

# Options Center for Independent Living

# Reference Guide to Independence



**Options**  
Center for Independent Living

**A Guide For  
People With  
Disabilities**

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2015

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More information on this study and other 100 Top Hospitals research is available at [www.100tophospitals.com](http://www.100tophospitals.com).

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**Options**

Center for Independent Living

**Celebrating 26 Years**

Partnering with People with Disabilities

Who Want to Live Independently

And Participate Fully in Society

**1989 to 2015**

Options CIL is a not-for-profit, community-based organization that assists persons with disabilities in living independently. Our services include information and referral, advocacy, independent living skills training, peer support, education and awareness about disabilities, personal assistance programs, sign language interpreter referrals, equipment loans, support groups, TTY distribution and volunteer opportunities. Options CIL also offers elderly blind services, and community reintegration services. For a full listing, visit our website, [www.optionscil.org](http://www.optionscil.org), or contact either of our offices.

## **OPTIONS SERVICE AREA AND OFFICES**

### **IROQUOIS COUNTY**

130 Laird Lane, Suite 103

Watseka IL 60970

815-432-1332 (Voice)

815-432-1361 (TTY)

815-432-1360 (Fax)

### **KANKAKEE COUNTY**

22 Heritage Drive, Suite 107

Bourbonnais IL 60914

815-936-0100 (Voice)

815-936-0132 (TTY)

815-936-0117 (Fax)

[optionscil@optionscil.org](mailto:optionscil@optionscil.org)



**United Way of Kankakee  
& Iroquois Counties**

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**Please contact us for a Membership Application or call Therese Cardosi for more information.**

**[www.optionscil.org](http://www.optionscil.org)**

**815-936-0132 (TTY) or 815-936-0100 (Voice)**



# Caring. Commitment. Community.

Riverside Healthcare is a fully integrated healthcare system serving the needs of individuals and communities throughout the counties of Kankakee, Iroquois, Will, Grundy and beyond. The heart of the system, Riverside Medical Center, established in 1964, is a 325-bed hospital that provides a full scope of inpatient and outpatient care and is a nationally recognized as an award-winning Level II Trauma hospital.

With leading programs in heart care, cancer care, neurosurgery and orthopedics, its reputation for nursing excellence has earned Riverside the designation as the area's only Magnet® Recognized hospital. Because Riverside's clinical performance ranks them among the top 5 percent of hospitals nationwide, Healthgrades has named them a Distinguished Hospital for Clinical Excellence and recipient of

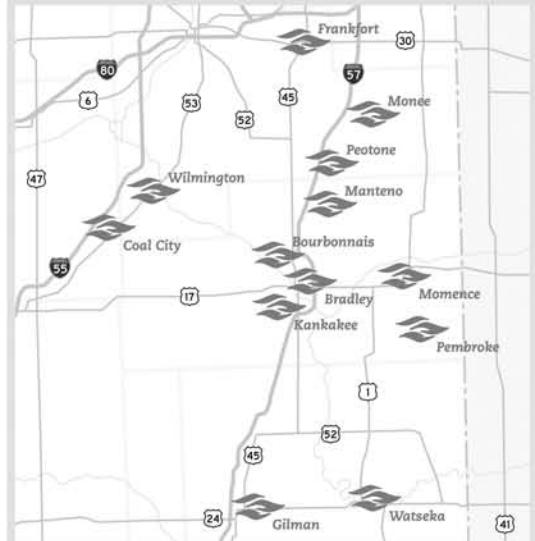
the Patient Safety Excellence Award for the past two years.

Truven Health Analytics presented Riverside with the 100 Top Hospitals® award in 2015, a distinction Riverside has earned six times. Riverside's excellence in cardiovascular services was also recognized when the hospital recently was named one of the 50 Top Cardiovascular Hospitals in the nation by Truven.

Riverside operates several community, primary and specialty health centers throughout the region, and the Riverside Medical Group, a group of more than 100 employed providers, offers primary care as well as more than 42 areas of specialty care. Riverside also offers the most advanced Senior Life Communities and a state of the art Health Fitness Center to help individuals and families be well at every age.

*Serving the needs  
of our communities.*

## Well Within Reach...



### RIVERSIDE HEALTHCARE FACTS:

- Kankakee County's largest employer with more than 2,600 employees
- Community benefit provided in 2013: more than \$42 million
- Total patient encounters in 2014: 251,699
- Newborn deliveries in 2014: 1,015
- Nationally recognized heart, spine, brain, orthopedics and cancer programs



## Our Mission:

To develop and maintain a motivated, professional staff that will deliver high-quality customer services and products filling the financial needs of our community, its businesses, and its citizens. This pursuit will never compromise the high standards for integrity of management, staff, and customers.



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## Options Counseling

Options Counseling is a program offered by Aging and Disability Resource Centers to assist and promote informed decision-making and planning ahead for long term care needs and supports available to people who wish to continue living independently in their own home.

Options Counselors will provide a personal interview to learn about your values, strengths, preferences, and concerns to develop an individualized plan focusing on options you find desirable and available. Some options may include benefits counseling regarding local/state/federal programs; payment and funding options, both private and public; and faith-based/non-profit community resources.

You will participate in developing an action plan to create goals and action steps to achieve your goals. Goals need not be extensive and will be based entirely on services you have requested. Your Options Counselor will follow up with you at designated intervals to clarify any questions or concerns you may have, and to assure that the supports provided to you are meeting your individual preferences and needs.

For more information regarding Options Counseling, please contact Options Center for Independent Living and ask to speak with an Options Counselor.



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## **Options CIL Vision Services Program**

Our Vision Service Program is available to any individual who is blind or who has a severe visual impairment. Our goals are to meet your needs as you live and possibly work in our community, to address the barriers that individuals with vision impairments face, to maximize your independence, and to provide information about disabilities.

Through a federal Chapter 2 grant from the Bureau of Blind Services, a division of the Department of Human Services, Options CIL has an inventory of various types of adaptive equipment available. For as long as supplies last, they are free to individuals age 55 and older who are visually impaired or blind and who live in Kankakee or Iroquois County.

Through a grant from the United Way of Kankakee and Iroquois counties, we can provide independent living aids to individuals younger than 55 who are income-qualified.

## **Vision Assistive Technology Center**

Our Vision Assistive Technology Center provides individuals who are blind or who have low vision with the opportunity to learn about and try out a variety of independent living aids that can be useful in their homes or at their jobs. Here is a partial list of some of the many independent living aids available for individuals with visual impairment that can be beneficial for homemaking, self-care, communication, money management, and other daily living activities:

- Magnifiers with a variety of magnifications, shapes, and sizes
- Talking watches and large face watches
- Talking calculators and large button calculators
- Talking clocks and large face clocks with various contrast backgrounds
- Large button TV remote controls
- Large button telephones
- Talking and jumbo print timers
- Large print measuring cups and spoons
- Liquid level indicators
- Large print check registers
- 20/20 pens
- Sunglasses of varying colors

# Helping A Loved One With Vision Loss

*Reprinted with permission of the National Eye Institute, National Institutes of Health (NEI/NIH).*

Vision loss is a major public health concern in the United States. People who have vision loss commonly experience depression, anxiety, and confusion. The consequences of vision loss, however, often extend beyond the person who has low vision. The family members, friends, and caregivers of people experiencing vision loss also are affected.

When a loved one becomes visually impaired, you are likely to feel overwhelmed. You also may experience a range of feelings, from sadness to guilt, and there are many day-to-day adjustments to make. You may find yourself putting aside your feelings and needs to focus on helping your loved one cope. Yet, in many cases, you may feel alone and at a loss about what to do or how to help. It is important to communicate your feelings to others. By sharing your feelings, you are in a better position to be more accepting of yourself and understand that what you and your loved one are experiencing is not isolated and unique.

Answering the following questions may help you express your thoughts and concerns:

- What feelings have you experienced since your loved one became visually impaired?
- In what ways has your life changed since your loved one's vision loss? Are there things that you've had to give up? How do you feel about these changes?
- What feelings are most difficult for you to accept and deal with?
- What do you do with these feelings? Are you able to share them with your loved one?
- Has your loved one's vision loss brought you closer together in any way? If yes, how?

When sharing your thoughts and concerns with your loved one, it is important to remember that communication involves both verbal and nonverbal expressions. When we think about communication, what usually comes to mind is the verbal aspect of communication. But communication also involves receiving information through listening. And most communication is nonverbal, which poses challenges when talking to people who are visually impaired, as they may not be able to see gestures, nods, facial expressions, and other visual cues.

Here are some strategies that can help you communicate more effectively and deal with difficult situations involving strong emotions and conflict:

- Listen to what the other person is saying as well as the feelings behind the words. This type of listening is hard when you may not want to hear "anger" or "frustration," when you are feeling "attacked" or "criticized," or when you disagree with the other person. At these times, it's helpful to let the person finish what he or she has to say before responding.
- Express your feelings or point of view with the use of the word "I." For example, "I feel upset about" or "I see it differently" rather than "You are being unfair" or "You are wrong."
- After each person has a chance to share his or her feelings and point of view using "I" statements, ask each other: "Are there areas of common ground?" Sometimes, you may have to agree to disagree and come back to the issue at a later time.

Adapted from the Lighthouse International's Program for Partners of People with Impaired Vision.



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# Independent Living

The definition of Independent Living is “The right of persons with disabilities to control and direct their own lives and to participate actively in society.”

To control and direct one’s life means making cultural and life style choices among options that minimize reliance on others in decision making and in performance of everyday activities, limited only in the same ways that persons without disabilities are limited. It means exercising the greatest possible degree of choice about where to live, with whom to live, how to live, and how to use time. This includes taking risks and having the right to succeed or fail. It also includes taking responsibility for one’s decisions and actions.

“To participate actively in society” means having opportunities to fulfill a range of social roles. These include working, owning a home, raising a family, engaging in leisure and recreational activities, and participating to the extent one chooses in all aspects of community life. This includes asserting one’s rights and fulfilling one’s responsibilities as a citizen.

(From the Report from the Study Group of the Seventeenth Institute on Rehabilitation Issues, Vocational Rehabilitation Services in Independent Living Centers; October 1990)

## Key Elements of Independent Living Philosophy

- We do not want to help people; we want to help people help themselves.
- We are for independence, not dependence.
- We believe persons with disabilities have the right to make choices that affect their own lives and must be empowered to take control over their own lives.
- We believe in the dignity of risk.
- We believe in creativity and survival skills of all people.
- We believe people do not need degrees to understand persons with disabilities – they need personal experience.
- We want social change – we believe that direct services cannot be separated from advocacy.

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# A Dollar A Day...

That is what most nursing home residents receive. Imagine if you or a loved one suffered some type of extreme health emergency and needed to live in a nursing home until able to recover. Often because of a health emergency and the long term hospitalization required prior to being admitted to a nursing facility, many become delinquent on utilities or are unable to pay their rent or mortgage and lose their home and personal belongings.

Now imagine that it's six months or a year later and you have recovered enough to once again live independently in the community. If you saved every dollar you received while in the nursing home instead of buying yourself toiletries or personal items you would still only have \$365 at the most!

How are you going to pay a security deposit or your first month of rent, pay any outstanding utility balances and purchase furniture or household goods such as pots and pans? Most people would not be able to do so and, if discharged, would be, for all intent and purposes, homeless! What would you do?

Options can help! There is a little known program in Illinois previously entitled Money Follows the Person that has now been more aptly named "Pathways to Community Living." It is sponsored by HFS (Healthcare and Family Services) and IDHS (Illinois Department of Human Services) with quality control provided by Master's degreed nurses at University of Illinois at Chicago. This program allows for payments of security deposits, first month's rent, set up of basic utilities, furniture, household furnishings and initial groceries.

Additionally, this program is administered by trained staff called transition coordinators at Centers for Independent Living throughout the state. These trained staff members will meet with people with disabilities living in nursing facilities to determine eligibility for the program. If a person is eligible and also interested in leaving the nursing home to live independently, these same trained staff will then assist them to identify housing and coordinate all aspects of transitioning into the community. This does require a collaborative effort among the physician, nursing home staff, and the person wishing to move.

If you or a loved one would like more information about this opportunity, please contact Options CIL.

*Let's Make It Happen...*



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# What Are Appropriate Accommodations For A Hearing Loss?

A lady explained, “I have a cochlear implant and I believe that I do well with it and understand most of what is said. For example, on conference calls, for the most part, I understand most of the dialogue. I may need to periodically request a repeat, and I sometimes need someone to summarize the topic of conversation so that I can have greater context for what I hear. Because I understand the majority of the conversation, I don’t feel that I need expensive accommodation such as real-time captioning (CART) or an interpreter.

“I am concerned about the cost of using accommodations such as CART or an interpreter regularly because I hear my colleagues complain about the expense of these accommodations on our bottom line. I don’t want to create an undue burden for my employer.”

Can an accommodation be simply a request to repeat information periodically? Could it be a request to summarize material periodically? Can an accommodation be something that is more a matter of human consideration? Or, does an accommodation need to be something like CART or an interpreter?

These are excellent questions. I commend you on wanting to use “free” accommodations as much as possible in order to reduce the financial cost to your employer.

The truth is, an accommodation is anything that works for you that is not a burden for the employer to provide. Request on what you need. This may make your employer more accommodating when you really do need something that costs more such as CART.

However, you shouldn’t be PRIMARILY concerned about the cost of the accommodations you need. Do be concerned about effective communication. Sure, cost is a consideration, but if you are not able to do your job because of poor communication, then you may be terminated. Therefore, talk to your boss, brainstorm, see what you can come up with together that would not be too hard and not too expensive, but well worth it to help you understand speech better.

Here are some facts about accommodations that you should know.

1. An accommodation can be a change in process or the way a job is performed to enable the person with the disability to perform the job better.
2. A person requesting an accommodation does not have to say ‘reasonable accommodation’ but can say they need a change at work for a reason related to a medical condition.
3. A request does not have to be in writing-it can be made verbally or through another mode of communication (an interpreter for example). The request must be considered as soon as it is asked.
4. The accommodation does not have to be granted if it provides an undue hardship to an employer (the employer must be able to prove this).
5. An employer does not have to remove any essential functions of the job or lower standards of performance of the job as these are considered undue hardships.
6. Typically, an employer does not have to provide personal use devices (hearing aids or assistive listening devices (ALDs) but they can if they choose to do so. (For example, if repeating what is said is seen as a hardship or disruptive in meetings, they may choose to purchase an ALD that could be used at all future meetings.)

*(Continued on page 15)*



## **What Are Appropriate...** *(Continued from page 14)*

7. An undue delay of providing the requested accommodation can be seen as a denial. If this happens, an employee has a right to file a complaint if it is not acted on in a reasonable length of time, based on the complication of the request (an easy request would have to be provided or denied fairly quickly).

8. An employer can choose a different accommodation than the one requested assuming it solves the problem.

9. Employers can receive tax benefits for providing reasonable accommodations, but they must document it.

Be aware that there can be some pitfalls with requesting certain free accommodations such as having things repeated for you. I have been in the presence of some people in the past that either had extremely soft voices or were passive aggressive (or both)-that this isn't as ideal as being able to control the volume on an assistive device yourself. The problem with a 'behavioral' accommodation is that when you don't get it or stop getting it, they can deny the refusal. They'll say, 'Oh yes, we do that every time.' And you can't prove that it isn't happening. An accommodation that involves a physical item has a paper trail or at least some tangible evidence whether or not it is happening. Many hard of hearing people have experienced horrendous amounts of unkept promises. Furthermore, requests to repeat often offend the mumblor, both as an implicit insult, and are even misinterpreted as being deliberate harassment of the mumblor.

An accommodation can be anything. It can be rearrangement of offices, meeting rooms, etc. It can be reassignment of yourself or others to do different duties or work with different people. It can be replacement or supplemental equipment. It can be scheduling such as 'pause all discussions whenever the hallway is full of screaming lunch-goers'. It could be, 'rearrange the conference room so that the presenter is not backlit'.

You can also ask for accommodations such as a desk that faces the entrance to your office, an office instead of a cubicle if speech understanding directly affects your job, or permission to put up a sign that says 'Please get my attention before you talk to me' and other such things that help you communicate better in the workplace. An accommodation could be as simple as asking for preferential seating in front of the speaker or asking the speaker to stand in one spot when talking.

It is wise to present your request for reasonable accommodation in writing. You can call the office of Civil Rights in Washington DC and request that they coach you on how to write a letter to formally advise your employer requesting accommodations. You must notify your employer that you plan on asking for accommodations.

Free accommodations such as "face me when you talk" when asked by the hard of hearing person don't cost the company a penny and thus cannot be contrived as causing them an "undue burden". I'd bet that if you asked an employer for a simple, free accommodation, most reasonable and conscientious employers would consider either that, or doing something else to accommodate you since these kinds of accommodations don't impact their bottom line in the least.

However, if your employer isn't accommodating, you can explain that according to the ADA you will ask for something effective such as CART and that will cost them a lot more.

I'm all for using accommodations that are free if they will work for you, and suggest only asking for the accommodations that cost bigger bucks when there is no other simple way to effectively help you hear. But always remember, make sure whatever accommodations you ultimately choose are effective for you because it will be your job on the line if you don't!

*This article contains information taken from Volume 8, Number 5 August 2, 2013 edition of Hearing Loss Help eZine which was written and published by Dr. Neil Bauman.*

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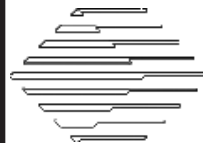
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- Supportive housing services for individuals with mental health treatment needs
- Community case management services for individuals with mental health treatment needs.
- Outpatient counseling and therapy
- Supported employment services for people with disabilities.



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[CORNERSTONE SERVICES.ORG](http://CORNERSTONE SERVICES.ORG)

Cornerstone Services has been expanding its services over the past year in Kankakee County and recently helped four individuals with disabilities make the transition from living in state-operated facilities to a home in the community. In December the agency opened a new group home in Bourbonnais, and plans to open another later this year.

“We have partnered with the state to provide residential opportunities to individuals who currently live in state-operated facilities such as Ludeman and Shapiro Developmental Centers, but want to live in homes in communities instead,” said Cornerstone President/CEO Ben Stortz. “We are proud to be able to offer them this opportunity.”

Four individuals will live in each of the homes when all residents have made the transition. So far, the residents seem very excited about moving into the house in Bourbonnais.

“I’ve worked really hard to get where I am,” said one of the residents. “I’ve got a big room and I decorated it how I like it. I am cooking; I pack my own lunches, and am even learning how to read. I’m a different person now and I feel good in my new house.”

Since 2009, Cornerstone has provided important services to people with disabilities in Kankakee County. The agency began with employment services, and made a significant expansion in 2012 with the opening of its Harvard Center, which provides daytime activities for adults with developmental disabilities. Most program participants come to Cornerstone from Shapiro Developmental Center each day and receive training to help them participate in community experiences. Cornerstone began providing behavioral health services for adults with mental health needs in 2013. In addition to counseling and therapy, the agency provides housing assistance, and case management.

“Many of the individuals have been waiting several months or more for services before coming to Cornerstone,” said Cornerstone’s Director of Professional Services for Kankakee County Abbey Ferenzi. “They are now receiving the medications and support services they need to manage their symptoms, live in their homes, and maintain healthy relationships with family, friends, and co-workers.”

For more information about the services Cornerstone offers in Kankakee County, call 815-823-8412.

## **Grumish Chiropractic Patients Share Their Story**

“I suffered from arthritis for 15 years, spinal pain for 2 years. I had compression pain in my spine and had difficulty turning over in bed. My left hip had intermittent pain making it hard to walk without pain meds. My upper back was very tight and my lower back and spinal column had terrible pain. I suffered with numbness and pain in my hands, arthritis in my joints and a stiff neck. I thought it was old age creeping up on me early. I ABSOLUTELY love Chiropractic care and it has benefited my life in so many ways. I feel ten years younger. My range of motion in my neck is wonderful. The pain in my spine is GONE.” -- *Reba*

“For the last year I’ve had ongoing problems with my hip. The pain got so bad that I started having trouble walking. I also had extremely sharp pain. I thought I was just getting older. My daughter in law recommended that I go and see a chiropractor and I tried someone else. That chiropractor just didn’t get it. Since coming to Grumish Chiropractic I’ve been thrilled with the results. I saw results as early as my 2nd treatment! Shortly thereafter the pain was gone completely!” -- *Joyce*

“I was having problems with my neck, middle and lower back and hip. I also had sinus and breathing issues. I saw my medical doctor where I was given steroid injections and ice packs but it didn’t help. I don’t remember a time when I felt o.k. My neck was always sore and I felt like I was 80 years old. A friend recommended Grumish Chiropractic. Anyone who has problems with neck, back or even scoliosis should come. I can breathe better because the tension is gone. I can move my neck freely and I can see major improvement in my upper body. I can’t thank the doctors at Grumish Chiropractic enough!” -- *Chuck*

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Personal Assistants (PAs) are people who work for you, a person with a disability, to assist you in remaining independent in your home and as productive as possible. ON YOUR TERMS, the personal assistant will assist with the tasks of daily living under YOUR supervision.

Options CIL has a program, the Personal Assistant (PA) Program, that will aid the person with a disability in all the steps from determining whether or not they qualify for this State program, to how to manage their PA. In partnership with the Illinois Division of Rehabilitation Services (DORS), Options CIL will help the person with a disability to begin the independent life he/she desires.

If the person with a disability is not familiar with managing a staff, the PA Specialist at Options CIL will work one-on-one with that person to help them learn helpful and effective communication skills, interview skills, and management skills to better manage the hired PA. This supportive feature is called PA Management and it could be the difference between a struggle and a blessing when working towards an independent life.

## HOW TO FIND OUT ABOUT GETTING and IMPLEMENTING SERVICES

- Call DHS/DORS (815-939-4422) or OPTIONS CIL (815-936-0100) for a referral to have your needs assessed in order to be approved for Home Services Program hours.
- Call the Options PA Specialist to discuss the hiring of a Personal Assistant.
- Call Options CIL for a current PA list when hiring your PA staff. Then call the names on the list, set up appointments for interviews, and hire your PA!
- If you have any trouble at all.....call Options CIL for help!

Remember, disability does not equal worthlessness or helplessness. Having a personal assistant can mean the difference between living independently or living dependently in nursing care.

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## Eastcourt Village APARTMENTS



Eastcourt Village Apartments is conveniently located at the intersection of I-57 and Rt. 17 East (Court Street) in Kankakee, IL, only minutes from nearby restaurants, convenience stores and Northfield Mall. Eastcourt Village is for mature adults, offering 72 one bedroom and 60 efficiency apartments. Bus transportation is available at the door. Model apts. available for inspection.

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Building Manager

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**815-937-4200**

## **Eastcourt Village Apartment Complex for Mature Adults**

This stately hi-rise standing at the entrance to Kankakee at exit 312 on I-57 continues to offer apartments, both efficiency and one-bedroom units, to mature adults. In addition to the apartments, there is a beautiful community room along with an array of amenities. All apartments include wall-to-wall carpeting, vertical blinds, appliances and individually controlled heating and air conditioning. There is a small charge for apartment electricity and cable TV. All other utilities are included in the rent.

Eastcourt Village has a new rental plan that is very beneficial to all tenants. With this new rental plan a tenant pays rent on the basis of 30% of income. For example: if a tenant has \$1,000.00 of income, the rent would be about \$300.00 a month. The exact calculation includes a few minor adjustments but that amount would be very close to the actual rent. This is a very attractive rental policy.

Residents have many opportunities for socializing, including weekly church services and various card games. For the convenience of the residents there are several laundry facilities throughout the building. In addition the metro bus service stops at the building every hour between 6 a.m. and 10 p.m. six days a week. There is a full complement of employees including a housekeeper and maintenance personnel to handle apartment maintenance. Apartment maintenance problems are handled as they happen. There is a local fire department within two minutes of the building. Paramedics respond to emergency calls quickly and have access to all apartments at all times.

The management office is open Monday thru Friday from 8 a.m. to 4:30 p.m. for anyone interested in information about our apartments, interested in a tour of the building or wishing to view our model apartments. For those persons who are not available during normal business hours, an appointment may be made to view the building or view an apartment by calling the office at 815-937-4200.

# United Way Equipment Program

Often adaptive equipment that is prescribed by a physician or can increase a person's independence in the home is not considered to be medically necessary and therefore, not a covered expense through many insurance programs. Thanks to funding from United Way of Kankakee County, Options is able to offer limited assistance in helping people obtain adaptive equipment that can improve quality of life in the home. Because funding is limited, equipment requests are restricted to \$200 per person. Also, it is very important to note that any item(s) covered through an individual's insurance carrier will not be purchased using United Way funds. The purpose of the equipment program is to provide assistance in obtaining items for which an individual's insurance, such as Medicare, Medicaid or any other private medical insurance, will not pay and that may not be able to be purchased through other means. Any individual without insurance is welcomed to contact Options to determine eligibility for the adaptive equipment program. If an individual has insurance, please determine if the item(s) being requested would be considered covered expenses. If the item(s) is not covered, please feel free to contact our office to determine if the item(s) can be provided to you through the United Way equipment program.

To apply for an item or assistance through the United Way equipment program:

- The individual for whom the item is being requested must have a disability.
- The individual must qualify through an income-based guideline (Catholic Charity poverty guidelines)
- If the person (and if applicable, family members in the household) is above poverty guidelines, a debit/income ration analysis must be completed.
- A determination guideline application must be completed and proof of income for all people contributing to the person's income must be submitted.
- A prescription for the item requested may be required.
- Each request is capped at \$200 unless approval for additional funding is granted by the Executive Director.
- No item covered by a person's insurance will be purchased using United Way funds.



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Hear Now is a division of Starkey Foundation and serves individuals throughout the United States. Hear Now is a national non-profit program committed to assisting those permanently residing in the U.S. who are deaf or hard of hearing and have no other resources to acquire hearing aids.

- ✓ **Hear Now requires an income screening process that includes proof of income.**
- ✓ **A person must have a documented hearing loss severe enough to need a hearing aid.**
- ✓ **For individuals who qualify through Starkey, Options CIL will pay the application fee.**

*For more information contact Options CIL*

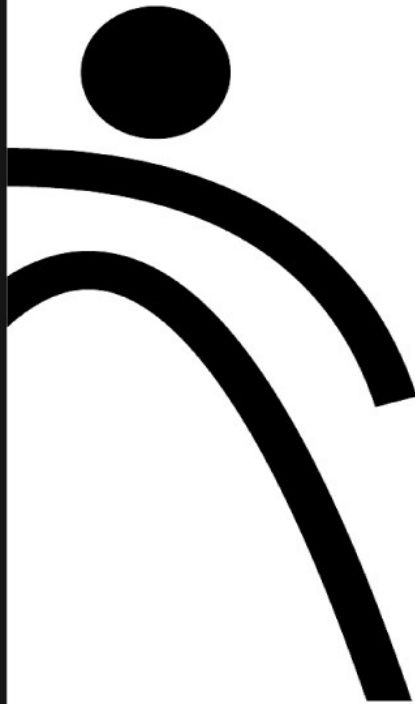
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# Community Education And Empowerment

Most everyone at some time has said or thought.....

- “There has to be something out there to help them.”
- “I wish I knew of someone or some place that could help you with your issue.”
- “I can’t believe someone hasn’t come up with a solution for this problem/need.”

Many times we need additional assistance in helping our consumers, family, and friends and we are frustrated because we don’t know who can help. While there are some gaps, our area is rich in qualified resources--ready to help when needed.

Options CIL is available to staff a booth or speak at any of your outreach events, informational meetings or forums, or any of your community events that are reaching out to the residents of your community. No one person can do everything alone. Everyone needs someone and Options CIL is here for anyone of any age with any disability.

**Wouldn’t your Organization/Club/Group like to be part of this growing awareness effort?**

**What are you doing to assist those the world doesn’t see?**

Options’ Community Outreach Program is striving continuously to reach out to the un-served, under-served and young student populations to raise awareness of available resources. Because people are sometimes unaware of all the community assistance that is available, they suffer needlessly in silence and isolation. Options CIL believes that all people deserve access to whatever community services are offered.

To learn more about what Options Center for Independent Living can do for you or someone you care about, invite us to speak at your business, your church, your social club, etc. Our Community Outreach Specialist will tailor a presentation for your group and share the many and varied programs and services provided by Options CIL. Having this knowledge will enable you to better serve yourself and those you interact with on a business or personal basis.

Call Options today and ask to speak with the Community Outreach Specialist. We welcome opportunities to share the resources in our area! Let’s get that message out that is simple and powerful that says what everyone at some point needs to hear.

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# A Few Words About People First Language

by Kathie Snow

Visit [www.disabilityisnatural.com](http://www.disabilityisnatural.com) to see the original, full-length article.

People with disabilities constitute our nation's largest minority group. It's also the most inclusive: all ages, genders, religions, ethnicities, sexual orientations, and socioeconomic levels are represented.

Yet the only thing people with disabilities have in common is being on the receiving end of societal misunderstanding, prejudice, and discrimination. And this largest minority group is the only one that *anyone can join, at any time*: at birth, in the split second of an accident, through illness, or during the aging process. If and when it happens to *you*, how will you want to be described?

**Words matter!** Old and inaccurate descriptors perpetuate negative stereotypes and generate an incredibly powerful attitudinal barrier—the *greatest obstacle facing individuals with disabilities*. A disability is, first and foremost, *a medical diagnosis*, and when we define people by their diagnoses, we devalue and disrespect them as individuals. Do *you* want to be known primarily by your psoriasis, gynecological history, or the warts on your behind? Using medical diagnoses incorrectly—as a measure of a person's abilities or potential—*can ruin people's lives*.

**Embrace a new paradigm:** "Disability is a natural part of the human experience..." (*U.S. Developmental Disabilities/Bill of Rights Act*). Yes, *disability is natural*, and it can be *redefined* as a "body part that works differently." A person with spina bifida has legs that work differently, a person with Down syndrome learns differently, and so forth. People can no more be *defined* by their medical diagnoses than others can be defined by gender, ethnicity, religion, or other traits!

A diagnosis may also be used as a *sociopolitical passport* for services, entitlements, or legal protections. Thus, the *only places* where the use of a diagnosis is relevant are medical, educational, legal, or similar settings.

**People First Language** puts the person *before* the disability, and describes what a person *has*, not who a person *is*. Are you "cancerous" or do you have cancer? Is a person "handicapped/disabled" or does she "have a disability"? Using a diagnosis as a defining characteristic reflects prejudice, and also robs the person of the opportunity to define himself.

Let's reframe "problems" into "needs." Instead of, "He has behavior problems," we can say, "He needs behavior supports." Instead of, "She has reading problems," we can say, "She needs large print." "Low-functioning" or "high-functioning" are pejorative and harmful. Machines "function;" people live! And let's eliminate the "special needs" descriptor—it generates pity and low expectations!

A person's self-image is tied to the words used about him. People First Language reflects good manners, not "political correctness," and it was started by individuals who said, "*We are not our disabilities!*" We can create a new paradigm of disability and change the world in the process. Using People First Language is right—*just do it, now!*

## A FEW EXAMPLES OF PEOPLE FIRST LANGUAGE

Say:	Instead of:
Children/adults with disabilities.	Handicapped, disabled, special needs.
He has a cognitive disability.	He's mentally retarded.
She has autism.	She's autistic.
He has Down syndrome.	He's Down's/mongoloid.
She has a learning disability.	She's learning disabled.
He has a physical disability.	He's a quadriplegic/crippled.
She uses a wheelchair.	She's confined to/wheelchair bound.
He receives special ed services.	He's in special ed; a special ed kid.
People without disabilities.	Normal or healthy people.
Communicates with her eyes/device/etc.	Is non-verbal.
Congenital disability/Brain injury	Birth defect/Brain damaged
Accessible parking, hotel room, etc.	Handicapped parking, hotel room, etc.

**Pull-Quote:** The difference between the right word and the almost right word is the difference between lightning and the lightning bug. *Mark Twain*

Copyright 2006-14 Kathie Snow, All Rights Reserved, used with permission. Contact [braveheartpress@msn.com](mailto:braveheartpress@msn.com) for reprint permission. Visit [www.disabilityisnatural.com](http://www.disabilityisnatural.com) for new ways of thinking!

## Not All Disabilities Are Apparent

A person may make a request or act in a way that seems strange to you. That request or behavior may be disability-related.

For example, you may give seemingly simple verbal directions to someone, but the person asks you to write the information down. He may have a learning disability that makes written communication easier for him. Or an apparently healthy person may ask to sit, rather than stand, in line. This person may be fatigued from a condition such as cancer, or may be feeling the effects of medication.

Even though these disabilities are hidden, they are real. Please respect the person's needs and requests whenever possible.

*Article taken from the United Spinal Association website.*

*To download this article or any other please go to [www.unitedspinal.org](http://www.unitedspinal.org)*

## Service Animals

Some people who are Deaf, blind or visually impaired, or who have traumatic brain injury, seizure disorder, or a range of other disabilities may use a service animal to assist them with daily living.

- While you may inquire whether an animal is a service animal, the person may not have information identifying it as such. This means that in general, you will need to modify a "no animals" policy to allow the person to enter with her service animal. Barring a direct threat to health and safety, this requirement of the ADA is generally thought to take precedence over any health codes, such as those for restaurants, and personal preferences, such as those of taxi drivers, prohibiting pets.

- Service animals are generally highly trained and well behaved. You may ask the person to remove the animal if she does not have the animal under control.



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# What Is A Center For Independent Living?

Centers for Independent Living (CILs) serve persons with disabilities. Centers for Independent Living are community-based, not-for-profit, non-residential organizations which serve persons of any age with any type of disability. CILs are controlled by persons with disabilities (consumers). This control is maintained through various means, including persons with disabilities must constitute at least 51% of the board of directors, and at least 51% of all staff and 51% of management staff must be persons with disabilities.

Centers for Independent Living provide a variety of services to persons with disabilities. Many of the services fill gaps left by government and traditional medical models.

All Centers for Independent Living provide four core services: advocacy, peer counseling, independent living skills training, and information and referral. In addition to these core services, CILs may provide other disability programs and services; for example, employment of persons with disabilities, community education, technical assistance in complying with disability laws, assistance in locating accessible/affordable housing, personal assistance training.

## What impact do centers have in Illinois?

- CILs have kept persons with disabilities out of institutions, which saves the state hundreds of thousands of dollars.
- CILs have changed the status of many persons with disabilities from unemployed to employed.
- CILs have helped persons with disabilities achieve or maintain self-sufficiency and productive lives in their communities.
- CILs have made communities more physically and attitudinally accessible for persons with disabilities.

## Facts about CIL

- Centers for Independent Living can provide services at lower costs.
- Community-based services are less expensive than services provided by institutional care settings.
- Centers for Independent Living provide services to all individuals of any age with any type of disability.
- Because there is a higher incidence of minorities with disabilities, Centers for Independent Living outreach to serve these individuals.
- CILs also outreach to individuals in the rural communities, many of whom would not be served by traditional agencies.

## How are CILs unique?

Consumer Control: Within the independent living movement, there is a strong belief that peer-conducted services are essential to assisting a person with a disability. Therefore, in CILs, 51% or more of the staff and Board of Directors are persons with disabilities who have personally experienced civil and human rights, attitudinal, economic, physical and communication barriers. Their experiences have resulted in unique commitments to assist others with disabilities in achieving lives of dignity. Staff serve as role models, demonstrating that it is both possible and desirable for persons with disabilities to be productive and independent. The understanding, guidance and support provided through CILs give others the confidence to take the first steps toward their own independence.

*(Continued on page 31)*



## **What Is A Center...** *(Continued from page 30)*

**Cross Disability Focus:** Unlike many agencies which serve only persons with a specific disability, CILs offer a broad range of community-based services for persons with a variety of disabilities in all age groups.

**Service Philosophy:** CIL services are available throughout the lifetime of a person with a disability. Emphasis is on consumer self-direction and control to the greatest extent possible. This is in contrast to the more traditional rehabilitative or medical model in which the “client/patient” is highly dependent on experts. Service coordination is the consumer’s responsibility and is performed by the consumer to the greatest extent possible. The move from dependence on staff to self-direction marks a shift from a client/patient role to a consumer role. A “client” traditionally accepts without question the “superior” wisdom of the experts – trusting and obeying. In contrast a “consumer” involves individual goal setting and makes personal choices regarding health care, life-style, vocation, education, and advocacy.

**View of disability:** While society in general too often views disability as something to be pitied, at CILs, peers with disabilities promote positive self-concepts, disability identification and disability pride. Disability is related to problems with the environment rather than to physical impairment. It is the environment which frequently causes the real disability: not being able to negotiate steps into a building is what prevents one from applying for a job, taking a course, or going shopping: not being able to hear a speaker or read printed material prevents one from communicating. CILs promote an environment designed for access to everyone.

The language used by people involved with CILs is also something that merits special attention. It is a language in which expressions like “crippled,” “patient,” and “wheelchair-bound” are actively discouraged. Persons with disabilities are not “confined to wheelchairs.” Wheelchairs do not confine; they liberate people who have mobility impairments. “Disabled person” is unacceptable; it indicates that those who use this phrase see the disability before the person. Consumers are not labeled “cases” to be managed as in the common traditional service model of case management. They are people to be empowered to oversee their own service acquisition and coordination.

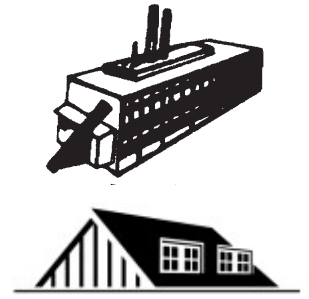
**Systems Advocacy:** CILs provide community advocacy as well as direct services. CILs advocate for the improvement of the quality of life for all persons with disabilities and seek to eliminate society’s attitudinal, environmental, social, psychological and economic barriers. Peers are forceful advocates of equal access and greater life opportunities for all persons with disabilities. Responsible, self-reliant and productive persons with disabilities can provide the best public relations and the most effective counseling advice.

The mission of Centers for Independent Living is complete integration of persons with disabilities into every aspect of the community, including the state of Illinois and all it has to offer. Centers for Independent Living are resources which can assist persons with disabilities to live as independently as possible and contribute to our quality of life in Illinois.

There are 22 Centers for Independent Living across Illinois covering 90 counties. Options Center for Independent Living serves Kankakee and Iroquois counties. Centers for Independent Living are people with disabilities assisting persons with disabilities to live independently, reducing or eliminating their dependence on the ‘system’ and SAVING Illinois tax dollars.

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# Caring For Stroke

*By Janie Rosman*

Caregivers must be patient with their loved ones and with themselves and know the signs of a stroke. The two major types of stroke are ischemic and hemorrhagic. To lessen the possibility of death and disability, the F.A.S.T. acronym is important:

- F = Face: Is one side of the face drooping down?
- A = Arm: Can the person raise both arms, or is one arm weak?
- S = Speech: Is speech slurred or confusing?
- T = Time: Time is critical!! Call 9-1-1 immediately!

## Types of Stroke

In an ischemic stroke, which accounts for 80 percent of all strokes, a blood vessel becomes blocked by a blood clot; a portion of the brain becomes deprived of oxygen and will stop functioning. When a blood vessel carrying oxygen and nutrients to the brain bursts and spills blood into the brain, a portion of the brain is deprived of oxygen and stops functioning, resulting in a hemorrhagic stroke; this accounts for about 20 percent of strokes. Mini-strokes are Transient Ischemic Attacks (TIAs) and have the same symptoms as a major stroke. A blood clot blocks the flow of blood in the brain and breaks on its own; symptoms can disappear after a short period of time, however this can be a warning sign of a future stroke.

## Recovery

Stroke rehabilitation doesn't reverse the stroke's effects; it helps the individual return to independent living, aiming to build strength, capability and confidence.

- Self-care skills such as feeding, grooming, bathing and dressing
- Mobility skills such as transferring, walking or self-propelling a wheelchair
- Communication skills in speech and language
- Cognitive skills such as memory or problem solving
- Social skills for interacting with other people.

Caring for a stroke survivor can be emotionally, mentally and physically stressful. You should ask the doctor and healthcare team what the person will need at home, be it equipment (a cane, a walker) assistance with bathing, dressing, tending to personal needs; help with preparing meals and cooking; or financial management. Caregivers can support their loved one and encourage small accomplishments, which mean a lot to someone who has to relearn a once-mastered skill.

## The Caregiver's Role

- Assist with doctor's appointments, medications, and exercises
- Manage financial matters and transportation
- Provide the stroke survivor with physical, mental and emotional support
- Assist the stroke survivor with daily activities such as personal care and hygiene
- Plan out the stroke survivor's care, including setting routines and managing the care team
- Assess stroke survivor's medical needs, communicate with healthcare professionals and advocate (medically) for the stroke survivor.

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# Wheelchair Type Advantages and Disadvantages

	Advantages	Disadvantages
<b>Manual Wheelchairs</b>	<ol style="list-style-type: none"> <li>1. Lightweight</li> <li>2. Greater reliability</li> <li>3. Easier to transport</li> <li>4. Less expensive</li> <li>5. Provides exercise</li> <li>6. Easier to overcome accessibility problems</li> </ol>	Self-Propulsion: <ol style="list-style-type: none"> <li>1. Possible secondary complications after long-term use such as sore shoulders, wrists, and elbows</li> <li>2. Requires physical effort to be mobile</li> </ol>
<b>Scooters</b>	<ol style="list-style-type: none"> <li>1. Aesthetics—does not look like a wheelchair.</li> <li>2. Increases mobility range without increased exertion</li> <li>3. Swivel seat may allow for easier transfers in and out of the seat</li> </ol>	<ol style="list-style-type: none"> <li>1. More complicated to transport in a car than a manual chair</li> <li>2. Needs charging</li> <li>3. Less flexible modifications to meet changing physical conditions than a power chair</li> </ol>
<b>Power Wheelchairs</b>	<ol style="list-style-type: none"> <li>1. Greatest mobility range with least exertion</li> <li>2. Easier to modify over time, if needed</li> <li>3. Available power seating options (i.e., tilt and/or recline)</li> </ol>	<ol style="list-style-type: none"> <li>1. More expensive</li> <li>2. More difficult to transport</li> <li>3. Less reliable than manual wheelchairs.</li> </ol>

Purchasing a wheeled mobility device is not a simple matter. Much like a car, there are also aesthetic considerations. What is the image you want to project? Also, as in buying a car, you need to be practical. Many a “soccer mom” would love the two-seater, convertible roadster. Too bad there’s no room for the kids. Function often trumps fantasy.

Both our self-image and the functions we need to perform in our everyday lives change over time. Eventually, you may have different priorities and thus “move” from one type of mobility device to another. But always do your homework. Ask others about function, reliability, and personal experiences. With routine maintenance, and a little tender loving care, you can stay mobile for years to come.

**Get out there.  
Check out the options that can take you where  
YOU want to go**

*Article taken from the United Spinal Association website.  
To download this article or any other please go to [www.unitedspinal.org](http://www.unitedspinal.org)*

## People With Disabilities

People with disabilities are individuals with families, jobs, hobbies, likes and dislikes, and problems and joys. While the disability is an integral part of who they are, it alone does not define them. Don't make them into disability heroes or victims. Treat them as individuals.

*Article taken from the 60th Anniversary  
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# Types of Low Vision

The visual acuity of people with low vision varies widely, but, in general, low vision is defined as a condition in which a person's vision cannot be fully corrected by glasses, thus interfering with daily activities such as reading and driving. Low vision is more common among the elderly, but it can occur in individuals of any age as a result of such conditions as macular degeneration, glaucoma, diabetic retinopathy, or cataracts. Each of these conditions causes different types of effects in a person's vision; however, here are a few generalizations:

**Macular degeneration** - The macula is near the center of the retina, which is the area in the back of the eye. The aging process and the thinning of the tissues of the macula cause the most common form of macular degeneration, "dry" macular degeneration. The result is a gradual loss of vision. "Wet" macular degeneration occurs when abnormal blood vessels at the back of the eye begin to leak fluid or blood and blur central vision, often resulting in rapid loss of vision. In either case, the person's central area of sight is affected the most, making it difficult to see objects that the person is looking at directly. The images above are a simulation of the effect of macular degeneration. Text can appear broken and unclear.



**Glaucoma** - Glaucoma is caused by an increase in pressure inside the eye, which causes damage to the optic nerve. The end

result is often the opposite of the effect of macular degeneration: the loss of peripheral vision and a blurry central area of vision. It can be particularly difficult to read text because text seems faded as well as blurry. Some people have compared the effects of glaucoma to looking at everything through a straw.

**Diabetic retinopathy** - One of the effects of long-term diabetes can be the leaking of retinal blood vessels, causing dark patches in the field of vision where the leaks occur. Text can appear blurred or distorted in these regions



**Cataract** - Individuals with cataracts have areas of opacity in the lens of their eyes which results in a blurred or hazy effect, especially in bright light. Text can appear to fade into the background. High contrast is especially important for people with advanced cataract.

Many thanks to WGFA 94.1 FM & 1360 AM for sponsoring Options Annual Iroquois County Wheel-a-thon on Saturday, August 29, 2015 at Lakeview Park in Watseka, Illinois

# CaptionCall

## Life is Calling

### Do you have difficulty hearing on the phone?

Do you or someone you know have trouble hearing on the telephone? With CaptionCall you can understand every word of every phone call. Its large, easy-to-read screen quickly displays written captions of what your callers say. That means you can get more from your conversations – and from life.

#### Basic Requirements

To get started with CaptionCall, all you need is:

- A high-speed internet connection
- Standard home phone connection
- Ordinary home electrical outlet

### How CaptionCall Works

Similar to captioned television, CaptionCall uses voice recognition technology and a transcription service to quickly provide written captions of what callers say on a large, easy-to-read screen. It works like a regular telephone – simply dial and answer calls as usual – speak and listen using a phone handset like always.

The captioning service is free. Captioning is provided by CaptionCall and paid through a fund administered by the Federal Communications Commission.

View free, nearly instant captions of what your callers are saying on the large, easy-to-read display screen of your CaptionCall Phone. With the CaptionCall Service, you get captioning that's:

- **Free**—No new bills and no monthly charges; captioning is fully funded by the FCC.
  - **Automatic**—No need to dial through the Captioning Service.
  - **Secure**—Safe, encrypted, FCC-regulated transcription.
1. You hear your caller's voice over a standard phone line.
  2. The CaptionCall Phone sends their voice to the CaptionCall Service, which quickly converts words to text.
  3. The text is displayed on the screen of your CaptionCall Phone.

CaptionCall is made available only to individuals who have a medically recognized hearing disability necessitating their use of the service. The CaptionCall service is supported through the federal government's Interstate Telecommunications Relay Service fund. This fund is established to fulfill the mandate of the Americans with Disabilities Act (ADA) to provide functionally-equivalent communications to people with hearing loss. The CaptionCall service uses communication assistants who convert the calling party's spoken words into captioned text. All calls made through CaptionCall must include a hearing-impaired person.

### Why CaptionCall?

Hearing loss shouldn't mean losing touch. With the CaptionCall Solution, talking on the phone is stress-free. This comprehensive solution includes:



**CaptionCall Life is Calling...** (Continued from page 38)

- A state-of-the-art, captioning-enabled CaptionCall Phone
- Free, nearly instant captioning with the CaptionCall Service
- CaptionCall Support for friendly, ongoing customer assistance

For more information about CaptionCall's innovative solution to help you get more from your conversations—and from life, contact Options CIL's office in Watseka or Bourbonnais. If you would like to test this phone, call Options to schedule an appointment since we have a CaptionCall phone on site for you to try out.

This information was provided by CaptionCall and their website [www.CaptionCall.com](http://www.CaptionCall.com).

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## **Epilepsy (Seizure Disorders)**

Epilepsy is a Neurological condition characterized by seizures that happen when the electrical system of the brain malfunctions. The seizures may be convulsive, or the person may appear to be in a trance. During complex partial seizures, the person may walk or make other movements while he is, in effect, unconscious.

- If a person has a seizure; you cannot do anything to stop it. If he has fallen, be sure his head is protected and wait for the seizure to end.
- When a seizure has ended, the person may feel disoriented and embarrassed. Try to ensure that he has privacy to collect himself.
- Be aware that beepers and strobe lights can trigger seizures in some people.

*Article taken from the 60th Anniversary  
Special Edition of the United Spinal Association  
Disability Etiquette booklet.*



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# Hearing and Speech: Presence St. Mary's Hospital Has The Connection To Communication

The National Institute on Deafness and Other Communication Disorders reports that an estimated 43 million Americans have a hearing, speech, voice, or language impairment. Approximately 1.4 million of these individuals are children with moderate to severe communication impairments due to impaired hearing.

“Hearing loss can strike at any age and at any time. It can emerge slowly or come on suddenly. Either way, even the slightest hearing loss can affect all areas of a person’s daily life,” explains Francis Hobson, MD, board certified Otolaryngologist, Presence St. Mary’s Ear, Head, and Neck Institute and Hearing Center.

Francis L. Hobson, M.D., continues to perform the area’s only cochlear implant surgeries at Presence St. Mary’s Hospital.

A cochlear implant (CI) provides a sense of sound to a person who is profoundly deaf or severely hard of hearing. It is an electronic device that is surgically placed into the cochlea or inner ear and consists of a receiver and an electrode array, which contains the electronic circuits that receive signals from the external system and send electrical currents to the auditory nerve.

The external components include a microphone, a sound processing unit, and a transmitter. All are worn behind the ear and secured magnetically to the implant.

“A cochlear implant receives sound from the outside environment, processes it, and sends small electric currents to the auditory nerve,” explains Dr. Hobson. “The electric signals from the electrode array stimulate the auditory nerve and are sent to the brain where they are recognized and perceived as sound. The patient experiences the signal as hearing.”

Cochlear implantation is an outpatient procedure. Prime candidates are adults and children who have severe to profound sensor neural hearing loss and who get little or no benefit from hearing aids.

## **Speech:**

Speech and language disorders can take many forms, including articulation, stuttering, and aphasia. They may be learning-based, acquired, or the result of injury or illness. For children, proper development of speech and language skills is imperative to ensure their ability to learn, to explore their environments, to interact with others, and to communicate their wants and needs.

The Rehabilitation Department of Presence St. Mary’s Hospital provides bilingual speech language therapy for pediatric patients, including the evaluation and treatment of expressive speech/language delays and disorders; articulation and related motor speech disorders; cognitive and oral motor impairments; voice disorders; and swallowing/feeding difficulties.

For more information about Presence St. Mary’s Hospital Ear, Head, and Neck Institute and Hearing Center or the Rehabilitation Department, go to [www.presencehealth.org/stmarys-kankakee](http://www.presencehealth.org/stmarys-kankakee).

# Simple Tips for Home Safety

Home safety is quite important and should not be taken lightly. Many accidents that occur in the home can be prevented by making a few simple changes. By following these tips you can prevent accidents and ensure safety as you live independently in your home.

- Position furniture in corners and parts of the room away from high traffic areas. This assists people with low vision and mobility impairments.
- Have handrails on both sides of stairs and steps. Make sure handrails go from the top to the bottom of stairs.
- Have lots of light at the top and bottom of the stairs.
- Keep the stairs clear.
- Carry small loads up and down stairs. Always hold onto a handrail.
- It is easy to trip on small rugs. Tape them to the floor or do not use them at all.
- Keep electrical cords behind furniture to prevent tripping. Do not place electrical cords under rugs or furniture legs because this can wear down the cords and become a fire hazard.
- Have nightlights in the bedroom, hall and bathroom to help keep lighting consistent. This is especially helpful for people with low vision.
- Keep several flashlights on hand in areas you spend most of your time.
- To help people with vision impairments, use contrasting colors in areas where there are doorways, walls, steps and other changes in structure.
- Have a mat or non-slip strips in the tub and shower.
- Have a bath mat with a non skid bottom on the bathroom floor.
- Have grab bars in the tub and shower. Consider a bath bench.
- Assist people with hearing impairments by carpeting floors and curtaining windows to minimize echoes and sharp noises.
- If there is an accident, an emergency alert device can bring help with the push of a button which alerts authorities outside the home.
- Keep the following information by your phone:
  - Your name
  - Your phone number
  - Your address
  - Name and phone number of your physician
  - Names and phone numbers of people to contact in case of an emergency
  - A list of your medications and dosages
- Be sure your house number is clearly visible from the street so that emergency services can easily locate your home.
- Check in with a friend or family member on a daily basis. If they don't hear from you they will know to go to your home and make sure everything is okay.
- When you are out, it is a good idea to carry medical and emergency contact information with you.

# Cognitive Disabilities: Learning Disabilities

Learning Disabilities are lifelong disorders that interfere with a person's ability to receive, express or process information. Although they have certain limitations, most people with learning disabilities have average or above-average intelligence. You may not realize that the person has a learning disability because he functions so well. Or you may be confused about why such a high-functioning person has problems in one aspect of his work.

- People with dyslexia or other reading disabilities have trouble reading written information. Give them verbal explanation and allow extra time for reading.
- Don't be surprised if you tell someone very simple instructions and he requests that you write them down. Because spoken information gets "Scrambled" as he listens, a person who has a learning disability such as auditory processing disorder may need information demonstrated or in writing.
- Ask the person how you can best relay information. Be direct in your communication. A person with a learning disability may have trouble grasping subtleties.
- It may be easier for the person to function in a quiet environment without distractions, such as a radio playing, people moving around or loudly patterned curtains.

*Article taken from the 60th Anniversary  
Special Edition of the United Spinal Association Disability Etiquette booklet.*

The Americans with Disabilities Act (ADA) of 1990 was conceived with the goal of integrating people with disabilities into all aspects of American life, particularly the workplace and the marketplace. Sensitivity toward people with disabilities is not only in the spirit of the ADA, it makes good business sense. It can help you expand your practice, better serve your customers or develop your audience. When supervisors and co-workers use disability etiquette, employees with disabilities feel more comfortable and work more productively. Practicing disability etiquette is an easy way to make people with disabilities feel welcome.



IROQUOIS PERFORMING ARTS CENTER

*Many thanks to the  
Witseka Theatre  
for hosting the  
2015 Iroquois County  
Wheel-a-thon Kick Off Party*

# River Valley Metro Mass Transit District

## What is it, and what do they do?

River Valley Metro Mass Transit District is a public service agency that offers three types of bus services for the residents of Kankakee County.

1. Traditional, or “fixed route”, bus service in the urbanized area of Kankakee County. This includes Aroma Park, Kankakee, Bradley, Bourbonnais and Manteno.

2. Commuter shuttle service to Midway Airport and to the Metra train station at University Park.

3. Service for individuals with disabilities who are unable to independently use fixed route service. This is referred to as Metro Plus service.

Fixed route buses serve more than 350 bus stops from 5:00 am to 10:30 pm Monday through Friday, 7:00 am to 10:30 pm on Saturdays, and 8:00 am to 5:00 pm on Sundays and major holidays. Most stops are served once each hour, but a few are served every half hour. All buses are wheelchair accessible. Fare is \$1.00 per trip.



The University Park Metra train station commuter shuttle departs from the Metro Centre in Bourbonnais and makes one stop in Manteno. The morning schedule is coordinated with trains departing from University Park, and the afternoon/evening schedule is coordinated with trains arriving at University Park. Fare is \$2.00 each way.

The Midway Airport shuttle departs from the Manteno Metro Centre in downtown Manteno and runs non-stop to the public transportation terminal at Midway Airport. Free parking is available adjacent to the Manteno Metro Centre. Fare is \$2.00 each way.

Metro Plus service requires pre-qualification and operates by appointment. Metro Plus buses will pick you up at your home and take you to your destination. This is a shared ride service, meaning that multiple individuals' trips are grouped together in an effort to meet all trip requests and improve efficiency. Ride time on Metro Plus is comparable to travel time on the fixed route system, including transfers and wait times. Fare is \$2.00 each way.

Additional details about each of these services are available at  
[RiverValleyMetro.com](http://RiverValleyMetro.com) or by calling 815-937-4287.



- ♦ **12 Local Routes** serving Aroma Park, Kankakee, Bradley, Bourbonnais, and Manteno
- ♦ **2 Commuter Routes** serving Midway Airport and the Metra train station at University Park
  - ♦ **Curb to Curb** service for those with qualifying disabilities

Whether traveling around town or to a Chicago destination, all River Valley Metro buses are equipped for wheelchair accessibility. And, if you have a disability that prevents you from getting to and from one of our 350 bus stops, Metro Plus can pick you up!

Metro Plus curb to curb service provides local transportation by appointment for people who have a disability that prevents them from using our regular service. Eligibility must be verified through a simple application process. For details, please visit [RiverValleyMetro.com](http://RiverValleyMetro.com) or call 815-935-1403.

Our buses run 365 days a year. Whether going to an appointment, visiting friends, or going out for the evening, **Go Where You Want To Go With River Valley Metro!**



# Rehabilitation Services

Presence St. Mary's Rehabilitation Services offers comprehensive therapy in the areas of:

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Vertigo/Balance/Falls
- Chronic Pain
- Incontinence
- Aquatic Therapy
- Wheelchair and Scooter Evaluations
- Lymphedema
- Pediatrics (PT, OT, and Speech)



21 Heritage Drive Bourbonnais, IL 60914

815.937.8220

[www.presencehealth.org/stmarys-kankakee](http://www.presencehealth.org/stmarys-kankakee)



**Presence St. Mary's Ear,  
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**Dr. Hobson is the first otolaryngologist to bring cochlear implant surgery to the community.**

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- Hearing Aid Consultation
- Hearing Aid Repairs and Trouble Shooting

**Call today for an appointment**  
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[www.presencehealth.org/stmarys-kankakee](http://www.presencehealth.org/stmarys-kankakee)

455 W. Court Street, Kankakee, IL 60901

