

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 **Winter 2007**

**TRANSITION NEWS
BEGINS ON PAGE 10**

TAXES

**DO YOU NEED YOUR TAXES
DONE FREE OF CHARGE? IF,
SO CALL DICK JOHNSON AT
SILC 661-3014 FOR AN
APPOINTMENT. ANYONE IS
ELIGIBLE REGARDLESS OF
INCOME.**

NO HEALTH INSURANCE? YOU MAY BE ELIGIBLE FOR FREE OR LOW COST HEALTH CARE COVERAGE

You and your family may be eligible for help with medical bills for routine preventive health care, medications and unexpected medical costs, like emergency room and hospital care.

The people who make up your household and the amount of your household income will determine what kind of coverage you may be eligible for.

You can find out more about these different health care programs by calling a local Facilitated Enroller, a person who can help you sort out your coverage needs and apply for the right program. You can find the number below.

Several types of health care coverage are available to meet your family's needs

NYS Medicaid/Child Health Plus A

New York State Medical Assistance Benefits are available to children and adults who have family incomes that meet Medicaid guidelines. Income limits vary depending on age, and pregnancy status. Medicaid eligible persons also have access to health insurance through the Medicaid Managed Care Program.

Child Health Plus B

A New York State health care coverage program available to children, birth through 18, who do not have health insurance but have family incomes too high to qualify for Medicaid. Premiums vary depending on household income, from \$0 to a full premium. Coverage is available through participating insurance companies.

Family Health Plus

A New York State health care coverage program available to adults, 19-64, who do not have health insurance but have incomes too high to qualify for Medicaid. Working adults who have recently lost work may apply. No premium is required, but income limits apply. Coverage is available through participating insurance companies.

Healthy New York

A New York State health insurance program for working uninsured individuals or sole proprietors who have incomes too high for other programs. Higher income limits apply. Requires a reduced cost premium. Available through participating insurance companies.

THREE EASY STEPS TO ENROLL

Call and make an appointment with a Facilitated Enroller. If you don't have transportation, the Enroller may be able to meet you at another convenient location.

Collect your family's documentation. The Facilitated Enroller will explain what information you will need.

Go to your appointment where the Facilitated Enroller will help determine which program will work best for you, and complete the application.

If you are eligible for one of the programs listed here, you may also be asked to choose one of the health plans offering these products in Chautauqua County. For information, call one of the numbers listed below.

Chautauqua Opportunities

Jamestown- 661-9430 ext. 260
Dunkirk- 366-4373 ext. 290

Blue Cross Blue Shield of WNY

Jamestown- 1-800-888-5407
Dunkirk- 1-800-888-5407

Fidelis Care New York

Dunkirk- 363-1020
Jamestown- 487-5131

Univerva Community Health

Dunkirk and Jamestown
1-800-494-2215
Local- 574-1679

If you need more information, call SILC at 661-3010 (Voice) or 661-3012 (TTY)

LEGISLATIVE NEWS

Because 2006 was an election year, the bills the HLAA-NYS (Hearing Loss Association of America New York State) have been supporting must be reintroduced in both houses of the NYS Legislature and will have new numbers. This will happen soon since the legislative committee members have been contacting their legislators requesting that they reintroduce the bills.

In the meantime, the committee recommends that all New York State members of HLAA have at their fingertips, the names and contact information for their state legislators. If you do not know who represents you in Albany, call your election commissioner or go to: www.congress.org/congressorg/home/. Be prepared to write to your legislators in support of these bills once the new numbers are available.

These are the bills HLAA-NY continues to support:

Hearing Aid Insurance for All New Yorkers would require insurance companies

to provide \$1,000 for up to two hearing aids every three years.

New York State Tax Credit would allow a tax credit of \$500 per hearing aid every five years.

Telecommunication Access for all New Yorkers would direct the establishment and administration of a statewide program for telephone access for all New Yorkers including those with hearing loss.

Interagency Council would create an Interagency Council for persons who are deaf, deaf-blind, or hard of hearing.

In addition, HLAA-NYS will continue to support the **Federal Tax Credit** bill that would allow a tax credit of \$500 per hearing aid, available once every five years. HLAA is hoping to soon have a new sponsor for this bill in the House of Representatives.

To view these bills on the Internet, visit:
State Assembly: www.assembly.state.ny.us
State Senate: www.senate.state.ny.us
Federal: www.Thomas.loc.gov

With legislative support statewide, and persistence from HLAA members statewide, the legislative committee is hopeful that these bills will pass this year.

Information appeared in the Winter 2007 issue of Hearing Loss Association of America New York State *Reporter*.

**NY RELAY WELCOMES
CAPTIONED TELEPHONE
SERVICES**

Beginning January 1, 2007 New York Relay Captioned Telephone Service became available in the State of New York for people

who are hard-of-hearing, have experienced hearing loss later in life, or are deaf individuals who prefer to use their own voice.

Captioned Telephone Service is ideal for people who have difficulty understanding spoken words over the telephone. A special telephone called "CapTel™" is required in order to access Captioned Telephone Service. This amplified telephone works like any other telephone with one important addition- it displays every word the caller says throughout the conversation. Calls are made in a natural manner-simply dial the telephone number directly for the person you are calling. Captions appear nearly simultaneously with spoken words.

If you or someone you care about, have difficulty hearing on the phone, read on!

Sprint has arranged, for a limited time only, to make CapTel™ phones available for just \$99.00!

This first-come, first-served offer is limited to 1 per household. There will be 300 CapTel™ phones available per month for purchase. If orders exceed 300 per month, a waiting list will be created for the following month's allocation.

Now is your chance to try CapTel™ at no risk! There is a 90 day guarantee from the manufacturer that means if you are not entirely happy with CapTel™ simply return the phone for a full refund.

For more information on ordering a CapTel™ phone, please visit the New York Relay website at www.nyrelay.com. You may order online. Just click on the picture of the CapTel™ phone! Or you may call 1-800-233-9130 (V/TTY) to order directly.

NY Relay, connecting people to people-one phone call at a time!

Mary Beth Mothersell, LMSW
New York Relay Account Manager
Sprint

mbmothersell@sprint.com

Information appeared in the Winter 2007 issue of Hearing Loss Association of America New York State Reporter.

Understanding Supports and Services for Resource Purposes

Parent to Parent of NYS has recently compiled a Guide to Understanding Supports and Services for Resource Purposes. This Guide was developed to inform families about the wide range of supports and services available to qualified individuals and to assist them in accessing those services for their loved one with a developmental disability.

While the Guide includes a wide range of services, it is in no way inclusive of every service offered by OMRDD. New York State's "consumer first" philosophy allows qualified individuals with mental retardation and development disabilities to build services around their specific goals, needs, and desires. When services and supports are built around people and not programs, the variety of ways to support individuals with developmental disabilities becomes limitless.

The staff at Parent to Parent of NYS are not experts in service delivery. Rather, they are parents of children with special needs whose expertise lies in the desire and motivation to create a satisfying quality of life for their children and their families. Creating that life requires an understanding of the terms and acronyms associated with the provision of supports and services. While there is no one resource that can address every question, it is their objective that the Guide will provide direction and a general overview of what is available.

Everyday, P2P receive calls from people who are trying to help their loved one(s) with developmental disabilities. The questions are

endless, but they always include a heartfelt request for help. The calls include requests for help with understanding how, in one way or another, to assist the person they support and care for. Often, the questions revolve around accessing services and understanding terms and acronyms.

Parent to Parent believes the Guide will prove to be a valuable tool for people with disabilities, parents and caregivers. Copies of the Guide can be downloaded from the Health Care Information and Education section of the Parent to Parent of NYS website at www.parenttoparentnys.org

TIMOTHY'S LAW BECOMES LAW

Timothy's Law was signed into law September 15, 2006.

The law requires insurance companies to cover 30 inpatient and 20 outpatient days of treatment for mental health services. Companies must fully cover "biologically based mental illness" including major depression, obsessive compulsive disorder, anorexia and binge eating.

Timothy's Law would also require coverage for children with attention deficit disorder, disruptive behavior disorders that include suicidal symptoms.

The state would pay for the premium increase for companies with 50 or fewer employees.

NYS would pay for the premium increase for companies with 50 or fewer employees. The measure is expected to increase premiums about 3 percent and no more than 10 percent while providing a much wider array of mental health services.

"People with mental illness around New York State will now have parity like people with

other illnesses,” said Sen. Thomas Libous, Broome County Republican, who carried the bill even after he left the mental health committee.

Implementation of the law may take some time. The bill was supposed to have been passed by both houses in June, but the Assembly didn’t pass it until September. That left just days for the industry to adhere to its conditions and more time will likely be needed. The New York Health Plan Association ...called the January 1 start date “simply impractical”.

Story appeared in the Jamestown Post Journal, September 15, 2006.

**ACCESSIBILITY OF MEDICAL
AND HEALTH CARE
FACILITIES**

The Council of Better Business Bureaus’ Foundation has published a series of brochures on accessibility. Here is a summary of material from their brochure on Medical Offices.

Title 111 of the Americans with Disabilities Act requires that physical alterations to public accommodations undertaken after January 26, 1992, be readily accessible to and usable by people with disabilities to the maximum extent feasible. The term “alterations” refers to changes a business is undertaking for its own purposes, such as renovation, and does not refer to steps a business takes to comply with the ADA’s requirements for barrier removal. Alterations do not include simple maintenance. Alterations that affect or could affect usability are required to be accessible.

This article contains information specific to a health care facility. For general accessibility information, contact Chris to receive a copy

of the entire brochure or call Helen for specific information about ANSI standards.

Q. Can a health care facility deny service to a person with a disability because his or her disability or behavior resulting from the disability may be disturbing to other patients?

A. No. The ADA specifically prohibits this type of discrimination.

Q. Must health care facilities allow service animals, including guide dogs, to accompany patients with disabilities into health facilities?

A. Yes, except in rare circumstances that the presence of an animal would compromise health and/or safety standards, such as in an operating room.

Q. Are health care facilities allowed to ask patients or clients with disabilities about their medical or whether they have certain conditions or diseases?

A. Medical and health care facilities may only ask questions that are necessary for the treatment and care of patients. Facilities may not ask such questions as a method of eliminating patients or clients from services to which they are entitled. Nor can such questions be asked because of fear, myths, or stereotypes about certain conditions or diseases.

Q. Can health care facilities refer a patient or client with a disability to another practitioner solely because the other practitioner is familiar with the patient’s type of disability?

A. Medical or health facilities that routinely make referrals may refer an individual with a disability to another facility or service only if the patient seeks or requires treatment or services outside the facility’s area of specialization. For example, a clinic specializing exclusively in drug rehabilitation could refuse to treat a person who is not a drug addict, but cannot refuse to treat a person who is a drug addict simply because

the patient tests positive for HIV. Conversely, a clinic that specializes in the treatment of individuals with HIV could refuse to treat an individual who does not have HIV, but it cannot refuse to treat a person for HIV infection because that person is also a drug addict.

Facilities that are not accepting new patients may refer new patients to another facility.

Q. What assistance must health care facilities provide for patients and clients who use wheelchairs or other mobility devices to ensure equal and effective treatment and services?

A. Individuals with mobility impairments often find it difficult or impossible to use certain standard equipment found in medical and health care facilities. For example, people who are not ambulatory cannot use standard-height examining tables.

Therefore, health care providers cannot conduct certain examinations that require patients to lie prone or supine unless the individual is lifted unto the table. Such measures can be embarrassing and undignified for many patients. Although people who use wheelchairs or other mobility devices are most often affected by this particular barrier to treatment, older patients and others who are semi-ambulatory can also experience difficulty.

An adjustable-height examining table is an ideal solution, if it is readily achievable to obtain one. Such tables can be lowered to the height of a wheelchair seat, thus enabling some patients who use wheelchairs to move independently, or with minimum assistance, from their wheelchairs to the table and back again. The adjustable feature also allows medical or health personnel to elevate the table to a comfortable height to conduct an examination.

If it is not readily achievable to obtain such a table, facilities must obtain, if readily

achievable, an inexpensive padded table the height of a wheelchair seat for use by patients who cannot use the conventional tables. This type of low table can also be used for some examinations of and consultations with patients who do not have disabilities. A group of physicians could purchase such a table and make arrangements to share its use.

If neither of these options is readily achievable, then medical and health care facilities must provide assistance to help patients onto high tables, including lifting them, if necessary. Such measures must be taken in a safe manner to avoid injury to both the health care personnel and the patient and to preserve the dignity of the patient to the maximum extent possible.

Similarly, health care facilities must provide such assistance to patients with mobility impairments who are having radiology exams or other tests conducted on surfaces that cannot be adjusted for height or that are inaccessible in some other way.

In all of these situations, medical and health personnel should follow the instructions and preferences of the patients with regard to lifting or providing other assistance.

Modifications to the manner in which certain examinations are conducted are also required. For example, some X-ray equipment used to take mammograms is built so the patient must stand to have the X-ray taken. Other mammogram equipment requires the patient to sit on a wheeled stool with a swivel seat. In both situations, a woman with a disability that prevents her from standing or sitting safely on such a stool would not be able to undergo the X-ray examination.

Replacing the stool with a stable chair or allowing the patient to undergo the examination from her wheelchair are appropriate methods of providing access.

Medical and health care facilities must provide assistance to undress and dress as needed or requested by patients with disabilities unless doing so fundamentally alters the services provided.

If they have a blanket policy prohibiting individuals other than patients in examination or treatment facilities, medical and health care facilities must modify the policy to allow a family member, friend or personal care assistant to accompany a patient or client when necessary during the examination or treatment.

Q. What access problems do patients with mobility impairments encounter at dentists' offices?

A. Some patients who use wheelchairs either cannot independently transfer into the dentist's chair or must remain in their wheelchairs because of their disabilities. For a patient who does not have to remain in his or her wheelchair and wishes to transfer to the dentist's chair, dental staff must provide assistance in transferring unless doing so would fundamentally alter the service provided.

Staff should follow the instructions and preferences of the patient with regard to lifting or providing the other assistance. Cushions or pillows may be necessary to enable a patient to sit comfortably in the dentist's chair for examination or treatment.

Some procedures do not require the patient to transfer from the wheelchair. In these cases dentists should allow the patient to remain in a wheelchair, if he or she wishes. Dentists must take steps, however, to ensure that the patient is made as comfortable as possible. If a patient can be treated only while seated in his or her wheelchair, dental staff must take whatever steps are necessary to conduct the examination and provide treatment unless to do so would fundamentally alter the nature of the treatment provided.

Q, How can health facilities provide communication with patients who are blind or who have limited vision?

A. Patients and clients with vision impairments may need orientation to locate the examination or treatment room within the medical or health care facility. It is customary to offer to orient a person with a vision impairment to his or her surroundings. If he or she accepts the offer of assistance, the staff person should offer his or her arm to the patient or client and guide the person to the appropriate area, altering him or her to obstacles along the way.

Printed material and information used by the health care facility such as consent-to-treatment and insurance forms must be accessible to people with vision impairments. Information about the condition for which the individual is seeking treatment, instructions that must be followed before certain tests and release-of-information forms must also be made available in an accessible format.

The best way to provide access to this information depends on the needs of the individual patient, the type of facility, its resources, and whether a particular option would pose an undue burden.

Methods to make material accessible include providing audio cassette tapes of the material and a cassette player in some situations. Large print materials are another inexpensive method for providing effective communication to many patients and clients with limited vision.

An inexpensive magnifier is also useful for some patients with limited vision. Brailled materials are an option for patients or clients who are blind, but not all people who are blind read Braille. Another method to provide effective communication to patients or clients who are blind or have limited vision is for staff to read the materials to them.

It is helpful to explain in advance the various procedures that are going to be performed. If

instruments are going to be used, an explanation about their function and purpose is important. If possible, allow the person to touch the implements. Let patients handle three dimensional models in the office, to explain procedures and treatments.

Q. What auxiliary aids and services must health care facilities provide to ensure effective communication with people with cognitive impairments such as mental retardation?

A. It is important to communicate clearly and simply with an individual with a cognitive impairment. In situations involving complex matters, people with cognitive impairments can benefit from the careful restatement or interpretation of concepts that fosters effective communication.

If it is necessary to obtain a signed consent to treatment form, make sure the patient is capable of making an informed decision about the proposed treatment or action. If the individual is not able to provide his or her informed consent, consent must be obtained from a parent or guardian.

If you would like a copy of the entire brochure, call Chris at 661-3013.

**IS VISION OR HEARING
LOSS KEEPING YOU FROM
USING A COMPUTER?**

Computer Connections at Prendergast Library can help you with assistive devices and introductory training. Call 484-7135 ext. 244 for information.

New equipment and training opportunities for Computer Connections are supported by Federal Library Services and Technology Act funds, awarded to the New York State

Library by the Federal Institute of Museum and Library Services.

**National Stroke Association's
New TIA Guidelines**

National Stroke Association has published new treatment guidelines for the prevention and management of transient ischemic attack (TIA) or mini stroke. A TIA is a brief episode of stroke-like symptoms such as sudden trouble talking, walking or seeing, paralysis on one side of the body or headache. These stroke symptoms go away within 24 hours and cause little or no permanent damage or disability. The new guidelines urge doctors to treat TIAs with antiplatelet medicine, such as aspirin to reduce the risk of suffering a more serious stroke. Read the entire report and learn more about the guidelines at <http://www.stroke.org/>.

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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.



TRANSITION NEWS



These are some helpful websites for anyone working with high school students:

Parent Briefs (at <http://www.ncset.org/publications/>) provides a series of publications about parent involvement in secondary education and transition.

Ticket to Work (at <http://www.vesid.nysed.gov/tickettowork>) details legislation providing a tool box of work incentives for people with disabilities.

National Collaborative on Workforce and Disability (NCWD) - Youth and Family Guide (at http://www.ncywd-youth.info/Who-Are-You/youth_and_Family/index.html) provides information about employment laws, services and programs for youth with disabilities.

Youth Leadership Forums (at <http://www/dol.gov/odep/programs/youth.htm>) provides a unique career leadership training program for students with disabilities.

Disability Benefits Planner (at <http://www/nls.org/planner/spring05.pdf>) provides keys to effective planning, assistance and outreach.

Career Zone (at <http://www.nycareerzone.org>) provides tools to use in career exploration, résumé writing and job searching.

Postsecondary Education Planning (at http://ccdnet.org/ecp_index.html) gives tips for prospective students with disabilities.

Postsecondary Education Planning for Assistive Technology (at <http://phhp.buffalo.edu/cat/transition/at.php>) is a guide to arranging for assistive technology on campus.

HEATH Resource Center (at <http://www.heath.gwu.edu/>) is a national clearinghouse on postsecondary education (college and vocational technical programs) for individuals with disabilities.

The National Information Center for Children and Youth with Disabilities (NICHCY) [at <http://nichcy.org/index.html>] is a disability-related information and referral center for birth to age

The Council for Exceptional Children (CEC) [at <http://www.cec.sped.org/index.html>] is a professional organization for educators working with exceptional children whose web site contains information about effective practices.

Parent Advocacy Coalition for Educational Rights Center (PACER) [at <http://pacer.org>] is a parent-to-parent information web site.

MAKE A DIFFERENCE

I am systems advocate at Southwestern Independent Living Center and am looking for volunteers to help me e-mail or phone government officials when I receive alerts about important issues that will affect the lives of people with disabilities.

When I receive an alert from Albany about health care, housing, transportation, or any other issue concerning people with disabilities, I will contact the volunteers by e-mail or phone with specific instructions on how to take action.

If you are interested, please contact Helen Kern at, 716-661-310 (V), 716-661-3012 (TTY), e-mail at helen@ilc-jamestown-ny.org.

VOTER REGISTRATION

If you have never voted before, you must be registered in order to vote. If you have moved since the last time you voted, you must register again.

The deadline for registering is approximately one month before the general election, or about October 5. The official Board of Election calendar has not been published yet. If you need a registration form, call Helen at 661-3010 (V) or 661-3012 (TTY).

CANCER TOOLBOX

The Cancer Survival Toolbox is a free, self-learning audio program that has been developed by leading cancer organizations to help people develop important skills to better meet and understand the challenges of their illness.

The goal of the Toolbox is to help you develop practical tools in your daily life as you deal with your cancer diagnosis and treatment. Family members and caregivers can also use the Toolbox on behalf of a child or anyone else with cancer.

The *Toolbox* includes ten modules. Modules 1 through 6 cover six basic skills that can help people with cancer meet the challenges of their illness. These skills are:

- • Communicating
- Finding Information
- Making Decisions
- Solving Problems
- Negotiating, and
- Standing Up for Your Rights

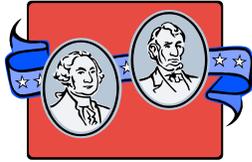
Modules 7, 8, 9 and 10 build on the skills learned in the first six modules and relate them to specific aspects of cancer survivorship. These three modules cover:

- Topics for Older Persons
- Finding Ways to Pay for Care
- Caring for the Caregiver
- Living Beyond Cancer

Information is available in English, Spanish and Chinese.

The Cancer Toolbox can be found at <http://www.cancersurvivaltoolbox.org/toolbox/Module.aspx>

Information appeared in the February 2007 e-newsletter of the American Brain Tumor Association.



SILC WILL BE CLOSED APRIL 6 FOR GOOD FRIDAY

TO GET MORE INFORMATION

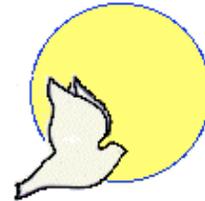
If you would like to receive more information about the services we provide, please fill in the information below, check the appropriate box/ boxes and return it to Southwestern Independent Living Center, Inc., 843 North Main Street, Jamestown, NY 14701. Or you may call us at (716-661-3010); or 661-3012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

Name: _____

Address: _____

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Phone: _____



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|--------------------------|--------------------------|---|
| <input type="checkbox"/> | Peer Support | Individual and Group sessions. |
| <input type="checkbox"/> | Advocacy | Assistance with legal and economic rights. |
| <input type="checkbox"/> | Housing | Assistance in locating adequate, affordable, and accessible housing |
| <input type="checkbox"/> | Transportation | Wheelchair accessible van available for medical and social appointments |
| <input type="checkbox"/> | Information and Referral | Information about other area services and organizations. |
| <input type="checkbox"/> | TDD Relay Calls | For hearing impaired individuals with <u>T</u> elecommunication <u>D</u> evice for the <u>D</u> eaf |
| <input type="checkbox"/> | Public Education | Regarding issues pertaining to people with disabilities. |
| <input type="checkbox"/> | Newsletter | A bi-monthly publication of SILC. |
| <input type="checkbox"/> | SILC Membership | A one year membership is \$5. |

WORK INCENTIVES AND BENEFITS ADVISEMENT PROJECT

Many individuals with disabilities fear that work activity will result in an immediate loss of case SSI or SSDI benefits, or a loss of health insurance through Medicaid or Medicare.

The Project will help individuals take advantage of special work incentives that will, in many cases allow them to retain cash benefits, Medicaid or Medicare, including:

- SSI budgeting rules and SSI rules for disregarding the income of students
- SSI's PASS (Plan for Achieving Self Support)
- SSDI's trial work period and extended period of eligibility
- New SSI and SSDI reinstatement provisions
- The 1619 (b) Medicaid and extended Medicare provisions

The Work Incentives and Benefits Advisement Project, a partnership of 6 agencies funded by the Social Security Administration under the Work Incentives Improvement Act, helps individuals maximize their employment potentials through benefits advisement services.

The project staff will serve any individual who receives Supplemental Social Security Income (SSI) or Social Security Disability Insurance (SSDI) benefits, receives extended Medicaid or Medicare benefits as special work incentives or is a special

education student, aged 14 or older, who receives SSI or SSDI benefits.

The project serves 16 WNY counties: Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Wyoming or Yates.

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.



