

The AT Messenger...bringing technology to you

Delaware Assistive Technology Initiative (DATI), Volume 15, No. 3,
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A Tribute to Joan Bradley

Tracy Bombara

Speech-Language Pathologist

Joan Bradley left this world on August 12, 2007. For those of us privileged to know her, she was an inspiration, a constant breath of fresh air and an endless source of energy. She began her nursing career in the Army, serving in the Korean War, and continued to care for so many at Wesley College and Kent General Hospital in Dover. She continued her education at the University of Delaware, becoming an R.N. First Assistant, and spent much of the rest of her career promoting the Association of Operating Room Nurses (AORN) to the point of co-authoring the Core Curriculum for the R.N. First Assistant. She was the dedicated and devoted wife to Walter, the loving mother of five children and the adoring grandmother to ten grandchildren. She was also an accomplished seamstress and a skilled bridge player. Some of her favorite times were when her family gathered at her home on Silver Lake to enjoy boating, water skiing, and tubing, with herself behind the wheel of the boat!



As if these accomplishments were not enough, she achieved so much more after an aneurysm robbed her of the power of speech in 1992. A circuitous journey spanning four years led her across three states to find an augmentative communication device that would allow her to communicate more effectively. She obtained her Delta Talker well into her sixties and worked hard to learn to operate the device and created her own "dictionary" to record her symbol sequences. When Medicare denied funding for the device not once, but three times, she refused to give up and continued the fight to ensure that these types of equipment were made available to

people like her who could benefit from their use. She received her reimbursement check from Medicare seven years after she obtained the device. She continued the funding fight because the Delta Talker allowed her to return to many activities that she had lost with the aneurysm rupture, not the least of which was teaching.

Over the course of the past 12 years, Mrs. Bradley was instrumental in educating many people on the benefits and possibilities of Augmentative and Alternative Communication (AAC). Upon receiving the Delta Talker, she volunteered as a guest reader at a local preschool program. She was able to give presentations at the LIFE Conference, at Kent General Hospital, and annually at the University of Delaware during the summer class on AAC. She provided testimony on AAC funding at the National Institute for Disability and Rehabilitation Research (NIDRR) in Washington D.C. and was always willing to share her story with anyone who was interested.

Personally, Mrs. Bradley was a gift to a speech-language pathologist working in the field of AAC. While I was the "knowledgeable clinician," she was the expert in communicating with a disability. She taught me that assisting people with speech impairments who depended on some type of AAC involved more than providing a means to communicate pleasantries such as "please" and "thank you" or ordering in a restaurant, more than calling to make basic medical appointments or paratransit travel arrangements. She wanted to live independently in her home and needed to be able to call or visit her doctors and tell them from a nursing perspective what her needs were. She wanted to be able to make appointments at her hair salon the day before special occasions and events so she would look her best. She not only wanted to be able to play bridge, but needed the vocabulary to trump her opponents soundly. She wanted to be more than a person in the pew at church: she needed to pray out loud and go to confession. She certainly taught me to think outside of the box with regard to personal vocabulary vs. generic messages with multiple applications that comprise most vocabulary sets on AAC systems. She hammered home the point that HER vocabulary needed to be about HER life. Most importantly, she never gave up on herself or her convictions, even in a funding battle that lasted seven years, for no other reason than it was "the right thing to do."

On behalf of all who were privileged to know her or who were able to learn from her life experience, I thank Mrs. Bradley for the lessons she provided to the AAC world and hope that the bridge tournament in heaven has provided a good share of grand slams!

Cochlear Implants and Auditory AT: Must They Be Provided?

Dan Atkins, Legal Advocacy Director
Disabilities Law Program

Hearing aids, assistive technology amplifying sound, are commonplace and do not elicit much controversy. Since their inception in 1978, cochlear implants, however, have been lightning rods for contentiousness in the Deaf community. Cochlear implants are electronic devices which, when implanted under the skin on the skull, convert sound waves into digital signals, which can then be understood by the brain as speech. With the implant, sound is transmitted past the damaged cochlea to the brain. While the implants do not "cure" deafness (in fact the implants often destroy what remaining hearing an individual may have), they do offer users the potential to develop language based on spoken communication. Thus, it has been considered by some in the Deaf community to be a rejection of deafness, its culture, and its unique language—American Sign Language. Gradually, however, the implants have become an accepted form of assistive technology for some children and adults with recent profound hearing loss but who have intact auditory nerves. More than 35,000 people in the United States have received them, and the number is increasing by about 30 percent each year.

Medicaid Coverage

Cochlear implants are prohibitively expensive—they can cost between \$50,000 and \$60,000. Post-operative costs, like programming of the device and frequent follow-up appointments, especially when medical complications arise, can equal the cost of the procedure. As a result, the government effectively depresses the demand—at least for the 80 million people who rely on Medicaid and Medicare for health insurance—in a few ways. First, the Centers for Medicare and Medicaid Services (CMS) practically ensures that

adults who are poor will not be able to afford an implant by setting its reimbursement level to hospitals at about \$20,000. Despite federal regulations that require Medicaid providers to accept Medicaid payment as payment in full, most hospitals circumvent the regulation by simply refusing to conduct the procedure at all. Second, Medicaid is a federal-state partnership, with the federal government setting broad parameters, but at the same time leaving states with significant discretion to tailor their packages to meet what states perceive to be the needs of their residents. Curiously, Delaware remains one of the few states not to cover cochlear implants for adults on Medicaid. However, it remains to be seen whether Delaware's exclusion could withstand legal challenge. If a beneficiary could show that the procedure is medically necessary, and could be fit within a category of covered services, perhaps Delaware could be compelled to provide the procedure (case by case administrative challenges were successful in Arizona and Utah).

Children on Medicaid whose doctors prescribe a cochlear implant as necessary and most effective to alleviate their hearing loss should be eligible for one. The 1989 Early Periodic Screening Diagnosis and Treatment (EPSDT) Act requires that state Medicaid programs cover any services for children under the age of 21 that are necessary to correct or ameliorate defects or conditions whether or not they are specifically covered under the State plan. Nevertheless, the same dilemma that confronts poor adults plagues poor children: with reimbursement rates not coming close to the cost of the procedure, finding hospitals and doctors to perform the work at the CMS rate is very difficult. As a result, while 45,000 children in the United States are eligible for the procedure, only about 10,000 have received it.

Medicare Coverage

Medicare is purely a federally operated health insurance program for 39 million Americans, primarily over 65, though over 10 percent of beneficiaries qualify based on disability rather than age. Medicare regulations consider cochlear implants as prosthetic devices—a coverable benefit. Until 2005, only beneficiaries with profound hearing loss were eligible to receive implants. Regulations have expanded eligibility to include moderate hearing loss. However, reimbursement caps limit the availability of the procedure.

Private Insurance

For those fortunate individuals with private insurance, there are varying degrees of luck. Some insurance companies cover the procedures and some do not. Typically, commercial health plans like Blue Cross and Aetna are more likely to cover it, while managed care plans are not so generous. How "necessary" is a cochlear implant? It is hard to argue that it is a life saving procedure, and so the insurance industry may not view it as "necessary." Nevertheless, private insurance beneficiaries should look carefully at their benefits package for the following:

- 1) Most health plans include benefits covering the diagnosis of a disease or illness, so the assessment and evaluation of the hearing loss may be covered.
- 2) Some benefits plans will explicitly cover or exclude cochlear implants. Some plans which include "prosthetics" may cover the implants.
- 3) Most plans will cover surgical procedures—in-patient and out-patient.
- 4) Post-operative audiology services should be considered rehabilitation, treatment, or therapy, though reimbursement may be capped.

Legislative Initiatives

Given the data supporting the safety and efficacy of hearing aids and cochlear implants, one wonders why states are not requiring insurance companies and state Medicaid programs to cover the assistive technology. The answer is that states are trying, incrementally at least. Connecticut, Kentucky, Louisiana, Maryland, Minnesota, Missouri and Oklahoma require that health benefit plans in their state pay for hearing aids for children. There are differences among these states with regard to the ages covered, amount of coverage, and hearing loss eligibility. Rhode Island requires the coverage for children and adults. Presumably because of cost, and effective lobbying by insurance companies, laws requiring coverage for cochlear implants have not been successful. In 2007, a Rhode Island state legislator, Robert B. Jacquard, proposed legislation requiring health insurance providers to provide coverage for cochlear implant surgery. It has not yet been voted upon.

Until Medicaid reimbursements are increased to reflect the actual cost of the procedure, children and adults who are poor and deaf will not in any meaningful numbers have access to cochlear implants. Until state legislation requires health insurance plans to cover the procedures, only the richest among us will be able to benefit. The French writer and social critic, Anatole France, once noted "[T]he law, in its majestic equality, forbids the rich as well as the poor to sleep under bridges, to beg in the streets, and to steal bread" (*The Red Lily*, 1894). With Medicaid and Medicare funding of cochlear implants falling thousands of dollars short of the cost of surgery, advocates for the deaf and hard of hearing surely can appreciate the intended irony of France's quotation all too well.

If a doctor has prescribed a hearing aid, cochlear implant, or other assistive technology and your health insurance provider has denied coverage to you or your child, please consider contacting the Disabilities Law Program (DLP) at the Community Legal Aid Society. The DLP has an office in each county in Delaware, and has attorneys and paralegals available to provide legal representation, advice, and referrals where appropriate. DLP services are available free of charge to Delaware residents with disabilities.

The AT Bargain Basement

Marvin Williams, AT Specialist
New Castle County ATRC

Hello true believers, and welcome to another installment of the *AT Bargain Basement*. I am Marvin Williams, your host for this inexpensive assistive technology extravaganza. To all of you regular *Basement* readers, welcome back! If this is your first time joining us, welcome! What took you so long? No matter, there are plenty of bargains to go around. Here's how things work. I bring you as much AT priced under \$100 as I can find. You are more than welcome to participate in the parade of bargains by sending along any that you may find so that I can report them here to the rest of the group. With that being said, let's get to the bargains!

My first bargain for you is the **ACM Wallet**. It is a handy credit card holder that can make it much easier for someone who normally has

problems getting out a credit card or drivers license to remove it with ease. To take out a card, you simply push the button corresponding to the card forward and the card slides with it. It comes in a six card version (\$39.99) and a 12 card version (\$59.99). It is available directly from the company at www.acmwallet.com. So now instead of fighting those cards, they can be a button press, or rather slide, away!



ACM Wallet

My next bargain is a peddling exerciser. While riding a bicycle can be a great source of aerobic exercise, it is not always convenient or safe for everyone. People who have balance issues may not be able to safely ride a bicycle, and unless you live where you can safely ride without worrying about traffic or road conditions, cycling may be out for you. Enter the pedal exerciser. These little things are great in that they are relatively low-cost (under \$20 in some cases), lightweight (about five lbs.), and really portable and easy-to-use. All you do is place it on the floor near wherever you're sitting, place your feet on the pedals and in the straps, and start pedaling! These units are also great for those who need exercise but cannot use their legs to get that aerobic boost. Simply place the exerciser on a sturdy table, grab the pedals, and start pedaling with your hands! The prices on these things are all over the place. The manufacturer's suggested retail is around \$55. However, I have seen them priced as low as \$16.95. There are also various manufacturers for these pedal exercisers. Some have resistance settings while others do not. What they all have in common is that they are all bargains and all readily available from a number of sources. **Wal-Mart** online carries the **Carex** model for \$39.76 and **Dick's Sporting Goods** carries two of the models made by **Stamina Instride** for \$29.99 and \$49.99. The \$16.95 model is a **Drive Standard** available from www.allegromedical.com. As usual, if you are not one to shop on the Internet but can do catalog ordering, feel free to contact me at the New Castle County ATRC for information so that you can call a company to order one.



LED Puck Lights from Home Depot

Next up are stick-on LED lights. These handy little lights, sometimes called puck lights since they resemble hockey pucks, are low-cost, lightweight, and can be placed almost anywhere. Many have adhesive backing so all you have to do is peel the backing and stick it up wherever you want it. The nice thing about these lights is that they don't require the ability to operate a switch to turn them on or off. If you can press the light, you can operate it. It's as simple as that. You can get a five pack at **Home Depot** for under \$20. Now, the light given off by each unit is not as bright as an individual lamp, but it may be just enough to act as a night light or to light a small dark room if regular lighting is not available or easily accessible. If you need more light, you may want to consider a plug-in light. However, do keep in mind that you may need access to an outlet and the ability to operate a smaller switch. You can find both the puck lights and their larger alternatives at **Home Depot**, **Lowe's**, **Wal-Mart**, and **Target**, among other places.



Wordlock by Master Lock

My final bargain in this edition of the *AT Bargain Basement* is one I've brought to you before: the **Wordlock**. This combination lock is different from regular combination locks in that the combination is a word of the user's choosing instead of a series of numbers that might not have any meaning at all to the user. This is a great little lock for those with memory problems or anyone who has problems remembering seemingly random information. **Lowe's** has the **Master Lock** version available for about \$7.50. The original **Wordlock** is also available in a few different styles. The big difference between the **Master Lock** version and the **Wordlock** is the **Master Lock**

incorporates numbers in the combination while the **Wordlock** does not. Other than that, the locks are not that different.

And that will do it for another edition of the *AT Bargain Basement*. Come back next time for even more bargains. If you find any of your own bargains, please feel free to send them in so that we can all share in the bargain goodness! So until next time, remember, just because it's a bargain, doesn't mean it's cheap!

Save the Date

15th Annual Inclusion Conference

May 8, 2008

Sheraton Dover Hotel and Conference Center

Dover, DE

OSEP Funds 15-State Consortium to Speed Delivery of Accessible Instructional Materials to Students with Disabilities

The U.S. Department of Education's Office of Special Education Programs (OSEP) has awarded 15 states and CAST, a leading education research and development organization, \$4.9 million to launch the **Accessible Instructional Materials (AIM) Consortium** to improve the quality, availability, and timely delivery of accessible instructional materials to K-12 students with print disabilities. The Federal grant, which covers an 18-month span, will cover 100 percent of the costs associated with AIM Consortium activities.

The AIM Consortium will explore the most efficient means to provide students with disabilities the materials they need to access, participate, and achieve in the general educational curriculum. The major federal special education and general education laws—the Individuals with Disabilities Education Act (IDEA) and the No Child

Left Behind Act (NCLB), respectively—both call on states to guarantee such access. IDEA 2004, in particular, mandates that all state education agencies adopt the National Instructional Materials Accessibility Standard (NIMAS).

"With this work, the AIM Consortium member states will blaze a trail for all U.S. states and territories by determining how best to meet the mandates of IDEA and NCLB and help improve academic outcomes for students with print disabilities," said Chuck Hitchcock and Skip Stahl, the Project's Co-Directors. "The AIM Consortium will develop a system to efficiently and effectively acquire and deliver general education materials in accessible formats, such as Braille, digital audio, electronic text, and large print."

The AIM Consortium includes Delaware, Georgia, Iowa, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Missouri, New York, Pennsylvania, Utah, Vermont, Wisconsin, and Wyoming. Their efforts will be coordinated and supported by CAST, a nonprofit educational organization with a decade's worth of experience leading major federal centers to improve access to the curriculum.

The goals of the AIM Consortium are to:

- 1) Develop state systems for increasing the timely provision of accessible instructional materials for student with print disabilities,
- 2) Ensure that state systems for identifying, acquiring, and using accessible instructional materials employ high-quality procedures and practices, and
- 3) Produce related products and services scalable and made available to all U.S. states and territories, thus contributing to nationwide efforts to improve academic outcomes for all students with disabilities.

Most of the \$4.9 million in funds will be distributed among the 15 state partners to develop and share systems and best practices for procuring appropriate materials. Delaware will receive \$167,000 to support its activities. Project Co-Directors Chuck Hitchcock and Skip Stahl of CAST also direct the NIMAS centers at CAST, which facilitate the implementation of the national Standard. Joy Zabala, Ed.D., a nationally known specialist in educational and assistive

technologies, will join CAST's staff as project manager. Dr. Zabala brings more than three decades of experience as a general and special educator, consultant, and professional developer to her role.

Karen Jones, from the Delaware Department of Education, and Beth Mineo, from DATI, will coordinate Delaware's AIM Consortium activities. The Inclusion Conference in May will feature a print access strand with CAST's Joy Zabala as the lead speaker.

CAST is a non-profit education R&D organization that works to expand learning opportunities for all individuals, especially those with disabilities, through the development of innovative, technology-based educational resources and strategies. CAST is host of the federally funded NIMAS Development and Technical Assistance centers for the delivery of accessible instructional materials. To learn more, go to www.cast.org.

Changing Faces, Changing Places

Aloha, Alma

Many of the people who we serve, particularly those in Kent County, may have noticed the absence of Alma Cordero from our Dover ATRC. Due to personal health matters, Alma is unable to continue the wonderful work she has done with DATI. Alma, who has been with DATI from the early days—April 1995 to be exact—brought a quiet sense of dignified grace to our organization, along with an incredible sense of dedication and compassion. Alma touched our hearts and also the hearts of many of those with whom we work. We want to take this opportunity to thank her for all of her efforts over the years and wish her all the best.



Alma Cordero

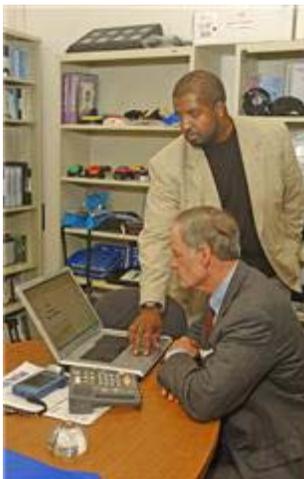
If you would like to drop Alma a note or send warm wishes her way, you can send it directly to the Kent ATRC and we'll make sure that she gets it. Address it to: Alma Cordero, c/o DATI, 100 Enterprise Place, Suite 1, Dover, Delaware 19904.

New Face in the Kent ATRC

Connie Yelle (pronounced "yell") is the newest member of the DATI team. She will provide administrative support at the Kent County ATRC. Connie brings a wealth of clerical and administrative support experience to the position, having held multiple positions in New Jersey schools over the past decade. Connie holds an Associate's Degree in Business Management from Chesapeake College, and has recently moved to Middletown with her family.



Connie Yelle



Marvin Williams (standing) demonstrates some AT to Senator Tom Carper.

Movin' On Up

Our very own Marvin Williams, famous Bargain Basement columnist and formerly the AT Specialist in DATI's Kent County Assisive Technology Resource Center, has relocated with his family to New Castle, and is now the AT Specialist at the New Castle ATRC. "I'm excited about the move," Marvin

says, "and also excited by the opportunity to provide services for the people of New Castle County." Marvin wants to make sure that everyone in Kent County knows that they can still call on him if they need assistance or advice.

New Face of Funding Assistance

Eileen Mapes recently joined the DATI as its new Information and Outreach Coordinator. She replaces Kia Bergman, who relocated to New Jersey as a result of her husband's job transfer. Eileen has been a Delawarean for over 3 years and comes to us from The Children's Hospital of Philadelphia, where she worked as a child life specialist. She has worked in the healthcare field for the past 12 years; in addition to child life, she brings experience in early intervention as well as member advocacy with a health insurance company. Here at DATI, Eileen will be responsible for the AT and Telework Loan Programs, The AT Messenger, individual funding assistance, and other outreach activities. Eileen says, "I am thrilled to join the DATI team and look forward to contributing to the significant work done by the DATI throughout the state of Delaware." Eileen received her Associate of Arts degree from American River College in Sacramento and her Bachelor of Arts and Master of Science degrees from Wheelock College in Boston. Eileen resides in Wilmington, and likes to spend her leisure time taking walks, cooking, and spending time with friends and family.



Eileen Mapes

New Location for Sussex ATRC

After searching for years for a permanent location, DATI is happy to announce that the Sussex County ATRC has landed in the exact location in which it began 16 years ago! The ATRC is back in the Georgetown Professional Park on Route 113. The address is 20601 Office Circle, and we are in Suite C. Housed at this location are Dan Fendler, AT Specialist, Sandy Walls, who provides administrative support and manages the AT Exchange, and Sonja Rathel, DATI's Project Coordinator. Sandy is pictured at the doorway awaiting your

visit! Just outside the door is ample free, accessible parking, and the center is, of course, fully accessible.



Sandy Walls welcomes visitors to the new Sussex ATRC location.

Dan and Sandy are clearly thrilled to be all settled in. They have a lot of exciting new products to share with you; stop by, say hello, and see what new goodies are on the shelves for you to test and borrow! We would like to extend our deep appreciation to our University of Delaware colleagues in the College of Marine and Earth Studies, particularly Joe Scudlark, Joe Farrell, and Bruce Campbell, for giving us a temporary home at their facility in Cape Henlopen State Park.



Dan Fendler (sitting) demonstrates AT at the Sussex ATRC.

New Equipment Added to DATI Inventory

This article highlights the new equipment that we recently added to our ATRCs. We base our decisions about new equipment on our knowledge of the changing marketplace, the needs we observe as we talk with people throughout the state, and our customer requests. So, if you'd like to see a product added to our inventory, please let us know!

The listing that follows is organized by product category. The name of each product is followed by the manufacturer/vendor name. You can access more information about any product in the DATI inventory using our online inventory tool. Go to www.dati.org, click the Equipment Demo/Loan option, and then the Search Inventory button. This tool allows you to search by product category, product name, or manufacturer name.

Environmental Adaptation

- Digital Cordless Answering System – Panasonic
- Infrared Sensor – Words+

Speech Communication

- Smart/128 – AMDi
- Smart/Speak – AMDi
- Tech/Touch – AMDI
- DynaVox VMax – DynaVox Systems LLC
- DynaVox V – DynaVox Systems LLC
- Palmtop 3 – DynaVox Systems LLC (pictured)



Palmtop 3

Computer

- Tracker Pro -- Madentec
- Roller Plus Joystick, USB/PS/2 – Traxys (was Penny & Giles) (pictured)



Roller Plus Joystick

- LifeBook Tablet PC – Fujitsu
- HP Digital Flatbed Scanner – Hewlett-Packard Company

Learning, Cognition & Development

- ClozePro CD – Crick Software
- Clicker 5 – Crick Software
- SOLO Suite – Don Johnston Incorporated
- Boardmaker Activity Pad – Mayer-Johnson Co. (pictured)



Boardmaker Activity Pad

Health, Safety & Daily Living

- Talking Indoor/Outdoor Thermometer – VoiceZone
- D-Grip add on handle – Motus Inc.
- T-Grip add on handle – Motus Inc.
- EZ Flo Automatic Faucet Control – International Environment
- Spring Action Scissors 8" Bent – Fiskars
- Open-It Universal Opener (yellow) – Maddak Inc.
- Upper Hand – Upper Hand Marketing Inc.
- Grip Wrench Pro Series – Idea Village Products Corp.
- Help At Hand Emergency Telephone Dialer – Electronic Component Service
- PenAgain – Ergo-Soft (pictured)



PenAgain

Recreation & Leisure

- Secateur Pruner Shear – Garant

Vision

- Standard gh Player CD – gh, LLC
- Cliplight - Coghlan's Clip-On Mini Magnifier 4.5X – LS&S (vendor)
- OptiVISOR Optical Glass Binocular Magnifier 2X – Donegan Optical Company
- Specwell Monocular 3.8 X11 – Specwell
- Wave Plus Magnifier 3.5D (1.9X) – Luxo Corporation

- Luxo Wave Plus – Luxo Corporation
- Voice Recorder (Voice Operated Recording) – Sony
- Digital Voice Recorder - Olympus Imaging America Inc.
- Pocket Paper Money Braille (orange) – LS&S (vendor)
- Talking Pedometer – LS&S (vendor)
- Analog Atomic Wall Clock 14" – Lacrosse Technology
- 5X Talking Timer – Smarthome
- Pliers 5 3/4" blue handle – Miracle Point

Hearing

- Dialogue VCO Telephone, base unit, handset, cord – Ameriphone
- Portable Phone Amplifier - Clarity (pictured)



Portable Phone Amplifier

AT Exchange: Making Connections, Saving Money

Beth Mineo, DATI Director

DATI unveiled its new AT Exchange a little over a year ago. One of the powerful new features is something that the general public never sees: an administrative tool that keeps track of how many devices have changed hands and the resultant cost savings to consumers and families. I recently used this tool to generate an outcome report, and was delighted with what I saw. Just this year alone, 41 individuals have been able to secure needed equipment through the AT Exchange. The cost-savings data are even more exciting:

consumers saved \$107,742 by using the AT Exchange to meet their AT needs!

For those of you unfamiliar with the AT Exchange, it works like a matchmaker of sorts. Those who no longer need equipment list it as available, and those looking for equipment can search the database or post "wanted" listings of their own. By far, the greatest number of successful "matches" have been for mobility, seating, and positioning devices. Environmental adaptations, speech communication devices, and modified vehicles were also frequently exchanged. Most devices are offered at significantly reduced prices, and many devices are actually available for free! One of our most remarkable exchanges resulted when a family no longer needed its wheelchair-accessible van and, knowing how difficult it is for people to afford accessible vehicles, listed the van for FREE. The lucky recipient of the van needed it to be able to get to medical appointments. Both parties involved in the exchange were delighted with the outcome. The recipient said, "I couldn't be any happier. If it wasn't for a wonderful, kind, generous lady that placed the van for free... I wouldn't have the van to help transport my power chair. She made me cry and smile at the same time... "

If you are not familiar with the AT Exchange, visit our website at www.dati.org, and click on the tab for AT Exchange. For full access to all the features of the service, you'll need to become a registered user, but you can browse the listings without registering. This service is free to all users.

Please think about whether you have equipment that is no longer needed... you can make a real difference for someone by making that equipment available through the AT

Exchange. For more information, contact the DATI Central Site at (302) 651-6790 or (800) 870-DATI (toll-free for Delaware only).

Evaluation Subjects Needed

Researchers at the University of Delaware are investigating new computer interface methods specifically tailored to the range of motion and movement characteristics of individual users. This technology has particular applications for individuals with disabilities, as the interface can be customized to an individual's typing or gesture movements. Typing and gesture movements are made on a flat touch surface. Evaluation subjects are being sought to help guide this research. Of particular interest are individuals with tremors or spastic movements, as well as those with limited finger and/or wrist range of motion.

Subjects will be compensated for their participation, and asked to make various target selections and gestures on the touch surface.

For more information about the project, including how to participate in this study, please contact:

Prof. Kenneth Barner
Department of Electrical and
Computer Engineering
University of Delaware
Newark, Delaware 19716
Phone: (302) 831-6937
E-mail: barner@ece.udel.edu

DATI Equipment Loan Policy

DATI has a wide variety of equipment at the Assistive Technology Resource Centers for the primary purpose of demonstration and short-term loan. The policy for equipment loans is as follows: The standard loan period is two weeks, defined as the day borrowed (e.g., Monday the 10th) to the same day two weeks later (e.g., Monday the 24th). Loans may be extended providing there are no names on the waiting list and/or that an extension will not interfere with an existing reservation. The maximum loan period is four weeks. A maximum of four devices may be borrowed during any single loan period. However, combinations of devices may be treated as a single device if the components are interdependent—either operationally, or because one component is required for the user to access another. Equipment loans across state lines are not permitted. Equipment must also remain in Delaware throughout the loan period.

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 Resource Centers Throughout the State...

1-800-870-DATI

dati@asel.udel.edu

New Castle County ATRC

Alfred I. duPont Hospital for Children

203 Administration & Research Bldg.

1600 Rockland Rd.

Wilmington, DE 19899

(302) 651-6790;

(302) 651-6794 (TDD);

(302) 651-6793 (fax)

Kent County ATRC

Easter Seals Kent County Center

100 Enterprise Place, Suite 1

Dover, DE 19904-8200

(302) 739-6885;

(302) 739-6886 (TDD)

Sussex County ATRC

20161 North Office Circle, Suite C

Georgetown, DE 19947

(302) 856-7946;

(302) 856-6714 (voice or TDD)

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