more brightly colored may prove to be beneficial. For someone with a physical disability, the base distances could be reduced, the pitching distance could be shortened, or a batting tee could be used. Adapted bats (larger, smaller, or lighter) could be used and so could velcro bats and gloves.

These are just a few of the suggestions from the physical education website www.pe.central.vt.edu. This particular website also has links to other adapted physical education websites and is a great information resource. Other places to look include: www.proteacher.com; Flaghouse Recreation Catalog, Abilitations Catalog, and Play with a Purpose Catalog

If you have any questions or would like additional information, please feel free to contact your local ATRC. ■

Positioning for Participation

Michael Meyreles, ATP
Nancy Chipman Ranalli, P.T.
New Castle County ATRC

For a typically developing student, “positioning” in the classroom may mean sitting at a desk that is the correct size and the appropriate distance from the blackboard. For a student with special needs, positioning for participation in classroom activities can mean much more. This article highlights a few of the positioning products available to make a student’s participation in the classroom more therapeutic and educational.

Standing Position

Standing is a very important activity for most students with special needs. The standing position allows weightbearing through the feet and legs, helps stretch tight muscles (from sitting in a wheelchair), encourages neck and trunk strengthening, and can aid digestion and circulation. There are many different types of standing devices. Supine (backlying) standers pro-

vide support from behind, while prone (stomachlying) standers provide support from the front. Both types of standers tend to have side (lateral) supports to help the student maintain a midline position and straps to control the student’s trunk and pelvis. These standers are adjustable so that the student’s position can range from nearly flat to fully upright. In addition, standers typically have trays, which allow various school activities, communication devices or toys to be placed within the student’s reach. Additionally, these devices are usually on wheels, allowing the student to be moved around the classroom. This encourages more interaction with the environment and enhances the student’s head control.

Free standers or standing boxes allow the student to stand in an upright position while providing support for the feet, knees, hips, pelvis and trunk to help maintain an upright, midline position. Unlike prone or supine standers, these types of standing devices

continued on page 9

Positioning for Participation (continued)

require the student be able to tolerate a fully upright position. As with the prone and supine standers, standing boxes typically have a work surface for the student's classwork. In the classroom, a student could be standing for nearly any activity—story time, math activities or even music class.

Seated Position

Sitting devices are numerous. The most common type of sitting device is, of course, the wheelchair. Wheelchair positioning affects a person's ability to interact with peers, participate in classroom activities, and function independently. Additionally, since the wheelchair is most likely the device the student uses most often, proper positioning in the wheelchair can prevent skin breakdown and deformity.

In most cases, the wheelchair should be viewed as an "additional" positioning device, not the sole device.

Other sitting devices include posture chairs, corner chairs and bolster chairs. These devices provide support where needed, whether it be laterally (on the side), posteriorly (in the back) or anteriorly (in the front), by using pads, straps and supports. They allow the student to concentrate on school activities, rather than expending a great deal of energy trying to keep his/her head and trunk erect. The type of chair selected depends upon the student's particular needs and the goals of sitting.

Floor Positioning

Floor (or mat) positioning can also be appropriate for the classroom. Positioning a student on the floor in sidelying or stomachlying allows the student the opportunity to get weight off the buttocks, thus preventing pressure sores. Additionally, floor positioning promotes stretching of various muscles, such as the back and hip muscles, which may get tight from sitting in a wheelchair. Various foam pieces, including wedges, bolsters and half-rolls allow the student to be positioned safely. This position would be appropriate for art activities because a supported prone position can leave one or both hands available for drawing. A supported sidelying position may allow a student more freedom of movement of his/her arms which may enhance classroom participation.

A student with special needs does not need to remain in a wheelchair for all classroom activities. Various positions—and positioning devices—are appropriate for many students. Before trying any device, it is important to consult with a physical therapist (PT) or occupational therapist (OT) who is familiar with the student. Many factors need to be considered when using a positioning device, and the student's PT or OT can make recommendations. Once the device is set up, and appropriate instruction provided, the classroom teacher or aid should be able to position the student to make the most of his/her day at school. ■

Inclusion Conference 2000

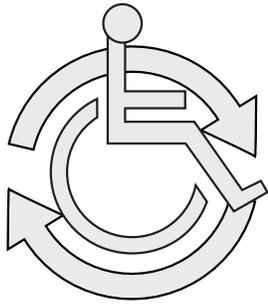
The Seventh Annual Inclusion Conference will be held in Dover on November 15 from 8:30–3:15 at the Sheraton Dover Hotel.

Educator Barbara Buswell, from PEAK in Colorado will deliver the keynote address, "Making Inclusion Work: Examples from the Field." She will then present one of the concurrent sessions, "Deciding What to Teach and How to Teach It in Inclusive Elementary Schools." Other sessions include "Quality Indicators for Assistive Technology Services in School Settings (QIAT)" presented by Joy

Zabala, "Positive Behavioral Support" presented by Mary Ann Mieczkowski and Brian Touchette, "Building Collaborative Classrooms for Everyone" presented by Jerry G. Petroff, and "IEP Goals and Objectives: How Do We Know When We Get There?" presented by a group of Delaware teachers.

Registration materials will be available in late September, and registration cost is \$15. For more information, contact DATI at 1-800-870-DATI (in-state) or 302-651-6790.

Barbara Buswell will also be appearing at a special Parents' Night on November 14. ■



Delaware Recycles Assistive Technology

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, then press 3 for the DATI Central Site office. All prices are negotiable and all area codes are 302 unless noted. You may also find an up-to-date recycle list on the DATI web site: <http://www.asel.udel.edu/dati/recycle/index.html>.

Devices Available

Ambulation/Mobility

Pony Walker, for child, B/O, Debbie, 732-6007
Walkers, pediatric, varying sizes, excellent condition, Meredith, 831-5854

Communication

Artificial Larynx, B/O, Wes, 243-1444, 633-1815 (pager)
DynaVox 2C, perfect condition, 3 yrs. old, \$3,000, Andrea, 212-605-0423
DynaVox 3100, back up kit, carrying case, mini cup switch, communication desk mount kit, new, \$3,000, Angela, 834-9574
DynaVox Mounting System, new, never used, \$100, Debbie, 732-6007

Hearing

TTY 4425 w/answering machine, printer, and direct connector, \$200, Christy, 765-0194
TTY, 800-232-5470 Relay
TTY, good for travel, no printer, \$50, Christy, 765-0194 TTY, 800-232-5470 Relay

Computers/Software

Powermac 4400/200 PC, \$1,000; Apple Multiscan, \$200; high resolution printer, \$200; 10' nonlaser printer cable, \$12; above computer & components can be purchased separately or as a pkg. for \$1,412, Margaret, 836-0559
Co:Writer & Write:OutLoud/Mac, \$200; Simon Sounds It Out, \$18; Access to Math, \$39; Intellikeys/Mac, \$200; Set of 3 Living Books--*Arthur's Birthday*, *Arthur's Teacher Trouble*, & *Little Monster at School*, \$20; No 1 & 2 Instant Access Sets for Living Books, \$12; IntelliTalk/Mac, \$20; IntelliPics, \$60; hands-on Concepts/Mac, \$39; Holidays Coloring

Book, \$27; Learning to Tell Time, \$27; Set of 4 Edmark Software-Millie's Math House, Bailey's Book House, Sammy's Science House, & Thinkin' Things, \$25; Set of 4 Instant Access Overlays from Edmark, \$30; above software can be purchased as a pkg. for \$706 or separately at prices listed above, Margaret, 836-0559

Personal Care/Home Management

Alternating Air Pressure Relieving Bed, fully computerized, full size, made w/Gortex for prevention of skin breakdown, operates on 120 volts, used 3 months, \$10,500, Barry, 716-924-0409
Bath Chair, arm rests, back support, \$30, Kathy, 644-2214
Bath Chair, w/back, no arms, \$15 or B/O, Alison, 427-0405
Baby Monitor, Gerry Model 611, \$15, Becky, 594-6576 day, 292-1834 evening
Bedside Commode, (2), \$15 ea. or 2 for \$25, Alison, 427-0405
Bunny Boots, keeps ankles from dropping, free, Regina, 369-4089
Commode, fits over toilet or stands alone, arms, brand new, \$30, Tony, 378-3780
Commode, back & arms, perfect condition, free, Anne, 655-9237
Commode Chair, portable, wheels, arm rests, child/youth ages 8-15, \$300, Lynn, 610-869-7407
Commode Stand, Luminex, includes bucket & splash guard, \$15, Becky, 594-6576 day, 292-1834 evening
Formula Stepper/Climber Exercise Equipment, \$900, Lynn, 610-869-7407
Hospital Bed, electric, adj., traction bar, \$1,500 or B/O, ask for Michele only, 368-8864
Hospital Bed, electric, w/ rails, needs assembly,

\$250, George, 945-4375
Hospital Bed, manual, side rails, excellent condition, \$200, Angela, 834-9574
Leg Pump, for circulation, needs liners, \$500, Jessica, 410-546-5006
Lift, Hoyer, w/ slings, \$50, Angela, 834-9574
Lift, Invacare, w/ slings, \$200, Angela, 834-9574
Lift Chair, blue, used 3 months, \$365, Elaine, 349-5197 evenings
Lift Chair, blue tweed, \$100, Gil, 798-5179
Oxygen Tanks, (3), aluminum, gauges, pull cart, \$100, Marcene, 478-3905
Quiver, holds mouth sticks, pencils, etc., free, Regina, 369-4089
Ramp, EZ Access, portable, 7', \$300, Richard, 239-4243
Regulator for H Tank, \$150, Doris, 834-5769
Shoes, P.W. Minor leather, extra-depth shoes, taupe, size 6, 3W, \$170 new, \$100, Becky, 594-6576 day, 292-1834 evening
Stair Glide, 12', needs new control box, \$500, Jessica, 410-546-5006
Stair Glide, covers approx. 6 steps, free, Barbara, 764-9007, Mary Ann, 477-0550
Tens Unit, Century 2100, carrying case & supplies, B/O, Sharen, 856-0969

Recreation

Bicycle, Joy Rider, adult, 3 wheeled, w/ basket, \$250, George, 945-4375

Three/Four Wheeled Power Scooters

Legend Pride, 3-wheeled, dismantles into 3 pieces, \$1,700, Rick, 239-7187
Rascal 240, 3-wheeled, long frame, blue, \$1,350, Edna, 335-3428
Rascal, 3-wheeled, \$1,200, Elaine, 349-5197 evenings
Rascal, convertAble 4-wheeled, joystick control, \$2,000 or B/O, James, 731-7768
Shop Rider, 4-wheeled, battery charger, less than 1 yr old, \$2,000, Richard, 215-465-3170

Vehicles/Accessories

Hand Brake/Throttle, new, GM, \$375, Barbara, 678-0515
Lift, Bruno, for van, \$1,600, Bonnie, 836-5892
Lift, attached to an aluminum platform, can

attach to the back of a vehicle with a hitch, \$650, Elaine, 349-5197 evenings
Pac-All, w/c carrier & cover, requires a Class 1 hitch installed on vehicle, purchased 12/99, used once, instructions available, \$250, Becky, 594-6576 day, 292-1834 evenings
Van, Chevy Astro, rear w/c lift, 55,000 miles, loaded, extended warranty, Michael, \$16,995 or B/O, 737-3163
Van, 92 Ford conversion van, Braun w/c lift, w/c tie downs included but not installed, less than 50,000 miles, \$10,800, will sell with or without w/c lift, John, 934-5088
Van, 98 Ford Windstar GL Advantage mini van, summit conversion, air kneel, power door & ramp, remote entry, automatic tie downs, rear air & heat, 25,000 miles, \$30,000, Angela, 834-9574
Van, 96 Chevy conversion, w/c lift, vcr & tv, all power, approx. 33,500 miles, \$16,900, Betsy, 610-358-3743

Vision

Video Eye, w/ 27" monitor, \$1,800, Joanne, 678-3453
Video Magnification System, Aladdin, 14", B&W, new, 2 yr. warranty, \$1,000 firm, Jean, 764-5337

Wheelchairs/Accessories

Advantage Flo Wheelchair Cushion, 18 x 16" otto back, \$250, Elsie, 999-7985
Children's, variety, free, Kristen, 672-1960
Gel Cushions (2), will sell separately, \$250 for 2, George, 945-4375
Wheelchair Pad, posey quilted; peach, turquoise, & white plaid; \$10, Becky, 594-6576 day, 292-1834 evening
Mobile arm supports for wheelchair, right & left, free, Regina, 369-4089
Power, adult, standard, needs batteries & tires, \$500, Jessica, 410-546-5006
Power, adult, standard, E & J Marathon, needs batteries & charger, will deliver within the state, free to good home, Carol, 577-4791 x13 day, 994-6908 evening
Power, adult, standard, new, \$3,000, Judy, 655-9408
Power, pediatric Quickie Zippie Tilt-N-Space,

Jay GSII back, lavender, free courtesy of the KMB Foundation, Jim or Teisha, 292-2346
 Manual, adult, Invacare, w/Jay back, \$600 Firm, William, 652-1914 after 9 p.m.
 Manual, adult, Invacare Action, ventilator tray, head rest, cushions, never used, \$500, Angela, 834-9574
 Manual, pediatric Tilt-N-Space, able to hold a portable ventilator, Jay cushion, green, free courtesy of the KMB Foundation, Jim or Teisha, 292-2346
 Manual, pediatric, Quickie, age 4-8, B/O, Debbie, 732-6007
 Manual, pediatric ages 4-8, free, Lynn, 610-869-7407
 Manual, pediatric, ages 8-10, free, Marge, 945-4675

Devices Needed

Bike, stationary, willing to pay reasonable price, Beth, 994-6865
 Computers, willing to pay reasonable price, Sandy, 645-4664
 Computer, willing to pay reasonable price, P.J., 349-9116
 Easy Stand, willing to pay a reasonable price, Ralph, 368-5550
 Exercise Equipment, indoor, willing to pay reasonable price, Beth, 994-6865
 Hospital Bed, low to the ground, willing to pay reasonable price, Ruth, 422-5294
 House, accessible, in Delaware, willing to pay reasonable price, Lorenzo, 201-930-9819
 Laptop computer, PC compatible, willing to pay reasonable price, Helen, 764-6220
 Minivan, accessible, willing to pay reasonable price, Lorenzo, 201-930-9819
 Print enlarging system, attaches to a television, willing to pay reasonable price, Robert, 798-9259.
 Ramp, portable, Kenneth, 697-1816
 Rehab Shower Commode Chair, adult, willing to pay reasonable price, Rosalba, 239-5114
 Scooter Lift, fits into trunk of car, willing to pay reasonable price, Zoan, 697-1291
 Touch Screens, for 15" & 17" monitors, willing to pay reasonable price, Sandy, 645-4664
 Van, wheelchair accessible, willing to pay rea-

sonable price, Ruth, 422-5294
 Van, wheelchair accessible, willing to pay reasonable price, Michele, 846-0789
 Wheelchair, adult, manual, donation only, Fred, 283-1741
 Wheelchair, adult, manual, Barbara, donation only, 422-1510
 Wheelchair, adult, manual, lightweight, similar to a stroller, willing to pay reasonable price, Asha, 737-2098
 Wheelchair, adult, manual, standard, high back, recliner, willing to pay reasonable price, Kenneth, 697-1816

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

Note on liability: The DATI assumes no responsibility for the condition of any products exchanged through this information service. It is the responsibility of the owner to provide accurate information about product specifications and condition. Additionally, terms or arrangements made for any product exchanges are the sole responsibility of the exchanging parties.■

To Contact DATI's Central Site office or the ATRC closest to you, call 1-800-870-DATI

Press
 #1 for English or
 #2 for Spanish,

then press

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

TDD callers: Do not press #1 or #2 and your call will be answered on a TDD line at the Central Site office.

DATI PUBLICATIONS LIST



The following publications are available from the DATI Publications Office. All prices include shipping and handling (ask about large quantity orders). Please be sure to indicate the items you wish to purchase and include a complete mailing address for shipment.

Funding Fact Sheets

Set of five fact sheets providing overviews of the policies and practices of five major funding streams in Delaware relative to assistive technology.

Price: Single copies are free. 2–9 copies are \$1.00 ea. 10 or more copies are 50¢ ea.

Public Schools

Medicaid

Medicare

Voc Rehab & Independent Living

Social Security

Set of five (single set is free, 2-9 \$5.00/set, 10 or more copies \$2.50/set).

1997 Guide to Funding Resources for Assistive Technology in Delaware

Comprehensive guide to the primary resources for assistive technology funding in Delaware. The guide contains information on eligibility, coverage policies, and application procedures. The material is bound, with index tabs for convenience.

Prices: 1–9 copies are \$20 ea. 10 or more copies are \$15 ea.

Assistive Technology: The Right Tools for the Right Job

A video profiling Delawareans working in their chosen professions with support from assistive technology. (Please indicate: open-captioned or closed-captioned format)

Prices: 1–9 copies are \$15 ea. 10 or more copies are \$10 ea.

Independence Through Technology Video

An introduction to the many ways in which assistive technology can impact lives. The video contains information about the DATI and other AT resources in Delaware. (Please indicate: English or Spanish)

Price: \$10 ea. (any quantity)

Free Publications

Independent Living Brochure Series

Five colorful brochures describing the benefits of assistive technology for activities of daily life.

You Can Get There From Here (Reaching and mobility aids)

Zip It Up (Clothing adaptations and dressing aids)

Around the House (Housecleaning and storage)

Cleanliness Is Next To... (Personal care and grooming)

What's For Dinner? (Cooking and dining)

Set of Five Brochures

*More publications
and order form on
the other side!*

Delaware Recycles AT Brochure

Description and contact information about the DATI's equipment recycling program—including punch-out Rolodex card for easy reference.

Selecting & Obtaining Assistive Technology Brochure

Outline of steps to be taken in acquiring assistive technology, including assessment, vendor selection, funding, training, and follow-up.

ORDER FORM

Ship to: Name _____ Title _____
 Affiliation _____
 Address (check one) Business Residence _____

 City/State/Zip _____
 Phone: Business _____ FAX _____ Residence _____
 Email Address: _____
 I am a: consumer family member friend/advocate professional other _____
 For printed materials, I need: braille large print 15/16 audiotape 1-7/8 audio-tape Spanish

Items:

Make checks payable to: University of Delaware/DATI (EIN 51-6000297). Sorry, no purchase orders accepted.

quantity	publication titles	price	total

Send your order to:

Delaware Assistive Technology Initiative
 University of DE/duPont Hospital for Children
 P.O. Box 269, 1600 Rockland Rd.
 Wilmington, DE 19899-0269
 FAX: (302) 651-6793

total enclosed

Please Keep Us Posted!



Has your address changed? Are you receiving duplicates?

If the address we have for you is incorrect, please type or print your correct address and forward it to DATI along with the current mailing label. If you no longer wish to receive this newsletter, please contact our office or send us your mailing label with "discontinue" written next to the label. Thanks for your cooperation.

DATI Mailing List Application



Name _____ Title _____

Affiliation _____

Address (check one) Business Residence

City/State/Zip _____

Phone: Business _____ FAX _____ Residence _____

Email Address: _____

Non-Delaware Residents: If you wish to receive copies of *The AT Messenger*, the annual subscription fee is \$20. Make checks payable to the University of Delaware (EIN 51-6000297) and mail it to the address shown below with this completed application form.

Delaware Assistive Technology Initiative
University of DE/duPont Hospital for Children
P.O. Box 269, 1600 Rockland Rd.
Wilmington, DE 19899-0269
Phone: (800)870-DATI or (302)651-6790
TDD: (302)651-6794 FAX: (302)651-6793

I am a:

- Person with a disability
(please specify): _____
- Family member of a person with a disability
- Friend/advocate/colleague of someone with a disability
- Professional working with people who have disabilities
(please specify) _____
- Interested citizen
- Other (specify) _____

Accessibility Needs:

- Braille
- Large print
- 15/16 Audiotape
- 1-7/8 Audiotape
- ASL Interpreter
- Tactile Interpreter
- Transportation
- Spanish

I would like to be involved in:

- Technology users peer network
- Service provider network
- Funding initiatives
- Presenters network
- Project governance
(boards & committees)
- Advocacy activities
- Volunteer work as: _____

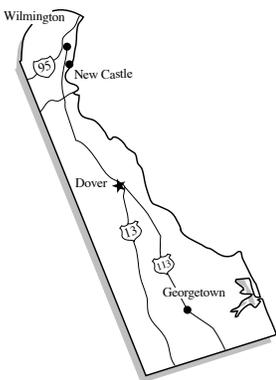


Delaware Assistive Technology Initiative
 Center for Applied Science & Engineering
 University of Delaware/duPont Hospital
 for Children
 PO Box 269
 Wilmington, DE 19899-0269

Nonprofit Organization
 U.S. Postage
 PAID
 Newark, Delaware
 Permit No. 26

Address Service Requested

10111200



DATI THROUGHOUT THE STATE...

1-800-870-DATI

**New Castle County ATRC
 Easter Seals of Delaware and
 Maryland's Eastern Shore
 61 Corporate Circle, Corporate
 Commons
 New Castle, DE 19720-2405
 (302) 328-ATRC; (302) 328-2905
 (TDD)**

**Kent County ATRC
 Easter Seals of Delaware and Maryland's Eastern Shore
 Kent County Community School
 65 Carver Rd.
 Dover, DE 19904-2716
 (302) 739-6885; (302) 739-6886 (TDD)**

**Sussex County ATRC
 Easter Seals of Delaware and Maryland's Eastern Shore
 Delaware Technical & Community College
 Jason Technology Center, Room 104
 Rt. 18, P.O. Box 610
 Georgetown, DE 19947-0610
 (302) 856-7946; (302) 856-6714 (voice or TDD)**

The AT Messenger is published quarterly by the Delaware Assistive Technology Initiative (DATI).

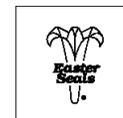
Delaware Assistive Technology Initiative
 Center for Applied Science & Engineering
 University of Delaware/duPont Hospital for Children
 P.O. Box 269, 1600 Rockland Road
 Wilmington, DE 19899-0269
 Phone: (800)870-DATI or (302)651-6790
 TDD: (302)651-6794; FAX: (302)651-6793
 E-mail: dati@asel.udel.edu; URL: <http://www.asel.udel.edu/dati/>

Beth Mineo Mollica, Director
 Joann McCafferty, Staff Assistant
 Julia Mercier, Information and Outreach Coordinator
 Sonja Simowitz, Project Coordinator

DATI is a joint project of the Center for Applied Science & Engineering at the University of Delaware and the duPont Hospital for Children.

DATI is funded by the National Institute on Disability and Rehabilitation Research of the U.S. Department of Education, Grant #H224A10005. This publication does not necessarily reflect the position or policy of NIDRR/ED, and no official endorsement of the materials should be inferred.

The University of Delaware is an equal opportunity employer and prohibits discrimination on the basis of race, color, creed, age, national origin, marital status or disability in conformity with applicable laws.



Creating solutions, changing lives.

