

MAY 18, 2016

>> JACK RINGLAND: Two-minute warning. Two-minute warning.

Okay, everybody, let's get started. We're running about ten minutes late. I want to make sure that we get through everything. So, if you could take your seats, we will get on our way. My name is Jack Ringland. I am the chairman of the Rhode Island Statewide Independent Living Council, and this is pretty much why you're here today. We are conducting an open house on what is called our state plan for independent living, and it is a state plan that will run from fiscal year 2017, which is -- starts the first of October this year, and go

through September 30th of 2019. And we have come up with a lot

of different things. So, as we go along, we'll introduce

people, and so forth. To my immediate right here is Lorna

Ricci. She is the director of the Ocean State Center for

Independent Living. Next to her is Ray band, he has been the

chair of the state plan committee, and he works for Disability

Law Center. And next to him is Margie Malloy, and she is vice

chair of the council.

And standing up in the back is Helen lasimone, and she's going to be assisting with moving the PowerPoint slides, and, also, there is a section at the end of what we are going to be doing which is going to be on what OSCIL has been doing.

Now, a little bit of housekeeping, please, if you have

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something that you want to say, raise your hand and we'll

**recognize you, and we may even try to get the microphone out
to**

you so that everybody can hear you. And state your name, so --

for the record, so that Tammi over here, doing the CART

services, can properly record that. And if you want, the

testifying part of it, if you haven't signed up to testify,

don't worry about it. We're going to have a question and answer

period at the end of my presentation, and we'll do it at the end

of what Helen is going to present. And if you haven't signed up

for that, don't worry about it. Raise your hand, and we'll get

the clipboard around to you. That way, you can get your name

checked off. And, by the way, please, please, make sure that you've signed in. We really need to know the attendance. Okay.

Without further adieu, let's go ahead.

There's been a number of changes that have happened in the, in our world, so to speak, and it's the world of the American's with disabilities act. Not a lot as far as the substance of the act, but there's been some inclusions of some things that were created by the passage of the workforce innovation and opportunities act of 2014, otherwise known as WIOA. So, there's been a little bit of language that has gone in. This is some of it. Some of it is pretty standard. You will notice that besides the -- it's bullet Number two there, where it says designated state entity, that used to be designated state unit,

which used to be the Office of Rehabilitation Services.

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However, they've decided to step back and have asked us to find a designated state entity. The designated state unit had a big part to play in the development and resource plan, and so forth, of the spill, the designated state entity has less of that, but still has to be what is called a pass through to get our federal money into the state. They then take it and distribute it. A little bit goes to us, and a whole lot more goes to the office of rehabilitation -- I'm sorry, Ocean State Center for Independent Living. And that is from part B funding.

So, I can say that at this point in time we do have a DSE, designated state entity, and that is going to be the governor's

commission on disability. And they've agreed to a number of things. We will be moving our office there, for instance, because they are giving us an office to use. They're supporting us in a number of different ways, and it's located in the Pastore center at 41 Sherrydale (sounds like) drive or lane, court, that's across from the DMV and traffic tribunal. It's three older brick houses that have been rehabbed. That's where they are. We're going to be in the one closest to the prisoner intake, I guess is where it is.

So, next slide.

>> HELEN IASIMONE: (Inaudible).

>> JACK RINGLAND: Okay. The collaboration on the SPIL
has

been done with the inclusion of nearly everybody on the state

plan committee being council members, nearly the whole council.

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And we've had a few people that have been former members, and

stuff like that. And the people that have had a vested interest

in helping us get along. And those that have not been full

members of the committee have been invited to join, and have

always had some sort of an important point to make in the

development. And it also included the Centers for Independent

Living and we get input from the entities carrying out the

programs, and so forth, from other disability organizations,

community based organizations, and other things of that nature.

That's all, you can see that's all by the, what is part of the code. And by the way, we do have some handouts that we will be handing out after the meeting is over with, so that you'll have something to take away with you.

Hang on just a moment here. Okay. Next slide.

The duties of the council, and they have been this way for all of the -- since the council had been in formation here in the state, which has been since 1993, and was also part of the directive that was passed in 1990 council development of the state plan. They'll monitor and review that plan, and the implementation of it all. So they shall meet regularly and ensure that the meetings of the council are open to the public, and advanced notice, and everything. We will submit to the

administrator, and this is the administrator of the --

administration for community living, such records as they may reasonably request, and so forth. And we will keep the records

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that are necessary. And we'll coordinate activities with other entities in the state to compliment the independent living services, and such as entities that facilitate a provision of or apply long term community based supports.

And in order to -- we will work in order to provide improved services to individuals and work with Centers for Independent Living to coordinate these services, such as we do with OSCIL, conduct resource development activities to support the activities, and perform other functions consistent with the

purpose of this part, and comparable to other functions.

We do not provide independent living services directly to individuals, or manage such services. If you were to approach us at a public event, or whatever, and say, hey, I'm in trouble, I don't know where to go, then we may suggest some things.

That's by no means an endorsement. It's just to get you going with trying to find some services. More than likely we will direct you to OSCIL. They will do whatever is necessary to do an intake, an assessment, and then they will decide where you might best find services suitable to your needs.

Core service, and this is center for independent living

**items. And these are consumer controlled community based
cross**

disability nonresident private nonprofit agency for individuals with significant disabilities, regardless of age and income, provides a variety or array of independent services including, at a minimum, certain core services. Those core services are

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information and referral, independent living skills training, peer counseling, including cross peer counseling, individual systems advocacy, and, also, added into this is the facilitation of transitioning from nursing homes back to the home and community-based residences, and, also, facilitating the transition of youth.

Next. This is the mission. Rhode Island is a state where

all citizens have an understanding and knowledge of independent

living philosophy and services, and we're all people with disabilities have a choice to live and least restrictive environment and have full access to all services needed and to provide equal inclusion into the community.

Now we're going to go into some of the goals, and everything. And this is goal 1 and 2 that we've come up with. Rhode Islanders having an understanding and knowledge of independent living services. Rhode Islanders with disabilities shall have equal access and inclusion to public services. 3, 4, and 5, all Rhode Islanders with disabilities are fully informed and empowered to live in the least restrictive environment.

The independent living network expands in Rhode Island. And, finally, the SILC will sustain efficient and effective

operations. The SILC meaning the Rhode Island statewide independent living council. SILC is the acronym for short.

Objective one, Rhode Islanders with disabilities are educated on IL services. The activities are the partner --

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participate or partner with consumer focused organizations

regarding conferences and educational opportunities. Cohost an

annual regional educational event. Continue enhancement of

OSCIL, RISILC and DSE web sides so that people can go to these

sites and find out what's available and get updates, and so

forth, because the programs are changing. Goal one, objective

two, government officials and policy makers are educated in the

areas that impact Rhode Islanders. Partner with the GCD legislative committee regarding issues impacting persons with disabilities. The GCD legislative committee looks at virtually all of the disable related legislation that goes up to the State House to be passed, recommends, denies, harmful or beneficial, and recommending amendments, and stuff like that, to get the best possible legislation. And there are some cases where we just flat out said no. I belong to the GCD, by the way, that's why I understand that.

Cohosting the public forum event and participating on other forum panels. This is an annual event for the GCD that goes on in the end of July and it is throughout the state, and plans are in the works on that, from what I understand.

Goal one, objective three, Rhode Islanders are educated in the IL philosophy and scope further an extent of IL services.

And the activities there are to provide resources at public events, maintain RISILC and OSCIL's websites to link to other disability related organizations to provide more exposure for

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the IL philosophy and for SILC services. For instance, the RISILC website has, down on the left-hand side, it says links, and there are several pages worth of links that you can go and find out different information. Goal two, objective one, Rhode Islanders with disabilities will have accessible and reliability transportation. It's got to be the hot topic of the day, week, month, year, whatever. Continue to have representative on the

**ATAC, Accessible Transportation Advisory Committee, to
RIPTA,**

**monitor the enhancement of access technology on RIPTA
buses, in**

**other words, cameras, automated stop announcements, even
down to**

accessible signage, and stuff like that. Advocate for

legislation to enhance and support accessible and reliable

public transportation for Rhode Islanders with disabilities.

Goal two, objective two, recreational facilities --

recreational activities are accessible to Rhode Islanders with

disabilities. Activities include advocate for accessible

recreational activities and facilities in the community,

bringing information to OSCIL and GCD, use media options,

websites and so forth, to inform consumers of locations of accessible recreation options, promote accessible RI. Is everybody familiar with what accessible RI is? It is an initiative of the (Inaudible) center. There are some booklets in the back, and they go through locating resources for accessible recreation activities.

Goal two, objective three, Rhode Islanders with

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disabilities will have access to all forms of communications without barriers. I think the thing is dying. I don't know.

Maybe not. If it does, I'll just have to yell louder. Model

communication access at OSCIL, DSE, and RISILC and provide information and referral to address community barriers to

communication.

And by the way, these are the things that we have right now. But we can add other things in. The state plan kind of is a fluid sort of thing. So if we decide that we want to add some more activities to some of these objectives, we can do so very easily.

Goal two, objective four, Rhode Island will be a state where people with disabilities have access to the community without barriers. Model access without barriers at OSCIL, DSE, and public events, educate consumers how to self-advocate to address those community barriers.

Goal three, objective four, all Rhode Islanders with disabilities will have access to the community living options.

OSCIL will provide core services, I and R, which is information

and referral, peer support, direct skills of training and

advocacy. And OSCIL will provide services to assist consumers

**with transitioning from nursing homes to group homes,
consumer's**

homes, private homes, stuff like that.

And that also includes the other way around, and helping

transition from the youth background to adulthood, and so forth.

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Goal four, objective one, expand OSCIL's current services

**to accommodate program growth and meet the growing needs
of the**

**community. Address underserved populations throughout
Rhode**

Island with the establishment of a satellite to provide options

to consumers seeking services in northern Rhode Island. Does everybody know where the satellite center is in Pawtucket? It's at 175 Main Street. It's where the transportation center, and it's across from Slater Mill.

Explore partnerships with other human service agencies to connect with consumers to wrap around services. Work with

united way 211RV to promote OSCIL services statewide, including

the out lying areas of the state.

Goal four, objective two, provide transition services.

OSCIL will expand to include high school outreach programs and

develop independent living skills and address barriers to

independent living and the community. OSCIL will partner with

the YMCA to offer services to young adults with disabilities.

Goal four, objective three, OSCIL will have needed staff, secure staff for the nursing home diversion services, secure staff for high school YMCA youth transition services, provide a needed staff for general IL service provision and the purchase of home modification and equipment for those consumers found eligible.

Goal five, objective one, increase internal communication and collaboration. Explore utilizing a facilitator at regularly

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scheduled meetings. This applies to the SILC. Collaborate with other human service entities to increase SILC membership opportunities. We are presently in a membership drive. So if

you are interested, let us know, and we will get you hooked up with the right paperwork.

Goal five, objective two, council members will be well informed of their duties and responsibilities. We are in the process of establishing an SILC member training schedule, just belonging simply isn't enough, but knowing how to use the services, and what the services mean, and stuff like that, is a big help.

Provide opportunity for annual review of mission and focus.

Okay. Do we have any questions? Do we have any people that are

signed up for testimony?

>> FEMALE SPEAKER: Signed up for what?

>> JACK RINGLAND: To testify.

>> FEMALE SPEAKER: Barbara.

>> JACK RINGLAND: Barbara Henry. Hang on just a minute, Barbara. We're going to bring the mic to you.

>> FEMALE SPEAKER: Hi, everyone. My name is Barbara Henry. Can you hear me?

>> JACK RINGLAND: Yes.

>> FEMALE SPEAKER: Okay. Well, I have a few concerns. I just want to say thank you, Jack, you did an excellent job speaking. I want to give you a round of applause. (Applause).

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You're a brave soul.

Any way, I just want to say -- I want to go back to the, I

think it was objective one, I'm not sure, transportation. I

want to go back and I want to put in concerns regarding persons

with all disabilities. I want to talk about Kennedy plaza. I

want to talk about public safety. I am a regular RIPTA user.

**As most of you know, I also am a mother of a young man who
has**

autism. So both me and my son take RIPTA all the time. And I

feel there's not enough police presence at Kennedy Plaza. It is

very dangerous there. There's a high number of just criminal

activity at Kennedy Plaza. There is a lot of people that are

very vulnerable who use RIPTA, who do not have the ability to

speak up, who are within that transitioning age that you also

touched on. And this links with -- I also want to get into

transitioning, but I really am very concerned about public

safety at Kennedy Plaza. I really would like to advocate for more police presence. Right now they have two security guards down there. There's a lot of fighting. The lighting, people have told me it's not very well lit there at night, at all. So, there needs to be more, just more public safety in terms of lighting. Anything to make people feel more safe, if you understand what I mean. I also wanted to talk about transitioning, that whole population. I think that's great that OSCIL is getting involved with teaching young adults to transition. I think that young adults need to learn

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self-advocacy. They need to learn how to say no, and stand firm on no, and not be swayed by it. Especially when it comes to

public safety. I want to go back on that. Last Sunday someone came up, I was standing literally right next to my son at Kennedy Plaza and a total stranger walked up, a man, walked up to my son, but lucky enough I have taught my son to not engage with strangers. But it made me think about today's public forum, and the dangers of strangers walking up to people with, especially cognitive disabilities. It's very challenging for someone with a developmental disability. We live in dangerous times, and that's my concern with the transitioning group. And I think that it's great if OSCIL could teach the transitioning population in a fun way, not in a scary way, not in a threatening way, but maybe in a physical activity way. And make

it fun, but make it real, and just make it very, very -- just make it real. Thank you, so much.

>> JACK RINGLAND: Thank you, Barbara. Who's next?

>> FEMALE SPEAKER: Janet Lobaton (sounds like).

>> FEMALE SPEAKER: I don't want to talk to everybody's backs. I'm just going to come up. I'm an ex phys ed teacher, I know how to talk loud. Can you hear me? I'm Janet, and I'm a board member on OSCIL. I've been for a couple of years now. And I wanted to come up here and just be positive with everything that has been going on that I have seen personally in the organization, and with helping people with disabilities

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continue to become independent. And Lorna first asked me to

join, I didn't know too much about the organization, but my son is disabled. And when he lost his job and became disabled,

OSCIL really helped out, and they found him housing, and he had

to go look for it. But they helped send him to the right places

to find things, because he did not want to go back and live with

mommy and daddy, even though he was in a wheelchair, and

everything. He wanted to be independent, which is what this

whole thing is about. It is very important.

So I personally can understand, because most people want to be independent. They want to feel good about themselves. And

so, when I did become a member on the board, I decided, well,

I'd volunteer at the center, and take some calls. This was

really great because I wanted to see exactly how OSCIL helps

the

people in the community. And by taking the calls, it was great because sometimes they call and I would just send them to the extension, but other times I have to listen to the person, and I found that they would give me a problem. I direct them to the person that was working in OSCIL that was specifically for that problem, so that -- which is great, because you might have someone that is for someone that has a challenge with their

sight, or someone that is in a nursing home and wants to go back

into living on their own, or possibility someone that needs help with their house, because now they're in a wheelchair, and they might need a ramp. They might need a lot of other things done

to their house. So, each of the -- I found that each of the staff, even though they have a broad generalization of the disabilities, they also are specific to help each individual.

So when I would -- I'd send a -- I'd tell a person, and usually they would get back, if they were busy that day they would get back usually the next day. It's a very efficient organization.

The staff is wonderful. They are full of resources. I personally found that out with my son, but I also found this out when I volunteered, that, really, a lot of people that need the help, that feel anxious and upset because they're facing a problem finally have somebody to help advocate for them.

So, I just wanted to come up here and positively state how I really enjoyed being on the board. I enjoy the transparency,

also. We have -- everything is out in the open. All of our funds, everything you can see, there is -- it's with all the politics, and everything, it feels great to have an organization where you know where everything is in the open and nothing is underhanded. Everything is for the person and for the person with disability. So, that's all. Thank you. (Applause).

>> JACK RINGLAND: Anybody next?

>> FEMALE SPEAKER: That's all we have signed up.

>> HELEN IASIMONE: (Inaudible).

>> JACK RINGLAND: Is there anybody here, sitting here that would like to say a couple of words?

>> LORNA RICCI: First of all, I think I need to have Janet

get out and talk to more groups. (Laughter). Thank you for

**those kind words, and it's always nice to hear from someone
else**

who's been at the agency, sees a different perspective of things

that we all see every day and has an opinion that is so highly

of the agency and is willing to share it. I thank you.

This has been quite an undertaking with our state plan

committee bringing you the goals and objectives that we have --

that have been outlined by Jack. I ask for any other additions

or suggestions. This is what this is all about, to hear some

other ideas. And in anything, I'd love to hear that you agree

with what we're doing. We're kind of bringing out to you kind

of a focus group, in a sense. And if there's things that you

support, are willing to even emphasize further this is even better for us, knowing that we're on the right path. I know there's testimony here for other ideas, but if you wish to support any of the specific objectives that we've mentioned, even further to know that we're right on, we'd all appreciate that input, as well. But, thank you, all, for being here.

>> JACK RINGLAND: Ray? Margie, is there something? No.

>> HELEN IASIMONE: Susan.

>> FEMALE SPEAKER: Hi, my name is Susan Shapiro, and I've

worked in the disability field for approximately 40 years. My experience with disability dates back to probably 55 years ago, with a mother who had a disable back in the late '50s, early '60s, when there were no services available. And from there,

going to a college in New York and finding myself surrounded
by
people with disabilities in my classes. Which was, at that
time, I thought typical. But I learned when I came back to
Rhode Island it was very atypical. I had folks with spinal cord
injuries, I had folks who (Inaudible) lungs that participated in
classes with me via technology, which wasn't widespread at that
time.

I know that -- I looked at the plan, and I have some
suggestions to change. One of which, the transition, I noticed
that there was nothing about the youth leadership forum as a
part of the transition for services. I think that leadership

skills are critical for people with disabilities. I think that

in addition to looking at the rights of a person with

disabilities we also have to look at the responsibilities that a

person with a disability has that are no different than the

responsibilities of a person without disability. They need to

be able to advocate for themselves, as well as expecting

agencies to step forward and help with that. I would add that

to the plan, if possible, because it's a program that I started

**a number of years ago with a couple of other people from
around**

the state, and something I would like to see resurrected,

because it did make a difference in the lives of so many people.

And looking back at the youth that participated, probably one of

my favorite stories is someone who was in special ed in

segregated classrooms and most recently got his master's degree

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in library science. He was borderline, and he was never -- he

was -- everybody looked at what he wouldn't do, rather than what

he could do. And given the support of a number of people, and

his growing belief in himself, he was able to achieve what he

wanted to achieve.

Two, I also worked with transition to nursing homes. And I

think that we need to advocate for more suitable housing. I

think that's a critical part of getting folks from nursing homes

back into the community, and from keeping people in the

community from having to go into nursing homes. So, if we

could

kind of address that in some way, that might be helpful, as well. That's it. (Applause).

>> JACK RINGLAND: Is there anybody else who would like to testify?

>> HELEN IASIMONE: Okay. I couldn't ask for a better segue to talk about OSCIL, and some of the projects that we've been doing, and what you, both Janet and Susan said about our program. Can everybody hear me okay?

We are going to -- this seems a little redundant, but I want to go into OSCIL's -- what is OSCIL. It's a nonresidential community driven community based cross disability nonprofit organization. We were established in 1988 to provide a wide

range of independent living services to enhance through

self-direction the quality of life for persons with disabilities

and promote integration into the community. Now, there are some

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general eligibility requirements. The presence of a disable,

motivation to actively participate in the independent living

program, as well as indication that the consumer will benefit

from participating by using OSCIL services. And any of the

acquisitions of modifications or any of the assistive technology

devices is actually, eligibility is based on income.

What I'd like to do is we've put together a slide

presentation on some projects that we completed. And this first

slide is a really good example of a before and after. The

installation of this ramp makes the entrance of the home accessible for the homeowner who is using a wheelchair.

Okay. We have a home that is sort of a front to back ranch, and we're looking at the side entrance. There are some stairs, two stairs that are really not even connected to the house, two cement stairs. This homeowner did not have the -- could not have the able to leave this home. They're in a wheelchair. So what we did was we put a ramp right from the house, all the way to the driveway. And it's an L shaped ramp.

And this individual was looking at being faced with maybe having

to leave their home, and now they can stay in their home.

>> LORNA RICCI: I have to say thank you to Helen. I'm

having her narrate the pictures for those who can't see them.

This wasn't part of our rehearsal, so she's doing a great job.

(Laughter).

>> HELEN IASIMONE: These projects are very near and dear

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to my heart. We've been really working very diligently with our ramp program. And this is another example of a home that had three stairs that were not accessible for somebody using a walker. And the home -- the stairs were actually pretty steep, so we had to create a platform, a ramp, another platform, and then a ramp. So, this was also an individual who was national able to leave their home. And with the installation of this ramp, they were able to increase their independence.

Now, I have another example of a ramp, which is a little different from the others. This is a rather large home. All of the entrances were very steep. The best egress for this consumer was through a sliding glass door in the back. And it's also an L shape ramp, and it's a 28-foot ramp that was constructed for a homeowner who really was unable to leave their

home for years. If this person needed to go to a doctor's appointment, it needed to be an ambulance. And I was told the story that as soon as the woman was able to get herself out on to the ramp and on to the platform in her wheelchair, she just sat there watching the birds. And the quality of her life and the ability for her to actually be independent and get out into the community, without this ramp that just didn't happen.

And the last ramp I'm going to show you today is a little different from the others. The home sat -- the driveway sat higher than the home. So, technically, a ramp you usually -- we call this a reverse ramp. So the ramp had to go down first, up,

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and then down. So, again, this was an individual who used a wheelchair, was unable to get out any of the entrances of their home. And with this ramp, now they were able to facilitate through the sliding door, and have access to being able to get to the driveway, get into the car, and to be able to function in the community.

Now, ramps aren't always the solution for increasing access to the home. Many times modified steps are the solution to

remove barriers and increase independence for someone who is unable to lift their legs.

Modified steps, an average step is about seven and a half inches, a modified step is four. So, they're closer together. They're about a foot wide. And it just makes it easier for someone who is only able to lift their leg just a bit. This is also another example of a modified stair. And in this instance, this staircase actually brought the consumer out into the garage. And the homeowner also had a balance issue, so the installation of these modified steps addressed it by using narrow steps, but longer steps, too, and then the railing. And the consumer was able to, with both of the railings and the wider steps, was able to navigate.

In many homes, the installation of handrails, it's a simple solution for increased safety and independence. And it also allows someone to kind of -- someone who couldn't get downstairs, or couldn't get upstairs, to be more social with

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their family.

Stair lifts, this is an example of a raised ranch. As we all know, when you walk into a raised ranch the first thing is stairs. So this homeowner could not go up the stairs and was worried that they would not be able to stay in their home. So a stair lift was installed and it addressed the barrier completely. I have another example of a stair lift. This is a full stair lift. As you can see, a very steep stairway. And

this consumer was not able to get upstairs, and their, bathroom, they had severe mobility impairment. And with the installation of this stair lift, they were able to navigate up to the -- up to their bedroom.

And here's another example of an individual whose bedroom and bathroom was also on the second floor, and her needs were being met by the installation of a stair lift.

Moving on to the bathroom here. Many times what happens is the -- this homeowner didn't have the ability to lift their leg over the tub, and so they were not able to use the shower. A safe way step was added to this tub to make it accessible to that they were able to shower and bathe independently.

Now, this is also another example of -- this one is a tub

cut. And a tub cut is used in this home addressing the barriers of getting in and out of the tub. The difference between the two of them is basic tub design. For a tub cut, you can only use a tub cut when a tub has a design in it. Or I should say it

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the other way around, you can only use a safe way step if there's no design in the tub. They both cost close in comparison, but they both work basically the same way. That's why I'm showing you both of them.

This is a perfect example of how a very small bathroom can be made wheelchair accessible. I will just narrate a little bit, if that's okay. The sink doesn't have a cabinet to it. It was a shower stall, and we took the shower stall out and put in

a role in shower. And there's also a bench, so that the consumer can transfer right from the wheelchair to the bench.

And then there was just enough, you know, the way that the room,

the room for the toilet, the sink, and the shower. So it's very efficient use of space.

Here we have another example of a role in shower for someone who is using a wheelchair. The difference for this is this started out as a full tub. So the tub was taken out, and

the shower was built and installed. And this homeowner was now

able to independently take care of all their own self-care.

As you know, when you are doing any kind of home modifications in older homes, space is a challenge. In these

two examples, these were both shower stalls that we made modifications to so that we were able to more efficiently be able to use the space, so that the consumer could independently shower.

Some of these devices, assistive technology devices are

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very commonly used. And they make a huge difference in someone's life. I know I mentioned transfer benches, shower chairs, something like a Rolator. These are just a few. There

are many more. And I wanted to -- someone else already told you

about our office. And hopefully you already know about our new

satellite. But our main location is 1944 Warwick Avenue. Our

contact number, I'm the new program director and very happy to be, and our new OSCIL north is at 175 Main Street in Pawtucket.

And thank you from the state planning committee, Rhode Island SILC members and volunteers, and OSCIL. Anybody have any questions?

>> MALE SPEAKER: Okay. I just, I guess I figured I'd share --

>> JACK RINGLAND: Who is speaking, please?

>> MALE SPEAKER: This is Vincent DeJesus (sounds like).

Any ways, I just figured I should speak a little. I was a former member, and I'm actually thinking of, I'm pretty sure I'm going to join back in, I just haven't filled out the paperwork yet. I would just like to say how important the SILC was, or

is, for the disabled community. I mean, like, there's IL centers that can help let people know where they are to get that help, even though they point out a lot but some people still don't know how to get help. And they come into situations out of nowhere. And we all have been there, and learned how to solve those problems, and we try to share them. And that's why

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I think SILC is such a great company, or a great organization, even about the history, and everything. It's just a great thing

to have to get the population, the communities information about

where they need more help to get, like, for instance, as Barbara Henry was saying, the transportation. That's an issue that was

brought up by the community a lot, because people with disabilities can't really use public transportation much to get to jobs, because they do not really know as well. But over time, with these agencies that help provide the correct information, it will all work out great. I figured that. Thank you.

>> HELEN IASIMONE: Thank you for sharing. (Applause).

Does anyone else have anything they want to share?

>> JACK RINGLAND: I know that I recognize some of the council members here to my right-hand side, but I also wanted to recognize a couple more that are here today. One is Carmine Boucher. She is from the Department of Health, and she is a very valued member of the independent living council. And to

her right is Alyssa Gleason. And she is the new designated state entity representative from the GCD. She's employed by the governor's council on disability. She is a policy aid.

>> FEMALE SPEAKER: Public education coordinator.

>> JACK RINGLAND: Public education coordinator. Do you have any words that you want to say?

>> FEMALE SPEAKER: Not really. (Laughter).

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>> JACK RINGLAND: I didn't mean to put you on the spot, just giving you the opportunity. That's all.

Does anybody up here have anything they want to add?

Anybody else want to say a few words?

>> FEMALE SPEAKER: I just had a question. (Janet) you

seem a lot you were talking about the transportation issue, and I was just wondering specifically which agency would they go to to get the help? Would it be from the commission, or?

>> FEMALE SPEAKER: It depends if it is an issue with discrimination or if RIde is saying you're not within that then you can come us to. For the most part, you just have to keep calling RIPTA and placing your complaints with them. We also tell people, call your General Assembly members. They're the ones in charge of regulating it and sending the money over to RIPTA and RIde. So calling them can really have an impact. These are probably the best people. There are other advocacy organizations. I don't have a list on me right now, it kind of depends on where you live. But your General Assembly

members

are the best, I think, to talk to.

>> MALE SPEAKER: Hello. My name is Dennis Harvey. I am the president of (Inaudible). That's who I am. A good point here about the legislation, because I know a lot of legislation. I go to the legislation of the rise of the house, and that is usually at 4:00 or 5 o'clock. And you walk in there, and they treat you like everybody else. You go there and you only have

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about 15, 20 minutes until the bell sings, you also have about 15, 20 minutes to commerce it with them, until the speaker of the house has the gavel and we all get out. On Tuesday nights, one of the legislators I used to know, Costa, she's on the

**committee and that is on Tuesday night. They have testimony
on**

that. So get involved in your legislation, because it's really

**important because they need to hear from you, even though
they**

say they work for you, even though there's a lot of things going

on in the state, you know there's always bad being the

legislation, because I'm not a legislator, but I encourage you

to do that. It's very important. That's it.

**>> JACK RINGLAND: Is there anybody else? We will hang
around for a while here. There are some refreshments in the
back, water if you're thirsty. There are a few brochures to be
taken, and everything. But we're available if you want to speak
to any one of us on an individual basis about any of the**

problems or things that are going on.

>> HELEN IASIMONE: I'm going to leave these on the table if they want them.

>> JACK RINGLAND: Yeah. Also, Helen is going to leave the copies of the presentation today. We wanted you to listen to it, and so forth, and then handout the presentation afterwards, so that is why you didn't get it coming in. I hope that this was informative, and if you can think of something, there are a number of ways that you can get in touch with us. You can

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e-mail myself at the council, or at my own private e-mail. You can get in touch with either Helen or Lorna at OSCIL, or any one of us that you may run into or know. We want to make this plan

great. We have to submit it by the end of June, and then from there the government takes over, reviews it, and we wait for the funds to come in to start our plan for the next three years.

So, Barbara?

>> FEMALE SPEAKER: Can I make one more suggestion, please?

>> JACK RINGLAND: Sure. Hang on just a second. I'll bring the microphone back to you.

>> FEMALE SPEAKER: This is Barbara Henry again. Can I go?

>> JACK RINGLAND: Go ahead.

>> FEMALE SPEAKER: This is an election year, and I've advocated for this throughout many years. I believe that especially with the low rate of employment for people with

disabilities, I strongly advocate for people with disabilities if they could be pole workers, that the state, whoever, you know, the elections, that they should hire people with disabilities, especially people are blind. They should be working at the auto mark machines, because it's very apparent that a lot of the pole workers do not know how to use the auto mark machines. They panic when there's a paper jam. They just, they get very nervous. And I would really like to see a lot more disabled people working on election day. It would really raise everyone's self-esteem. People with disabilities have

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such a low rate of employment, and that has to change. Thank you.

>> JACK RINGLAND: Thank you, Barbara.

>> MALE SPEAKER: Once again, this is Dennis Harvey again, once again, I do warn you that is a good truth to do. But if you want to get any bills in, you better do it now, because you have until January, because the rise of the house do not take any.

>> JACK RINGLAND: Do you know.

>> MALE SPEAKER: June, I'm sorry, because they do not take

any bills. They may hear some bills, but they do not take any

bills. They want to go home. I'm not trying to say it's not

worth it, but if you want to start something you better start it

now, just for advice. Because when June roles around they want

to get around there. They have lives to live. They've been working hard for you. I want to recommend if you want to do something like that I suggest you start it now.

>> JACK RINGLAND: Thank you, Dennis.

>> FEMALE SPEAKER: Hi, my name is Angela Azevedo. I passed the ataxia awareness bill last year, and that started in March. Yes, it does take a long time. We didn't pass until June for the bill, and it's called ataxia awareness day. September 25th we celebrate it all internationally, and Rhode Island was the second state to pass it, Massachusetts was the first. So, talking about the bills again, you do need to get it

ahead because I have to pass a, what is it, a legislation, yeah,

for the first year to make it ataxia awareness day as of
September 25th.

>> MALE SPEAKER: I'm sorry, let me show you how

legislation works. It goes to the financial committee,

legislation. That is the committee that hears every bill in the

United States, house and senate, goes to there. They all vote

on it. And sometimes it debates, sometimes the senator says,

well, more, depends what senator you have, depends on how
strong

a bill it is. You might want to talk to the chair or the vice

chair because they have the most power on the floor, if they

will ask for more information, or something like that. That's

how it goes. And then, if it passes that, it goes to the floor,

and then all members vote on it. And it gets passed the legislation. The governor, she signs it into law. So that's how the legislation works. You all got a quiz. You're all happy on your legislation? Okay. Go.

>> FEMALE SPEAKER: So, I just wanted to say that we did pass a bill, and it had a lot of help with the governor's office, the house, the represented house, and so, that's the only reason why I brought it up. Thank you.

>> HELEN IASIMONE: I want to thank everybody again for coming. (Applause). And I remind you, there's refreshments in the back.

>> MALE SPEAKER: And it's the same thing for the finance

**committee, it's the same process if you want to put in for the
finance committee. It's the same process. I just wanted to let
you know.**

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