



The AT Messenger

bringing technology to you

Delaware Assistive Technology Initiative (DATI) • Volume 14, No. 1 • Winter 2006

New Castle ATRC Moves to duPont Hospital for Children

The New Castle County Assistive Technology Resource Center (ATRC) has moved to the Alfred I. duPont Hospital for Children in Wilmington. With its new office space in North Wilmington, the ATRC will continue to serve as the comprehensive AT resource center in New Castle County.



The New Castle County ATRC recently moved to the second floor of the Administration & Research Building of the Alfred I. duPont Hospital for Children.

As in Kent and Sussex Counties, the New Castle ATRC is barrier-free, open to the public, and contains examples of all types of AT. Eden Melmed, the Assistive Technology Specialist; Beth Mineo Mollica, the DATI Director; and Kia Bergman, the Information and Outreach Coordinator, are available to assist visitors Monday through Friday 8:00 a.m.-4:30 p.m.

Services offered at the site include personal equipment demonstration, assistance in helping to identify technology options for a given need, and consultation relative to funding options. Most



The new ATRC provides more space for housing AT items available for demonstration and loan.

of the equipment at the site is available for a two-week loan period, enabling users to "try before they buy." Drop-in visitors are always welcome, but to ensure personalized attention, it is recommended that you call in advance to make an appointment. There is no charge for the services offered by DATI's ATRCs.

The New Castle ATRC contact information is as follows:

DATI
New Castle County ATRC
Alfred I. duPont Hospital for Children
1600 Rockland Rd.
P.O. Box 269
203 Administration & Research Building
Wilmington, DE 19899-0269
(800) 870-DATI
(302) 651-6790
(302) 651-6793 (fax)
(302) 651-6794 (TDD)
newcastle.atrc@dati.org ■

INSIDE THIS ISSUE:

Handheld Devices in the Classroom	2
The AT Bargain Basement	3
DLP Activities Outlined in AT Act	4
Purchasing a New Van	6
Tobin Partners with DATI	7
www.dati.org Serves as Model	8
Delaware AT Exchange.	8

Handheld Devices Making Their Way into the Classroom

Dan Fendler, AT Specialist
Sussex County ATRC

After presenting a session on assistive technology to a group of teachers studying for their master's degrees, it became very clear to me that many of them really understood the importance of technology in the classroom. The teachers recognized how important technology can be to all students, and particularly those with special needs. However, many were frustrated with their school's slow acceptance of some technological advances.

Technology is becoming integral to many professions. This is particularly true in education. Arguably, the potential impact of technology in the classroom is enormous. There are many promising examples, not the least of which is the increasing availability of digital textbooks. Because of the potential importance of technology related to education, it is more important than ever to get comfortable with these tools.

In my experience as an Assistive Technology Specialist, I have seen the reluctance of many educators to use technology in the classroom. I understand this reluctance. Many times, technology can be fickle and uncooperative. Wrestling with some device that doesn't work is one of the last things that an educator wants to deal with when teaching. But for those of you who are receptive enough to consider that there may be tools available that can truly help your students, I would like to give you a better understanding of some of the potential classroom uses of some small handheld devices.

Handheld computers, also known as PDAs, or personal digital assistants, are commonly available in either **Palm OS** or **Pocket PC** formats. These are the two predominant operating systems. Currently, there is a bit of controversy regarding which platform is best. Personally, I have no opinion about which platform is better, but I find myself more familiar with the **Pocket PC** format, because of its similarity to **Microsoft Windows**. My advice to anyone considering either platform is to figure out what you want to accomplish with the device, and then see what software is available to meet your specific needs.

PDAs made their biggest initial impact in the corporate world. The devices were used primarily as schedulers because the calendar could easily be shared with others. One of the key tools of the calendar function of a PDA is that it includes a notification system that reminds the user of a pending appointment. While not the inventor of the PDA, (**Apple Computer, Inc.** coined the term PDA for one of the earliest versions—the **Newton**) **Palm, Inc.** is commonly recognized as the company that brought the PDA into the mainstream.

Some of the features that make PDAs useful in a business environment work effectively in a classroom setting as well. Some examples are:

- The schedule function can be very useful to students struggling with time management skills.
- The use of a calendar function with alarms can help students with their organization skills.
- Timers can be used to keep a student on task.
- Devices can be used as note takers, either with or without an external keyboard.
- Most devices have some sort of handwriting recognition program available (**Graffiti** in **Palm OS**, **Notes** in **Pocket PC**).
- Curricular content in digital format can be processed and converted to an MP3 format, then downloaded to the PDA so the student can listen to the material. This is helpful for those students with reading difficulties.
- eBooks can be downloaded and read on PDAs.
- Built in calculators and hundreds of software applications are available, many at no cost.

PDAs are not for everyone. Due to the small size of the screen, students with a visual impairment may not be able to effectively use a PDA; however, newer PDAs may have a version of **DECtalk** speech capability, allowing content on the screen to be read to the user. Also, the small controls may be difficult to manipulate for students with fine motor limitations.

As always, if you have any questions, please do not hesitate to contact your local ATRC. ■

The AT Bargain Basement

Marvin Williams, AT Specialist
Kent County ATRC

Hello true believers, and welcome to the winter installment of the *AT Bargain Basement*. I am Marvin Williams, and I will be your guide through a wonderland of bargains! For those of you who are new to the *Bargain Basement*, I'll explain the rules of the game... I find the best AT deals I can for \$100 or less. For this installment, I have decided to take a look at the bargains available for loan and/or demonstration at your local ATRC. Each ATRC has recently received numerous additions to its inventory and quite a few of those happen to be great bargains! That means everything you read about in this column is available for loan from an ATRC near you. So, without further adieu, let's get to the bargains!

Our first items are the **Door Knocker 300** from **CompuTTY** and the **Flashing Door Chime** from **Lamson Home Products**. The **Door Knocker** is a signaler that flashes when someone knocks at the door. Just plug it into an outlet near the door, and you're all set. When someone knocks, the signal on the unit flashes and gives a visual alert that someone is at the door. Since it plugs into a wall outlet, you can take this device with you on vacation or move it to other doors in your home. The **Door Knocker** is available for \$24.95 through **CompuTTY's** website, www.computty.com or by placing a phone order at (800) 366-9950.

The **Flashing Door Chime** works along similar lines, but is for use with doorbells and phones. To use this unit, simply mount the doorbell chime button where you would have a regular wired doorbell button. The receiver is plugged into the wall and a lamp is plugged into it. When the button is pressed, the light plugged into the receiver will flash, giving a visual cue that the doorbell has been pressed. It also has a chime on it with a few



Flashing Door Chime

different tones so that you can have auditory and visual cues. The nice thing about this unit is that it also includes a phone attachment so that you can plug your phone into a receiver and it will make the lights flash when the phone rings as well. The door chime is available for around \$50 at your local **Lowe's**.®

Next up is the **Clear Sounds 40XLC Amplified Phone** with a large backlit Caller ID display. The hearing aid compatible **40XLC** is nice because it combines all of the functions of a good amplified telephone with large, easy-to-see buttons, and a large print Caller ID display. There is even a speaker phone included. For those of you needing a more tactile telephone ring, there is a pillow shaker attachment included with this phone. With this device next to your bed, you may never sleep through the phone ringing again. The ringer is adjustable to 95dB, which is nothing to sneeze at, and the amplifier goes up to 50dB. It sells for \$86.43 from **Ambient Weather**, www.ambientweather.com.

Another bargain that is available for loan at your local ATRC is the **Oversized Universal Remote**. This item is a marvel to behold. The large, easy-to-use buttons light up when you press them. Also, since it's a universal remote, you can program in up to four devices and control them all from the same remote. **Maxi-Aids** sells the **Oversized Universal Remote** for \$38.95 through their website, www.maxiaids.com, or by calling (800) 522-6294.

Next we have the **Wide-View Fresnel Stand Magnifier**, which is available for \$87.95 from **LS & S, LLC** at www.lssproducts.com or by calling (800) 468-4789. This is a large magnifier that can be handy for reading books, magazines, or newspapers. The stand allows hands-free use, and the gooseneck holding arm lets you position the magnifier in a way that works best for you. As with all magnifiers, it is a good idea to try it out before you make a purchase to be sure it will provide enough magnification for you.

continued on page 4

The AT Bargain Basement (continued)

That brings us to the **Timex Weekly Medication Manager**. The **Timex** system is great because it has four different medication compartments at each level and seven levels, thus giving you enough compartments for four different sets of medications every day for seven days. The system also has alarms on it so you can get friendly reminders of when you need to take your medications. The alarm can be a beep, a voice, or a flashing reminder. Each compartment can have its own reminder. The box can also have two additional timers set. The system has a history tracker so that you can see when the alarms were stopped and when pills were missed. One very big bonus of this unit is that each individual four-compartment tray can be taken off of the



Timex Weekly Medication Manager

weekly rack and used independently with the timer. So if you have medications you take four times a day every day, you can set them up on the rack and then take them and the timer with you when you're on the go. When you get home, put the empty rack back and take the full rack for the next day. The **Timex** full week unit sells for \$25.95 and a single four compartment unit sells for \$16.95 from **Safe Home Products** at www.safehomeproducts.com or (877) 358-0900.

For more information on any of the products mentioned in this article, or to inquire about a demonstration or loan of the equipment, please contact your local ATRC.

And that will bring to a close another installment of the *AT Bargain Basement*. As usual, if you know of any bargains, please feel free to drop me a line. I'll be sure to mention it here and to properly credit you for your wonderful ideas. So until next time, remember—just because it's a bargain doesn't mean it's cheap! ■

Disabilities Law Program Activities Outlined in AT Act

*Dan Atkins, Legal Advocacy Director
Disabilities Law Program*

Robin is fourteen years old, born with Cerebral Palsy, and relies on a wheelchair for mobility. A treating orthopedist prescribes a therapeutic exercise device which will improve circulation, bone strength, and cardiovascular fitness. Citing the device's cost of \$10,000, Robin's Managed Care Organization contends that the service is not a covered benefit, is not cost effective, and is essentially a home exercise device—and therefore not medically necessary.

The Disabilities Law Program

Unfortunately, Robin's case is not hypothetical. Robin (a pseudonym to protect her confidentiality) is a client of the Disabilities Law Program (DLP). Through its Assistive Technology grant, the DLP represented her in a Medicaid hearing. Community Legal Aid Society, Inc. (CLASI) is a non-profit law

firm representing poor, disabled, or elderly Delawareans free of charge. The DLP is a special project of CLASI, advocating for people with disabilities (mental or physical) in a number of different spheres. There are no income requirements or fees for DLP services. The DLP has projects focusing on the rights of people with mental illness, developmental disabilities, and traumatic brain injury, in addition to several projects which cut across disabilities by focusing on individual rights, voting rights, removing barriers to work for recipients of social security benefits, and assistive technology.

The AT Act

Through the reauthorization of the Assistive Technology Act of 1998, the DLP receives federal fund-

continued on page 5

DLP Activities Outlined in AT Act (continued)

ing to provide advocacy services to promote the acquisition, utilization, and maintenance of assistive technology (AT) devices and services by individuals with disabilities. Individuals with disabilities are defined in the Act as those who have a disability and who would be enabled by an AT device or service to minimize deterioration in functioning, to maintain a level of functioning, or to achieve a greater level of functioning in any major life activity. The familiar Americans with Disabilities Act definition of disability will determine what a disability is—the disability must substantially limit a major life activity. Major life activities have been construed by the courts to include walking, talking, breathing, working, procreating, and thinking. Disabilities which can be remediated by medication or a device may not be considered substantially limiting. For instance, someone with vision problems whose sight can be corrected with eyeglasses, or someone with hypertension which can be controlled by medication, may not have a substantially limiting impairment. However, someone who exclusively relies on a wheelchair for mobility most certainly would qualify, since the person may be mobile with the wheelchair, but the major life activity of walking is still impaired.

DLP Priorities under the AT Grant

In a non-profit organization, demand typically outstrips resources. As a result, the DLP solicits input from the community and then develops priorities to reduce subjectivity in case selection, and to leverage our limited resources to meet client needs and address systemic issues. The DLP employs a multi-faceted advocacy approach when confronting AT problems. The DLP handles cases both on the individual level (directly representing consumers in administrative and court hearings) and on the systemic level (advocating through committees and public policy forums). For instance, in the area of Medicaid litigation, the DLP, in addition to representing individual clients like Robin, is advocating through multi-disciplinary councils for the state to adopt a Medicaid Buy-In Program, which would significantly expand the number of clients eligible for Medicaid services, and as a result make AT

devices and services more widely available for consumers.

In addition to the area of Medicaid advocacy, the DLP also represents children eligible for special education services who are seeking technology to improve their ability to benefit from their curriculum. For instance, electronic versions of instructional materials are crucial to students with visual impairments. The DLP represents a number of children in their efforts to seek payment from Medicaid, or school districts, for devices or services which they could not otherwise afford. Children with autism, mental retardation, or cerebral palsy may have limited ability to speak. Small handheld computers may be able to give a voice to a child who otherwise would need to rely on a rudimentary point at the picture book to communicate. The AT device strengthens vocabulary, enhances communication, and promotes the child's independence.

On a systemic level, the DLP collaborates with the Delaware Assistive Technology Initiative (DATI) and state councils to promote legislative, regulatory, and policy standards which facilitate access to appropriate AT devices and services. The DLP sees the emergence of Charter Schools in Delaware as an opportunity to improve the availability of assistive technology to students with disabilities by ensuring that these schools properly implement the mandates of the Individuals with Disabilities Education Act.

A third DLP AT priority area is assisting AT consumers in maintaining their independence and helping employees, who rely on AT to work, receive vocational rehabilitation. In the coming year, important priorities for the DLP will include: 1) ensuring that AT (e.g., a wheelchair) has adequate warranties through enforcement of the AT Lemon Law, which was drafted by the DLP; and 2) advocating for employers to provide AT as reasonable accommodations.

Conclusion

Robin awaits a decision from the Medicaid Hearing

DLP Activities Outlined in AT Act (continued)

Officer on whether she will be able to receive an AT device that remains beyond her family's financial means. The DLP argued that AT, while expensive up front, is cost effective in the long run. Robin's doctor pointed out that without the device, it is certainly possible that Robin's condition could deteriorate, she could suffer broken bones, and she could need in-patient care, or worse, institutionalization in the near future. Paying \$10,000 now to keep a child with her parents, rather than paying tens of thousands of dollars later to institutionalize her, seems so obvious. However, victory is anything but guaranteed.

Robin's case is an example of the work the DLP is doing on behalf of individuals with disabilities in their effort to acquire AT. This article has highlighted just a few of the major areas of the law within which the DLP fulfills its responsibilities under the AT Act. The full DLP priorities are published on the CLASI website at www.declasi.org. In some cases, technical assistance or a referral only may be

provided. Nevertheless, please consider calling the DLP in any of its three offices in Delaware should a person with a disability have any concerns about the provision, acquisition, or maintenance of an AT service or device. Contact information for the DLP is as follows:

New Castle County

100 W. 10th St., Suite 801
Wilmington, DE 19801
(302) 575-0690

Kent County

840 Walker Rd.
Dover, DE 19904
(302) 674-8145

Sussex County

144 E. Market St.
Georgetown, DE 19947
(302) 856-6133 ■

Purchasing a New Adapted Van

Carol E. Barnett

My brother Steve and I were in the market for a new accessible minivan in 2004. Steve is an adult who uses a power wheelchair to get around and we found the adapted minivan to be perfect for us. We had purchased a minivan with a **Ricon** electronic ramp with a remote control and a lowered floor in 1996 and had our share of problems with the electronics that often failed with no warning. There were several times when the lift would not slide out from under the van and my brother was either trapped in the van or he was outside the van and unable to enter. There is no company in Delaware that can repair this type of minivan, so we were forced to go to either Pennsylvania or New Jersey to find reputable mechanics. Also, the van could never be fixed in just a day or two. Any repair took weeks, at best. Often, parts had to be ordered from the manufacturer in California or actually made by a local machine shop since they were sometimes unavailable. I had to arrange for many a friend to follow me for 30-40 miles so I could drop off the van and

leave it there for repairs. Also, we were left without the use of the van for all those weeks as none of the repair shops have vans to rent while you wait.

Since we had experienced all that heartache with our first, fully-equipped minivan, we decided to go slightly more low-tech with our second van. I actually purchased the van on the telephone and found my car loan on the Internet, so it made for a very interesting and unique experience. I worked with **Mobility Independent Transportation Systems (M.I.T.S.), Inc.** in York, PA and we ordered a maroon **Chevy Venture** minivan with a **Braun Entervan System**.

This new van requires me to manually open the sliding door on the passenger side and pull down a lightweight ramp that is mounted and hinged to fit against the door when it is not in use. After Steve enters the van, he moves to the front passenger seat area, as the seat has been removed. His wheelchair is secured in an **EZ Lock** system. A V-shaped

continued on page 7

Purchasing a New Adapted Van (continued)

device is placed on the underside of his wheelchair and that device fits into the **EZ Lock** system mounted on the floor of the van. He can lock himself in, and off we go. The **EZ Lock** system has its own alarm that will sound if the chair comes loose from the device. That has never happened in over nine years of use. One of the other good decisions I made was to forego the carpeting and just have a rubber material installed on the floor of the van. In the rain and snow, it simply gets a little wet and then dries, without any residue left behind. The cost of a new van is about \$43,000. We were lucky enough to have received about \$5,000 in rebates so the final cost was about \$38,000. Hopefully this van will not require very specialized repair work, and the usual maintenance can be done by a **Chevy** dealer or a local mechanic.

I went to the **AAA** website, www.aaa.com, to look into a car loan. The website links to **Capital One Auto Loans** and I filled out the papers online and was approved for a loan within a day or two. Then the company mailed me some forms to complete and sent me a check for the amount of the loan. We were able to secure a six-year loan at 4.79 percent interest, which was a lower rate than the car dealer could offer. Of course, now we have 72 car payments to make, but just in case we win the lottery along the way, I made sure that the loan could be paid back early with no pre-payment penalty.

We drove the old van to York, PA (about a two

hour ride through beautiful horse farm country) and drove home about two hours later with the new van. They made an appointment so they could fit the **EZ Lock** system that was ordered to my brother's specific model chair. **M.I.T.S.** was willing to take our old van and sell it on consignment. Within two weeks, the van was sold and a check was on the way. That made one part of this complex transaction very easy indeed! I did have to register the van at the Delaware Division of Motor Vehicle and had to pay the taxes and other costs (almost \$800) that local car dealers usually handle. I was glad I had my checkbook with me that day as I did not realize that these fees had not been paid already.

All in all, this was a pleasant experience and we are very pleased, so far, with our new van, which is now one-year-old. I would highly recommend the dealer we used and would certainly check out the **Chevy Venture** minivan.

Contact information:
Mobility Independent Transportation Systems, Inc.
(M.I.T.S. Corporation)
11448 North Main St. Extended
Glen Rock, PA 17327
(888) VANS-4-YOU ■

DATI was so impressed with Carol and Steve's management of a complex van purchase and modification that we asked Carol to share their experience with our readers. Thanks, Carol and Steve!

Tobin Foundation Partners with DATI

The Tobin Foundation for the Visually Impaired, a nonprofit organization headquartered in Wilmington, has made a donation of \$10,000 to the Delaware Assistive Technology Initiative (DATI) to be used to assist Delawareans with visual impairments.

This grant will help the Tobin Foundation to broaden their reach, and will help the DATI to continue to offer the most up-to-date assistive technology options to those with visual impairments throughout the state of Delaware.

With the Tobin Foundation grant, the DATI plans

to add to its inventory of aids for those with visual impairments in each of its three ATRCs. The inventory items will be available for demonstration and loan. AT Specialists at each ATRC will also be available to discuss the new AT and to help identify low vision aid options based on an individual's personal needs.

With this grant money the DATI will also be able to provide Delawareans with visual disabilities with low-cost AT devices that may assist them. Details of this new program will appear in the Spring issue of *The AT Messenger*. ■

DATI's Website Serves as a Model for Other Programs

When Beth Mineo Mollica, DATI Director, provided a demonstration of DATI's new website to representatives from AT Act Programs across the country in November 2004, she could not have predicted what happened next. "I mentioned that the site had been developed with funding from the Real Choice Systems Change Grant from the Centers for Medicare and Medicaid Services," Mineo Mollica recounts. "I thought it only fair to offer the source code at no cost to other federally-funded programs that could benefit from it." Since that time, more than a dozen states have begun the process of adopting one or more of the website's modules for their own use.

The module garnering the most attention to date has been the AT Exchange, which enables constituents to interact via the Internet to buy, sell, or give away used AT using a "want ads" type of approach (www.dati.org/exchange/index.php). This interest has been stoked, at least in part, by the

terms of the new Assistive Technology Act, which require all State AT Programs to operate an equipment exchange or equipment recycling program. In the interest of efficiency and economy, a national meeting of all those interested in adopting the DATI's AT Exchange model has been scheduled for February 27 and 28 in Philadelphia. DATI staff, and representatives of AgoraNet, the company contracted to construct the site, will showcase the system and its capabilities, and work with other interested states to identify additional features and data collection functions to be built into the next generation of the system.

This type of cooperation is very typical among the State AT Programs. "We have relatively little federal funding but a very large mandate," says Mineo Mollica. "We have to maximize our resources, and sharing new materials and tools across programs has proven to be one very effective way for us to 'do more with less.'" ■

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 the loan of the equipment 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. ■



Please Keep Us Posted!

Has your address changed? Are you receiving duplicates? Would you prefer to receive the newsletter via email?

If the address we have for you is incorrect, please type or print your correct address on the form below and forward it to DATI along with your current mailing label or the first page of your electronic newsletter. If you no longer wish to receive this newsletter, visit www.dati.org/news/unsubscribe.html or contact our central office.

Do you know a friend or family member who would be interested in receiving the newsletter? Please provide him/her with the subscription form below.

The AT Messenger Subscription Form

- I am a Delaware resident; please sign me up to receive *The AT Messenger*
- Please cancel my subscription to *The AT Messenger*

Name: _____ Title: _____

Affiliation: _____

Address (check one): Business Residence _____

City/State/Zip: _____

Phone: _____ Fax: _____

Email (check one): Business Residence _____

Format: I have provided my email address above, please send me an electronic version (large print, plain text, PDF, and HTML versions are available).

I prefer to receive a print version of *The AT Messenger* through the mail.

Indicate if an alternate format is needed:

- audio tape Braille large print

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 (please specify) _____

interested citizen

other (please specify) _____



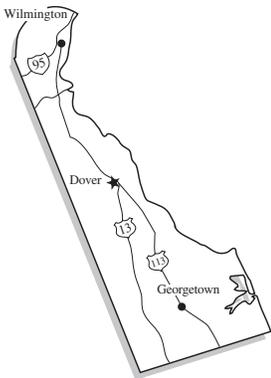


Delaware Assistive Technology Initiative
 Center for Applied Science & Engineering
 University of Delaware/Alfred I. duPont
 Hospital for Children
 PO Box 269
 Wilmington, DE 19899-0269

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

Address Service Requested

01020306



**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
 Cheer Community Center
 20520 Sand Hill Rd.
 Georgetown, DE 19947
 (302) 856-7946; (302) 856-6714 (voice or TDD)

The AT Messenger is published quarterly by the Delaware Assistive Technology Initiative (DATI). Dissemination of this newsletter to other people, association newsletters, and electronic mailing lists is encouraged. Information contained in this publication may be reprinted without permission, although attribution to the author and DATI is required.

Delaware Assistive Technology Initiative
 Center for Applied Science & Engineering
 University of Delaware/
 Alfred I. 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
 dati@asel.udel.edu; www.dati.org

DATI is funded by the Rehabilitation Services Administration (RSA) of the U.S. Department of Education, Grant #H224A050008 to the University of Delaware. This publication does not necessarily reflect the position or policy of RSA/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.



Alfred I. duPont
 Hospital for Children
 Nemours
 Children's Clinic