

AT Reuse Grantees by Type of Program, Level of Development, and Initial Requests for Technical Assistance

Program	Program Director	Type of AT Reuse and Program Purpose	Level	Comments and Unique Features	Staffing	Sustainability Plan	TA Requested
University of Kansas Center for Research, Inc.	Sara S. Sack	<p>Expand and improve current program – recycling of navigational and organizational AT and AT for LD and other cognitive impairments more efficiently.</p> <p>Nine activities planned above and beyond current AT Act grant.</p>	A	<ol style="list-style-type: none"> 1. Explore best practices software tools for Return on Investment (ROI) as a preferred means to determine program cost savings. 2. Explore emergency response plan. 3. Do not wish to retaining equipment for more than 90 days – find out demand for various types of equipment. 4. Pediatric and bariatric equipment 5. Develop general classification survey 6. Currently funded through Medicaid (Sharon Morton). 7. Also have AgrAbility grant and farmers use navigational technology. 8. Heavy use of volunteers – explore ROI and liability issues of using volunteers. KS Project will develop ROI and wage value of using volunteers and will share with other projects. 9. Cattle drivers across KS will provide transportation of AT. 10. Approach civic organizations for volunteers. 	<p>Patty Blackmore, Program Coordinator</p> <p>Sheila Simmons, AT for Kansans Program</p> <p>Jessica Brody, ATIA – e-waste recycling and legislation (1/2 states have e-waste legislation).</p> <p>Jackie Dwyer, AT for Kansans Program- very involved in database development.</p>	<ol style="list-style-type: none"> 1. National level manufacturers re: financial investment and dealing managing e-waste problem (pilot in KS and take beyond) (e.g., Garmin). 2. Insurance – who purchases high cost, lightly used DME and pilot recycling for insurance companies focusing on no more than 2 types of DME per year (e.g., bariatric equipment is high cost and very lightly used). 3. Partner with bariatric centers to get reutilized AT. 4. Homeland Security – plans to help underwrite the program. 5. Medicaid – currently is funding DME recycling in KS. If we can solve just one of their problems, we can sustain the program. 	<ol style="list-style-type: none"> 1. Classification system for AT Reuse Programs 2. Liability issues re: volunteers

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Easter Seals	Elisabeth Marx	<p>Establish program and Improve effectiveness.</p> <p>Plan calls for these steps:</p> <ul style="list-style-type: none"> • Survey farm families to determine if they are using AT. If not, is AT still usable. • Develop successful web-based reutilization system • 4 AT specialists in state to integrate AT into use • Outreach through AgrAbility grant – customize AT per farmer. 	N	<ol style="list-style-type: none"> 1. Will use commercially available, UD farm equipment like electronic feed carts; scooters and ATVs. 2. National AgrAbility database is very useful for finding AT solutions for farming families. 3. Wisconsin Easter Seals is one of 92 affiliate programs interested in serving underserved pops., such as rural families. They are working with Carol Moss of Rural Solutions in the DC Easter Seals office. 	<p>Graduate students will develop survey to determine what farmers with disabilities might use and what they currently have, what they have and are not using, and whether they would be willing to participate in a web-based exchange service.</p> <p>Mark Novak, will develop web-based prototype for AT exchange.</p>	<ol style="list-style-type: none"> 1. Good chance of funding through VR if outcomes for employment occur. 2. Coop. Ext. Service operate Natl. AgrAbility project for 15 years – handle website and promotion of program. 3. WISTECH – AT Act Program – is another partner and promotes them. 4. Easter Seals will maintain the reuse web site. 	<ol style="list-style-type: none"> 1. Sustainability issues – determining operational costs to sustain the program. 2. Best practices in device exchange programs.

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Sooner AMBUCS, Inc, OK	Adri-Anne Trammell	<p>Computer Reutilization – Established in 1998 with about \$4,000 a year.</p> <p>Goal is to expand program by increasing output to 500 computers with modems per year.</p>	I	<ol style="list-style-type: none"> 1. Started in a location with no heat or running water and able to relocate as a result of this grant. 2. AT Act grantee – recycled 300 models, MARC site now, XP orders, linked to OK AT Act website and get referrals. 3. Recipients must find a mentor; modems will enhance follow-up which will be done for a six-month period of time. 4. Current evaluation includes name, address, phone number, age, disability, type of activity to be achieved, reason for contacting Ambucs, level of satisfaction when they receive computer, type of computer, RAM, hard drive, type of software and AT 	<p>Adri-Anne Trammell – 20 hrs./wk.</p> <p>5 Part-time staff:</p> <ul style="list-style-type: none"> • FT Volunteer Coordinator/ stipend • Computer Technician • 4 PT employees 	<ol style="list-style-type: none"> 1. Community Foundations 2. Some experience getting smaller grants. 3. Currently ask for donations, no fees and currently collect an average of \$2.00 per computer. 4. Plan to go to business community for donations 	<ol style="list-style-type: none"> 1. End-of-life and proper disposal of materials. 2. Recycling for usable parts and pieces. See comments below. 3. Written materials to use for training computer recyclers. 4. Decision tree for XP: what software and hardware is compatible with XP. <p>Sooner Ambucs is currently using landfills as is allowed in OK. The Office of Environmental Quality is interested in using correctional facilities for recycling</p>
Virginia Department of Rehabilitative Service	Ken Knorr	DME	I				<ol style="list-style-type: none"> 1. Liability and insurance

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University of Idaho	Ronald Seiler	<p>DME, community-based collaborative involving community-based, state agencies, advocacy groups and 10 CILs (front-end service providers and storage) and other community-based organizations like UCP, faith-based, and senior center organizations.</p> <p>Plan to add 5 new organizations each year to develop infrastructure.</p>	I	<ol style="list-style-type: none"> 1. Idaho is leading the nation in Medicaid reform since 1996. 2. Medicaid tags all DME upon purchase. 3. VR has donated AT equipment over many years. 4. Plan to involve Education in Year 2 or 3. 5. Donations: To CILS 6. Distribution: A mix (VR, shipping, CILs, rental vans. 7. Collection, refurbishing and distribution: CBO/IL. 8. Policy work: Bring in agencies to discuss necessary policies for this program. 9. No fees planned for reutilized DME – focus on individuals with lowest incomes. 	2 ½ time positions at IL Centers- Bought out existing staff time.	<ol style="list-style-type: none"> 1. No plan to pursue state funding and need TA to develop realistic sustainability plan. 2. No plan to charge fees as target is population with lowest level of income. 	<p>Medicaid policies that allow for reutilization like in Kansas.</p> <ol style="list-style-type: none"> 1. Sustainability – no expectation for long-term support from state legislature. 2. Liability waiver forms – particularly those used for Medicaid refurbishing. 3. Top 10 list of DME Medicaid equipment that is typically reutilized. 4. Medicaid policies re: ownership of DME - in Idaho, Medicaid DME ownership resides with users, not Medicaid. 5. Public awareness – what strategies and products are available or that can be developed to reach Native Americans, Spanish-speaking pops.? 6. Outcome measure instrument. 7. Training information on: <ul style="list-style-type: none"> • Inventory mgmt. using technology to track and report (first series in March 07 and need training materials – want to do own training). • Matching devices to people • Selecting devices – what protocols are in place to determine what to select or not • How to market the program • Intake and outcome forms and what data to collect • Blue book re: depreciation

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Delaware Assistive Technology Initiatives AT ReUse Project	Beth A. Mineo Mollica	DME/AT – an interagency collaborative for DME/AT Reuse – develop capacities within organizations and partner “buy-in” along with costs-benefits data to assure sustainability.	N	<ol style="list-style-type: none"> 1. Interagency Kick Off Retreat in January 07 to build bridges: <ul style="list-style-type: none"> • What agencies now do • Their reuse interests • Complete survey • Compile booklet of results from retreat 2. Concerned about “mom & pop shops – sanitization & repair. 3. Agency self-assessment tool designed for both pre-and Post assessments. 4. DATI plans to involve state Legislature 5. An economist is involved at U. of Delaware. He has already developed a model for determining cost benefits analysis (CBA) for home and vehicle mods 6. Four CBA tracks: <ul style="list-style-type: none"> • Safety • IL • Cost benefits • Policy measures <p>More complex questions will provide the kernels of data to “make or break” the program.</p>	<p>Beth M. Mollica, Project Director, is 25% time.</p> <p>Linda Kelley, Logistics and scheduling, is 25% time.</p> <p>Sandy Walker is 25% time.</p> <p>Current AT specialists will have a role.</p>	<p>Plan to involve the legislature very early on, and view completion of costs benefits measures essential for agencies to continue participating.</p> <ol style="list-style-type: none"> 1. State legislative funding. 2. Agency participation. 	<ol style="list-style-type: none"> 1. Sanitization 2. Suggestions for draft survey 3. Consumer protection vs. consumer choice (assessment & safety).

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New Mexico Division of Vocational Rehabilitation	Andrew J. Winnegar	AT reutilization to increase independence and clinical outcomes – DME.		<ol style="list-style-type: none"> 1. Consortium of state agencies involved in providing AT as catalyst to get them to recycle AT using website as a conduit. 2. Agencies will include spec. ed., VR, Medicaid, Advisory Council. 3. Much work will need to be done re: state policy around equipment bought with state dollars. 	<p>Program Coordinator (TBH) to work initially on state policies and procedures for AT/DME reuse.</p> <p>Repair tech on board.</p> <p>Web site run by non-profit organization.</p> <p>External program evaluator will develop a matrix for program evaluation purposes</p>	<p>Fee-based model for sustainability:</p> <ul style="list-style-type: none"> • Medicaid • Schools • Fees for services 	<ol style="list-style-type: none"> 1. Matrix of 12 grantees to share information and expertise. 2. Insurance and liability issues for web-based exchange/reuse programs. 3. Medicaid and Children’s Medical services – what is being done at the national level re: reutilization of DME - fees for reutilization and policies regarding donation or transfer of Medicaid-funded DME to reutilizers – and state policies that help or hinder the transfer of Medicaid purchased AT. 4. Blue book for DME/AT build into data collection system to standardize grantees valuation of AT just as Turbo Tax does for putting a value on donations for tax purposes.

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Paraquad, Inc. MO	Carla W. Walker	<p>DME – Want to establish a model that can be replicated.</p> <p>Program started a year ago in collaboration with OT Department at University of Washington. Through the grant they want to:</p> <ul style="list-style-type: none"> Enhance clinical outcomes by participating in the community with 4 IL centers and one other agency (international organization). Focus groups will identify specific reuse needs. Right now, program recycles shower chairs, walkers, cans, and some devices. Serve Eastern MO, western IL, for DME and serve all ages. <p>Plan to coordinate with MO AT Program and in particular re: computer recycling though they have not yet defined how they will collaborate.</p>	A	<ol style="list-style-type: none"> OTs at Washington University handle all clinical evaluation for DME could take place at sites. Very interested in measuring the impact of continued usage of DME on lives of customers such as reductions in hospitalizations and more involvement in community. There will be some capacity to transport DME (7 vehicles at Paraquad). IL centers will be “stocked.” ILs will be trained in how to take seat measurements for low tech needs. High tech needs for clinical evaluation and customized molds will be referred to UW where other issues such as environment and training needs will be considered. 	<p>Kim Walker, staff OT, handles DME reuse.</p> <p>Carla Walker, Project Director.</p> <p>Carey Morgan, Principle Investigator/OT is focusing on research outcomes of the project, and she serves on the MO AT Act Board.</p> <p>Hired FT certified repair technician.</p> <p>UW grad students for research on outcome measures.</p>	<ol style="list-style-type: none"> Repair Center will be able to bill Medicaid/Medicare. Will charge for equipment such as cost for replacement batteries. Cost of AT is built in to IL Centers’ budgets. 	<ol style="list-style-type: none"> Want monthly audioconference calls that address 1 – 2 topics each 6 x yearly peer consultants to review and discuss their ideas A central location for posting particular issues for grantees’ discussions. One audio conference on databases – want to explore use of KS database, in particular. Consider posting various project databases on Pass It on Web site.

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University Legal Services, Inc, D.C.	Jane Brown	<p>Disability Equipment Recycling partnering with ILH for storage space & WC Society of DC, an organization with 20 years of experience in recycling DME.</p> <p>Goal: Make consumers as independent as possible at home.</p> <p>Current AT program does not recycle wheelchairs; program expansion will allow for wc recycling and distribution as well as other expansions.</p>	I	<ol style="list-style-type: none"> 1. Program expansion will address short-term emergency needs for AT (30 – 90 days) and long-term permanent needs for individuals who would otherwise not receive any DME/AT. 2. Building up volunteer infrastructure 3. Don't have large enough location for storage in DC - working with Senior Housing and others on finding more space for storage. 	<p>Jane Brown, Director</p> <p>Tony Tillman, one of several AT Specialists</p> <p>Alicia Johns, Program Mgr.</p> <p>Paul Holland, WC Society</p> <p>Volunteer Coordinator (To be hired)</p> <p>AT Technician (To be Hired)</p> <p>Equipment Lending Coordinator (To be hired).</p>	<ol style="list-style-type: none"> 1. Foundations and charitable contributions 2. Voluntary donations for DME/AT. 3. Service club involvement – a location makes it easier for the service club to show what services they do. 4. Data on outcomes is essential to ID impacts: <ul style="list-style-type: none"> • Stay at home • More independent • Entrepreneurship • ADL • Safety • Quality of life • Communication 	<ol style="list-style-type: none"> 1. MARC contacts for OS software licensing 2. Database to measure outcomes – KS? Nebraska's? 3. Recycling agreements, job descriptions and sharing of resources, program policies and procedures 4. Comparative research of other programs – barriers and solutions focused 5. Transportation solutions – DC is relying on volunteers. What are other projects paying for drivers? 6. Identifying equipment donation resources 7. Program evaluation tools 8. Cohesive marketing plan and tools for reuse programs. 1-800 number? National marketing campaign to get AT/DME Reuse on people's radar. 9. Is there a service club that would take AT Reuse on nationally? Could Home Depot be solicited for cleaning supplies? Could national DME vendors be solicited for certain items?

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MDRS, Project START	Dorothy Young	Expansion of three current projects already involved in reutilization: <ul style="list-style-type: none"> • Equipment Connection • MI Use It Again (Local hospitals used for storage, demo and training activities) • Computer recycling • Focus on DME recycling 	N	<ol style="list-style-type: none"> 1. Partners are IL, faith-based organizations, local hospitals, VR and IL. 2. IL will be used to store and repair DME but currently they don't know how to repair equipment and they cannot transport it. 3. Jackson State Storage and Repair for toy library. 	<p>AT staff in place with State AT Program will get AT to consumers.</p> <p>6 contractors will repair DME for a fee and free advertising.</p>	<ol style="list-style-type: none"> 1. Show cost savings to agencies so they will be invested and then get agency and in-kind support. 	<ol style="list-style-type: none"> 1. MARS and logistics; more info on computer recycling 2. Conference call with contractor 3. Review forms to be used
Project Mend, TX	Mary Valdez	DME Recycling with Corpus Christi Memorial Hospital which will provide direct referrals and a storage room.	I	<ol style="list-style-type: none"> 1. Community-wide donation drives are done several times a year. 2. Satellite partners – those with whom they have a contractual agreement to provide services such as intake and distribution of equipment. 	<p>1 case manager handles paperwork and trains partners.</p> <p>1 warehouse mgr.</p> <p>1 boomed technician</p> <p>1 development cord.</p> <p>1 quality assurance mgr.</p>	Corpus Christi may find funds in their budget or in county budget.	<ol style="list-style-type: none"> 1. Learn about TX Food, Drug, Device, Cosmetic Salvage establishments, and Brokers Law 2. Electronic inventory system 3. How to assess progress and determine if they are on track meeting their goals.

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STAR Program, Tools for Life, Ga. Dept. of Labor	Doris Chadwell	<p>Intra and Interstate Infrastructure expansion to increase reutilization of Computers (ReBoot) and DME (FODAC).</p> <p>Increase program efficiencies in all areas:</p> <ul style="list-style-type: none"> • Donations • Refurbishing • Assessments • Sanitization and repair • Transportation • Lay out of areas for storage, reuse, etc. • Training in use and maintenance • Volunteers 	A	<ol style="list-style-type: none"> 1. MOUs for Interstate collaboration with CILS and State AT Programs. 2. Interstate Kick Off meeting in March 07. 3. DHL will transport DME/ computers/AT at cost – pilot in GA. could expand to other states if successful here. 4. Use of Ga. Tech industrial design students for student projects to lay out optimal designs for program efficiencies at ReBoot. Replicate at FODAC and beyond. 	<p>Carolyn Phillips, P.I. @20%</p> <p>Doris Chadwell, Program Director @ 20%</p> <p>FT Program Coordinator (TBH)</p> <p>FT ReBoot Coordinator (TBH)</p> <p>FT FODAC Coordinator (TBH)</p>	<ol style="list-style-type: none"> 1. Sliding scale purchase of DME and computers based on base costs of refurbishing (i.e., cost of replacing batteries or upholstering in wc; cost of JAWS or other AT software. 2. VR for customers with employment goals on VR caseloads. IL funds or IL customers, etc. 3. Advocates and IL agencies exploring state funds 4. FL exploring state funds of 1 mil. 	<ol style="list-style-type: none"> 1. Insurance and liability information 2. Outcome measures 3. Sustainability – Medicaid/Medicare/ other 3 party reimbursement

Development Levels of Grantees:

- **N = New** – Program services are new and grantees requires assistance in most aspects of program planning, implementation, and evaluation tasks.
- **I = Intermediate** – Program has been established through earlier efforts and demonstration grant will allow for significant progress toward achieving major program enhancements such as increasing the quality of AT reuse services, efficiencies of AT reuse services or the number of AT recycled/refurbished for AT reuse.
- **A = Advanced** – Program services are well known for AT reuse initiatives and demonstration grant will allow for significant progress toward achieving major program enhancements and toward expansion of services into other states.
- **TBH= To Be Hired**