THE INDEPENDENT

the hardest battle is to be nobody-but-yourself
in a world that is trying to make you like everybody else.
e.e. cummings

SUMMER 2007, VOL.19 NO.4

SUMMER CAMP

With summer approaching, its time for you to start thinking about camp. Do you have questions about whether the camper in your family would enjoy and benefit from going to camp?

The staff of the New York State Office of Mental Retardation and Developmental Disabilities has written a brochure, addressing these issues.

- Is the person ready for a camp experience?
- What are the qualifications of the camp director and counselors?
- What services are available?
    - Settings and programs
    - Medical and nutrition
    - Waterfront safety

To view this brochure on line go to www.omr.state.ny.us/hp_camp_ safeguarding.jsp. You can also call Chris at 661-3013 for a copy of the brochure.

TRANSITION NEWS BEGINS ON PAGE 7

FreeEmergency Info Online

A free online service www.EmergencyInfoOnline is a printer friendly directory produced by Bridge Multimedia. This preparedness tool offers a wealth of compiled digital information regarding emergency preparedness, response and recovery - with a particular emphasis on individuals with special needs. It provides in-depth information to address a broad range of questions that students and parents might have, including assistance that the FCC, the Department of Homeland Security and FEMA can provide to ensure that individuals with disabilities can access emergency information and to assist with emergency planning. For more information, go to www.EmergencyInfoOnline.org.

DISABILITY RIGHTS ON LINE

The Disability Rights Section of the Civil Rights Division of the U.S. Department of Justice has recently posted the 18th Edition of Disability Rights On-Line News, which provides readers with some of the latest information surrounding efforts to uphold the rights of people with disabilities across the country. The text is available in HTML and PDF formats, and you may also read back issues of the publication. Visit: http://www.usdoj.gov/crt/ada/disabilitynews.htm.

VESID POSITION

Education Program Assistant (EPA, Grade 14)

VESID is seeking qualified candidates to join the Interagency, Legislative, Family, & Community Affairs (ILFCA) unit at VESID to manage the State Rehabilitation Council (SRC), assist the ILFCA Coordinator with government relations and provide administrative assistance to the ILFCA unit.

Qualifications: Masters Degree preferred or a bachelor's degree with five years experience in program management or human services. A working knowledge of State Vocational Rehabilitation Services and familiarity with the State legislative process is a plus.

Salary: Approximate hiring rate $35,428; maximum grade rate $43,840.

The Council's mission and responsibilities are articulated in the federal Rehabilitation Act/ Title IV of the Workforce Investment Act).

Essential Function: SRC Management and Coordination

Requisite skills: **Organization**

- Demonstrate excellent organization skills in coordinating varied administrative Council responsibilities.

- Execute and coordinate a range of administrative requirements (e.g., scheduling and processing facility contracts for meeting space/hotel rooms; process expenditure authorizations in a timely manner, etc.);

- Develop annual budget, justification and related documentation to secure State Education Department authorizations;

- Schedule and negotiate meeting space and logistics for quarterly meetings and interim committee meetings/ teleconferences, etc.;

- Assist Council members in meeting reasonable accommodation needs;

- Overseeing the processing of Council member's travel vouchers, facility/hotel payment processing and assist VESID personnel with securing authorizations;

- Insure consistent communication with Council members and track/ support committee activities;

Requisite skills: **Facilitation**

- Actively facilitate Council meeting and support the Council Chair in conducting Council meetings;

- Assist in facilitating Executive Committee teleconferences to plan Council meeting agenda and Council operations;

- Facilitate and support the work of VESID staff serving as committee liaisons;

- Facilitate SRC Chair and Executive Committee communication with Deputy Commissioner, ILFC Coordinator, and VESID Managers.

Requisite skills: **Communication**

- Demonstrate excellent written and verbal communication skills in carrying out a range of Council responsibilities:

- Develop Council Agenda with SRC Chair, Executive Committee, VESID Committee Liaisons and the ILFCA Coordinator;

- Generate Council meeting minutes;

- Responsible for compiling and writing SRC Annual Report;

- Develop correspondence on behalf of the Council as needed;

- Responsible for collating and editing public comments from regional VESID State Plan Public Forum;

- Demonstrate ability to effectively address the Council and represent the Council at other public forums;

- Coordinate Council communication with the public and stakeholders.

Essential Function: Assist ILFCA Coordinator with Government Relations

Requisite skills: <u>Organization and Computer Skills</u>

- Coordinate and track assignments for VESID comments on proposed state legislation;

- Assist ILFCA Coordinator with scheduling legislative appointments;

- Assist ILFCA Coordinator in developing legislative handouts and resource packets for distribution**;**

- Conduct legislative and special projects research.

Essential Function: Assist ILFCA Unit with Administrative Functions

Requisite skills: <u>Computer and Writing Skills</u>

- Assist ILFCA staff with research, special projects, and grant writing.

Send resumes to: Consumer Directed Choices, Inc., 7 Washington Square, Albany, NY 12205; Attention: Danielle Gamier Program Director; fax 518-690-7153; for more information call 518-464-0810; e-mail- ProgramResumes@ cdchoices.org

Americans with Disabilities Act (ADA) Best Practices Toolkit Update

On December 5, 2006, and February 27, 2007 the Civil Rights Division of the U.S. Department of Justice (DOJ) issued new installments of a technical assistance document designed to assist state and local officials in improving compliance with Title II of the Americans with Disabilities Act (ADA) in their programs, services, activities and facilities. The new technical assistance document, which will be released in several installments over the next ten months, is entitled “The ADA Best Practices Tool Kit for State and Local Governments.” The documents newly released in February address Effective Communication Requirements Under Title II of the ADA and 911 and Emergency Communications Services.

The Tool Kit is designed to teach state and local government officials how to identify and fix problems that prevent people with disabilities from gaining equal access to state and local government programs, services, and activities. It will also teach state and local officials how to conduct accessibility surveys of their buildings and facilities to identify and remove architectural barriers to access.

This new information may be accessed by visiting DOJ's ADA website, and is also located in the Hot Topics section of www.DisabilityInfo.gov.

April 2007

PROYECTO VISION

Report identifies strategies to increase employment of Latinos with disabilities.

Latinos are the fasting growing population in the U.S., but they often have lower levels of educational attainment, are more likely to live near or below the poverty level, and are disproportionately affected by chronic health conditions. For Latinos with disabilities in this country, their double minority status even further increases their likelihood of unemployment, poverty, and inadequate health care.

In response to the need for a comprehensive examination of topic, Proyecto Vision recently released *Latinos with Disabilities in the United States: Understanding and Addressing Barriers to Employment.* The report is an extensive gathering of research and statistical data on disabled Latinos and employment and is enriched with the first hand knowledge that Proyecto Vision and its regional partners have gleaned from five years of providing localized technical assistance to disabled Latinos across the country.

“In 2000, the U.S. Census Bureau released data showing that 24% of working age Latinos in the US had a disability compared to 18.6% for all groups,” says Arturo Lopez, administrator for the largely rural San Joaquin Valley district of the California Dept. of Rehabilitation. “Working age Latinos are becoming disabled from injuries in dangerous work environments and heavy manual labor, including farm work; lack of access to medical care and insurance, complex health conditions such as HIV/AIDS, diabetes and obesity; violence, including the effects of firearms”.

Despite these formidable hardships, many Latinos are deeply reluctant to ask for help, the report says, while few disability or vocational service agencies offer culturally relevant Spanish-language outreach and information materials.

There are, however, signs of improvement and possibility. *Latinos with Disabilities in the United States* highlights innovative research and employment projects that are working to reduce barriers and presents numerous profiles of Latinos who have found success. “I am very impressed with the comprehensiveness and the quality of this report. Most important, I am impressed by the message of hope, the promise of real equality of opportunity,” says Fredric Schroder, former Commissioner of the Rehabilitation Services Administration. “The report offers a comprehensive resource for professionals and minority individuals themselves as they work toward first-class status in society. Thank you for such an important contribution to improving opportunities for minority individuals with disabilities.”

The report also makes four concrete recommendations on ways to improve the situation for Latinos with disabilities:

- **Improve Vocational Rehabilitation Services for Latinos** by increasing cultural responsiveness, including culturally diverse interpretations of independent living and developing more Latino role models within the system.

- **Re-envision the Disability Community’s Approach to Latinos** by adopting effective outreach methods, integrating culturally appealing messages, and bringing more Latinos with disabilities into leadership positions.

- **Build the Latino Community’s Capacity for Including People with Disabilities** by introducing disability topics into the Latino community, educating Latino community leaders about disability issues and building networks between job developers and Latino business entities.

- **Increase Overall Visibility of Latino leaders** by cultivating additional public policy advocates who are Latinos with disabilities.

Proyecto Vision has a bilingual web site at www.proyectvision.net

Information appeared in the newsletter of World Institute on Disability 2006: The Year in Review

FOR SALE

WALKER WITH WHEELS, SEAT AND SELF LOCKING BRAKES $500 WHEN NEW.
WILLING TO SELL FOR $100 CALL CHRIS AT 661-3013 FOR MORE INFORMATION

TRANSPORTATION FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES

Through a grant from the Western New York Developmental Disabilities Services Office, Southwestern Independent Living Center provides FREE evening and weekend wheelchair accessible transportation to Chautauqua County residents with developmental disabilities who are living with family members. This service is not exclusively for people living with parents. Riders can live with their parents, spouse or their own children. Riders can use this transportation service throughout the county for recreational purposes. Riders must provide documented proof of disability.

For more information, call Helen at 661-3010.

SPORTS IN ACTION

Are you interested in playing wheelchair football, or participating in wheelchair bowling?

It's great exercise! And a great way to get out and meet some new people!

If you are interested, call Helen at 661-3013.

CLASS ACT

Senator Tom Harkin (IA) and Representative Danny Davis (IL) have sponsored bills called CLASS (Community Living Assistance Services and Supports) Act in both the U.S. House and Senate.

These identical bills would provide (insurance-type) payments to working individuals who either become disabled, or who have existing disabilities. This intends to be a national program which would be entirely funded through the aggregate of voluntary employee payroll deductions. All of the employee contributions would be paid by the employee (ie., there is no mandatory cost share by the employer).

All employees over the age of 16 would be automatically enrolled in the program initially, and would have to affirmatively choose to opt-out. Once a worker decided to opt-out, he/she would have a limited time in which to re-enroll. It is estimated that the individual employee payroll deduction would be $15-$20 per month, and the bill limits the ability to increase the amount of the deduction/premium above this amount for those that are enrolled the first year. The premiums for those enrolled in subsequent years would be subject to a cost of living increase, as well as an increase based on their age.

Workers' payments would be aggregated in an "Independence Fund" which would be managed by HHS. After a worker pays in to the fund for 20 quarters, he/she would be eligible for cash benefits if he/she meets the disability criteria for benefits.

Adults whose disability results in two ADL (activities of daily living) limitations or equivalent cognitive impairment would receive a Tier 1 benefit of $50 per day ($1500 per month). ADL's are defined as eating, toileting, transferring, bathing, dressing, and continence. Adults whose disability results in four or more ADL limitations or equivalent cognitive impairment would receive a Tier 2 benefit of $100 per day ($3000 per month). These payments would continue for as long as the specific ADL limitations last. The state's Disability Determination Service would evaluate eligibility.

There is no prohibition on continuing to work while receiving benefits under the program. Although it is not specified in the bill, the cash benefit under the program is intended to be used for services and supports necessary for the person with a disability to stay in the community. In addition, the cash benefits under the program would not be considered either earned or unearned income, and so would not affect Medicaid benefits. The IRS impact is unclear at this point.

On March 21 bill H.R. 1621 was referred to the House Committee on Energy and Commerce. You can express your support by contacting: Rep. John Dingell Chairman, Committee on Energy and Commerce, 2125 Rayburn House Office Bldg., Washington, DC 20515; (202) 225-2927 (V); e-mail; go to http:/energycommerce.house.gov/membios/contact_form.shtml.

In the Senate bill S.799 was referred to the Senate Committee on Finance March 7. You can contact either Sen. Max Baucus, committee chair or the ranking member Chuck Grassley at the Committee on Finance, 219 Dirksen Senate Office Bldg., Washington, DC 20510-6200; phone (202) 224-4515. New York Senate Charles Schumer is a member of the committee. You can contact him in Buffalo at 846-4113 (V); Washington at 202-224-6542 (v), 202-224-0420 (TTY) or go to http://schumer.senate.gov and click the contact button.

HEALTH CARE FORUM

Governor Spitzer has directed the commissioners of the major state health agencies, including the Department of Health and Office of Mental Health, to travel the state and hold forums to listen to the health care needs of New Yorkers. Based on what they hear from citizens, they will be making recommendations on how to improve and coordinate support for people who use health care services in NY State.

It is very important that they hear about your concerns and priorities. At the first listening forum, aging issues were not even mentioned!

The only way they will hear about the needs of long term care consumers, particularly older adults, is if people speak out!

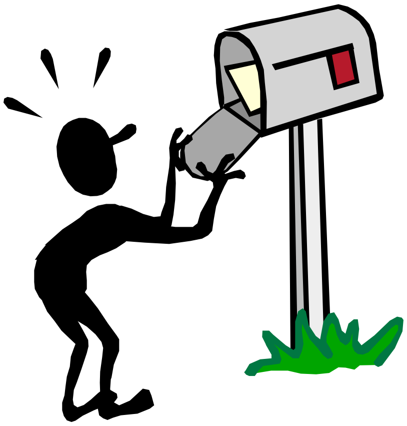
<u>Three Actions You Can Take</u>:

1. Send an email. Go to www.omh.state.ny.us/omhweb/news/pr_people_first_form.html and send a quick message. **IF YOU CAN, FORWARD THIS LINK TO YOUR MEMBERS OR OTHER PEOPLE!**

2. Mail a written letter or comment. You can write your own letter to the commissioners or go to www.health.state.ny.us/events/listening_forums/docs/comment card.pdf to print out a one page comment card. **IF YOU CAN, MAKE COPIES AND DISTRIBUTE THIS CARD TO YOUR MEMBERS OR OTHERS!** Send your messages to Richard F. Daines, M.D., Commissioner, NY DOH – Corning Tower, Empire State Plaza, Albany, NY 12237.

We recommend that people submit comments by July 15.

Information from Sara Rosenberg,
Executive Assistant/Office Manager
Long Term Care Community Coalition
242 West 30th Street, Suite 306. New York, NY 10001
sara@ltccc.org; Tel - 212-385-0355; Fax - 212-239-2801; www.ltccc.org; www.assisted-living411.org; www.nursinghome411.org



TRANSITION NEWS

Building a Future: Working with the Post-High School Expectations of Students & Parents

The transition from school to adult life can be a difficult process for high school students and their families. During this period of change, students must begin to set goals for their futures and plan with their families on how to reach these goals. This period of change may be even more difficult for students with disabilities who may have additional barriers to face when making plans for the future. The goals of this project included examining student and parent expectations, understanding what factors play an important role in the planning process, and discovering what circumstances may predict high expectations for students and parents. The study conducted by Institute for Community Inclusion/UCEDD University of Massachusetts Boston examined the impact of Social Security on the transition process for students who receive Supplemental Security Income (SSI) or Social Security Disability Income (SSDI).

Students and parents completed a survey once a year for three years. On the survey, participants rate a series of statements on a scale of 0 ('not true') to 3 ('completely true'). The survey questions addressed short-term and long-term expectations for life after high school, expectations for employment, the importance of work, student level of self-determination, and level of parent involvement in the planning process

FINDINGS

- Most students thought they were likely to find a job immediately after high school.
- Although both parents and students thought that work was important, they valued employment for different reasons.
- Students had higher expectations for work and rated their own level of self-determination higher than their parents did.
- Parents perceived themselves as more involved in students' life planning than students perceived them to be.

The findings of this study highlight some of the issues regarding short-term and long-term expectations for students as they prepare for the transition to adult life. In general, most students have high expectations for their employment after high school. To build on these expectations, schools need strategies to bring student and parent expectations more in line and to ensure that students are encouraged and supported in their career goals. Parents of young adults with disabilities and school staff working with these students might consider the following recommendations to meet students' expectations and improve employment outcomes:

1) Strengthen parent and student expectations early.

-Parents and students have high expectations for work after high school. Providing early and frequent opportunities for career exploration and planning will make it more likely that these expectations will be fulfilled.

- Introduce the concept of transition from school to work for all students as early as possible, because it is likely that students who are working while in school will have an easier time finding a job after high school.

- School staff should keep in mind the particular interests expressed by students with respect to the importance of work. Knowing that students rank earning a living and meeting new people as the most important aspects of work might help in designing various school-based efforts to promote career exploration and work experience.

- Develop and implement career-related curricula and materials which contain language and activities that reflect students' values related to work.

- Include competitive employment as part of students' Individual Educational Plans (IEP).

- Develop career portfolios for each student which contain information about the student's activities involving employment, such as work experience, internships, or job training.

- Work with local school-to-work partnerships as a way to link students with opportunities in local businesses. School-to-work activities provide a rich resource for career exploration and employment experience. Special education personnel should help to create and maintain a strong presence in school-to-work partnerships through membership on steering committees and the participation of special education students in all partnership activities.

- Give students and parents examples of students working in the community. Teachers should communicate success stories through meetings or newsletters, and have successful student workers return to talk to students and parents. These role models encourage students to work towards their goals.

- Learn about the impact of work on the students' Social Security benefits and how Work Incentives may help students save money for employment goals.

2) Connect students and parents as planning partners

Students and parents have differing views regarding expectations for work and beliefs in the student's level of self-determination. These differences in perception suggest that communication is an important area to focus on, particularly at the onset of the transition process. Parents and students who understand each other's ideas will be better able to work together to reach employment goals.

- At home, begin discussing career-related issues with students at an early age.

- Teachers should assign both classroom and take-home exercises related to career choices in order to promote discussion among their peers and with family members.

- Support students in actively participating with teachers and parents in the discussions related to their IEP by reviewing meeting agendas in advance and assisting them in developing questions and responses.

- Share career portfolios and work experiences routinely at parent-teacher conferences and IEP meetings.

- Engage in family activities which promote ongoing conversations about career exploration and expectations for future work.

- Encourage family members to allow students to accompany them to their job sites and then discuss the experience.

To access the entire study, go to http://www.communityinclusion.org/article.php?article_id=38&type=audience&id=5

END OF ONE-SIZE-FITS-ALL MEDICINE?

Most of the time, doctors can be pretty sure that the medicine they give you is going to help. But sometimes they just have to wait and see. The fact is, people don't all respond the same way to medications. A new field of research is trying to take out the guess work and help doctors predict which medicines will be right for you.

Because each of us has a unique set of genes, we all have tiny differences in our bodies that can affect the way medicines do their jobs. While typical doses of medicines work well for most people, in others they might not work at all or could cause unwanted side effects. The study of how our genes affect the way we respond to medicines is called pharmacogenomics. The ultimate goal of this research is to tailor medicines to people's unique genetic make-ups, making drugs safer and more effective for everyone in the end.

For example, some people don't process certain cancer medicines as fast as others. A normal dose for most people could be a dangerous overdose for them. Dr. Howard L. McLeod's NIH-funded research group at Washington University in St. Louis has found specific differences that can predict whether certain cancer drugs will be toxic to a patient. This knowledge can be used to design a test to help doctors know which patients shouldn't take these medicines.

"Patients will have more of a say in their therapy," McLeod explained at a recent scientific meeting. "It'll be their genes guiding decisions."

Anti-cancer drugs aren't the only ones that work differently depending on our genes. Dr. Stephen Liggett at the University of Cincinnati Medical Center studies the effects of medicines called beta blockers in people with chronic heart failure.

"These medicines can be very effective in some people," he told the audience, "but the variability in response is enormous." Liggett's group, with funding from NIH, has pinpointed a single genetic difference that determines how people with chronic heart failure will respond to a beta blocker called bucindolol. In the future, tests may be able to tell doctors which patients this medicine will be able to help.

Pharmacogenomics is affecting many other fields of medicine as well. Researchers supported by NIH have found variations in genes that affect how people with asthma respond to a type of inhaled medicine. These genes might one day tell doctors which medicines will work best on a given patient. Researchers are also using pharmacogenomics to understand why people react differently to medicines for mood and anxiety disorders. And the list doesn't end there.

So when might we see practical changes from these advances in our health care? "Health care systems will gradually change," predicts Dr. Rochelle Long of NIH's National Institute of General Medical Sciences, who directs the Pharmacogenetics Research Network, a nationwide research effort sponsored by NIH to drive this new field forward. "Some changes are happening now, and within 5 to 10 years, medicine choices and doses will become much more tailored."

Tests to predict how patients will respond to some cancer medicines are already on the market. The Food and Drug Administration, NIH's sister agency, has also begun including pharmacogenomic information on some drug labels.

Ultimately, with the right privacy laws and security measures in place, we might all have cards in our wallets and doctors' offices containing our genetic information. Our doctors will use this information to predict which medicines will work best in our bodies. But Long cautions, "How to consider the sum total of all this research information is still a considerable challenge. That world is still some distance off in the future."

Pharmacogenomics isn't the only way to practice personalized medicine. Start your own personalized medical plan now:

- **Gather your family's medical history** to find out what risks you might have inherited. Then talk to your doctor about what you can do to lower these risks.
- **Start moving.** An active lifestyle can help ward off health problems. Walk, run, bike, swim, garden, or do any other physical activity you enjoy. Talk to your doctor about an exercise program that's right for you. NIH has many resources about exercise and physical fitness at health.nih.gov/result.asp/245.
- **Develop good eating habits and control your weight.**, Good nutrition is a big part of staying healthy. NIH has resources to help at health.nih.gov/result.asp/474.
- **If you smoke, quit.** Smoking is the third leading cause of death in the U.S. For resources to help you quit, see health.nih.gov/result.asp/607.

Web Sites

Medicines for You :
www.nigms.nih.gov/medsforyou
/index.html

The Promise of Pharmacogenomics:
www.ncbi.nlm.nih.gov/About/
primer/pharm.html

Information from Nat'l Institutes of Health's *News in Health*, June 2005 available on the web at
http://newsinhealth.nih.gov/2005/June2005/
docs/01features_01.htm#feature01

CHANGES IN EPIC COVERAGE

The recently passed NYS budget has changed Epic. Prior to July 1, 2007, seniors could join EPIC and be exempt from joining a Medicare Part D plan as well. Beginning on July 1, 2007 all EPIC enrollees will be required to join a Medicare Part D drug program as a condition of EPIC eligibility.

EPIC will help in many ways to make this advantageous for seniors enrolled in EPIC.

EPIC will enroll seniors into a Medicare Drug Plan based on the drugs and pharmacy they use if seniors did not do it themselves.

EPIC will provide “wrap around” coverage for drugs not covered by the drug plans, for costs not paid during deductible and gap coverage. In other words EPIC will be the secondary coverage. Medicare Part D will be the primary coverage.

EPIC will work differently for the Fee and Deductible Plan Enrollees and Medicare Part D.

Those seniors enrolled in the Fee Plan will be handled this way. EPIC will pay the Medicare Part D premiums up to the benchmark amount of $24.45 (for 2007) for all fee plan enrollees, including those already enrolled in Medicare Part D plans. If you are enrolled in a Medicare Part D that costs more than $24.45, EPIC will pay up to that amount. If your plan costs less than $24.45, EPIC will pay the premium in full. Seniors will continue to pay their quarterly EPIC fees. Those seniors eligible for the Full Extra Help (or LIS) from Medicare will continue to have their EPIC fees waived.

Those seniors enrolled in the Deductible Plan for EPIC will be handled this way: seniors enrolled in Medicare Part D will receive an annual credit toward the benchmark premium amount ($24.45) for the months enrolled in a Medicare Part D Plan. These EPIC enrollees will be responsible for paying their own Medicare Part D premiums.

As with Medicare and Medicare Part D changes, there are exceptions. The exceptions are:

- Those seniors who did not meet their EPIC deductible in previous years will not have to join a Part D plan.

- Seniors in Medicare Advantage plans that do not offer a cost-effective Part D option without reducing other medical benefits will not have to join a part D plan.

- EPIC enrollees, who would lose, or their dependents who would lose, retiree health coverage if enrolled in Medicare Part D will not have to join a Part D plan.

This policy change makes another confusing alteration to the rules regarding Medicare Part D. This is a new program and with new programs there are growing pains. Remember that EPIC will be notifying each enrollee of how this change will affect you. You will be hearing from EPIC in a variety of mailings that are coming out. EPIC operators are available at (800) 332-3742 (voice), tty call 1- 518-486-2507 (the NYS Office of Technology tty information operator for most State offices in Albany) and ask for the EPIC program) to answer your questions and concerns. This change will give you two-fold coverage for your medications, you will have the Medicare Part D plan as primary coverage and EPIC as secondary coverage.

Article appeared in the May 14 issue of the Jamestown Post Journal. Author was Janell Sluga, Health Insurance Information, Counseling & Assistance Program for the Chautauqua County Office of the Aging.

The information for last issue’s transition article came from the National Center on Secondary Education and Transition’s web site www.ncset.org.

SILC WILL BE CLOSED MONDAY, SEPTEMBER 3 FOR LABOR DAY.

TO GET MORE INFORMATION

If you would like to receive more information about the services we provide, please fill in the information below, check the appropriate box/ boxes and return it to Southwestern Independent Living Center, Inc., 843 North Main Street, Jamestown, NY 14701. Or you may call us at (716-661-3010); or 661-3012 (TDD). E-mail- info@ilc-jamestown.ny.org; web site- http://www.ilc-jamestown-ny.org

Name:______________________________________

Address:____________________________________

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Phone:______________________________________

☐	Peer Support	Individual and Group sessions.
☐	Advocacy	Assistance with legal and economic rights.
☐	Housing	Assistance in locating adequate, affordable, and accessible housing
☐	Transportation	Wheelchair Accessible van available for medical and social appointments
☐	Information and Referral	Information about other area services and organizations.
☐	TDD Relay Calls	For hearing impaired individuals with Telecommunication Devices for the Deaf
☐	Public Education	Regarding issues pertaining to people with disabilities.
☐	Newsletter	A bi-monthly publication of SILC.
☐	SILC Membership	A one year membership is $5.
☐	WIPA	Work Incentives Planning and Assistance

WHEEL CHAIR BASKETBALL STARTS MAY 22 AT THE ICE ARENA.

Lakers Sled Hockey program seeks new basketball players, wheel chairs and challengers!

As part of its summer training program, Lakers Sled Hockey will start a wheel chair basketball program, starting Tuesday May 22 at 6:30 PM at the Jamestown Savings Bank Ice Arena. The program will continue on Tuesdays, May 29, June, 5, 26, July 3 (tentative), July 10, 17 and 24.

The Lakers team, part of CCYHA's youth hockey program, seeks new players for this off-ice activity. Young men and women ages 6 through 18 whole are physically challenged but can ride in a wheel chair are welcome to sign up. Volunteers will assist in pushing the wheel chair if necessary. Youngsters not in the hockey program are welcome to participate.

Lakers Sled Hockey Coach Rod Kolstee notes, "With the ice off of Rink A at the arena this gives our kids the opportunity to try another sport and to keep them in shape over the summer." The basketball program is coached by Dan Keefe of Cummins, Inc. and other volunteers. Interested families may register or direct questions **to Jeff Moran, Team Manager at 716-450-3700.** Registrations for the early fall sled hockey program are also being accepted. Families in need of transportation assistance should also contact Mr. Moran. The Sled hockey starts up again in late August.

The project is also seeking to borrow several wheel chairs for use by youth who are challenged but do not normally use wheel chairs. "Challengers" - well-abled youth, young adults or organizations who want to play basketball at the wheel chair level are also being sought to give the Lakers team the opportunity to play a regular game. Contact Mr. Moran at the phone number above.

The expenses for this summer program are covered by donations. Contributions in support of this project may be sent to CCYHA Lakers Sled Hockey c/o JSB Ice Arena, 319 W. 3rd St. Jamestown NY 14701.

Happiness is a butterfly,

which, when pursued, is

always just beyond your

grasp, but which, if you

will sit down quietly, may

alight upon you.

~ Nathaniel Hawthorne