

# "UNIQUE ABILITIES" PROGRAMS GUIDE FOR FAMILIES IN NEW HAMPSHIRE

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#### **Preamble**

This program guide is dedicated to my daughter Sarah.

My family began looking for programs for our daughter since she was 18 year old. We visited a number of places we heard about from other families. We researched names of "vendors that were given to us from our Regional Family Support agency, we attended the Annual New Hampshire Family Support Conference event for 18 years and we talked with a number of people at community events. However, in the end we received limited and influenced information that was helpful but did not cover all the programs and different opportunities the "vendors" provided.

My wife and I stated on this venture to create a comprehensive guide of programs and services available for our daughter and our family as well as friends in our community. We hope it will be a guide for your family as well. The guide is a collaboration of services, vendors, financial grants, respite places and the services provided in New Hampshire. If you have any input or new programs and vendors that are available in New Hampshire, please drop me a line and I will be sure to include it in the next revision. <a href="mailto:author@uniqueabilitiesprogramsnh.com">author@uniqueabilitiesprogramsnh.com</a>

All services look different for everyone depending on their funding allotment, individual's needs, individual goals, etc. The family should visit key facilities and ask questions.

Thank you as it takes a community to prepare all of us for the future.

# David

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# **Table of Contents**

Short History of DHHS Programs in NH - 1901 to Today	
<u>Laconia State School – Closed Forever!!!</u>	1
The Creation of Area Agencies	1
<u>Acronyms</u>	
<u>Definitions</u>	15
Vendors/Programs/Information	26
Services For Individuals with Developmental Disabilities	26
Area Agencies & State Regions	27
Camps/Enrichment Programs	30
Adam's Camp - New England	31
Camp Horizons	Error! Bookmark not defined
Beyond Akeela	Error! Bookmark not defined
Bridging the Horizon	Error! Bookmark not defined
Camp Allen	Error! Bookmark not defined
Camp Arrowhead	Error! Bookmark not defined
Camp Birch Hill	Error! Bookmark not defined
Camp Fatima	Error! Bookmark not defined
Camp Starfish	Error! Bookmark not defined
Camp Wediko	Error! Bookmark not defined
<u>Grotonwood</u>	Error! Bookmark not defined
Millworks Theatre Troupe Theatre Camps	Error! Bookmark not defined
NHDI Kids On Campus	Error! Bookmark not defined

Melody Pines	Error! Bookmark not defined.
Naticook Day Camp	Error! Bookmark not defined.
Recreational Education Center	Error! Bookmark not defined.
Zebra Crossings	Error! Bookmark not defined.
Organizations/Resources/Informational	Error! Bookmark not defined.
A Day in Our Shoes (R)	Error! Bookmark not defined.
ABLE NH (R)	Error! Bookmark not defined.
Annie's Angels NH (R & G)	Error! Bookmark not defined.
Annie Forts UP Syndrome Fund, Inc.(G)	Error! Bookmark not defined.
<u> Autism Speaks – New England (R &amp; G)</u>	Error! Bookmark not defined.
Best Buddies New Hampshire (A)	Error! Bookmark not defined.
Bridging the Horizon (A)	Error! Bookmark not defined.
	Error! Bookmark not defined.
Devereux (R)	Error! Bookmark not defined.
Dennis M. Drake Memorial Foundation Inc. (G)	Error! Bookmark not defined.
Disabled Children's Fund (R & G)	Error! Bookmark not defined.
Disability Right Center (R)	Error! Bookmark not defined.
	Error! Bookmark not defined.
	Error! Bookmark not defined.
Family Support NH (R)	Error! Bookmark not defined.
Family Support Councils - Area Agencies (R & G)	Error! Bookmark not defined.
Family Voices (R)	Error! Bookmark not defined.
	Error! Bookmark not defined.
Governor's Commission on Disability (R)	Error! Bookmark not defined.
and the control of th	

Greater Salem Caregivers (R)	Error! Bookmark not defined.
Harriet M. Howland Memorial Fund (G)	Error! Bookmark not defined.
Harry Allen Gregg Foundation (G)	Error! Bookmark not defined.
High Hopes Foundation of NH (G)	
Housing and Urban Development (R)	Error! Bookmark not defined.
Institute on Disability at UNH (R)	Error! Bookmark not defined.
Joseph's Closet (R)	Error! Bookmark not defined.
Kings Daughter Benevolent Association (G)	Error! Bookmark not defined.
Learn Behavioral (R)	Error! Bookmark not defined.
Loaner's Closet for DME (R)	Error! Bookmark not defined.
Make-A-Wish Foundation (G)	Error! Bookmark not defined.
Neil & Louise Tillotson Fund (G)	Error! Bookmark not defined.
NH Council on Disabilities (R & G)	Error! Bookmark not defined.
NH Department of Education (R)	Error! Bookmark not defined.
NH STABLE (I)	Error! Bookmark not defined.
Northeast Deaf & Hard of Hearing (R)	
Oberkotter Foundation (G)	Error! Bookmark not defined.
Oracle Health Foundation (G) (formally - First Hand Grant Requests)	
Perkins Low Vision Clinic (R)	Error! Bookmark not defined.
Perkins School for the Blind (R)	Error! Bookmark not defined.
Play Among the Stars Theatre Group Inc. (A)	Error! Bookmark not defined.
Recreational Education Center (R)	
Salem Area Special Needs (SASN) (A)	
Sleep in Heavenly Place (R)	

Simply Social Kids (A)	Error! Bookmark not defined.
Special Olympics New Hampshire (A)	Error! Bookmark not defined.
Stepping Stones (R)	Error! Bookmark not defined.
The Kempels Foundation (R)	Error! Bookmark not defined.
The Nancy Carney Pathways for Extended Learning Program (R)	Error! Bookmark not defined.
The Upper Room in Derry (R & A)	Error! Bookmark not defined.
United HealthCare Children's Foundation (G)	Error! Bookmark not defined.
Victoria's Victory Foundation (G)	Error! Bookmark not defined.
Welcome Families NH (R)	Error! Bookmark not defined.
Yvie's Closet (R)	Error! Bookmark not defined.
Choices for Independence: Day/Residential Programs	Error! Bookmark not defined.
Section 811 Supportive Housing for Persons with Disabilities	Error! Bookmark not defined.
ADU - Accessory Delling Unit	Error! Bookmark not defined.
ASPIRE Living & Learning (formerly IPPI)	Error! Bookmark not defined.
<u>Advocates</u>	Error! Bookmark not defined.
Brock Children's Home	Error! Bookmark not defined.
Community Integrated Services (CIS)	Error! Bookmark not defined.
Community Partners for Change	Error! Bookmark not defined.
Crystal Springs Inc.	Error! Bookmark not defined.
Easter Seals.	Error! Bookmark not defined.
<u>Farmsteads of New England</u>	Error! Bookmark not defined.
Farmsteads of New England Four Winds Community	
- <del> </del>	Error! Bookmark not defined.

Kimi Nichols Center	Error! Bookmark not defined.
Life Connections (formerly Becket)	Error! Bookmark not defined.
<u>Life Visions</u>	Error! Bookmark not defined.
Living Innovations, a Service of Mosaic	Error! Bookmark not defined.
Moore Center - Agency	Error! Bookmark not defined.
Morrison Center- Maine	Error! Bookmark not defined.
Nashua Center	Error! Bookmark not defined.
Opportunity Networks	Error! Bookmark not defined.
Our Place NH (The Visions Model)	Error! Bookmark not defined.
Pathways of the River Valley - Agency	Error! Bookmark not defined.
<u>Plowshare</u>	Error! Bookmark not defined.
Residential Resources	Error! Bookmark not defined.
Robin Hill Farm	Error! Bookmark not defined.
Rose Meadow Farm	Error! Bookmark not defined.
Sevita Health (Formally Neurorestorative)	Error! Bookmark not defined.
Siddharth Services Inc.	Error! Bookmark not defined.
Summit New Hampshire LLC	
The Home Possible Project (The Visions Model)	Error! Bookmark not defined.
TILL, Inc.	Error! Bookmark not defined.
Visions for Creative Housing Solutions	Error! Bookmark not defined.
Waystone Health & Human Services (was Fidelity House CRC)	Error! Bookmark not defined.
Work Opportunities Unlimited	Error! Bookmark not defined.

# Short History of DHHS Programs in NH - 1901 to Today

### Laconia State School - Closed Forever!!!

The school's story starts in 1901, when an act of the New Hampshire state legislature called for the institution's creation. The state school was conceived to serve two purposes. The first was to provide a home for the "feeble-minded" children who were contributing to overcrowding in "almshouses" around the state. "The other idea was that children who were feeble-minded needed to be isolated from the rest of society." By 1905 the schools' charter was expanded to adults. It was a difficult decision, but as a society, we didn't know anything different. As society values changed over the years, it opened up our thinking, it opens up our mind to thinking differently.

In 1978, a group of parents sued the state, claiming the "Laconia State School for the Feeble Minded" failed to carry out the state's responsibility of serving its' disabled residents. The suit led to many changes at the school and spelled the beginning of the end for the institution. The population was reduced over the next decade by placing more and more residents in community-based support networks as those resources were developed. In January 1991, the Laconia State School and Training Center closed for good and NH was the first state in the nation to close its institution for people with developmental disabilities.

# The Creation of Area Agencies

In 1975, the New Hampshire legislature passed a law (RSA 171-A) which mandated "the Division of Mental Health to establish, maintain, implement and coordinate a comprehensive service delivery system for developmentally disabled persons." Managed by the New Hampshire Bureau of Developmental Services, the area agency system was created, which now is comprised of 10 area agencies.

The year 1982 marked another significant change: New Hampshire led the country in its' reassessment of services for people with intellectual and developmental disabilities, beginning the process of closing its state-run institutions and moving toward a community-based service approach. It was a lengthy transition, taking about a decade to complete.

Since leaving the state school, many former residents have shown that they can live as members of their communities. They deserve to be members of their family, to enjoy the dignity of privacy and to enjoy their civil liberties.

# Acronyms

AA - Area Agency for Developmental Services

ABA - Applied Behavior Analysis (as a treatment for autism)

ABD - Acquired Brain Disorder (before age 21)

ABI - Acquired Brain Injury

ACA - Affordable Care Act

ACB - American Council of the Blind

ACF - Administration for Children and Families

ACLD - Association for Children with Learning Disabilities

ACRE - Association of Community Rehabilitation Educators

A/D - Aged and Disabled Waiver (DHHR/BOSS)

ADA - Americans with Disability Act

ADD - Attention Deficit Disorder

ADHD - Attention Deficit Hyperactivity Disorder

ADL - Activity of Daily Living

ADRC - Aging & Disability Resource Centers

ADU - Accessory Dwelling Unit

AFB - American Foundation for the Blind

AI - Artificial Intelligence (computer generated)

ANB - Aid to the Needy Blind

APA - American Psychological Association

APS - Acute Psychiatric Services

APSE - Association of People Supporting Employment First (formerly Association for Persons in Supported Employment )

APTD - Aid to the Permanently and Totally Disabled

AS - Asperger's Syndrome

ASA - Autism Society of America

ASD - Autism Spectrum Disorders

AT - Assistive Technology

ATA - Alliance for Technology Access

ATEC - Assistive Technology, Evaluation and Consultation Services

AUCD - Association of University Centers on Disabilities

AWEP - Alternative Work Experience Program

BCF - Bureau for Children and Families (DHHR)

BDS - Bureau of Developmental Services (part of DHHS)

BHHF - Bureau for Behavioral Health and Health Facilities (used to be OBHS)

BIAA - Brain Injury Association America

BMS - Bureau for Medical Services

**BON** - Board of Nursing

**BOSS - Bureau Of Senior Services** 

**BP** - Benefits Planning

BPH - Bureau for Public Health (DHHR)

BWE - Blind Work Expense (SSA)

**CAA - Community Action Agency** 

CAATI - Computer Access Assessment Training Institute

CAC - Community Advisory Committee

**CAP - Community Action Program** 

CBA - Community Based Assessment (DRS)

**CD - Communication Disorder** 

CDC - Centers for Disease Control and Prevention

CDR - Continuing Disability Review (SSA)

CDS - Consumer Directed Services

**CEC - Council for Exceptional Children** 

CFIL - Choices for Independent Living

CHADD - Children & Adults with Attention Deficit Disorder

CHAP - Child Health Assurance Program (EPSDT)

CHIP - Children's Health Insurance Program

CIL - Center for Independent Living

CMS - Centers for Medicare and Medicaid Services (formerly HCFA)

CNCS - Corporation for National and Community Service

CON - Certificate of Need (DHHR)

CP - Cerebral Palsy

CPS - Community Participation Services (Day programming), supposed to be 80% in the community

CRC - Certified Rehabilitation Counselor

**CRP - Community Rehabilitation Program** 

CSD - Children with Severe Disabilities

CSHCN - Children with Special Health Care Needs

CSNI - Community Support Network Inc.

CSS - Community Support Services (HCBS - Service)

CVA - Cerebrovascular accident (Stroke)

DBTAC - Disability and Business Technical Assistance Center

DD - Developmental Disability/Developmentally Delayed

DDA - The Developmental Disabilities Assistance and Bill of Rights Act, PUBLIC LAW 106-402

DDC - Developmental Disabilities Council

DDD - Division of Developmental Disabilities (DHHR)

DD Waiver - Developmental Disability waiver

DFA - Division of Family Assistance (DHHR) determines eligibility for Medicaid, SNAP, TANF, etc.

DHHS - Department of Health and Human Services

DME - Durable Medical Equipment

DOE - Department of Education

DOL - Department of Labor

**DOT - Department of Transportation** 

DP - Direct Placement (DRS)

DPT - WV Division of Public Transit

**DRC - Disabilities Rights Center** 

DRS - Division of Rehabilitation Services

DS - Down Syndrome

DSP - Direct Support Professional (Provider)

EBD - Emotional/Behavioral Disorder/Disability

EC - Early Childhood

ECRLL - Early Childhood Resource Lending Library

EEOC - U.S. Equal Employment Opportunity Commission

EFC - Enhanced Family Care (Residential Program)

EFCA - Enhanced Family Care Act

EI - Early Intervention

EMOD - Environmental or Vehicle Modification (HCBS - Service)

EN - Employment Network for Ticket to Work (SSA)

**EOMB - Explanation of Medicaid Benefits** 

EPE - Extended Period of Eligibility (SSA)

EPSDT - Early Episodic Screening, Diagnosis, and Treatment

ESES - Extended Supported Employment Services (DRS)

EWE - Extended Work Experience (DRS)

EXR - Expedited Reinstatement of Benefits (SSA)

FAPE - Free Appropriate Public Education

FBA - Functional Behavioral Assessment

FBI - Finger In Belt (Assistance/Need)

FBR - Federal Benefit Rate (SSA)

FC - Facilitated Communication

FCC - Family Centered Care

FCESS - Family Centered Early Supports and Services (Infants and Toddlers)

FDA - Food and Drug Administration

FERPA - Family Educational Rights and Privacy Act

F2F - Family to Family

FOIA - Freedom of Information Act

FPL - Federal Poverty Level

FRAXA - Fragile X Research Foundation

FRC - Family Resource Center located regionally statewide

FSC - Family Support Council (operated within each Area Agency Region)

FSN - Fair Shake Network

FTE - Full Time Equivalent position

F&S - Feeding & Swallowing

G&C - Governor & Council

GIE - General Income Exclusion (SSA)

**GSIL** - Granite State Independent Living

HASCI - Head and Spinal Cord Injury

HCB - Home and Community-Based Waiver Services (MR/DD and A/D)

**HCBS - Home and Community Based Services** 

HCBS - ABD -Home and Community Based Services Waiver for Acquired Brain Disorder

HCBS - DD Home and Community Based Services Waiver for Developmentally Disabled

HCBS - IHS Home and Community Based Services Waiver for In Home Supports for Children with Developmental Disabilities

HC-CSF - Home Care for Children with Severe Disabilities

**HCV** - Housing Choice Voucher

HFA - High Functioning Autism

HH - Hard of Hearing

HHA - Home Health Agency

HHS - Health and Human Services

HI - Hearing Impaired

HIPAA - Health Insurance Portability and Accountability Act

HKG - Healthy Kids Gold

HKS - Healthy Kids Silver

HOH - Hard of Hearing

HMO - Health Maintenance Organization

HRSA - Health Resources and Services Administration

HRST - Health Risk Screening Tool

**HUD - Housing and Urban Development (Federal)** 

I & R - Information and Referral

ICF - Intermediate Care Facility

ID - Intellectual Disability (formerly MR)

IDDRC - Intellectual and Developmental Disabilities Research Center

IDEA - Individuals with Disabilities Education Act

IDEIA - Individuals with Disabilities Education Improvement Act

IEP - Individualized Education Plan (federal rule under IDEA a service agreement/contract)

IFSP - Individualized Family Service/Support Plan

IHSW - In Home Support Waiver (those in a school program)

IOD - Institute on Disabilities

IPE - Individual Plan for Employment (DRS)

IRWE - Impairment Related Work Expense (SSA)

ISA - Individualized Service Agreement

ISP - Individualized Service Plan

ITA - Individual Training Account (Workforce WV)

IWD - Individual with Disability

IWP - Individual Work Plan (SSA)

JAN - Job Accommodation Network

JC - Job Coaching

LBPH - Library for the Blind and Physically Handicapped

LD - Learning Disability

LDA - Learning Disabilities Association

LEA - Local Education Agency (school)

LEAH - Learning Education in Adolescent Health

LEND - LEadership in Neurodevelopment and related Disabilities

LFA - Low Functioning Autism

LPC - Licensed Professional Counselor

**LRE** - Least Restrictive Environment

LS - Life Skills training (DRS)

LSW - Licensed Social Worker

LTC - Long Term Care

MA - Medical Assistance (Medicaid)

MBD - Minimal Brain Dysfunction

MBI - Medicaid Buy-In (see M-WIN)

MCHS - Maternal & Child Health Services

MCHB - Maternal and Child Health Bureau (Federal)

MD - Muscular Dystrophy

MDET - Multidisciplinary Evaluation Team

MDSS - Medicaid Decision Support System

MEAD - Medicaid for Employed Adults with Disabilities

MH - Mental Health

MHCA - Mental Health Consumer's Association

MI - Mental Illness

MIG - Medicaid Infrastructure Grant

MMH - Mild-Moderate Mentally Impaired

MQIP - Medicaid Quality Incentive Program

MRI - Magnetic Resonance Imaging

MS - Multiple Sclerosis

MSP-CAN - Mountain State Parents Children and Adolescent Network

MTS - Medicaid To Schools

M-WIN - Medicaid Work Incentive Network

NACDD - National Association of Councils on Developmental Disabilities

NAMI - National Alliance on Mental Illnesses

NCDDR - National Center for the Dissemination of Disability Research

NCDRR - National Center for the Dissemination of Rehabilitation Research

NCHS - National Center for Health Statistics

NCHSD - National Consortium for Health Systems Development

NCIL - National Council on Independent Living

NCLB - No Child Left Behind

NDRN - National Disability Rights Network

New Heights - New Eligibility System to replace EMS)

NF - Nursing Facility

NH - Nursing Home

NHH - New Hampshire Hospital

NHLeads - AA Billing System (also FCESS data system)

NHSEIS - NH Special Education Information System

NICHQ - National Initiative for Children's Healthcare Quality

NICHY - National Information Center for Children and Youth with Disabilities

NIDRR - National Institute of Disabilities and Rehabilitation Research

NIH - National Institutes for Health

NLD - Nonverbal Learning Disability

NOGD - Notice of Decision

NPIN - National Parent Information Network (organization)

NPND - National Parent Network on Disabilities (organization)

NSIP - National Service Inclusion Project

OAA - Old Age Assistance

ODEP - Office of Disability Employment Policy (DOL)

OMBP - Office of Medicaid Business and Policy

OPG - Office of Public Guardian (court appointed guardians)

OSE - Office of Special Education (DOE)

OSEP - Office of Special Education Programs (US Department of Education)

OSERS - Office of Special Education and Rehabilitative Services (US Department of Education)

**OSP - Office of Sponsored Programs** 

OSS - Office of Social Services

OT - Occupational Therapy/Therapist

PA - Prior Authorization

P&A - Protection and Advocacy

PABSS - Protection and Advocacy for Beneficiaries of Social Security

PACER - Parent Advocacy Coalition for Educational Rights

Part C - Part C of the IDEA, see FCESS

PAS/PC - Personal Assistance Services or Personal Care

PASS - Plan for Achieving Self-Support (SSA)

**PBS - Positive Behavior Support** 

PCA - Personal Care Attendant

PCES - Personal Care Employment Support Services

PCP - Personal Care Physician

PCS - Personal Care Services

PDD - Pervasive Developmental Disorder

PDD/NOS - Pervasive Developmental Disorder, Not Otherwise Specified

PDMS - Participant Directed and Managed Services (those that have exited a school program)

PERC - Parent-Educator Resource Center

PESS - Property Essential for Self-Support (SSA)

PHS - Public Health Service

PIA - Programs for Individuals with Autism

PIC - Parent Information Center

#### PL - Public Law

- PL 94-142 Education for all Handicapped Children Act of 1975
- PL 105-15 Individuals with Disabilities Education Act of 1997 (formerly PL 101-476)
- PL 105-476 Individuals with Disabilities Education Act of 1990 (formerly PL 94-142 and 99-457)

PNP - Parent Network Project

**PNS - Parent Network Specialists** 

PPC - Pediatric Pulmonary Center

PRA - Project Rental Assistance (part of the HUD 811 program in NH)

Provision 1619 a & b - Extended Medicaid coverage while working (SSA)

PSC - Program Support Center

PSS - Peer Support Services/Specialist

PT - Physical Therapy/Therapist

PTI - Parent Training and Information Centers

PVS - Persistent Vegetative State

PWD - Person/People With Disabilities

QA - Quality Assurance

QDWI - Qualified Disabled Working Individual

QMB - Qualified Medicare Beneficiary

**RBI - Routines Based Interview** 

RCEP - Regional Continuing Education Program

**RESA - Regional Educational Service Agency** 

**RSA - Revised Status Annotated** 

RRTC - Rehabilitation Research and Training Center

RSDI - Retirement Survivors Disability Insurance (SSA)

SABE - Self-Advocates Becoming Empowered

SAMHSA - Substance Abuse and Mental Health Services Administration

SAU - School Administrative Unit (district)

SCHIP - State Children's Health Insurance Program

SCI - Spinal Cord Injury

SCSHCN - Services for Children with Special Health Care Needs

SE - Supported Employment

Section 503/504 - Sections of the Rehabilitation Act of 1973

Section 504 - A civil rights law that requires schools to provide accommodations and modifications in writing.

Section 619 - Section 619 of the IDEA, Preschool Special Education

Section 811 - The Section 811 Rental Assistance (PRA) program provides project-based rental assistance for persons with disabilities linked with long term services

SELN - State Employment Leadership Network

SEP - Supported Employment Program (HCBS - Services)

SFC - Specialized Family Care

SFY - State Fiscal Year

SGA - Substantial Gainful Activity

SILC - Statewide Independent Living Council

SIS - Supports Intensity Scale

SITP - Strategic Information Technology Plan

SLMB - Special Low Income Medicare Beneficiaries

SLP - Speech Language Pathologist

SLT - Speech/Language Therapy/Therapist

SMF - Specialized Medical Services

SNAP - Supplemental Nutrition Assistance Program (formerly Food Stamps)

SNF - Skilled Nursing Facility

SON - Standard of Need

SPA - State Plan Amendment

SPARC NH! - NH early Childhood Advisory Council

SPP - State Performance Plan

SPU - Secure Psychiatric Unit (NH State Prison)

SRP - Supported Residential Program

SSA - Social Security Administration

SSBG - Social Security Block Grant

SSDI - Social Security Disability Income, SSA Title II/T2

SSI - Supplemental Security Income, SSA Title XVI/T16

SSN - Social Security Number

ST - Speech Therapy

SURS - Surveillance & Utilization Review Subsystem (MMIS)

SW - Sheltered Work/Workshop

SWD - Students With Disabilities

TA - Technical Assistance

TANF - Temporary Assistance for Needy Families

TANF-INCAP - Temporary Assistance for Needy Families- Incapacity

TBI - Traumatic Brain Injury

TDD - Telecommunication Device for the Deaf

Title II - Section of the SSA Act dealing with SSDI

Title XIV - Section of the SSA Act dealing with SSI

Title XIX - Section of the SSA Act dealing with Medicaid

TPL - Third Party Liability

TPR - Timely Progress Review (SSA)

TT - Text Telephone

TTW - Ticket To Work (SSA)

TTY - Teletypewriter

TWE - Trial Work Experience (DRS)

TWP -Trial Work Period (SSA)

TWWIA - Ticket to Work and Work Incentive Improvement Act

UCEDD - University Centers for Excellence in Developmental Disabilities

**UCP - United Cerebral Palsy** 

VA - Veteran's Administration

VI - Visually Impaired

VR - Vocational Rehabilitation (part of the NH DOE)

WAT - Work Adjustment Training (DRS)

WI - Work Incentives

WIC - Women, Infant and Children

WIPA - Work Incentive Planning and Assistance Project

YTD - Youth Transition Demonstration

# **Definitions**

**ABSTRACT CONCEPT** – A concept or idea not related to any specific instance or object and which potentially can be applied to many different situations or objects. Persons with cognitive deficits often have difficulty understanding abstract concepts.

**ABSTRACT THINKING** – Ability to reason and to solve problems.

**ACQUIRED BRAIN INJURY** – The implication of this term is that the individual experienced normal growth and development from conception through birth, until sustaining an insult to the brain at some later time which resulted in impairment of brain function.

**ACUTE CARE** – The phase of managing health problems which is conducted in a hospital on patients needing medical attention.

**ACUTE REHABILITATION** – Based in a medical facility, accepts patient as soon as medically stable, focuses on intensive physical and cognitive restorative services in early months after injury; typical length of stay one week to several months (short term); identifiable team and program with specialized unit.

**ADL** – Activities of daily living such as eating, grooming, toileting, and dressing.

**AGITATION** – Behavior pattern of restlessness and increased activity intermingled with anxiety, fear and/or tension.

**AMBULATION** – Walking

**AMNESIA** – Memory loss

**Retrograde** – inability to remember information prior to the injury

**Anterograde** – inability to consistently remember events since the injury; associated with inability to remember and learn new material.

**ANEURYSM** – A bubble-like deformity in a blood vessel wall which is prone to bleeding.

**ANOXIA** – State of almost no oxygen supply, resulting in low energy production and possible death of the cell, may be due to poor blood flow to the brain or low oxygen in the blood.

**ANTICOAGULANT AGENTS** – Drugs used in stroke prevention therapy to prevent blood clots from forming or growing. They interfere with the production of certain blood components necessary for clot formation.

**ANTICONVULSANT** – Medication used to control or decrease the possibility of seizure.

**ANTIDEPRESSANTS** – Drugs which help treat depression.

**ANTITHROMBOTICS** – Type of anticoagulation therapy that prevents the formations of blood clots by inhibiting the coagulating actions of the blood protean thrombin.

**APHASIA** – Loss of the ability to express oneself and/or to understand language, caused by damage to the brain cells rather than deficits in speech or hearing organs.

**Applied Behavior Analysis (ABA)** – is a therapy based on the science of learning and behavior. ABA therapy applies the understanding of how behavior works to real situations. The goal is to increase behaviors that are helpful and decrease behaviors that are harmful or affect learning.

**APRAXIA** – Inability to carry out a complex or skilled movement; not due to paralysis, sensory changes or deficiencies in understanding.

**APTD:** Aid to the Permanently and Totally Disabled, starts at the 18 birthday and can have a monthly cash benefit based on adult's income

**ARTERIOVENOUS MALFORMATION (AVM)** – A "tangle" of blood vessels present from birth which may be prone to bleeding.

**ASPIRATION** – When food or liquid goes into the windpipe (trachea) and lungs instead of the esophagus and then the stomach. This can cause lung infection or pneumonia.

#### ASSISTANCE -

- **Dependent/Maximum** Person is unable to perform the task
- Moderate Person can participate somewhat, but still requires a good deal of help.
- Minimum Person does most of tasks himself/herself, but requires some help
- Contact/Guard (FBI finger in belt) Person requires no real help. A hand is placed on him/her for safety precautions (balance or lack of attention).

**ATAXIA** – A problem of muscle coordination not due to apraxia, weakness, rigidity, spasticity or sensory loss, caused by a lesion of the cerebellum or basal ganglia. Can interfere with a person's ability to walk, talk, eat, and to perform other self-care tasks.

**ATROPHY** – Deterioration or loss of tissue caused by lack of nourishment, inactivity or loss of nerve supply.

**AUDIOLOGIST** – One who evaluates hearing defects and who aids in the rehabilitation of those who have such defects.

**BILATERAL** – Pertaining to both left and right sides.

**BLOOD LEVELS** – Amount of medications or other substances in the blood. Blood tests must be done regularly when a person is on certain medicines to ensure that proper levels are maintained.

**BRAIN PLASTICITY** – The ability of intact brain cells to take over functions of damaged cells; plasticity diminishes with maturation.

**BRAIN SCAN** – An imaging technique in which a radioactive dye (radionuclide) is injected into the blood stream and then pictures of the brain are taken to detect tumors, hemorrhages, blood clots, abscesses or abnormal anatomy.

**BRAIN STEM** – The lower extension of the brain connected to the spinal cord. Neurological functions located in the brain stem includes those necessary for survival – being awake or alert.

**CAT SCAN** – Series of cross-sectional x-rays of the head and brain that reveals the internal structure of the brain in precise detail.

**CEREBELLUM** – The portion of the brain (located at the back) which helps coordinate movement. Damage may result in ataxia.

**CEREBRAL INFARCT** – When the blood supply is reduced below a critical level and the brain tissue in that region dies.

**CEREBRAL-SPINAL FLUID** – Liquid which fills the ventricles in the brain and surrounds the brain and spinal cord.

**CLOSED HEAD INJURY** – Trauma to the head which does not penetrate the skull but which damages the brain. Occurs when the head accelerates and then rapidly decelerates or collides with another object and brain tissue is damaged by violent smashing, stretching or twisting of brain tissue (example: hitting the windshield of a car).

**COGNITION** – "Thinking" skills such as being able to organize, solve problems, follow directions, etc.

**COGNITIVE DEFICIT** – A reduction in one or more "thinking" skills which include: attention, concentration, memory, sequential thought organization, judgment, reasoning and problem-solving.

**COGNITIVE REHBILITATION** – Therapy programs which aid people in the management of specific problems in thinking and perception. New strategies and skills are taught to help people improve function and/or compensate for remaining deficits.

**COMA** – A state of unconsciousness from which the patient cannot be awakened or aroused, even by powerful stimulation.

**COMMUNITY SUPPORT SERVICES** – appropriate for individuals who currently reside independently or have a desire to reside independently within a year. These services assist an individual in maintaining health and safety while living independently (ex: assistance with grocery shopping, maintaining a safe living environment, assistance with budgeting, assistance with taking a class, etc.)

**COMMUNITY PARTICIPATION SERVICES** – these services are provided by a staff that can be with anywhere between 1 and 3 individuals at the same time. These services can range in hours depending on need (anywhere from one day per week to 5 days per week). These services are provided in the community and can include volunteering, socialization, participating in community-based activities, etc.

**CONCRETE THINKING** – Thinking limited to what is seen or to one specific example.

**CONCUSSION** – The common result of a blow to the head or sudden deceleration usually causing an altered mental state, either temporary or prolonged.

**CONFABULATION** – Making up facts or events. It differs from lying in that the individual is not attempting to deceive.

**CONTINENT** – The ability to control urination and bowel movements.

**CONTRACTURE** – Loss of full movement of a joint.

**CONTRECOUP** – Bruising/injuries of brain tissue on the side opposite the point of impact.

CSF - Liquid which fills the ventricles of the brain and surrounds the brain and spinal cord.

**DEPRESSION** – A feeling of sadness brought about by loss; usually a natural process in brain injury recovery. On occasion, professional treatment may be necessary.

**DIFFUSE** – Brain damage which involves many areas of the brain rather than one specific location.

**DYSARTHRIA** – "Slurred" speech due to paralysis or weakness of tongue, lips, and other facial muscles. A language disorder characterized by difficulty with speaking or forming words.

**DYSPHAGIA** – Problem with or absence of the ability to chew and/or swallow.

**EDEMA** – Swelling.

**ELECTROENCEPHALOGRAM (EEG)** – A medical test which studies "brain waves" or electrical activity of the brain. Useful for diagnosing seizure disorders (epilepsy), coma and brain death.

**EMBOLIC STROKE** – Stroke resulting from the blockage of an artery by a blood clot (embolus).

**ENHANCED FAMILY CARE** – this looks different for everyone- this can be an individual living with another young adult who supports and supervises them within their private home or can be a husband and wife supporting an individual with children living in the home as well. This can look like a roommate type setting or a family setting.

**EPILEPSY** – Seizure disorder.

**EPISODIC MEMORY** – Memory for ongoing events in a person's life. More easily impaired than semantic memory or perhaps because rehearsal or repetition tends to be minimal.

**EQUILIBRIUM** – Normal balance reactions and postures.

**FOCAL** – Restricted to one region (as opposed to diffuse).

**FRONTAL LOBE** – Front part of the brain; involved in planning organizing, problem-solving, selective attention, personality and a variety of higher cognitive functions.

**HEMOTOMA** – blood clot regarding the brain:

**Epidural** – outside the brain and its fibrous covering but under the skull.

**Subdural** – between the brain and its fibrous covering.

**Intracerebral** – in the brain tissue.

**HEMIANOPSIA** – Visual field cut. Blindness for one half of the field of vision; this is not the right or the left half.

**HEMISPHERE** – One of the two halves of the brain.

- **Right** Controls left side of the body and is involved with visuospatial abilities.
- Left Controls the right side of the body and is involved with language.

**HEMORRHAGE** – Bleeding that occurs following trauma .

**HYDROCEPHALUS** – Enlargement of fluid filled cavities in the brain.

**HYPOXIA** – Lack of oxygen reading the tissues of the body.

**ICP** – Intracranial Pressure: Cerebrospinal fluid (CSF) pressure measured from a needle or bolt introduced into the CSF space surrounding the brain; reflects the pressure inside the skull.

**INCONTINENT** – Inability to control bowel or bladder functions.

**INFARCT** – The immediate area of a brain-cell death caused by the stroke. When the brain cells in the infarct die, they release chemicals that set off a chain reaction that endangers brain cells in a larger surrounding area.

**ISCHEMIA** – An interruption or blockage of blood flow.

**LABILITY** – State of having notable shifts in emotional state (e.g., uncontrolled laughing or crying).

**LATENCY OF RESPONSE/RESPONSE DELAY** – The amount of time it takes a person to respond after the stimulus has been presented.

**LEFT HEMISPHERE** – The half of the brain that controls the actions of the right side of the body, as well as analytic abilities such a calculating, speaking, and writing.

**LONG TERM MEMORY** – In neuropsychological testing, this refers to recall 30 minutes or longer after presentation. Requires storage and retrieval of information which exceeds the limit of short term memory.

MILD BRAIN INJURY – A patient with a mild traumatic brain injury is a person who has had a traumatically-induced physiological disruption of brain function, as manifested by at least one of the following: 1) any period of loss of consciousness; 2) any loss of memory for events immediately before or after the accident; 3) any alteration in mental state at the time of the accident (e.g., feeling dazed, disoriented or confused) 4) focal neurological deficit(s) which may or may not be transient; but where the severity of the injury does not exceed the following; a) loss of consciousness of approximately 30 minutes or less; b) after 30 minutes, an initial Glasgow Coma Scale score of 1-15; c) Post Traumatic Amnesia not greater than 24 hours.

**Magnetic Resonance Imaging** – A type of diagnostic radiography using electromagnetic energy to create an image of soft tissue, central nervous system and musculoskeletal systems.

**NEUROPSYCHOLOGIST** – A psychologist who specializes in evaluating (by tests) brain/behavior relationships, planning training programs to help the survivor of brain injury return to normal functioning and recommending alternative cognitive and behavioral strategies to minimize the effects of brain injury. Often works closely with schools and employers as well as with family members of the injured person.

NON-AMBULATORY - Unable to walk.

**OCCIPITAL LOBE** – Region in the back of the brain which processes visual information. Damage to this lobe can cause visual deficits.

**OCCUPATIONAL THERAPIST** – Therapist who focuses on helping stroke survivors rebuild skills in daily living activities, such as bathing, toileting, and dressing.

**PARIETAL LOBE** – One of the two parietal lobes of the brain located behind the frontal lobe at the top of the brain.

- Right damage can cause visuospatial deficits (having difficulty moving around new or familiar places).
- Left damage to this area may disrupt ability to understand spoken or written language.

#### Participant Directed and Managed Services (PDMS Waiver) offers the following services:

- **Personal Care Services:** includes assistance and skills training with basic daily living skills, such as communication, socialization, health and personal safety, and physical functioning.
- **Employment:** Includes supports, ongoing coaching, consultations and training regarding vocational needs, interests and goals of the individual, including job development and volunteerism which could lead to employment.
- **Community Participation:** includes supports and training for accessing and participating in a variety of meaningful, functional, outcome-oriented community-based supports, including therapeutic recreation.
- **Respite:** short-term temporary relief from care taking responsibilities for the family.
- Consultative Services: may include evaluation, training, mentoring and special instruction to improve the ability of the service provider, family or other care-givers to understand and support the individual's developmental, functional, communication, socialization and health and behavioral needs.
- **Based on need,** Adaptive therapies, recreational camps, assistive technology, and mileage may also be available through the PDMS waiver.

**Personal Care Services** - This program is for those that choose to live at home, need supports to do so, but still want traditional day services. This Includes assistance and skills training with basic daily living skills, such as communication, socialization, health and personal safety, and physical functioning.

**PHYSIATRIST** – Medical doctor who specializes in rehabilitation.

**PHYSICAL THERAPIST** – Healthcare professional who specializes in maximizing a stroke survivor's mobility and independence in order to improve major motor and sensory impairments in walking, balance, and coordination.

**POST TRAUMATIC AMNESIA (PTA)** – A period of hours, weeks, days or months after the injury when the patient exhibits a loss of day-to-day memory. The patient is unable to store new information and therefore has a decreased ability to learn.

**POSTACUTE REHABILITATION** – Are programs designed to provide intensive, 24-hour rehabilitation to improve cognitive, physical, emotional, and psychosocial abilities, to facilitate better independent living skills. Facilities typically provide a full spectrum of clinical therapies, as well as life-skills training in a residential setting.

**PROSODY** – Rhythm and timing of speech.

**PSYCHIATRIST/PSYCHOLOGIST** – Specialist who helps stroke survivors adjust to the emotional challenges and new circumstances of their lives.

**Persistent Vegetative State** – A long-standing condition in which the patient utters no words and does not follow commands or make any response that is meaningful.

**RECREATIONAL THERAPIST** – Therapist who helps to modify activities that the patient enjoyed before the Brain Injury or introduces new ones.

**REHABILITATION** – Comprehensive program to reduce/overcome deficits following injury or illness and to assist the individual to attain the optimal level of mental and physical ability.

**RESIDENTIAL SERVICES** – there are a variety of services that are considered "residential": Residential Services include:

- Enhanced Family Care (EFC) are houses with shared living (a room in a family home) with a family;
- **Supported Residential Health Care**: These facilities typically have more comprehensive options. They provide social and health services to three or more residents, and may provide medical care to residents;
- **Residential Care:** These facilities provide assistance with personal care and provide social activities. Supervision levels are kept to a minimum.

**RESPITE** - A time away for parents and caregivers.

**RETROGRADE AMNESIA** – Inability to recall events that occurred prior to the accident; may be a specific span of time or type of information.

**Section 504** – a civil rights law that prohibits discrimination against individuals with disabilities. Section 504 ensures that the child with a disability has equal access to an education. The child may receive accommodations and modifications,

however fewer procedural safeguards are available to the child with a disability and the child's parents than under IDEA (IEP).

Section 811 – The Section 811 Rental Assistance (PRA) program provides project-based rental assistance for persons with disabilities linked with long term services. In New Hampshire, the 811 PRA program creates an opportunity for extremely low income, non-elderly persons with severe mental illness to live as independently as possible through the coordination of voluntary services and providing a choice of subsidized, integrated housing options. Section 811 is a Mainstream Voucher Program provides voucher assistance to households that include a non-elderly person(s) with disabilities, defined as any family that includes a person with disabilities who is at least 18 years old and not yet 62 years old. Applicants may qualify for a preference on the waiting list if they are transitioning out of institutional or segregated setting or at serious risk of institutionalization because lack of access to supportive services for independent living, or they would be institutionalized if their services were cut. Applicants must meet all other eligibility requirements for the Housing Choice Voucher Program. New Hampshire Housing will coordinate housing search assistance with other agencies to assist disabled clients with locating units, including units with needed accessibility features.

**SEIZURE** – An uncontrolled discharge of nerve cells which may spread to other cells nearby or throughout the entire brain. It usually lasts only a few minutes. It may be associated with loss of consciousness, loss of bowel and bladder control and tremors; may also cause aggression or other behavioral change.

**SHORT TERM MEMORY** – Primary or "working" memory; its contents are in conscious awareness. A limited capacity system that holds up to seven chunks of Information over periods of 30 seconds to several minutes, depending upon the person's attention to the task.

**SHUNT** – A procedure to draw off excessive fluid in the brain. A surgically-placed tube running from the ventricles which deposits fluid into either the abdominal cavity, heart, or large veins of the neck.

**SKULL FRACTURE** – Term used to describe the breaking of the bones surrounding the brain. A depressed skull fracture is one in which the broken bone(s) exert pressure on the brain.

Speech - Language Pathologist: a professional educated in the development and disorders of human communication.

**SOCIAL WORKER** – Counselor of psychological needs.

**SPASTICITY** – An involuntary increase in muscle tone (tension) that occurs following injury to the brain or spinal cord, causing the muscles to resist being moved. Characteristics may include increase in deep tendon reflexes, resistance to passive stretch, clasp knife phenomenon, and clonus.

**SPEECH-LANGUAGE PATHOLOGY SERVICES** – A continuum of services including prevention, identification, diagnosis, consultation, and treatment of patients regarding speech, language, oral and pharyngeal sensorimotor function.

**STAFFED RESIDENCES** – This is a residence that supports anywhere from 1-3 individuals where staff rotate shifts in the home. These tend to be services for individuals who require 24-hour support/supervision and/or experience medical or behavioral challenges that cannot be safely/appropriately supported within a traditional home setting.

**STATUS EPILEPTICUS** – Continuous seizures; may produce permanent brain damage.

**STROKE** – Sudden interruption of blood flow to a part of the brain that kills cells within the area. Body functions controlled by the affected area may be impaired or lost.

**SUPPORTED EMPLOYMENT** – appropriate for individuals who are relatively independent in most aspects of their life but require assistance with obtaining and maintaining employment.

**TRAMATIC BRAIN INJURY** – Damage to living brain tissue caused by an external, mechanical force. It is usually characterized by a period of altered consciousness (amnesia or coma) that can be very brief (minutes) or very long (months, indefinitely). The specific disabling condition(s) may be orthopedic, visual, aural, neurologic, perceptive/cognitive, or mental/emotional in nature. The term does not include brain injuries that are caused by insufficient blood supply, toxic substances, malignancy, disease-producing organisms, congenital disorders, birth trauma, or degenerative processes.

**TEMPORAL LOBES** – Two lobes, one on each side of the brain located at about the level of the ears. They allow a person to tell one smell from the other and one sound from the another. They also help in sorting new information and are believed to be responsible for short-term memory.

- **Right Lobe** mainly involved in visual memory (i.e., pictures/faces)
- Left Lobe mainly involved in verbal memory (words/names)

**THROMBOEMBOLISM** – Embolus that breaks away from a clot in one vessel to become lodged in another vessel.

**THROMBOSIS** – Clotting of blood within a vessel.

**VENTRICLES** – Fluid filled cavities inside the brain.

**VERBAL APRAXIA** – Impaired control of proper sequencing of muscles used in speech (tongue, lips, jaw muscles, vocal cords). These muscles are not weak but their control is defective. Speech is labored and characterized by sound reversals, additions, and word approximations.

**VOCATIONAL THERAPIST** – A specialist who evaluates work-related abilities of people with disabilities

# Vendors/Programs/Information

# Services For Individuals with Developmental Disabilities

The NH developmental services system offers adult individuals with developmental disabilities a wide range of supports and services within their own communities.

Any resident of NH is eligible for services who has a developmental disability and meets the following criteria:

- Which is attributable to an intellectual disability, cerebral palsy, epilepsy, autism or a specific learning disability, or any
  other condition of an individual found to be closely related to an intellectual disability as it refers to general intellectual
  functioning or impairment in adaptive behavior or requires treatment similar to that required for persons with an
  intellectual disability; and
- Which originates before such individual attains age 22, has continued or can be expected to continue indefinitely, and constitutes a severe disability to such individual's ability to function normally in society.

The range of services available include:

- Service Coordination including advocacy, facilitation, and monitoring;
- Day Services focusing on assistance and training provided to individuals to maintain and improve their skills in personal care, vocational activities, and community integration to enhance their social and personal development;
- Employment Services focusing on assistance and training provided to individuals to maintain and improve their skills in vocational activities and enhance their social, personal development, and well-being within the context of vocational goals. These services develop paid employment opportunities in integrated settings;
- Personal Care Services offering assistance and training to individuals to maintain and improve their skills in basic daily living and community integration and to enhance their social and personal development;
- Community Support Services that are intended for individuals who have developed or are trying to develop skills to live
  independently within the community. Services consist of assistance and training provided to maintain and improve skills
  in daily living and community integration and to enhance social and personal development;
- Family Support Services including respite and environmental modifications, to assist families in caring for a family member at home; and
- Crisis Services, Assistive Technology Services, and Specialty Services. Camps & Programs

## Area Agencies & State Regions

I Northern Human Services <a href="https://northernhs.org/">https://northernhs.org/</a>

II Pathways of the River Valley <a href="https://pathwaysnh.org/">https://pathwaysnh.org/</a>

III Lakes Region Community Services <a href="https://www.lrcs.org/">https://www.lrcs.org/</a>

IV Community Bridges <a href="https://www.communitybridgesnh.org/">https://www.communitybridgesnh.org/</a>

V Monadnock Developmental Services <a href="https://www.mds-nh.ord">https://www.mds-nh.ord</a>

VI Gateways Community Services <a href="https://www.gatewayscs.org">https://www.gatewayscs.org</a>

VII The Moore Center <a href="https://moorecenter.org/">https://moorecenter.org/</a>

VIII One Sky <a href="https://www.oneskyservices.org/">https://www.oneskyservices.org/</a>

IX Community Partners <a href="https://communitypartnersnh.org/">https://communitypartnersnh.org/</a>

X Community Crossroads https://communitycrossroadsnh.org

As part of its' contract with the NH Bureau of Developmental Services, each area agency must have a **Regional Family Support Council** which in part serves as a liaison to the state Family Support Council.

# STATE OF NEW HAMPSHIRE BUREAU OF DEVELOPMENTAL SERVICES Area Agencies

R	egion#	Area Agency Name
		Suzanne Gaetjens-Oleson, LCMHC, Chief Executive Officer
		87 Washington Street, Conway, NH 03818
	(1)	Telephone: (603) 447-3347
		BDS Liaison: Brianna Belfontaine - 271-5021
		Mark Mills, Executive Director
		654 Main Street, Claremont, NH 03743
		Telephone: (603) 542-8706
		BDS Liaison: Kristen Kather - 271-9209
		Rebecca Bryant, Executive Director
	III	719 North Main Street, PO Box 509, Laconia, NH 03247
	(3)	Telephone: (603) 524-8811 or (800) 649-8817
		BDS Liaison: Melissa Occhipinti – (603) 271-5032
۱/		Ann Potoczak, Executive Director
	IV	70 Pembroke Road, Suite 5, Concord, NH 03301
	(4)	Telephone (603) 225-4153 or (800) 499-4153
$\angle$		BDS Liaison: Brianna Belfontaine - 271-5021
_		Mary Anne Wisell, Executive Director
	v	121 Railroad Street, Keene, NH 0343I
	(5)	Telephone: (603) 352-1304 or (800) 469-6082
		BDS Liaison: Ashley Wilson - 271-7256
		Sandra Pelletier, Executive Director
	VI	Nzenalu Obinelo, VP of Individual & Family Services
	(6)	144 Canal Street, Nashua, NH 03064
	(6)	Telephone: (603) 882-6333
		BDS Liaison: Ashley Wilson – 271-7256
		Janet Bamberg, President & CEO
	VII	195 McGregor Street, Unit 400,
/	(7)	Manchester, NH 03I02
_	(7)	Telephone: (603) 206-2700
		BDS Liaison: Melissa Occhipinti – (603) 271-5032
		Matthew Cordaro, CEO
	VIII	755 Banfield Road, Suite 3
	(8)	Portsmouth, NH 03801
	(0)	Telephone: (603) 436-6111
Ŧ	+	BDS Liaison: Kristen Kather – 271-9209
/1		Christopher Kozak, Executive Director
	IX	113 Crosby Road, Suite #1
	(9)	Dover, NH 03820-4375
	(3)	Telephone: (603) 749-4015
		BDS Liaison: Kristen Kather – 271-9209
		Cynthia Mahar, Executive Director
		8 Commerce Drive
		Atkinson, NH 03811
	(10)	Telephone: (603) 893-1299
		BDS Liaison:
		SENCIES ABOVE

THE ASSOCIATION FOR NEW HAMPSHIRE'S TEN AREA AGENCIES ABOVE

Community Support Network (CSNI)https://csni.org/

The Area Agency provides either directly or through subcontractors, an array of services for individuals who have a developmental disability or acquired brain disorder. To be eligible for area agency services you must meet the disability definition and be of a specific age, depending on the service.

There are 10 Area Agencies throughout New Hampshire that are non-profit corporations and operate within the guidelines and regulations established by the Department of Health and Human Services. Funding availability is critical to receiving all of the services clients may need. You and your family will be able to discuss this in full detail with an Area Agency supporting the community where you live. If you are not able to receive the assistance you need form your Area Agency, there is an appeal process through the DHHS that allows individuals to move to a different Area Agency under special circumstances.

## **Family Support Council**

The Family Support Council (FSC) join with the area agency to promote person-centered, family-directed practices, provide learning and networking opportunities, as well as foster personal and collective advocacy with the result of positively influencing family capacity to develop meaningful life outcomes with their loved ones. The Family Support Council provides an opportunity for families to make their concerns and priorities for services known.

The Family Support Councils are made up of individuals who experience a disability or family members of someone who experiences a disability and resides in one of the towns in which the area agency they are joining serves. Members need only their own qualifications, experience, or perspective.

The members' level of involvement and availability will determine the actual time spent each month. The FSC strive to keep their members' commitments at manageable levels that include:

- New members will receive orientation materials that provide additional information about the Council, Family Support, the Area Agency, the Area Agency Board of Directors, the Bureau of Developmental Services, the Area Agency system, etc.
   The orientation is designed to assist new members in learning about the Family Support Council's philosophy, history and background, and current priorities.
- Potential FSC members are invited to meetings and if interested. All interested members are voted on by the existing FSC members.
- Once voted onto the FSC in your area agency, the members are expected to:
  - Attend Council meetings,

- Contribute to some subcommittees,
- o Council members also network with other agencies and organizations, and
- o Participate in any functions sponsored by FSC, as deemed necessary.

The Family Support Council's also oversees discretionary funding available for services and resources to help promote independence, increase independence, participate in the community, increase skills, and/or training to caregivers. They provide small funds to families to assist with: Education, Summer Camperships, Respite, Technology and others.

# **Camps/Enrichment Programs**

Summer Fun! Camps Rise to the Occasion with Inclusive Summer Programs

For most kids, summer is one of the most wonderful times of the year. And one thing that makes it pretty awesome is summer camp. There was a time when children and young adults with developmental disabilities (DD) didn't have access to the same summertime activities as many others. However, more programs are emerging to give everyone enjoyable experiences while adding the life skills of self-confidence, leadership, and character building.

<u>We believe</u> a recreation program should be all-inclusive. These camps do not have to have specialized people to make an inclusive camp, but most of them have people that are special and caring. They have programs that are adaptable to the abilities of the individuals they serve and there are a number of scholarships and grants available to allow all individuals the ability to have fun!

# Adam's Camp – New England <a href="https://adamscampnewengland.org/">https://adamscampnewengland.org/</a>

Adam's Camp Office

26 Shaker Road, Concord, New Hampshire 03301

508-901-9610

#### **CAMP Locations**

Loon Mountain Resort, NH

Nantucket, Massachusetts

Intensive therapy based camp, family support, and recreation for children, youth and adults with developmental disabilities

CAMPERS AGES: 3+ - PATHFINDER TEAM - Is an intensive, multidisciplinary therapy based program for children ages 3 and up with developmental disabilities or delays including, but not limited to: autism, cerebral palsy, and Down syndrome. Their signature Pathfinder program uses their unique 5-5-5 model, which consists of 5 pediatric therapists who work one-on-one with 5 children over 5 consecutive days. Therapists focus on each child's strengths to provide goal-centered, outcome-based programming. Synergy, focus, and extensive time dedicated specifically to working on strengthening skills make this a unique and powerful intervention. Children often achieve significant developmental, functional and behavioral gains that can be further developed and sustained.

**CAMPER AGES:** 5 - 10 - **PATHBLAZER TEAM** - is a hybrid team combining the individual center-based model of Pathfinder with the therapy based on-the-go model of Trailblazer. Campers ages 5-10 work one on one with five pediatric therapists for three hours each day at the child care center. They spend the remaining three hours participating in recreational activities as a group with the support of an individual therapist. Therapists rotate throughout the three hour time frame. The focus of the afternoon is on generalizing skills, social interactions, communication with peers, safety awareness and independence.

**CAMPER AGES**: 8+ - **TRAILBLAZER TEAM\*** - Is an activity-based, "therapy based on-the-go" program for youth ages 8 and up with developmental delays including, but not limited to: autism, cerebral palsy and Down syndrome. Their Trailblazer program consists of teams of 4 therapists, providing therapeutic support to 5 campers over 5 consecutive days. Trailblazer campers benefit from being able to practice social skills and develop independence in activities of daily living. This program is considered a

"transition" program, linking the intensive therapy based programs with more social based programs.

**CAMPER AGES**: 12+ **DISCOVERY TEAM\*** Is an activity-based, "therapy based on-the-go" program for youth ages 12 and up with developmental delays including, but not limited to: autism, cerebral palsy and Down syndrome. Their Discovery program consists of teams of 4 therapists and 2 volunteers providing therapeutic support to 5 campers over 5 consecutive days. Discovery campers benefit from being able to practice social skills and develop independence in activities of daily living.

\* The activity-based focus of this program makes wheelchair use and limited mobility a challenge.

**CAMPER AGES**: 13+ **ADVENTURE TEAM\*\*** - This program is an activity-based program for children 13 years and older who are independent with feeding and toileting. It includes 8 activity filled hours per day for five consecutive days and one night of tent camping. Each team has 12 campers and 6 counselors.

\*\* This is NOT a therapy based program. This program is not appropriate for campers who require one-on-one support or more, campers who have aggressive, self-injurious, or destructive behavior, campers with mobility challenges, or campers who are a flight risk.

**TYPE OF CAMP:** Overnight

**CAMPER GENDER(S)**: Coed Campers.

Adam's Camp serves toddlers, children, youth, and adults with developmental delays or disabilities and their families. **This program is not a match for those whose primary diagnosis is an emotional, behavioral, or psychiatric disorder.** 

The mission of Adam's Camp is to **realize the potentials** and **develop the strengths** of children and young adults by bringing together individuals and families with professionals and volunteers to collaboratively provide customized, intensive therapy based camp, family support in a recreational environment.

At Adam's Camp, unique therapy and adventure programs are designed and delivered by dedicated therapists and counselors who help special needs children, youth and adults reach for the stars. These programs are combined with sibling and parent offerings that address the needs of the entire family and have created an amazing and supportive community for their participant families, their partners, and their sponsors.

The team at Adam's Camp recognizes that families of those with special needs already have extra challenges and extra expenses. They want to ensure that participation in Adam's Camp programs is possible for every family, regardless of financial or insurance status. Fortunately, there are several ways to pay for camp! Give them a call to discuss your individual needs.

Adam's Camp New England has been serving children and families since 2008. Adam's Camp is a 501(c)(3) organization so your contributions are tax deductible.

David received his inspiration to help the didabilities world while on a job shadow program in high school where a software enginer told David we "would never in our lifetime be able to speak to a computer to have it learn anything - as a computer has an IQ of zero" as well as 22 years ago when he and his wife had a 24 week pre-mature baby that the Docters told them she would never service 1 week. David took the challenge and has been designing, writing and deploying software applications for over 35 years to ensure computer application are helpful for "all abilities" and his daugher is in inclusive programs from sports to dance, to singing and theratre groups to other activities she likes to do.. He is an active member in a variety of non-profit groups, a coach with challenger baseball and a key contributor for Bridging the Horizons as well as for ensuring knowledge about programs for special needs people is shared with all families equally for their benefit.

David has been an advocate for the "Unique Abilities" nation for over 20 years. He is an engineer and business person with an AS in Electronic Data Processing, a BS in Computer Science as well as an MBA all from Southern NH Universary. In addition, he has a certificant in International Business from North London Polytechincal Institute London England.



David M. Habib

Work/Love in Progress To Be Continued...

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