3.2 ASSISTIVE TECHNOLOGY

3.2.1 GENERAL

Assistive Technology (AT) is defined as the application of technology to alleviate barriers that interfere with the lives of individuals with disabilities and is intended to help the individual maintain or enhance his or her ability to function personally, socially, and/or vocationally.

Agency rehabilitation engineers and rehabilitation technologists are available to provide consultation on all AT referrals as well as perform initial evaluations and assessments, and set-up AT equipment, provide follow-up evaluations, design and fabricate original items, and provide specifications and final inspections for AT services. When necessary, referrals will be made to outside sources. **Some AT services are provided by the counselor without assistance from the AT program.**

Definitions:

Agriculture Accommodation – This service refers to those services provided for MDRS clients that would like to be able to work or to continue to work in the agriculture field that also includes turf, forestry, logging, row crop production, timber processing, and custom machinery and lawn care services, also anyone working in a support industry such as processing facility, machinery dealership, farm supply business, pest management business, agricultural consulting services, etc.

Auditory Accommodation – This service assists with the enhancement of communication through AT in the environment and relationships of a person who is hearing impaired.

Augmentative/Alternative Communication – This service refers to the provision of a device to supplement or to replace natural speech and/or writing.

Computer Access – This service refers to the provision of computer hardware and/or software.

Durable Medical Equipment (**Activities of Daily Living Devices)** – This service refers to devices that help a client perform daily living activities.

Environmental Control Unit – This service refers to the provision of a specific kind of assistive technology that gives a client control over items in their environment.

Home Modification – This service refers to modifications to a client's home.

Job Site Accommodation – This service refers to the process of modifying or rearranging job tasks (parts of a job) to allow a person with a disability to continue to work.

Seating and Mobility – This service refers to devices that assist a client with personal mobility such as a wheelchair, scooter, or wheelchair seating components.

Vehicle Accommodation – Vehicle Accommodations are broken into three specific services to assist a client with driving a vehicle:

Driver Evaluation – This service refers to determining whether a client is able to safely drive a vehicle.

Vehicle Consultation – This service refers to recommendations as to what type of vehicle would meet the client's needs. This service would be provided for a client who does not currently own a vehicle.

Vehicle Assessment – This service refers to determining if a client's vehicle meets the MDRS policy for modifications and determining what modifications a client would need for a vehicle that he/she currently owns.

Vision Aids (Non-Computer Related) – This service refers to the provision of devices used by an individual who is blind or has low vision that does not include a computer. For additional information on this service see the OVR/OVRB Resource Guide -Section 3.21.1.

The counselor should evaluate the client's need for AT services throughout the rehabilitation process. Examples of MDRS cases which may benefit from AT services include persons with mobility impairments, spinal cord injuries, traumatic brain injuries, visual impairments, speech impairments, respiratory impairments, cardiac impairments, learning disabilities, hearing impairments, and other limitations which result in a severe disability.

3.2.2 REFERRALS FOR AT SERVICES

VR/VRB, OSDP, and ILB field staff will refer their clients to the Agency's Assistive Technology program by creating a Service Authorization in AACE.

NOTE: It is imperative that the counselor verify that the information in the referral is accurate and up-to-date.

The referral will be assigned to the appropriate AT professional. The counselor will be advised via e-mail the name of his/her contact. Complete medical packets should be forwarded (mailed/eCopied/faxed) to the appropriate professional handling the case.

The following information must be included in the referral packet:

a) Medical reports, as indicated by the client's disability(ies).
b) Specialist reports, as appropriate to the individual's disability(ies) for the services being requested (i.e., psychological evaluation, educational diagnostic testing, orthopedic reports, ophthalmology reports, occupational therapy reports, physical therapy reports, and pertinent reports from rehabilitation centers)
c) An in-depth description of the client's limitations and how they impact him/her.

Once the service authorization and medical packet have been reviewed by the AT professional, he/she will notify the client and the referring counselor of the date and time of the initial evaluation. The counselor must identify the client's vendor of choice prior to any vendor accompanying an AT professional or counselor during an evaluation for durable medical equipment. Additionally, having vendors present during an evaluation should be limited and only with approval of the district manager. The counselor is encouraged to maintain contact with the client and notify the AT professional of any changes in the client's status or condition. After performing an initial evaluation for the requested AT service, the AT professional will send a report with all recommendations and cost estimates to the counselor. The counselor will request, in writing, the specifications, drawings, and/or other information necessary for the provision of the AT service.

NOTE: AT recommendations are valid for one year from date of evaluation, with the exception of computer access evaluations which are valid for six months. If action is taken on a report that is over this limit, the AT program should be consulted to determine if any changes should be made to the recommendation. Also, should there be any significant changes in the client's physical and/or cognitive abilities, the AT program should be consulted to determine if any changes should be made to the original recommendation.

3.2.3 PURCHASING ASSISTIVE TECHNOLOGY SERVICES/DEVICES

It is necessary to follow the Mississippi Public Purchasing Law when purchasing items not covered by *contract, medical exemption, or comparable benefits*. All items covered by any State contract must be authorized according to the State contract price (quotes/bids are not required).

For additional criteria for customized services, please see specific sections relating to:

- Computer Purchases – refer to Section 3.2.5.1
- Vehicle Accommodations – refer to Section 3.2.5.5
- Durable Medical Equipment (DME) – refer to Section 3.2.6

Purchases of $5,000 or under:

Purchases of $5,000 or under (exclusive of freight and/or shipping charges) do not require quotes or additional supervisory approval. These items should be purchased from a vendor chosen by the client. To be an eligible DME vendor, the vendor must give MDRS a minimum discount of 20% off manufacturer's suggested retail price (MSRP). (For Computer purchases, refer to Section 3.2.5)

Purchases over $5,000 but not over $25,000:

Purchases over $5,000 but not in excess of $25,000 (exclusive of freight and/or shipping charges) require at least two written quotes or certification that the vendor is a single source. (Single source means that no comparative or competitive quotations can be obtained and no other item would be suitable or acceptable to meet the need; consequently, very rarely will there ever be a single source.)

Once the counselor receives the AT recommendation, (except for items covered by contract, medical exemption, or comparable benefits) the client should be given the choice of eligible vendors from which to receive the AT services/device(s). The counselor will solicit quotes from at least two of these chosen vendors. Each quote must discount the MSRP by a minimum of 20% to be considered. The lowest and best competitive quote shall be selected. If the lowest quote is not selected, a justification must be written stating why the lowest quote was not chosen. **NOTE: This does not include DME exemptions, home modifications, computers, or vehicle modifications.**

Quotes (or if the vendor is certified as a single source, the single source certification) must be sent to the district manager for approval if the amount is over $15,000. After approval by the district manager, an authorization may be issued.

Purchases Over $25,000:

For purchases over $25,000 (exclusive of freight and/or shipping charges) the counselor must send the specifications for the items to the district manager for approval. Once approved, the district manager will then forward the material to the finance office. The finance office will arrange for advertising in the newspaper, and provide guidance in obtaining bids. Purchases over $25,000 require approval by the district manager. Furthermore, purchases over $45,000 require approval by the district manager and the director of client/field services. If the lowest bid price is not selected, a justification must be written stating why the lowest bid price was not chosen.

When purchasing AT equipment (including computers, telecommunication equipment, computer software, etc.), the appropriate AT professional should be contacted for any required assistance.

NOTE: For computer based equipment refer to Section 3.2.5.1
For vehicle accommodations, you must refer to Section 3.2.5.5

Third Party Responsibility

In the event the client has Medicare, Medicaid, or private insurance, the counselor should verify the benefits available to the client before authorizing to the client-chosen vendor. If the client has Medicare, the vendor chosen by the client must be willing to accept assignment of the Medicare benefits/payment. The vendor shall not require the client to sign any forms obligating the client or MDRS for amounts over and above the Medicare approved rate.

3.2.4 MAINTENANCE AND REPAIR COSTS

An AT professional will assist the client in securing satisfactory adjustments when problems occur that are under warranty or are reasonably expected to be remedied by a vendor at no cost to MDRS. **It is the client's responsibility to provide ongoing upkeep and maintenance cost. The Agency is not responsible for upkeep, repairs, or replacement of vehicle modifications, wheelchairs/scooters, computers, or other AT equipment.**

3.2.5 CUSTOMIZED SERVICES

3.2.5.1 COMPUTER BASED AT EQUIPMENT/ COMPUTER ACCESS

The area of computer access is very broad and encompasses any accommodations related to computer hardware or software that a client may need to accomplish his/her goal. It is imperative that the client and the counselor have a clearly defined goal, and this goal should be noted in the service authorization.

Computer Literacy

A client must possess basic computer literacy to be eligible for an AT evaluation. MDRS AT Program does not provide computer literacy training for clients. Basic computer literacy may be obtained through community colleges, the Addie McBryde Center, the REACH Center, or other sources outside of MDRS. In addition, the AT program only provides limited training (approximately four hours) on computer technology that is purchased for a client. If the AT professional determines that a client needs additional training, that information will be included in the AT report.

Purchasing Computer Based AT Equipment

The need for computer equipment and related software should be carefully evaluated by an AT professional prior to preparation of equipment specifications to be certain of equipment compatibility. Companion equipment/software should be thoroughly tested to make this determination.

After securing the recommendation for computer systems from the AT professional, counselors should send a copy of the recommendation to the district manager for approval. Once the district manager approves the request, the counselor should send the recommendation to Management Information Systems (MIS). MIS staff will obtain a list of approved vendors and price quotes and send it to the counselor. **The counselor should not write the Individualized Plan for Employment (IPE) or the Independent Living Plan (ILP) until this information is returned to the counselor.** The counselor should secure the signature of the client on the MDRS-AT-02 before the authorization is issued. A signed copy should be given to the client and the original must be retained in the case file.

The counselor should request that the vendor ship the computer equipment to the AT professional handling the case. The counselor should send a copy of the authorization to the AT professional and MIS. When delivering the computer or computer systems to the client, the AT professional shall secure the signature of the client on the MDRS-AT-03. A signed copy should be given to the client and the original must be retained in the case file.

Computers for College Students

It is up to the counselor and the client to determine when and/or if it is necessary for MDRS to purchase a computer for college training. If a client is a college student and a referral is made for computer access, the AT program will assume that the counselor has made the decision to provide a personal computer for the client. The AT program cannot make a determination if a client should be provided a computer for college training. The AT program can only make recommendations as to what hardware and/or software would allow a client to reach his/her vocational goal.

Computer Repair

MDRS does not provide routine maintenance or computer repair. Referrals for AT service should not be made for routine maintenance or repair. The client should contact a local computer service or the manufacturer directly.

3.2.5.2 HOME MODIFICATION

Home modification is the application of assistive technology to the residence of a client to remove barriers that prevent the client from reaching his/her specified goal. The desired goal(s) should be clearly stated on the referral for AT evaluation and consistent with the client's vocational or independence goal.

MDRS will not provide home modifications to a residence that is structurally unsound or in such disrepair that to not have repairs prior to providing the modification would compromise the safety and effectiveness of the modification.

Title to Property

Prior to referring an individual to the AT program for a home modification evaluation, the counselor must determine property ownership of the residence to be modified. Rental or mortgaged property and/or property owned by someone other than the client may be considered for modification by MDRS for non-permanent modifications that can be moved to another location should the client move. It is necessary to secure written permission from the titleholder prior to modifying any property. This includes property:

I. Owned by other parties

II. Mortgaged

III. Rented

IV. Otherwise encumbered that could impede client's use

V. Owned by the client or the client and others

NOTE: Counselors should make a determination that the cost of any home modification is commensurate with the value of the home.

Home Additions

At no time will MDRS pay for modifications that add to the total square footage of the home. Total square footage refers to that area that is originally heated and cooled. MDRS may, however, pay for accessibility modifications to home additions that have been paid for by the client that are a component part of the original roofline.

MDRS does not participate in the construction of new homes other than in an advisory capacity.

Home Repair/Maintenance

MDRS does not pay for home repairs or general maintenance of homes.

Changes to Specifications

If it is necessary to make changes to the specifications, these changes must be made in writing with the approval of the AT professional who formulated the specifications. The AT professional, the client, the counselor, and the contractor must then sign these changes before they will be accepted. The counselor is not responsible for payment of additions to the specifications unless this procedure has been followed. The counselor should notify the client and the contractor that MDRS is not responsible for payment of additions to the specifications unless this procedure has been followed.

3.2.5.3 JOB SITE ACCOMODATION

Job site accommodation is the process of modifying or rearranging job tasks (parts of a job) to allow a person with a disability to continue to work. Often a person with a disability can complete most of the job tasks required for a job, however, there may be specific job tasks that the client cannot complete without modification due to the limitations imposed by the disability.

The service authorization should identify the specific functional limitation that needs to be addressed. It is essential that the counselor work with the employer to achieve the required services. Counselors are reminded of ADA and 504 responsibilities; however, the success of the client's rehabilitation takes precedence.

For in-house job site accommodations – refer to Chapter 1.02 of the MDRS Policy Manual.

3.2.5.4 SEATING AND MOBILITY

Evaluation of the client in his/her home or other appropriate setting will be conducted in order to evaluate the client for a proper seating and/or mobility system. The AT professional will determine if there are any physical deformities and/or limitations such as pelvic obliquities, scoliosis, contractures, fixations, etc. that need to be addressed by an occupational therapist or physical therapist. **NOTE: Medicare and some private insurance companies require seating and mobility systems to be evaluated/recommended by a licensed occupational or physical therapist.**

The counselor should secure the signature of the client on the Client/Owner Agreement of Understanding (MDRS-AT-02) before the authorization is issued. A signed copy should be given to the client and the original retained in the case file. During the delivery of the seating and mobility system, the Agency AT professional should secure the signature of the client on the Assistive Technology Equipment Delivery Receipt (MDRS-AT-03). A signed copy should be given to the client and the original must be retained in the case file.

Repairs

MDRS does not provide routine maintenance or repair. Referrals for AT service should not be made for routine maintenance or repair. The client should contact a local vendor for repair service or the manufacturer directly.

3.2.5.5 VEHICLE ACCOMMODATION

Motor vehicle modifications may be provided, when necessary, to enable clients to prepare for, secure, retain, or regain employment or achieve independent living goals. Motor vehicle modification services can be provided when a specific employment goal has been identified on the IPE and subsequent rehabilitation services are required and will result in gainful employment or when identified as an approved/appropriate goal as part of an individual's ILP. MDRS will only participate financially in the purchase of AT devices, adaptive equipment, and vehicle modifications. **MDRS will not purchase or lease a vehicle.**

Driver Evaluation

If a client will be driving a vehicle modified by MDRS, and MDRS will be providing adaptive driving equipment, that client must have a driving evaluation performed to determine if the client has acceptable physical and cognitive abilities to drive.

NOTE: If the client has been a consistent driver for an extended period of time and is updating his vehicle with comparable adaptations to those used previously, an evaluation may not be required.

If the client has had a driving assessment in the last five years, an exception can be made. In order for the client to forego a driving assessment, the counselor must have:

- a copy of the previous driving assessment, and
- a letter from the client's doctor stating there have been no changes in the last five years that would negatively affect this client's ability to drive a vehicle

A copy of these documents should be included with the medical information sent with the AT referral.

NOTE: The client must hold a valid driver's license or a valid learner's permit to receive a driving assessment.

Vehicle Consultation

When a client is considering purchasing a new or used vehicle, it is beneficial for the client and MDRS if they are referred to AT prior to that purchase. The consultation will assist the client in acquiring a vehicle that meets his or her needs.

Vehicle Assessment

Vehicle Standards for Agency Approval

MDRS has established policies for the age and mileage of a vehicle that the Agency will modify. The requirements are different depending on the type of modifications that the client will need. The age/mileage requirements are necessary because adaptive equipment is often expensive. Older vehicles are subject to more frequent malfunctions and have a shorter operating life than newer vehicles.

It is recognized there are some vehicles that, because of excellent care and condition, may warrant consideration even though they exceed the age and mileage restriction and/or there may be hardship situations. So, even if the client's vehicle does not explicitly meet the above requirements, a referral can be made for vehicle modifications.

All vehicles must be in good working order. Used vehicles must have a vehicle inspection and mechanic's inspection in addition to meeting these requirements.

Modification Level	Vehicle Age / Mileage Requirements	
Level I	None	Mechanical gas/break (hand controls), unoccupied wheelchair/scooter loader/carrier, trailer hitch, steering devices, portable ramps, power and manual wheelchair tie-downs, simple non-driver devices, left foot accelerator, pedal extensions, secondary driving aids (non electrical), upgraded suspension.
Level II	< 7 years old or have < 140,000 miles	Occupied wheelchair/scooter lift, power transfer seat, manual transfer seat, automatic door openers, low and zero effort steering systems, low and zero effort breaking systems, power seat bases, electronic secondary controls.
Level III	< 3 years old or have < 60,000 miles	Modifications to the structure of the vehicle (raised doors, raised roof), power pan, electronic driving equipment, electronic secondary controls, lowered floor for a full size van.
Level IV	< 30,000 miles	Lowered floor minivan conversions.

NOTE: This listing is not exclusive. Any item that is not on this list should be approved by an AT professional to determine what level of modification that item would fall into.

Vehicle modifications are provided under State contract rates. The client will be informed of vendors who are under contract to provide modifications, repairs, and installation of adaptive equipment to vehicles (See Vehicle Modification Fee Schedule).

MDRS will not provide vehicle modifications without proof of ownership and insurance coverage for both the vehicle and the installed equipment. The intended driver must possess a valid driver's license.

Repairs and Maintenance

The Agency will neither repair nor replace motor vehicle modifications damaged by accident, vandalism, or fire.

The client should sign the new MDRS-AT-02 before the authorization is issued and the MDRS-AT-03 when the vehicle is delivered and before the statement of account is paid. Agency AT professionals are available for assistance with all aspects of this process.

The vehicle modifications will be inspected for quality assurance. For all vehicle modifications, the counselor should notify the AT professional upon completion of the modifications so the AT professional can make arrangements for final inspection **before acceptance**. The AT professional should secure the signature of the client on the MDRS-AT-03. A signed copy should be given to the client and the original must be retained in the case file.

If a modified vehicle is sold, the client is responsible for seeing that the adaptive equipment is transferred to the replacement vehicle, if practical. The Agency's AT professionals are available to assure that the transfer and refitting of the adaptive equipment is performed correctly and is deemed safe for normal operation.

3.2.6 DURABLE MEDICAL EQUIPMENT (DME)

Federal regulations implementing the 1992 Amendments to the Rehabilitation Act were issued by the Rehabilitation Services Administration in March 1997. One of the most significant changes involved the increase of informed choice in client selection of service providers. Examples of durable medical equipment would be prosthetic and orthotic devices, wheelchairs and accessories, motorized scooters, patient lifts, and other medically prescribed items.

> **Effective October 1, 1997, DME that is medically prescribed has been placed on the exempt from quote or bid list in order to accommodate the federal mandates on informed choice for clients.**

The OVR/OVRB counselor will buy DME and associated supplies, as exemptions, **only** when **medically prescribed** by a physician (M.D.) as **medically necessary**. Counselors must continue to ensure the Agency does not pay excessive prices or prices that exceed the lowest manufacturer's suggested retail price customary within the locality involved, less 20 percent. For non-medically prescribed DME, see non-exempt medical purchases in this section.

Federal regulations and State purchasing laws require a fee schedule be established for all purchases. For further guidance, please refer to the OVR/OVRB Fee Schedule.

Procedure for DME purchase

Medically Prescribed DME Purchase (Exempt)

- Obtain prescription from medical professional
- Discuss vendor choice with client, ensuring informed choice
- Pursue and verify available comparable benefits
- Contact DME vendor to obtain price (To be an eligible DME vendor, they must provide a copy of the lowest manufacturer's suggested retail price, less a 20 percent discount to the Agency.)
- Purchase should be planned on the IPE
- Authorization for DME should be issued

Non-Exempt Durable Medical Equipment Purchase

Should the need arise to acquire an item of DME that is not medically prescribed, OVR must purchase according the Agency purchasing rules and State purchasing laws. **Please refer to purchasing guidelines in OVR/OVRB Resource Guide Section 3.2.3.** DME and AT purchases/modifications, while similar are different. It is important to clarify which category the item for purchase belongs.

3.2.6.1 ORTHOTIC / PROSTHETIC SERVICES & APPLIANCES (O&P)

The VR counselor should provide the VR client with sufficient information for the client to make informed choice regarding the provision of the O&P service.

- **Prescriptions:** The provision of all orthotic or prosthetic devices, or the modification of such items, must be prescribed by an orthopedist, surgeon or M.D., licensed in the State to prescribe it.

- **Authorizations:** Authorizations for orthotic or prosthetic device/services must be issued only to a facility/location where the fitting, fabrication, modification or repair of same is performed by or under the direction of a certified prosthetist and orthotist (CPO), a certified orthotist (CO) in the case of an orthotic device, or a certified prosthetist (CP) in the case of a prosthesis. Please see the fee schedule for detailed information for authorizations.

- **Physical Therapy:** When a new prosthetic device is prescribed for a person with an amputation, he or she should receive an initial physical therapy (PT) treatment/ training in a rehabilitation hospital, community hospital, or medical clinic setting if possible. The amount of time, care and services provided in the home by a home health physical therapist may not be uniform, and the length of physical therapy (prosthetic/gait training, etc.) time spent during the home visit may not be as comprehensive as conducted in a hospital or clinic setting.

- **Checkout Sessions:** Clients receiving upper and lower extremity prostheses should participate in the following checkout (office visit) sessions with at least the physical therapist and the orthotic & prosthetic company representative. When feasible, the team approach in the checkout sessions, which would include the client, the Orthopedist, the physical therapist, the O&P company representative, and the VR counselor, is better for everyone.

  These checkout sessions are to discuss and review the client's physical condition, and to review how the orthotic/prosthetic device is fitting and/or functioning, and like factors. In addition, these sessions allow upper and lower extremity wearers to demonstrate the individual is receiving maximum utilization of the preparatory (temporary) or the definitive (permanent) device.

  At the completion of the initial physical therapy evaluation/training, the counselor should initially authorize, as needed, a minimum of ten physical therapy sessions and prosthetic/gait training sessions to insure maximum utilization of the prosthetic device. At the end of two months (60 days), the check-out session will be held to demonstrate the definitive (permanent) limb, how it fits, to check for shrinkage, swelling, skin irritation, etc.

3.2.7 PROJECT START (Success Through Assistive/ Rehabilitative Technology)

Project START is made possible through a federal grant under the Technology-Related Assistance for Individuals with Disabilities Act of 1988 (P.L. 100-407), as amended in 1994 (continued funding made available by the Assistive Technology Act of 1998) to improve the awareness of and access to assistive technology. Project START is the State Assistive Technology Act program that works to improve the provision of assistive technology to individuals with disabilities of all ages through a comprehensive statewide program of technology-related assistance. Additionally, the program supports activities designed to maximize the ability of individuals with disabilities and their family members, guardians, and advocates to access and obtain assistive technology devices and services.

Project START'S Mission: Empowering Mississippians with disabilities through awareness, education, and access to assistive technology

Key Activities of Project START

- Device Loan Program
- Device Reutilization
- Device Demonstration Program
- Training and Technical Assistance
- Public Awareness
- Coordination and Collaboration
- Transition Services

Without awareness and access to available assistive technology, Mississippians are unable to lead productive, rewarding and independent lives that are possible with assistive technology. Project START offers an on-line catalog www.msprojectstart.org that covers a broad range of devices and equipment.

The following categories are included in the on-line catalog:

- Adapted Toys for Children
- Adaptive Computer Equipment
- Augmentative & Alternative Communication (AAC)
- Capability Switches
- Communication
- Computer
- Durable Medical
- Hearing Impairment
- Low Vision
- Mobility

Project START's services are provided on a statewide basis and are available to individuals of all ages and disabilities as well as to service providers. Services are available at no cost to consumers in Mississippi. To access these services through MDRS an AT referral in AACE is completed. A consumer may call Project START or the consumer may fill out the request for services on-line at www.msprojectstart.org

Device Loan Program

Project START's device loan program, *Try AT Before You Buy AT*, enables people with disabilities to borrow and try out different types of AT devices for a limited time period (30 days for professional organizations and 90 days for consumers). Project START has developed an extensive device loan program containing state-of-the-art devices that cover a variety of needs. Equipment is used for demonstration, training, evaluation, and loan purposes. Equipment can be borrowed for the purpose of evaluation, for trial to determine its effectiveness and appropriateness, for use while a device is being repaired, or until a device is received from the manufacturer. The on-line catalog contains all the available equipment for loan or to be given away at no charge to consumers. Project START continually upgrades and adds to the device loan program to ensure appropriate devices are available.

Device Reutilization Program

Project START operates and/or supports device reuse through device exchange, repairing and recycling activities. Device exchange involves connecting an individual with a used device and an individual who needs a device. They often take the form of "want ads" or are similar to "e-bay" ads. In a device exchange, the current owner of the device and the prospective recipient of the device negotiate the terms of exchanging the device directly. For this service, consumers can access Project START Equipment Exchange Program at www.msprojectstart.org, click on the Equipment Exchange Link.

Project START's recycling program involves the intake of used devices (usually through donation) by consumers or different organizations in Mississippi. Project START is responsible for device storage and redistribution. The recycling program differs from refurbishment in that devices are generally redistributed "as is" or with only minor work such as cleaning. This program takes donations of all available assistive technology, cleans it, and gives it away to Mississippians who can't afford and have no other access to the assistive technology.

Examples of donations are:

- Walkers
- Shower Chairs
- Manual Wheelchairs
- Hoyer Lifts
- CCTV
- Low Vision Aids
- FM Systems
- Voice Amplification
- Hospital Beds

Device Refurbishment: Computer and Mobility
Project START's device refurbishment program involves the intake and repair or customization of used devices for computers and mobility equipment. Project START is responsible for device storage, repair, and redistribution of computers and wheelchairs to consumers in the state who can't afford or who have no other access to the assistive technology.

Device Demonstration
Project START provides consumers and others the opportunity to see the latest technology, get information, and learn what might be the most appropriate device for them through demonstrating all types of devices and equipment on a daily basis.

Training and Technical Assistance
Staff of Project START develop and disseminate training materials, conduct training, and provide technical assistance on a numerous topics statewide, including state and local educational agencies, other state and local agencies, early intervention programs, adult service programs, hospitals and other health care facilities, institutions of higher education, and businesses.

Public Awareness
The staff of Project START conduct public awareness activities, including statewide information and referral systems, designed to provide information that relates to the availability, benefits, appropriateness, and costs of AT. Project START provides exhibits and displays supplying information about assistive devices and services that relate to a cross-section of disabilities. Project START maintains a video and book library of assistive technology materials and information.

Consumers can request information from Project START. The request will be sent by mail within five working days of receiving the request or can be faxed or given over the phone when necessary. Typical information provided by Project START includes the following:

- Information concerning availability of assistive devices to meet specific needs
- Where and how to obtain evaluations for assistive devices
- Names of companies that manufacture the device
- Referral to assistive technology services providers
- Training opportunities for service providers, consumers, and other support groups

Coordination and Collaboration
Project START works to improve access to assistive technology, by partnering with many public and private entities responsible for policies, procedures, or funding for the provision of assistive technology devices and services to individuals with disabilities, service providers, and others.

Transition Services
Project START develops and disseminates training materials, conducts trainings, facilitates access to AT, and provides technical assistance to assist eligible secondary school students with disabilities transitioning from secondary to post-secondary school training or work and adults with disabilities who are maintaining or transitioning to community living.

Information and Referral Services
Project START maintains a clearinghouse for assistive technology information which includes articles, newsletters, catalogs, and data from various manufacturers and retailers for assistive devices from numerous resources. In addition, Project START has access to the Internet which allows Project START to maintain the latest and most up-to-date information about assistive technology issues and devices from the national level.

Training
Project START sponsors conferences and monthly trainings with consumer groups and other service provider systems to increase awareness of and access to assistive technology on a comprehensive basis. Partnerships include but not limited to: T.K. Martin Center, Magnolia Speech School, Hudspeth Mental Health Center, Technology Assistive Device (TAD) Center, Technology Learning Center, and Jackson State University.

Project START can arrange for consultants and experts to provide training in areas such as:

- Application of assistive technology in specific areas (i.e. Special education, with specific disabilities, in specific environments, etc.)
- Use of specific assistive devices
- Evaluation procedures for assistive technology
- Assistance in accessing various service provider systems in the state
- Information on funding options
- Advocacy issues