Meet Your Board Members
(pages 14-16)

TOP ROW, L TO R: Marc Samuels, President; Jenny Nordine, Past President; Beth Rolland, President Elect; Leah Belle, Member at Large;
SECOND ROW, L TO R: Tim Brant, Member at Large; Cassandra Johnson, Treasurer; Staci Frazier, Secretary;
THIRD ROW, L TO R: Cassy Bell Churchill, Mobility Dealer Representative; Jannette Conrad, Corporate Member Representative
LOOK WHO’S TALKING

VOICE FEEDBACK NOTIFICATIONS
LIGHTS - BUZZERS - NOW VOICE
Get the ONLY wheelchair docking system that TALKS to you. Our new system “TELLS” you the status of your docking system.

(888) 952-5625 • www.ezlock.net
**IN THIS ISSUE:**

**Standard Submissions**

<table>
<thead>
<tr>
<th>Education Updates</th>
<th>28</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greetings from the Executive Office</td>
<td>4</td>
</tr>
<tr>
<td>It Looks Easy</td>
<td>10</td>
</tr>
<tr>
<td>Manufacturer’s Corner</td>
<td>32</td>
</tr>
<tr>
<td>Past President’s Address</td>
<td>4</td>
</tr>
<tr>
<td>President’s Address</td>
<td>4</td>
</tr>
<tr>
<td>Research Road</td>
<td>7</td>
</tr>
<tr>
<td>Volunteer Spotlight</td>
<td>12</td>
</tr>
</tbody>
</table>

**Articles**

<table>
<thead>
<tr>
<th>Chapter News</th>
<th>21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Easy to Be a Presenter</td>
<td>25</td>
</tr>
<tr>
<td>Integrating Smartphrases</td>
<td>20</td>
</tr>
<tr>
<td>Meet Your Board Members</td>
<td>14</td>
</tr>
<tr>
<td>OT Doctoral Degree Mandate</td>
<td>27</td>
</tr>
<tr>
<td>Safety Tips for DRS</td>
<td>36</td>
</tr>
</tbody>
</table>

---

The articles published in News Brake reflect the opinions of their authors, not the editor, the ADED organization at large, or its Board of Directors. As such, ADED neither takes a position on, nor assumes responsibility for, the accuracy of the information or statements contained in any articles published in News Brake.

Additional issues are available by contacting the ADED office. News Brake is published quarterly. Articles by members and nonmembers of the ADED association are accepted at the discretion of the editor and as space permits.

For advertising rates, please please contact the executive office: marketing@driver-ed.org 866-672-9466.
Greetings ADED members! I trust that your holidays were joyful and spent with loved ones. A New Year is upon us and with that, your 2019 ADED Board of Directors is excited and geared up to continue their work on an updated and visionary strategic plan.

2019 BOARD OF DIRECTORS: The board met in Atlanta, Georgia this past December 2018 for the annual transition and planning meeting. This year, we welcomed four new board members to the group (some of which are returning from prior years of service!): Beth Rolland (2019 President-Elect), Staci Frazier (2019 Secretary), Tim Brant (2019 Member at Large), and Jannette Conrad (2019 Corporate Board Representative). A full day was devoted to new board orientation so that they could hit the ground running in 2019. Our newest board members are excited to help lead the organization and are all committed to their service to ADED. Marc Samuels, 2019 ADED President, is geared up to lead the organization forward under an ambitious strategic plan.

While the strategic plan is a work in progress, the board has a clear vision for the future of ADED. More information about the strategic plan will be shared with membership with the spring issue of NewsBrake. In the meantime, please consider this a call for volunteers in any level of leadership or tasks needing to be accomplished. The association is only as strong as its membership and a robust volunteer crew can help us achieve the vision that the board has created for success in our industry.

2019 BOARD MEMBERS:
President: Marc Samuels, MS, OT, CDRS
Past President: Jenny Nordine, OTR/L, CDRS
President Elect: Beth Rolland, OTR, CDRS
Treasurer: Cassandra Johnson, CDRS
Secretary: Staci Frazier, OTR/L, CDI, CDRS
Board Member at Large: Leah Belle, OTR/L, CDI, CDRS
Board Member at Large: Tim Brant, CDI, CDRS
Corporate Member: Jannette Conrad/VMI
Mobility Equipment Dealer Member: Cassy Churchill/Clock Mobility

CDRS RENEWALS: Check your certificate! If your CDRS expired 12/31/2018, and you have not submitted a renewal, your credentials are now expired. However, it is not too late to renew! The association allows up to 2 years to renew expired credentials. CDRS related policies are available: www.aded.net. You may always contact the ADED Executive office at: info@driver-ed.org (866) 672-9466 for assistance. For those whose credentials expire 12/31/2019, your renewal reminders will arrive by June 2019.

MEMBERSHIP RENEWALS: A huge thank you goes out to the members that have already renewed their memberships for 2019. With this membership drive, ADED offered a drawing worth 50% off ADED Annual Conference & Exhibits. A total of 20 names were randomly selected from the pool of renewals that were received by the deadline. Congratulations to the winners!

To keep your member profile active on the ADED website, you must renew your membership by March 2019. Continuing with our efforts to reduce costs and waste, we have gone paper-LESS by offering on-line renewals and limiting direct mail reminders. If you have any trouble logging into your account, please e-mail us at info@driver-ed.org.

ADED ANNUAL CONFERENCE: Mark your calendars for 2019 Annual Conference in Lexington KY! We will gather August 9-13, 2019 for our 43rd annual conference. Professional Pride is the conference theme (sounds like an award-winning horse doesn’t it?). Under the direction of ADED’s Education Services Director, Lynn Mortilla-Rocap, the conference team and the

(Continued on next page)
Conference Content Taskforce have built an outstanding program for you. ADED selects the program contents by using a peer review process to approve submissions for program selection. In a format that allows for objectivity, all proposals are presented to the committee which includes program abstract and learning objectives with the presenter identifying information redacted. This process allows for objective and thorough assessment of the selections before they are accepted for the conference program. The Conference Content Taskforce is tasked with reviewing all submissions that have passed peer review and designing the conference program. We had many wonderful submissions from a wide variety of knowledge experts. Although we could not use all the submissions this year, we are certain that this is a program you will not want to miss.

NETWORKING THROUGHOUT THE YEAR: Have you heard? ADED has a closed Facebook group, Driver Rehabilitation Specialists Group, which can be found here: https://www.facebook.com/groups/driverrehab/. We have over 250 members and growing every day with members in the US, Canada, and Great Britain. Don’t miss out on the conversations, networking, and fun. To access the group: submit a request to join through Facebook, answer a couple of simple questions, and our moderators will approve your request. Stay in touch with your ADED friends and make some new ones across the globe by participating in this group. I hope to see you there!

Sincerely,
Elizabeth Green, OTR/L, CDRS CAE
Executive Director

Past President’s Address

Wow! It is 2019….I hope each of you have enjoyed a few days off for celebration and feel energized and re-dedicated to the clients we serve, our colleagues, and our association. I begin this year as ADED’s Past President and look forward to these new responsibilities to our association. Your board of directors continues to be strong leaders in our industry and looks forward to engaging in our future.

As you know ADED is in a period of evolution and growth in many areas from the badging and micro-credentialing program, to co-located conference (see President’s Address pg. 7), to expanded education opportunities, and expanding to more than 1000 ADED members!

I appreciate the opportunity you have given me to serve as your ADED President. This position has provided too many experiences and friendships than I can share, and I appreciate each of them. We are a unique and gifted group of professionals with many paths to become an ADED member. Each of these paths have crossed and widened to include mentors and mentees, additional ADED chapters, volunteers, our expert executive office, committee chairs, board leadership, and most important the communities we serve.

Keep your goals for excellence in driver rehabilitation in front of you, on your path, and make 2019 your most inspired year!

~Jenny Nordine, Past President

Jenny Nordine
OTR/L, CDRS
ADED Past President
First, thank you for entrusting me to the position of ADED President and let me assure you that I will do my best to “do no harm.”

Being a part of the ADED Board of Directors this past year has been a very enlightening experience. Getting a close up look into the behind the scenes workings of our organization has given me a much deeper appreciation of the quality and expertise of our executive staff, as well as the substantial time commitment and depth of knowledge shared on a daily basis by our volunteer board members, chapter officers, committee chairs, and each of our past and current committee participants. I have been able to see for myself the robust framework that holds up this organization and the solid foundation for what is being built today. Adhering to a well thought out and clearly articulated Strategic Plan has already helped ADED in taking our first steps to:

• Reframe the identity of driver rehabilitation as a specialty within targeted professional groups.
• Educate regulators to understand that Certified Driver Rehabilitation Specialists (CDRSs) are the preferred provider for driver evaluation, training, and licensing recommendations.
• Promote the value of high-quality, comprehensive driver rehabilitation services delivered by an ADED credentialed provider to key partners, referral sources, and consumers.
• Enhance the credentialing program to provide pathways of education that develop and recognize levels of competency within the scope of driver rehabilitation.
• Increase ADED membership base to strengthen volunteer and financial infrastructures and ensure regional access to driver rehabilitation services.
• Assure proactive exploration in anticipation of future trends and changes in the industry.

It would take up multiple NewsBrakes to detail each of the many strategies identified, the wide variety of actions taken, and tactics planned, to address each of these broad goals, in the interest of brevity, I will just highlight a few of my personal favorites.

In my original bio, published a year ago, and in person at conferences and events, I reached out to you, and my other fellow ADED members, asking for your feedback as to how ADED can better support and enrich your work. I was advised that some folks were feeling that they would like to have a way to promote specific professional interests within ADED. To that end, the Board is developing a policy for the creation of the Special Interest Groups (SIG) program. This program will be a new member benefit similar in structure to an ADED
President’s Address (Continued)

Chapter. The SIGs will be communities, within ADED, of members with focused areas of interest or practices within the industry. The SIG program will be designed for members to promote a specific professional interest, develop communication, and networking opportunities, and members of specific SIGs would be able to identify concerns and needs directly to ADED leadership. ADED SIGs would also serve as a resource to the association by identifying issues requiring added resources, and carrying out activities and programs addressing the specific needs of the group and advancing our mutual professional interests.

Members also identified a need for better “coordinated outreach, education, and professional promotion.” Individuals willing to do this outreach would like support in their efforts. To this end, the ADED Ambassador Program has been created (see page 18 for all ADED Opportunities). An ADED Ambassador is an active ADED member, committed to promoting the value of high-quality, comprehensive driver rehabilitation services, delivered by ADED credentialed providers, to key partners, referral sources, and consumers, thru active educational outreach. As a member of ADED’s network of public speakers, ADED Ambassadors are committed to increase ADED’s visibility and positively promote the driver rehabilitation profession. Participants are added to a list held by ADED, and utilized when there are external inquiries about locating local subject matter experts to provide talks. Ambassadors also have access to an ever expanding library of exclusive educational materials relating to improved PowerPoint presentations, and other speaker resources.

I have been also been receiving positive feedback from ADED members about the recently started, and ever growing, Micro Volunteer Program. These individuals have each offered up their valuable time throughout the year, and have made a big difference in pursuing ADEDS vision to be an effective and diverse network of professionals, globally recognized as the primary resource and standard-bearer for driver rehabilitation expertise. To those of you who have volunteered their time, thank you! To those of you interested in volunteering, welcome! Please reach out to info@aded.net.

Those are just the tip of the iceberg for all the exciting projects we are addressing, moving forward into 2019. Additional items in the pipeline include an all new Digital Badging Program that will allow members to demonstrate and proudly display their subject specific (multiple categories) learning achievements with peers, potential employers, educational institutions, and others. They will elevate and identify the badge holder as a subject specific specialist. They can also lay the groundwork for acquiring the new ADED SDR (Specialist in Driving Rehabilitation) micro-credential. This micro-credential will verify, validate, and attest that specific skills and competencies have been achieved, and are endorsed by ADED. Full details on this very exciting program are coming in the spring edition of NewsBrake.

Let us not forget the long running whispers and desires expressed by many a member over the years regarding the possibility of a ‘joint’ (or ‘co-located’) ADED/NMEDA conference. A true logistic behemoth, and potentially an industry changing opportunity. Over the past year, behind the scenes, this mythological creature has actually begun to take form and is now a true prospect in the not too distant future. I promise much more detail coming soon on this exciting development!

Lastly, I ask you take a moment to ask yourself, how you too may contribute to the ongoing evolution of ADED. Once you have your answer, go for it!

Marc Samuels, MS, OT, CDRS
ADED President

Research Road

Older Drivers’ Foot Movements

By Johnell Brooks, Clemson University

Research is a team sport! To answer complex questions, a multi-disciplinary team approach is often required. A recent example is a study sponsored by the National Highway Traffic Safety Administration which studied older drivers’ foot movements. The team included ADED members Leah Belle and Nathalie Drouin who conducted the behind-the-wheel and in-clinic evaluations, respectively. This research study used an instrumented vehicle built by Automotive Engineering graduate students and was only possible due to the hard work and dedication of the massive team of 25 individuals including engineers, social scientists, physicians, clinical coordinators, research assistants, etc. 

* * * * * * * * * * * *

This Traffic Tech is shared with permission. The 2-page handout (on pages 8 and 9 of this issue of NewsBrake) is available at https://www.nhtsa.gov/sites/nhtsa.dot.gov/files/traffic_tech/812389-tt-olderdriversfootmovement.pdf and the full research report is available at https://www.nhtsa.gov/sites/nhtsa.dot.gov/files/documents/812431-older-driver-foot-movement.pdf If you have any questions about the study, please email Johnell at jobrook@clemson.edu

(Continued on next page)
Older Drivers’ Foot Movements

Background
A previous NHTSA report, Pedal Application Errors (Lococo, Staplin, Martell & Sifrit, 2012), showed that pedal error crashes were more common among older drivers and among female drivers. However, the study provided limited information about driver characteristics that may play a role in pedal errors such as medical conditions, physical attributes or fit in vehicles.

Objectives
This study explored how older drivers use their accelerator and brake pedals, to identify characteristics that could pose an increased risk of a pedal application error. The study also explored whether driver-vehicle fit was related to these characteristics.

The study collected and analyzed data from older adult drivers to address the following research questions:

1. Is medical status associated with drivers’ foot positions and movements?
2. Is drivers’ sex or anthropometry (e.g., height, foot size and leg length) associated with foot positions and movements?
3. Is drivers’ sex or anthropometry related to driver-vehicle fit?

Method
The foot movement study, which addressed the first two research questions, included the following groups of cognitively normal drivers age 60 and older:

- Normally aging (NA) participants who did not have functional limitations.
- Medical conditions (MC) participants included drivers in two groups:
  - Peripheral neuropathy (PN) participants with limited sensation in their feet, and
  - Orthopedic (OP) participants with a fracture or replacement of the right hip in the 18 months preceding the study.

Table 1 contains the distribution of the 26 participants across medical condition groups and sex.

<table>
<thead>
<tr>
<th>Medical Condition</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>NA</td>
<td>7</td>
<td>11</td>
<td>18</td>
</tr>
<tr>
<td>PN</td>
<td>2</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>OP</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>10</td>
<td>16</td>
<td>26</td>
</tr>
</tbody>
</table>

All participants completed an in-clinic assessment comprised of measures of physical functioning, cognition, perceptual motor abilities, and vision. Following the in-clinic session, participants drove an instrumented vehicle (2011 Chevrolet Malibu) over a 27-mile course that included on-road suburban, urban, and freeway driving. The course also required negotiating a parking garage and outdoor parking lot, both with gated access. The study evaluated driving performance using two methods: data from vehicle instrumentation, and scores from a certified driving rehabilitation specialist (CDRS) who directed participants through the course.

The route included 10 locations where all participants were required to brake, and the study used vehicle instrumentation data to characterize foot behavior in each situation. The CDRS scored behaviors during 18 specified tasks that included 8 on-road and 4 parking maneuvers. Table 2 summarizes the test conditions.

<table>
<thead>
<tr>
<th>Required Braking Locations</th>
<th>CDRS Scored Maneuvers</th>
</tr>
</thead>
<tbody>
<tr>
<td>On-Road</td>
<td>1</td>
</tr>
<tr>
<td>Emergency Stop</td>
<td>1</td>
</tr>
<tr>
<td>Backing</td>
<td>4</td>
</tr>
<tr>
<td>Straight Parking</td>
<td>2</td>
</tr>
<tr>
<td>Gate Access</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>10</td>
</tr>
</tbody>
</table>

The driver-vehicle fit study, which addressed the third research question, included most of the participants from the foot movement study plus additional participants who had incomplete foot-movement data. The 33 participants included 12 females and 21 males. Participants arrived at the study site, parked, and sat in their vehicles with their hands on the steering wheel and their right foot on the brake pedal. A researcher measured each participant’s self-selected position. The participant then got out of the vehicle while the researcher gathered additional measurements of seat position.

While one researcher completed measuring the vehicle, another recorded the participant’s height, upper leg (femur) length, lower leg (tibia) length, foot length, and distance from the knee to the ball of the foot. The researcher used these measures to calculate the “right leg functional reach,” the distance from the hip to the ball of the foot when the foot is at a right angle to the leg.

When the participant returned to the driver’s seat, the researcher demonstrated how to adjust the seat optimally as defined by CarFit guidelines. CarFit states that drivers should be able to use the full range of the pedals without fully extending their leg or stretching...
with their toes (for more information, visit www.car-fit.org). After a researcher recorded the adjusted seat position, the participant returned to the vehicle. The driver then considered the adjustments and, if desired, readjusted the seat to a comfortable position before leaving the site.

Results
In general, medical status did not appear to affect foot positioning or variability in foot movements. Drivers in the MC group applied less pressure on the brake than the NA group during the required on-road braking maneuver at a three-way stop. However, there was no significant difference in maximum brake force by group during the emergency stop. The MC group also looked to the right for a longer duration than the NA group at one of four backing locations.

Sex, however, did appear to affect foot positioning and movement. Females had shorter (i.e., faster) foot transfer time from the accelerator to the brake than males during one straight parking maneuver, and female drivers’ foot positioning on the brake was closer to the lateral center of the brake pedal than male drivers during on-road braking and gate access.

Anthropometric variables also had a statistically significant effect on many of the measures of foot positioning and movement. Table 3 summarizes the results.

Table 3: Anthropometric Variables and Foot Movement

<table>
<thead>
<tr>
<th>Shorter Drivers</th>
<th>Lifting versus pivoting</th>
<th>Faster transfer time</th>
<th>Closer to brake center</th>
<th>More brake coverage</th>
<th>More hover time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shorter Shoe Length</td>
<td>Closer to brake center</td>
<td>Toe points more forward</td>
<td>Less maximum brake force</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shorter Femur</td>
<td>Longer transfer time</td>
<td>Closer to brake center</td>
<td>More brake coverage</td>
<td>More conformance of movement w/ direct path</td>
<td>Toe points more forward</td>
</tr>
<tr>
<td>Shorter Tibia</td>
<td>Lifting versus pivoting</td>
<td>Faster transfer time</td>
<td>More conformance of movement w/ direct path</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Group differences in clinical scores were not reflected in on-road driving performance. Each of the groups averaged high scores on combined on-road tasks. However, the MC participants demonstrated poorer performance in combined parking lot tasks. These differences reflected MC participants’ errors in judging the turning radius when turning left into a parking space, taking multiple attempts to position the vehicle in the parking space, and failing to shift into park at the end of the task.

Driver-vehicle fit analyses showed that drivers whose self-selected seat positions provided a good fit had an average functional leg reach that was about three inches longer than that of drivers who had not adjusted their seats properly. Logistic regression analysis of the relationship of sex, height, and measures of right leg length showed that only functional leg reach was significantly associated with fit. As functional leg reach increased, the expected probability of acceptable fit increased.

Discussion
In-clinic data indicated that NA participants had better sensitivity on the soles of their feet than the MC group, and the NA group scored better on measures of cognition and physical performance that have been associated with driving performance. These factors may help explain why drivers in the MC group performed similarly to the NA group during the on-road evaluation but demonstrated more difficulty in the parking tasks. Drivers with medical conditions, whose cognitive scores were poorer than those in the NA group, may have devoted more attention to the vehicle control tasks necessary for parking as a result of limited lower limb sensation, pain, or poorer cognition.

Males’ and females’ foot movements differed significantly on only 4 measures across the 10 locations. The observed sex differences in foot movement type, transfer time, and foot position on the brake may reflect differences in anthropometry rather than sex. Females were shorter, on average, than males and had shorter tibias, femurs, and smaller feet.

Conclusion
This study showed that older adults with medical conditions performed as well as their healthier peers in on-road driving and were similar to those normally aging in terms of foot positioning and movement. However, they made more errors in negotiating parking tasks. Findings also showed that many older adults, particularly those with a shorter functional reach, may need guidance in adjusting their seats to allow easy access to the pedals.

Reference

Report Access
For a copy of the research report Older Drivers’ Foot Movements (DOT HS 812 431), visit www.nhtsa.gov. Kathy J. Sifrit was the NHTSA Project Manager for this project.

Suggested APA format citation for this document:

TRAFFIC TECH is a publication to disseminate information about traffic safety programs, including evaluations, innovative programs, and new publications. Feel free to copy it as you wish. If you would like to be added to an e-mail list, contact TrafficTech@dot.gov.
Managing Construction Zones
The client/student should be challenged with various types of road conditions. Construction detours may be temporary or long term. If a client’s training does not include driving in construction zones, they will not be adequately prepared to drive through them in the future. The addition of a construction zone completely changes even a route familiar to a person.

Train for early recognition of construction zones by having the patient use commentary driving and through reading critical signage aloud. An inexperienced or cognitively impaired driver might see the flashing lights, orange cones, flagmen, etc., but not know how to respond to them and may drive straight for the obstacle. Even after the obstacle is noticed, there may be a delay in decision making. You must be ready to intervene if necessary.

IT LOOKS SO

Approaching Speed Bumps Or Dips
1) Identify where the speed bump or dip is
2) Slow almost to a stop for a speed bump or significantly for a dip
3) Just before the front wheels contact the bump or dip, release the brake. This minimizes wear and tear on the vehicles’ suspension, brake system, and the driving instructor!
4) Glide over the speed bump or through the dip
5) Be ready to accelerate back to normal speed
6) Identify where the next speed bump or dip is
7) Begin the process again

Orange cones, barricades, fencing, etc. may often block visibility and observation of cross traffic at inter-sections. The client must be taught how to incorporate common decision making techniques into more complex settings.
TECHNIQUE FOR THREE-POINT TURN INSTRUCTION

1. Identify specific space to park
2. Check mirrors for traffic behind
3. Apply turn signal
4. Steer vehicle toward opposite side of lane from the space
5. Slow the vehicle
6. Look for your point-of-entry
7. Sharp turn of steering wheel to the center of the space
8. Visually target near landmark & distant landmark in center of the space
9. Cover the brake
10. Check sides for clearance
11. Straighten wheel to center in the space
12. Visually target & use distant landmark in center
13. Steer toward that landmark
14. Stop within the space

This skill should initially be taught in a secluded, protected location due to the fact that an inexperienced driver will take a significant amount of time at each step. As improvement is made, progress to less secluded settings.

TECHNIQUE FOR ANGLE PARKING

1. Identify specific space to park
2. Check mirrors for traffic behind
3. Right turn signal
4. Steer vehicle toward opposite side of lane from the space
5. Slow the vehicle
6. Look for your point-of-entry
7. Soft turn the steering wheel and cover the brake
8. Visually target near landmark & distant landmark in center of the space
9. Steer toward that mark
10. Straighten the wheels
11. Stop within the space by comparing angle with adjacent vehicles

INSTRUCTION TECHNIQUES FOR PARALLEL PARKING

ENTERING THE SPACE
- On approach, turn right signal on.
- Position the car two (2) feet away from the front cone, parallel to the curb.
- Pull forward one (1) full car length in front of front cone. STOP
- Back straight back until the front cone is even with the rear tire. STOP
- Turn steering wheel all the way to the right and hold it.
- Back up until the car is at a 45° angle from the curb. STOP
- Straighten the wheels. Back straight for 1-2 feet (you may need to eliminate this step when in a van or large SUV). STOP
- Turn the steering wheel all the way to the left and hold it.
- Continue backing into the space without hitting the rear cone or curb. STOP
- Straighten the wheels to center the car in the space. Pull forward without hitting the front cone. STOP. At this point, the car should be 6”-18” inches away from the curb centered in the parking space, with the wheels straight. (*See note below*)

EXITING THE SPACE
- Reverse directly back only as far as necessary without hitting the rear cone.
- When the front bumper will clear the front cone, STOP. Put the car in drive. Turn the steering wheel all the way to the left and hold it.
- Turn left signal on. Check mirrors and blind spot.
- When the lane is clear, exit the space and accelerate to appropriate speed.

These measurements are based on the Texas Department of Public Safety criteria. Check your Licensing Agency to establish the proper distances for correct training.

It is recommended that this handbook be provided to the client at least one to two sessions before they will be attempting parallel parking. That will give them an opportunity to review the steps. You can provide commentary driving by embellishing the...
Volunteer Spotlight

Carol Wheatley, OTR/L, CDRS
Medstar Good Samaritan Hospital

What were your first impressions of ADED?
My first ADED conference was in Crystal City, Arlington, VA in 1997. I was struck by the welcoming and supportive atmosphere of the conference, and the friendliness of the attendees.

How long and/or in what capacity been a volunteer for ADED?
I was Secretary to the ADED Board from 2003-2004. Unfortunately, I type via hunt and peck, so it was a long 2 years.

What other organizations have you volunteered for?
AOTA, I served on the Pathways Project.

Editor’s Note: Carol was also on the following committees: 2005 Professional Development, 2007 Board Development (now Leadership Development), 2016 Government Relations Ad Hoc.

Other than work and family, what other group/people know you best?
I am fortunate to have some great friends.

What is your favorite holiday tradition?
Baking cookies

What is your New Year’s resolution?
Bake fewer cookies

Tell us about the best vacation you ever had, why, and where did you go?
Canadian Rockies, I loved hiking the mountains and the breath-taking scenery.

Favorite quote:
“From what we get, we can make a living; what we give, however, makes a life.” – Arthur Ashe

Name a song/musician that you like to listen to in your car:
Mary Fahl – “Going Home”

What is your favorite part of your job?
Training people to drive with adaptive equipment, and when they pass the MVA Driving Skills Test.

What do you wish your car could do (think futuristic)?
Prevent crashes

Larry Bowen, BSc., CDRS
Larry Bowen Driver Rehab Inc., British Columbia, Canada

What is something you appreciate or gain from being an ADED volunteer?
It is a good question. This has caused me to pause and reflect on why I have volunteered my time and energy. Over the years I have volunteered for a number of groups, associations and organizations: Horseback riding for disabled, Disabled Skiers Association (Examiner of Instructors), Archery for disabled, G.F. Strong Social club, ADED, Luke 15 House (Transition house for men with alcohol and drug issues) and Lay Director Cursillo. I have a passion for helping people with a disability be the best they can be. I am proud of being part of the ADED family and willing to put my time and energy to help the Association stay the course being true to its mission.

What makes ADED great?
These words stand out: honesty, integrity, supportive, friendship, sense of family, people first, bringing out the best of each member, one collective goal, willingness to help one another, having fun, want to be there, sense of purpose.

What were your first impressions of ADED?
I have been involved for 30 years (since 1988). My first impressions were friendly, cooperative, one objective, multidiscipline, interested, professional, fun group, and personable.

How long and/or in what capacity have you been a volunteer for ADED?
Secretary ADED 1994
President-elect of ADED 1995
President of ADED 1996
Past President ADED 1997
Chairperson of the Finance Committee 1998

Introduced Worship Service at the 2000 Conference in San Jose California.

Anything else you’d like us to know about you?
I am an avid fly fisherman and tie my own flies.
The board met in Atlanta, Georgia for the annual orientation, transition, and planning meeting. Work completed during this meeting included: approval of the 2019 operating budget, updating several policies & procedures, review of work to date, and executive director annual review. Due to the immense amount of progress under the current strategic plan, the board has taken steps to update the plan to include new objectives and strategies, guiding the organization into 2020.

The board has a clear vision for the future of the association and has set a series of objectives to ensure success and growth.

Four new board members, Beth Rolland (2019 President-elect), Staci Frazier (2019 Treasurer), Tim Brant (2019 Member at Large), and Jannette Conrad (2019 Corporate Board Representative), completed a full day of board orientation with Marc Samuels (2019 President), Jenny Nordine (2019 Past-President), and Liz Green, Executive Director.

Sincere appreciation goes to those outgoing board members (Dan Allison, Mary Beth Meyer, Beth Gibson, Gina Lewis) who completed their leadership duties, but are not far away from service. These key leaders of the industry have spent innumerable time and energy in making ADED an association of worth and moving forward. ADED appreciates your service.
Meet Your Board Members

Marc Samuels, President

Hello. I’m a father, husband, friend, Occupational Therapist, CDRS, and now ADED president. One year ago, you elected me to the ADED board of directors as president-elect. Last year when I was asked to write a bio for the NewsBrake, I took that opportunity to re-introduce myself to you and to reach out for your input as to what you believe ADEDs priorities should be moving forward. Since that time, other board members and myself, have heard from a great many of you.

Based on that feedback, the new, updated ADED strategic plan was created. Using this plan as our guide, we have been meticulously laying the groundwork for a great many new and innovative ADED membership benefits. ADED has begun building new industry partnerships. We have been facilitating greater community and professional awareness around driver rehabilitation. Additionally, we are continuing to cement ADED’s place as the driver rehabilitation authority, through the creation and distribution of Best Practice Guidelines for the Delivery of Driver Rehabilitation Services, ADEDs Code of Ethics, and our joint venture with NMEDA: Recommended Practices for Driver Rehabilitation & Vehicle Modifications; Guidelines for Vocational Rehabilitation.

I am excited to be taking a leadership role in these continued efforts and look forward to hearing more from each and every one of you in 2019. We are well situated to keep up this incredible momentum and I look forward to representing you and our industry moving forward.

Jenny Nordine, Past President

As I transition to my role as Past President for 2019, I look forward to supporting Marc as ADED President and ensuring that the momentum felt by the ADED board and membership continues. As you know, we have an aggressive strategic plan for growth and programming. This year I will continue to oversee the badging and micro-credentialing program and its evolution as a pathway to certification of our members. I am excited to be involved with the Publications Committee as the board liaison to ensure our membership communication is helpful and educational.

I have been in private practice since 2001 and a CDRS since 2002. Our practice has grown to include the states of Arizona and New Mexico, including four full-time CDRS’s, two occupational therapy practitioners working toward certification, plus support staff. Private practice has given me a rare experience as an occupational therapist to practice in a unique setting as well as learn to manage a business.

Prior to joining the ADED board, I served ADED as Education Committee Chair beginning in 2010 as well as on the NMEDA CAMS-HP committee in 2011. Additional board experience includes the Arizona Brain Injury Board, and the Arizona State Rehabilitation Committee.

I look forward to continuing my service to you and our organization. Please never hesitate to contact me at my office or via email.

Beth Rolland, President Elect

What a great time to be back on the ADED Board! The organization has moved so far forward in the handful of years since I was a Member at Large. It is my privilege to take a seat at this table and contribute to continuing momentum.

I became a CDRS in 2000, running a program at Kesler in Saddlebrook, NJ for 16 years. I soon became involved at the state level in promoting our profession, sitting on committees with DMV and with Older Driver Initiatives, as well as presented widely at in-services, conferences, and support groups and lecturing yearly at Seton Hall University, Columbia University, and Kean University about the specialty of driving rehabilitation. I have served ADED on the Certification, Professional Development and Research Committees, as well as two terms as Member at Large on the Board. My husband’s job brought us to Syracuse, NY in 2016, where I am working on starting a program at SUNY Upstate Medical Center.

I have continued my advocacy for driving rehab in NY State, lecturing regularly at LaMoyne College and at support groups and in-services. My focus during this term is to strengthen the evidence to support our practice in order to promote awareness of the CDRS credential among key stakeholders at DMV, Vocational Rehabilitation, referrers, and payers. I urge all of you to consider becoming involved in research to advance this goal. We have a terrific Research Committee ready and willing to support you.
Meet Your Board Members

Leah Belle
Member at Large

I have been working in the field of driver rehabilitation since 1998 and have been a CDRS since 2004. I work in a rehab hospital in Greenville, SC with two other CDRSs and serve clients of all types and service needs up to moderate tech level. I am very grateful for the friendships and mentorships I have gained through my membership of ADED.

The growth I have observed of our association is reflected in the professionalism and dedication to this field I see in its members. I am proud to serve on the Board for such a high-quality association.

One of my duties as Member at Large for 2019 will be to continue as liaison for the ADED Chapters. In addition I will be the liaison for the new Special Interest Groups that we look forward to adding as a benefit to our members. I look forward to increasing the opportunities for all members, new and old, for networking and growth. I would love to hear your thoughts about what is working well for you as a member of ADED and welcome any feedback on how we can improve your experience as an ADED member. Feel free to send me an email at lbelle@ghs.org or you can also send an email to the member liaison email at memberliaison@driver-ed.org.

Cassandra Johnson
Treasurer

Greeting! I am Cassandra Johnson, your ADED Treasurer. I have been in the driver rehabilitation industry for 8 years. The more I learn, the more I realize I don’t yet know! I work for Strow-matt Rehabilitation Services, a private practice program based in Houston, TX. You’ll usually find me in the Dallas-Fort Worth metroplex, but 2018 has been one of those years that required more travel, to provide driver rehabilitation services to our clients.

I am originally from New Mexico and graduated from New Mexico State University. I relocated to Texas in 2006 and I have no intention of moving. My boot heels are firmly planted in God’s country!

I am so grateful for a welcoming ADED community that continues to provide encouragement, support, and a priceless wealth of knowledge. In 2015, I became a CDRS. I have served as a mentor and also on the Scholarship Committee. It is my goal to participate with my fellow Board of Directors members to provide solid leadership that will keep ADED at the forefront of our industry as a source of forward-thinking education.

As your Treasurer, my focus is to accurately track and report financial activities to the Board and cohesively work to ensure the long-term financial security of our ADED organization.

Staci Frazier
Secretary

I am honored and excited to be a part of the ADED Board of Directors as Secretary. I previously was on the board as the President, with my Past President term ending in 2008. I was impressed at the transition meeting by the progress ADED has made as an organization and am looking forward to working with the executive office and other board members.

I am an occupational therapist, CDI and CDRS, with 25 years of experience in a wide variety of occupational therapy environments. I work for a hospital-based program called Drive-Ability in Exeter, New Hampshire.

In 2000, when I became a CDRS, ADED became an important part of my professional and personal life. Being a part of organization at both the chapter and national level helped increase my skills as a CDRS and the growth and development of my program. You may recognize my name or face from my terms as the Publication Chairperson and NewsBrake Editor.

I want to give special thanks to Beth Gibson for her mentorship in learning the roles and responsibilities of Secretary. My role on the board has a clear description of keeping and organizing the minutes for the board meetings. Along with this I will continue this year to be active on the Publications Committee, as an ADED ambassador, and a part of the ADED Speaker’s Bureau.

Tim Brant
Member at Large

I would like to first thank the ADED membership for electing me to the board! It’s an exciting opportunity that I do not take lightly. As the Member At Large, my responsibility this year is to manage the Mentor Program. A big part of this is to pair mentors with new attendees (VIPs) at the annual conference. I will also be available to provide mentorship and guidance for any members.

A little bit about myself – I grew up on a dairy farm and went to high school in Shanksville, PA. I graduated from Indiana University of Pennsylvania in 1992 with an education degree and minor in traffic safety. I was hired as a driver rehab instructor at the Hiram G. Andrews Center (HGAC) in Johnstown, PA the same year. HGAC is owned and operated by PA Vocational Rehabilitation, so I got first-hand experience in how voc rehab operates. While I was there, I started a high-tech van program.

In 2003 I took the big leap into private practice and started Brant’s Driving School. From small beginnings, we have been blessed with steady growth. With my wife, Annie, as my office manager, we now have a team of 24 employees. Our customer base is the entire Mid-Atlantic region. We have a full range of vehicles including sedans, low-tech and high-tech vans, and a full-size truck. Every day is an opportunity to help someone new!
Meet Your Board Members

Cassy Bell Churchill
Mobility Dealer Representative

I am Cassy (Bell) Churchill and I have the pleasure of serving a second term as the Mobility Dealer Representative for the ADED Board. I started working in this industry as a Regional Sales Representative for Freedom Motors, and then eventually Viewpoint Mobility. In this position, I was responsible for the sale of wheelchair accessible conversion packages to mobility dealers in the Midwest region. In 2004, I became Store Manager M.C. Mobility Systems in the Cincinnati. I went from a Bell to a Churchill in 2011 after marrying my husband Nathan and then spent two years with Superior Van and Mobility in Lexington, KY. I developed a great love and appreciation for the driver evaluation field during my time at Superior. In July 2013, we moved back to Cincinnati and I returned to M.C. Mobility Systems. My most challenging and rewarding job started over 2 years ago with the birth of our daughter, Skai. Our love for her and the desire to be closer to family made a move to Michigan happen in 2018 where I am now fortunate to work in the industry that I love, as Sales Manager for Clock Mobility.

I remain active with the National Mobility Equipment Dealers Association, participating on the Education and Training Committee and Dealer Marketing sub-committee. I am thrilled to be part of an industry that truly cares for their clients and hope to make a positive impact during my time on the ADED Board.

Jannette Conrad
Corporate Member Representative

I am excited to be joining the ADED family serving as the Corporate Member Representative on your Board of Directors.

Over the last 20 years, as part of the VMI team, I have had the honor of watching the mobility industry change and evolve. As one of the leading manufacturers of wheelchair accessible vehicles and lifts, VMI is dedicated to leading that evolution with an unwavering commitment to “Never forget the challenges faced by our customers,” as stated in our team’s Mission, Vision, and Values.

Likewise, my role with VMI has evolved along with it. I began my journey in inside sales and customer service for our mobility dealers and inspiring individuals and families using our products. Over the years, I’ve worked directly with the leading OEM automotive manufacturers, visited hundreds of mobility dealers across the country, served on NMEDAs Training and Education Committee, and helped to create a team of veterans working together to create programs to support their brothers and sisters, Veterans helping Veterans.

Finally, I am a certified Lean Six Sigma Blackbelt which specializes in helping organizations and teams operate as productively and efficiently as possible. My goal is to learn from each of you how we as manufacturers can better support you, and I hope to use my experience to support ADED through the ongoing evolution that shows little signs of slowing down.
The National Organization for Vehicle Accessibility (NOVA) (formerly The Ralph Braun Foundation) believes that every individual has the right to accessible transportation. NOVA’s mission is to assist those with mobility needs through education, information, and product acquisition.

NOVA is a nonprofit organization serving consumers of all ages throughout the Continental US and Canada. Our mobility assistance grant program operates on quarterly funding cycles with upcoming dates listed on our website www.novafunding.org. During each funding cycle, grants are awarded to eligible individuals for up to 25% of the cost of the mobility transportation equipment with a maximum amount of $5,000. Eligible products include those from any mobility equipment manufacturer that is in good standing with NMEDA and sold by a NMEDA certified mobility dealer. This program is directed to people who have secured the majority of the money needed to complete the project and just need some additional help to bridge the funding gap and reach their goal.

Every Grant is a Dream Come True
Here’s a quick look at just one of the 21 lives we have touched in 2018

Brandon

31-year-old Brandon sustained a quadriplegic spinal cord injury in 2002, and following numerous surgeries and rehabilitation visits, he has been able to live independently with strong family support and visits. He recently completed training for the use of hand controls with a CDRS, but the final step to regaining his independence was to purchase the driving equipment which would give him the ability to drive himself to medical appointments and other community outings. With the generous assistance of our friends at Sure Grip/Howell Ventures and a grant from NOVA to assist with the remaining balance, Brandon was able to drive himself home in his own van without waiting for a ride!

“I would like to thank NOVA for their help in making one of my dreams come true of finally driving my own van. It is so nice to be able to just get in my van and go. It gives me so much more independence and freedom. I don’t have to rely on people to help me; I can do more on my own now. Thanks again.” – Brandon

You can read these stories and many more on the Success Stories page of our website.

Your Support Can Change a Life

NOVA is a 501(c)3 public charity which relies solely on the generous donations of individuals and corporations to make our mobility assistance grant program successful. Help us continue to make mobility dreams come true by making a contribution to NOVA. Giving is easy! Visit the Give page on our website to learn how you can help. No amount is too small…every dollar makes a difference in the lives of those who need it most!

Contact: www.novafunding.org
Autonomous Vehicles and Medically At-Risk-Driversthrough the Lifespan: Role, Function and Future Directives for the Driver Rehabilitation Specialist

Presenters: Sherrilene Classen, PhD, MPH, OTR/L, FAOT, FGSA; Mary Jeghers, MSOT, OTR/L, Shabnam Medhizadah, MSc, BSc; Sandra Winter, PhD, OTR/L, and Luther King, DrOT, OTR/L, CDI, DRS

Correction to conference speakers listing in Fall Issue.
Integrating Smartphrases into Documentation System to Prompt Driving Considerations & Referrals by Interdisciplinary Team

Submitted by Sylvia Canturk, MS, OTR/L, DRS
scanturk@valleyhealthlink.com

Occupational and physical therapists are well situated in the rehabilitation process to address driving with clients of potential concern. Unfortunately, driving and community mobility can be overlooked during this rehabilitation process as the focus can be centered on the more basic needs of the client. My experience has allowed me to work in multiple locations to include driver rehabilitation as part of acute care. Being a driver rehabilitation specialist, I found myself often being concerned when I saw conditions and cases not being addressed by my other team members. In an attempt to increase the attention of the care team, I created a tool using smartphrases to help address driving as appropriate with clients. Winchester Medical Center uses a software program called “EPIC” to chart all documentation. I developed a library of smartphrases to help identify neurological conditions that specifically impact driving. These smartphrases may be used by all the system’s practitioners. They prompt the physicians and discharge planning team to consider potential impact of a patient’s medical conditions on his/her ability to drive. The smartphrases also prompt that the physicians to address ‘clearance to drive’ with their patients. In addition, physicians, physicians’ assistants, and nurse practitioners can also then decide to recommend driver rehabilitation as necessary.

Before these smartphrases were utilized by the therapy team, I met with our neurologist and case managers to ensure they would be onboard and accepting of these smartphrases in our documentation. The smartphrases were well received and has been implemented as an easy to use tool for our therapists. Therapists are now able to better identify and notate conditions that can have a direct impact on driving. These smartphrases are specific to the clinical setting and we have asked that our therapists utilize them when they have concerns. In addition, the system allows therapists to add customized notes along with the smartphrases if needed.

Using smartphrases has improved our team’s awareness for driving and increased the frequency of address patient driving goals earlier in the disease process. There has been an increase number of referrals of appropriate clients for comprehensive driving evaluations, therapists have been handing out more driver rehabilitation brochures, and there is an overall increased awareness of driving rehabilitation by the case managers, physicians and patients. With the success of the neurological smartphrases, we now plan to develop smartphrases for additional conditions such as right lower extremity amputations.

Below are the current smartphrases:

<table>
<thead>
<tr>
<th>Neurological Consideration</th>
<th>Smartphrase</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dementia</td>
<td>.DRIVEDEMENTIA</td>
<td>Per chart review the patient has dementia and continues to drive. Would benefit from periodic review with physician regarding *** ability to safely continue to operate a motor vehicle.</td>
</tr>
<tr>
<td>Right Foot Drop</td>
<td>.DRIVEFOOTDROP</td>
<td>The patient has right foot drop as a result of ***. May benefit from adaptive equipment in order to safely continue driving.</td>
</tr>
<tr>
<td>Visual Field Cut</td>
<td>.DRIVEVISION</td>
<td>The patient presents with a visual field cut. Recommend the patient doesn’t return to driving until cleared by a physician.</td>
</tr>
<tr>
<td>Stroke</td>
<td>.DRIVESTROKE</td>
<td>The patient presents with at a stroke. Recommend the patient doesn’t return to driving until cleared by a physician.</td>
</tr>
<tr>
<td>Seizure</td>
<td>.DRIVESEIZURE</td>
<td>The patient presents with a seizure. Per DMV requirements the patient needs to be six months seizure free before returning to driving. Recommend the patient doesn’t return to driving until cleared by a physician.</td>
</tr>
</tbody>
</table>
SEATING SOLUTIONS
WE’VE GOT THIS
<table>
<thead>
<tr>
<th>Chapter Office</th>
<th>Name</th>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>COLORADO</td>
<td>Barry Doyle, MS, OTR/L, CDRS</td>
<td><a href="mailto:bdoyle@craighospital.org">bdoyle@craighospital.org</a></td>
</tr>
<tr>
<td></td>
<td>Denise Kaplan, OTR/L, CDRS</td>
<td><a href="mailto:lovetherockymountains@msn.com">lovetherockymountains@msn.com</a></td>
</tr>
<tr>
<td>FLORIDA</td>
<td>Bryan Garrison, RKT, CDRS</td>
<td><a href="mailto:bryan.garrison@va.gov">bryan.garrison@va.gov</a></td>
</tr>
<tr>
<td>Vice-President</td>
<td>Lori D. Grismore, OTR/L</td>
<td><a href="mailto:lgrismor@health.usf.edu">lgrismor@health.usf.edu</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>André Johnson, COTA, BHS</td>
<td><a href="mailto:andre.c.johnson@gmail.com">andre.c.johnson@gmail.com</a></td>
</tr>
<tr>
<td>GEORGIA/SOUTH CAROLINA</td>
<td>Brigitte King, OTR/L, CDRS, CDI</td>
<td><a href="mailto:bking@ghs.org">bking@ghs.org</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>Rebecca Day-Lewis, OTR/L, CDRS</td>
<td><a href="mailto:Rebecca.day-lewis@choa.org">Rebecca.day-lewis@choa.org</a></td>
</tr>
<tr>
<td>KENTUCKY/TENNESSEE/WEST VIRGINIA</td>
<td>Michele Coffey, OTR/L, CDRS</td>
<td><a href="mailto:mwcoffey@yahoo.com">mwcoffey@yahoo.com</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>Suzanne Farnan-Maddux, OTR/L, CDRS</td>
<td><a href="mailto:Suzannefarnan-maddux@kentuckyonehealth.org">Suzannefarnan-maddux@kentuckyonehealth.org</a></td>
</tr>
<tr>
<td>IOWA/NEBRASKA <strong>new chapter starting 2019</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>President</td>
<td>ELECTION RESULTS PUBLISHED SOON!</td>
<td></td>
</tr>
<tr>
<td>Vice-President</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secretary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MIDWEST (IN, OH, MN, WI, MI, IL)</td>
<td>Violet Potocki, OTR/L, CDRS</td>
<td><a href="mailto:vpotocki@northshore.org">vpotocki@northshore.org</a></td>
</tr>
<tr>
<td>Vice-President</td>
<td>Clayton Jewell, OTR/L, CDRS</td>
<td><a href="mailto:clayton.jewell@maryfreebed.com">clayton.jewell@maryfreebed.com</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>Meredith Sweeney, OTR/L, CDRS</td>
<td><a href="mailto:meredith.sweeney@osumc.edu">meredith.sweeney@osumc.edu</a></td>
</tr>
<tr>
<td>NORTH CAROLINA/VIRGINIA</td>
<td>Laura Juel, MS, OTR/L, CDRS, ATP</td>
<td><a href="mailto:laura.juel@duke.edu">laura.juel@duke.edu</a></td>
</tr>
<tr>
<td>Vice-President</td>
<td>Jan Stephanides, MS, OTR/L, CDRS, CDI</td>
<td><a href="mailto:stephanidesj@gmail.com">stephanidesj@gmail.com</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>Mary Breister, OTR, CDRS</td>
<td><a href="mailto:mary.breister@wwrc.virginia.gov">mary.breister@wwrc.virginia.gov</a></td>
</tr>
<tr>
<td>NORTHEAST (CT, MA, ME, NB, NH, NJ, NL, NS, NY, PA, RI, VT)</td>
<td>Amanda Plourde, COTA/L, CDI, CDRS</td>
<td><a href="mailto:aplourde@northeastrehab.com">aplourde@northeastrehab.com</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>Lori Benner, MPA, OTR/L, CDRS</td>
<td><a href="mailto:lbenner@hmc.psu.edu">lbenner@hmc.psu.edu</a></td>
</tr>
<tr>
<td>NORTHWEST (BC, OR, WA)</td>
<td>Jeff Lango, OTR/L, CDRS</td>
<td><a href="mailto:alpinerehab@gmail.com">alpinerehab@gmail.com</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>Melissa Patopea, OT, CDRS</td>
<td><a href="mailto:mearl@u.washington.edu">mearl@u.washington.edu</a></td>
</tr>
<tr>
<td>ONTARIO</td>
<td>Tamalea Stone, OT</td>
<td><a href="mailto:Tstone.ot@hotmail.com">Tstone.ot@hotmail.com</a></td>
</tr>
<tr>
<td>Vice-President</td>
<td>Tim Danter, CDI</td>
<td><a href="mailto:timdanter@gmail.com">timdanter@gmail.com</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>Nellemarie Hyde, OT, CDRS</td>
<td><a href="mailto:nhyde@saintelizabeth.com">nhyde@saintelizabeth.com</a></td>
</tr>
<tr>
<td>WESTERN REGION (AZ, CA, NV)</td>
<td>Lula Capuchino, OTR/L, CDRS</td>
<td><a href="mailto:lula@capuchinotherapy.com">lula@capuchinotherapy.com</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>Ana Verran, OTR/L, CDRS</td>
<td><a href="mailto:averran@aol.com">averran@aol.com</a></td>
</tr>
</tbody>
</table>

**Updated 01.22.19**
Chapter News . . .

Kentucky, Tennessee, & West Virginia Chapter

The October chapter meeting was held in Lexington, KY at Superior Van and Mobility. Guest speakers included Giovanni Suarez from VMI and James Morrison with Veigel North America. Superior Van and Mobility provided breakfast and VMI provided lunch. Attendees received 4 contact hours for their attendance to the presentations. The next chapter meeting will be in April 2019. Thank you to both speakers and to Superior Van and Mobility.

New Products

KNOW DRAIN

Tired of dead batteries?

KNOW DRAIN allows any selected equipment to be disconnected with a magnetic switch.

KNOW DRAIN will disconnect selected equipment automatically if the battery voltage drops below a safe reserve starting voltage.

Crescent Industries, Inc.
191 Washington St., Auburn, Maine 04210
Tel (207) 777-3500 Fax (207) 777-3522
www.crescentindustries.com

The Impossible Takes A Little Longer

New Products

ODYSSEY HVAC

CHRYSLER HVAC
Northeast Chapter

Northeast Chapter members enjoyed the networking event during the annual ADED conference in Richmond. Although this was not a formal chapter meeting, networking was focused on the diversity of state rulings that impact our practice. We had a full house which was great to see.

A membership meeting was held during the New England Traffic Safety Educators (NETSEA) conference in October. Amanda Plourde, our chapter president is an active member of NETSEA. Her continued presence and active leadership (Vice President) in NETSEA activities provides a forum for us to attract new members for ADED and provides us an annual education meeting that largely focuses on traffic safety. Bruce Renfro and Kristen Keilty also represent ADED on the NETSEA Board.

This conference is especially valuable for driver rehabilitation specialists with healthcare backgrounds because it focuses heavily on traffic safety. The conference presents a good opportunity for ADED members to obtain continuing education credits and more importantly, knowledge. There were two ADED approved pre-conference workshops. In addition, several sessions included information that is relevant to those who work with individuals who have functional limitations.

The participants in the chapter meeting discussed diversity of medical review boards throughout the Northeast and the varying policies regarding our field. The opportunity to share was so valuable, consideration is being given to more teleconferencing for the group.

Colorado Chapter

The Colorado Chapter of ADED meets quarterly, with most meetings including presentations and seminars for contact hours. This year our topics included: a presentation from a Colorado State Patrol (CSP) on Elderly, Disabled and Impaired Drivers; a presentation by a local hospital-based pharmacist on Medication, Marijuana and Driving; and a presentation by a Colorado ADED CDRS addressing Sleep and the Impacts on Driving. Case studies were also presented in these group forums, as a way to share knowledge on equipment options, patient diagnoses, vehicle options, and treatment practices as well as to problem solve difficult cases together.

In 2018, many of the Colorado ADED members were also influential in working on a DMV project to streamline the Colorado State Rehab Permit process and update the medical reporting forms so that they are clear, concise, and useful in reporting accurate information from CDRS/physician/optician to the DMV. That form is in the process of being reviewed within the state governance and should be in the final stages of approval by 2019.

We are still working on getting the CDRS contact information as well as the State Statutes and driver’s responsibility regarding driving after a medical change (in a self-reporting state) to be visible to the general public on the DMV’s website.

The Colorado ADED Chapter’s 2019 meeting schedule has been approved for four meetings throughout the year. Several members of the chapter are also planning on attending the annual conference in Kentucky.
Courses available:
- AutoCoach 2.0: Making AutoCoach Accessible: A New Mobile App Designed by Certified Driver Rehabilitation Specialists for Parents of Teens with Cognitive and Physical Disabilities
- Driving Readiness in Autism Spectrum Disorder: The Role of Executive Function & Intellectual Disability
- Medical cannabis and functional driving assessments: How and when to assess on-road?
- Optimizing the Value of Driving Simulators in Rehabilitation Practice by Increasing Behavioral Validity
- Preparing for the Impact of Highly Automated Vehicles
- Self-Driving Cars: The Impact on People with Disabilities

ADED members are eligible for reduced registration fees

Complimentary members' only webinars:
- Funding Sources for your Clients
- Unlocking the Benefits of Autonomous Vehicles

eLearning.aded.net

The premier resource for online driver rehabilitation education
Presentation Toolkit Now Available for Driving and Community Mobility: Occupational Therapy Practitioner Roles in Driver Rehabilitation Programs Presentation (a.k.a. DRP Toolkit)

Have you been asked to present to occupational therapy students or other practitioners about your role as a driver rehabilitation specialist? Have you been interested in sharing more, but haven’t had the time to organize a presentation? If so, we have your answer! This article describes the DRP Speaker Toolkit. Read on to learn more about what the toolkit includes, presenter qualifications, and how to become a presenter.

Background: First, let’s start with some background about the project. With funding from the National Highway Traffic Safety Administration (NHTSA), the American Occupational Therapy Association (AOTA) is expanding Occupational Therapist Involvement in Older Driver Safety. The intent of this funded work is to build service pathways in driving and community mobility by occupational therapists.

One component of this work, was dedicated funding to ADED to identify, design, and implement a project that would address an identified gap. ADED identified consistent and accurate occupational therapy student and practitioner education as a priority. ADED gathered a team of driver rehabilitation experts to develop this speaker toolkit. AOTA and ADED’s shared mission is expanding Occupational Therapy Practitioner Roles in Driver Rehabilitation. The intent of this work is to increase the capacity of professionals to address the driving and transportation challenges facing the aging population.

The result of this collaboration has been the DRP Speaker Toolkit.

What’s in the DRP Speaker Toolkit?

The DRP Speaker Toolkit includes PowerPoint® presentations, with speaker notes. Included are two handouts: a state-specific worksheet for legal guidelines and the Spectrum of Driver Services document. Each slide of the presentation has detailed speaker notes, making it easy to prepare and present the material. In addition, in preparation for a state or facility conference, the objectives, abstract, and synopsis are written and ready for potential submission.

What does the DRP Presentation cover?

This presentation highlights occupational therapy’s role as the expert in the instrumental activity of daily living driving and community mobility and how to collaborate with the driver rehabilitation specialist. Attendees gain specific knowledge on resources, strategies for driving conversations, and referral strategies to driving rehabilitation.

Presentation Topics:

One of the cool things about this presentation is that it was created to include 10 different modules. The module topics are listed below. The benefit of this method is it allows the presentation to be easily tailored to meet the needs of the audience. When you complete the presenter application, you will identify the presentation focus, length, and topics of interest. From there, you will be provided with a presentation that includes the appropriate modules.

Module Selection:

Based on your audience, length of presentation, and goal, this presentation may be modified. The 10 modules for this presentation include:

1. Introduction
2. Driving as an IADL for all occupational therapy practitioners
3. Spectrum of Driver Services: Document value and use
4. The collaborative role between the occupational therapy practitioner and driver rehabilitation specialist
5. DRS Referral from the occupational therapy practitioner
6. State specific information in order to understand legal guidelines
7. Clinicians Guide for Assessing and Counseling Older Drivers
8. Review of typical mobility devices
9. NHTSA Highway Safety Guideline 13 on Older Drivers & the importance of advocacy for affecting policy decisions (optional)
10. ACOTE (optional) – to explain why and how driving rehabilitation is part of educational standards for occupational therapy practitioners; useful for clinicians to understand how education addresses this area of practice.

Presenter Qualifications:

The primary presenter must be an occupational therapy practitioner with experience in the field of driver rehabilitation or have a co-presenter who is a driver rehabilitation specialist or certified driver rehabilitation specialist. Both the fields of occupational therapy and driver rehabilitation must be represented.

Benefits for the presenters include:

• The potential for continuing education credits for licensing, certification and credentials
• ADED contact hours (please refer to ADED Policy 403 for credit limits)
• NBCOT professional development units
• State licensing continuing education (as per state)
• Visibility and awareness of your driving program within the community

Application:

Visit https://aded.site-ym.com/page/350 to complete the presenter application!

Article submitted by DCM Curriculum Jenny Nordine (Chair), Team: Terri Cassidy, Anne Dickerson, Elin Schold-Davis, Susie Touchinsky

NewsBrake Winter 2019
An ADED Ambassador is an active ADED member committed to promoting the value of high-quality, comprehensive driver rehabilitation services delivered by ADED credentialed providers to key partners, referral sources, and consumers through active educational outreach. As a member of ADED’s network of public speakers they are committed to increase ADED’s visibility and positively promote the driver rehabilitation profession.

Why has ADED launched this program?
To provide ADED members with opportunities and resources to develop their skills in promoting driving rehabilitation services through speaking engagements. Our intent is promote the value of comprehensive driver rehabilitation services delivered by ADED providers to key partners, referral sources and consumers.

Why should I become an ADED Ambassador?
- To encourages professional development and growth
- To motivate people to action
- To increases awareness of the profession
- To share my passion, knowledge, and experiences
- To help others

For more information visit: www.ADED.net/ambassador
The Occupational Therapy Doctoral Degree Mandate: Why Driver Rehabilitation Specialists Might Care

Mary Shotwell, PhD, OT/L, FAOTA, ADED Research Committee

Since many ADED members are occupational therapy practitioners, the research committee is taking this opportunity to discuss plans regarding advancing occupational therapy to the entry level doctoral degree, and occupational assistant degree to a bachelor’s degree. These changes may mean a potential for an increase in research opportunities between the DRS and occupational therapy practitioner students.

For the past several years, the field of occupational therapy has been undergoing much debate over increasing the entry level requirement for both occupational therapists and occupational therapy assistants. While discussions and debates continue, regardless of the eventual requirement for entry level, many of the current occupational therapy programs offer a clinical doctorate degree. As part of this doctoral level education in occupational therapy, students engage in doctoral experiential component.

The project and the capstone experience are meant to advance the profession of occupational therapy by exploring areas such as: research, emerging practice, program development, policy development, leadership, and advocacy. These capstone projects/experiences may be beneficial to driving rehabilitation by providing opportunities and/or potential synergy for advancing the driver rehabilitation profession.

As part of their mentored capstone project/experience, students must complete a rigorous project where students: explore the literature, present a proposal, defend the proposal, implement a project, evaluate the results of their project, and disseminate findings. The capstone experience requires that doctoral students engage in 560 hours of mentored activities that may be a combination of activities that are pre-negotiated with the university and the mentor. While many of these projects may be a typical research project, many of the projects may be in the area of program development and or engaging in leadership and advocacy activities. To that end, the research committee wants to encourage you to communicate with the committee members to discuss possibilities for how you might collaborate with a doctoral student for their capstone projects/experiences. Since there are so many programs in process of converting to the doctoral level, many universities are looking for opportunities for capstone projects/experiences. If you have more questions or want to discuss potential ideas, contact the research committee or your nearest occupational therapy doctoral program to discuss ideas.


Powerful tools for driver assessment and rehabilitation

Driving Rehabilitation Specialists use DriveSafety clinical simulators and SimClinic Software to evaluate and rehabilitate drivers who have sustained functional loss due to accidents, trauma, age or other medical conditions. DriveSafety simulators provide therapists with insight into a patient's risk behind the wheel in the safety of the clinic without exposing either the client or the clinician to the real dangers of the road.

Learn how DriveSafety and SimClinic software can help you improve patient outcomes. Visit drivesafety.com
In 2018, I celebrated my career silver jubilee. Working for professional membership associations and specifically my role in professional education has and continues to keep me fulfilled and challenged. My journey has been peppered every step of the way with my own professional development, education, and credentialing. Fortunately, this has provided a very deep understanding of the plight professionals have related to education in their own careers. This has propelled me to keep current with cutting-edge methods, trends, and technology while never forgetting the proven procedures of the past.

The one thing I have learned along my journey is that change is good! Inherently people dislike change. Familiar is comfortable, convenient, and if it ain’t broke why fix it. I have reminded myself of this numerous times in the past year as we mark the one year anniversary of the ADED eLearning platform. Our initial adoption of online education needed to cross some barriers, however we are in a terrific growth phase and blossoming. We will continue to grow this user-friendly educational outlet and be able to constantly offer more to our members.

Continuing education, contact hours, CEUs, lifelong learning...whatever your terminology may be, one thing is clearly stated: Professional development is empowering. While I would hope that mastery of the skills and knowledge in one’s chosen field would be a reward in and of itself, we know that lifelong learning may be an economic imperative if employers are seeking professionals that have credentials. Continuous acquisition of new skills, especially because career spans are lengthening is one reason we want to expand the educational avenues available to our members and those in the profession.

ADED’s multimodal education is also an asset to people shifting their careers or looking to enter a specialized area of care. Professionals also seek to enhance their skills so they remain employable as their jobs and industries change, a growing trend with the increasing impact of artificial intelligence and automation. Technological changes in the industry demand stronger and more continuous connections between education and employment. Young professionals entering the workplace are discovering their college education didn’t provide all the skills they need in a niche profession or to get promoted. They need to build the professional skills required in the industry to succeed.

As ADED moves into 2019, I hope you share my excitement about the next phase of educational growth available with the Badging and Microcredentialing program. Professionals are seeking ways to distinguish themselves from the competition. This program will allow participants to show their mastery of in-demand knowledge and skills. This will also help to provide an established educational pathway for those working towards CDRS® certification.

2019’s Annual Conference theme is Professional Pride. We look forward to providing our members and the profession with the multifaceted educational tools necessary to display their professional pride not only this year but for years to come.
DRS 101 - MARCH 5-6

INTRODUCTION TO DRIVER REHABILITATION
8:30 AM - 5:30 PM BOTH DAYS
This two-day course is ideal for those new to the field of driver rehabilitation. The skills and knowledge needed to establish an adaptive driving program or become a new staff member for an established program will be discussed and shared. Topics of the course include: program development, behind the wheel training techniques, introduction to adaptive driving equipment and program documentation. Also discussed will be collaboration with mobility equipment dealers, family and medical team members.

Presenters: Dan Allison MS, OTR/L, ATP, CDRS & Beth Gibson OTR, CDRS
15 Contact Hours / 1.5 AOTA CEUs

DRS 201 - MARCH 5-6

INTERMEDIATE/ADVANCED TRACK
Trouble in the Trenches: How to dig out by using a Clinical Decision-Making Tool 8:45 AM - 12:00 PM
Presented by: Tamalea Stone, BAHon, BHSc: OT, OT Reg.

Vision and Driving 1:00 PM - 5:15 PM
Presented by: Nathalie Drouin, OTR/L, CDRS, CDI

Beyond the Box: Exploring Creative Approaches to Driving 8:30 AM - 10:45 AM
Presented by: Leah Belle, OTR/L, CDI, CDRS & Nathalie Drouin, OTR/L, CDRS, CDI

Cannabis and Functional Driving Assessments: How and When to Assess On-road 2:00 PM - 5:20 PM
Presented by: Nellmarie Hyde, OT, CDRS

12 Contact Hours / 1.2 AOTA CEUs

DRS 101 & DRS 201 - MARCH 7 - 11:00 AM - 12:00 PM

AutoCoach 2.0: An Innovative App to Teach Parents of Teens with Cognitive and Physical Disabilities How to Drive
Presented by: Emma Harrington, Ed.M., Matt Abisamra, OTR/L, CDRS, Dan Allison, MS, OTR/L, ATP, CDRS

1 Contact Hour / .1 AOTA CEU

HOTEL INFORMATION:
Hilton Daytona Beach Oceanfront Resort
100 North Atlantic Avenue, Daytona Beach, Florida, 32118

FEES:
$425 FOR NMEDA MEMBERS
$475 NON-NMEDA MEMBERS *INCLUDES 1 YEAR MEMBERSHIP

For complete information please visit:
www.nmedaannualconference.com
### 2019 Course Schedule

<table>
<thead>
<tr>
<th>Location</th>
<th>Event</th>
<th>Date</th>
<th>Hours Offered</th>
<th>Speaker(s)</th>
<th>Topics</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daytona Beach, FL</td>
<td>NMEDA Annual Conference</td>
<td>March 5-6, 2019</td>
<td>15 ADED/1.5 AOTA hours offered</td>
<td>Dan Allison, MS, OTR/L, ATP, CDRS &amp; Beth Gibson, OTR/L, CDRS</td>
<td>Intro to Driver Rehabilitation: Program development, driver training, adaptive driving equipment and program documentation. Course will also emphasize collaboration with mobility dealers, consumers &amp; families.</td>
<td><a href="http://nmedaannualconference.com">Register online</a></td>
</tr>
<tr>
<td>Houston, TX</td>
<td>Texas OT Association</td>
<td>April 26-27, 2019</td>
<td>15 ADED/1.5 AOTA hours offered</td>
<td>Chad Strowmatt, LOT, CDRS</td>
<td>The Impact of Disability, Vision and Aging on Driving: Disabilities, visual impairments, the aging process as they affect driving, driver assessment and training, adaptive equipment, vehicle modifications &amp; driver licensing issues.</td>
<td><a href="https://www.tota.org">Register online</a></td>
</tr>
<tr>
<td>Lexington, KY</td>
<td>ADED Annual Conference</td>
<td>August 9-10, 2019</td>
<td>15 ADED/1.5 AOTA hours offered</td>
<td>Nathalie Drouin, OTR/L, CDRS, CDI</td>
<td>The Impact of Disability, Vision, and Aging on Driving: Disabilities, visual impairments, the aging process as they affect driving, driver assessment and training, adaptive equipment, vehicle modifications &amp; driver licensing issues.</td>
<td><a href="www.aded.net">Register online</a></td>
</tr>
<tr>
<td>Wallingford, CT</td>
<td>Gaylord Specialty Healthcare Hospital</td>
<td>October 18-19, 2019</td>
<td>15 ADED/1.5 AOTA hours offered</td>
<td>Staci Frazier, OTR/L, CDI, CDRS</td>
<td>Intro to Driver Rehabilitation: Program development, driver training, adaptive driving equipment and program documentation. Course will also emphasize collaboration with mobility dealers, consumers &amp; families.</td>
<td><a href="www.aded.net">Register online</a></td>
</tr>
</tbody>
</table>

Contact ADED 866-672-9466  
Register online: [www.aded.net](http://www.aded.net)  
Memorial Scholarship Application Deadline: [May 9, 2019](#)
QLK is the only wheelchair docking system that gives everyone true peace-of-mind.

**DEALERS ❤️ QLK**
- Custom options: advanced stabilizer, wireless release, adjustable height floor mounts...and more!
- Quick and painless installation
- Brackets for every wheelchair

**DRIVERS ❤️ QLK**
- Complete independence to drive your vehicle
- More wheelchair clearance
- Improved user experience

**WE ALL ❤️ QLK**
- Certified iQ Crash Testing forward, backward and sideways
- Packed with exclusive features
- Proven durability and reliability

**THE SYSTEM WITH...**

**MORE HEART.**

FEEL THE LOVE AT: QSTRAINT.COM/QLK-150
Among other things, the adjusted joystick steering makes this possible. The young woman has been training as a teacher for two years. In order to pursue her career later on (without always having to rely on people for help), the 19-year-old needed her own car. Marina suffers from dysmelia – she was born with a malformed arm. Above all, Marina needs support with steering and shifting gears, and with using the secondary functions of a car.

“Actually, it was my father who discovered this,” she says. At first, she tried to cope with driving a normal car, but in the driving school it soon became clear that she would need joystick steering. Paravan found an expert who was technically qualified to make the required adjustments. From the outset an SUV seemed the best idea. “I actually saw the Ford in a parking lot,” remembers Marina Schömig. “Instead of ‘Kuga,’ I read it as ‘Kiga’ – as in kindergarten. Then I knew it was my car.”

Marina Schömig got her driver’s license in the summer of 2017. After a medical assessment that certified her fitness to drive, she passed the theory part of the driving test at home. She did the practical part of the test at the mobility center in Aichelau. Joystick steering adapted specially for her hand was fitted in the driving school car. “Despite her symptoms she has enough power in her hand to steer the car,” says Paravan driving instructor Igino Farnhamer. She completed the Space Drive training in just two and a half weeks. “It felt very strange,” she remembers, “as it was a very big car.” She soon got to grips with the technology. “I knew straight away that it was the right thing for me and it was fantastic fun into the bargain.”

The car is equipped, among other things, with Space Drive steering, automatic door opening, a made-to-measure seat and seat belt system, and voice control. “Not much more can be added to the electronics,” says Joachim Glück, a representative for technological advice at Paravan GmbH. This type of vehicle conversion takes a good 250 to 300 hours. In this case, the project was financed by an employment agency. “First the whole interior of the car was scanned by the Paravan engineer, so that they could adapt the future conversion in the best possible way,” reports technician Bernhard Dank, who implemented the vehicle conversion. Marina Schömig will be able to open her car using a smartphone app or a button under the car sill. To this end, a motor was installed in
the door and in the lap belt, as part of the belt system adapted for her that also includes a strap system. Once the driver is seated in the car, the seat belts fasten at the touch of a button, and then the uniquely adapted joystick steering, as well as the Paravan Touch Pad, move into position. The future teacher steers the car with three fingers using the drive-by-wire system Space Drive. She operates the accelerator and brakes with her feet. PARAVAN Voice Control can operate up to 100 secondary functions in the car, including the turn signals, windscreen wipers, automatic transmission, sun visor, and air conditioning. This was important for Marina Schöming who states, “I couldn’t manage without it.”

“The functions that can be controlled using the Touch Pad, right through to the seat adjustment, can all be operated using the smartphone app too,” explains Bernhard Dank. Thanks to Marina’s physical size, the belt system could be installed on the B-pillar. This enabled the two places on the back seat to be retained. This was important for Marina. “When I’m going somewhere, I drive now,” she says. If the belt system were to be installed further back, she would be able to transport just two passengers. Any normal driver can sit in the specially adapted seat too. “In that case, the belt system is moved away and the Space Drive System deactivated,” says the technician. The inclusive use of her car is important to Marina and to many other customers, if, for example, a family member needs to drive her car or when it is taken for a service.

Final adjustments are made, for example to individually produced control elements or to the strap system for the seat belt, when the car is handed over to Marina. “Marina Schöming will be relatively tightly strapped in to the driver’s seat, compared to the more traditional three-point seat belt. Therefore, the system must be very precisely adapted for her,” explains Dank. The electrical functions have also been highly personalized according to her wishes. In the end, a final vehicle inspection test is on the cards, after which Marina Schöming can finally drive off in her modified car.

In the future, she will no longer be reliant on help from others and she will be able to drive on her own to school. At the moment, Schöming travels every day by bus and she still needs to be accompanied. “I can’t put down my bus pass and or take off my rucksack,” she explains. This means that she cannot hold on. It will be a great relief for her and her whole family. Next year she would like to go on a road trip with some friends for a couple of days, to give something back.

“But first I have to do the 3-hour journey to my house,” she says. She appreciates the difficulty of the long trip and has already received support from her friends.

Contact:
c/o Anke Leuschke,
Press Officer Paravan GmbH
Phone: +49 7387 99 95 81
or +49 172 7916987
E-mail: paravan@leuapress.de

Paravan Space Drive System

A new dimension of drive-by-wire

Space Drive is the world leading drive-by-wire system with triple redundancy that is unrivaled in the world — a real breakthrough. It allows persons with low residual strength, minimum movement capabilities and even those without limbs to safely drive a car. With Space Drive, you activate the brake, accelerator, and steering wheel using driving aids controlled by microprocessors using triple redundancy. These transmit the signals in nanoseconds to a servo motor for the brake and accelerator and another for the steering. The system is certified according ISO 26262 ASIL D and manufactured according to the world-wide highest quality level: IPC-A-600 class 3.
(Continued from previous page)

About Paravan GmbH:

Paravan GmbH is the world leader in made-to-measure adapted vehicle solutions for people with disabilities. A workforce of around 180 develops and produces individually tailored automotive conversions, electric wheelchairs, movement trainers and lots more. A technological highlight is Space Drive, an intelligent digital steering system in line with the drive-by-wire principle. It is completely fail-safe, thanks to active redundancy of the servo motors and the first to have approval for use on the road anywhere in the world. This innovation enables severely disabled people, sometimes without arms and legs, to drive cars independently and safely. It is not possible for these drivers to make an easy intervention on the steering wheel. Over the last 15 years, Space Drive has proved itself worldwide in over 500 million kilometers of road driving and is always being continuously developed. The system is certified according to ISO 26262 ASIL D and is manufactured in accordance with the highest international quality standard, IPC-A-600 class 3. Numerous vehicle manufacturers, automotive suppliers and research facilities use Space Drive for vehicles and projects involving autonomous driving. The system is available as a retrofit kit with an open interface for all well-known vehicle types. Schaeffler Technologies AG & Co. KG and the owner of Paravan GmbH, Roland Arnold, founded the joint venture Schaeffler Paravan Technologie GmbH & Co. KG on September 12, 2018. In October, Schaeffler Paravan Technologie GmbH & Co. KG acquired the drive-by-wire technology as well as all related activities from Paravan GmbH and will develop the technology further in the future.

Manufacturers’ Corner

Dear Friends of DriveSafety,

I am pleased to announce the promotion of Mr. Steven J. Hallmark, our long-time Chief Operations Officer, to the office of President and CEO of DriveSafety on January 1, 2019. We have been planning for this exciting change for several months now. For years Steve has served with distinction overseeing all of our day-to-day operations. He brings tremendous energy and skill to the management of the business and has shown great vision for our exciting path ahead.

I love DriveSafety and what it stands for in our important industries. This includes a high value on scientific rigor and technical excellence. More importantly, it includes a genuine passion for listening to our clients, understanding their needs and providing unmatched personal customer care. Under Steve’s leadership, these ideals will continue as trademarks of DriveSafety.

On a personal note, my wife and I are making some long-anticipated transitions in our life that include more time together on important opportunities that we share in family and service realms. I will continue as a strategic advisor, consultant and Director on DriveSafety’s Board and look forward to what I consider the greatest prospects we have ever had as a company in the years ahead. I am genuinely excited about the leadership Steve provides and have confidence in his ability to carry on what has always been great about DriveSafety. Beyond that he is already raising the bar for us to provide even better solutions and care for all of our clients. For your convenience, please note Steve’s full contact information below.

Thank you for your business and trust. Even more, I personally thank you for wonderful relationships that I will always treasure.

Sincerely,

Douglas F. Evans
Founder, DriveSafety, Inc.

Contact Information for Steve:
Steven J. Hallmark
President, DriveSafety, Inc.
Mobile: 557-2170
Email: shallmark@drivesafety.com

426 White Pine Drive | Murray UT 84123
(888) 960-4854 www.drivesafety.com
BRAUNABILITY LAUNCHES THE TURNY® EVO ROTATING SEAT TO GIVE MORE INDEPENDENCE TO PEOPLE WITH MOBILITY CHALLENGES

Product offers customers safe and easy option to get in and out of vehicle

Winamac, IN (Jan. 7, 2018) – BraunAbility, the U.S. market leader in wheelchair accessible vehicles and wheelchair lifts, is expanding its product offering to now include an additional mobility transportation solution, the BraunAbility® Turny® Evo seat.

The Turny® Evo rotating seat lift creates an easier and safer way to get in and out of tall vehicles. It is an ideal alternative for anyone with limited mobility, wheelchair users who can transfer into a vehicle seat and caregivers of children, young adults and older parents.

“We strive to create and offer products that are safe, high-quality, reliable and help our customers maintain their lifestyle without worry or strain, which is exactly what the Turny® Evo seat does,” said BraunAbility CEO Staci Kroon. “With the addition of the Turny® Evo seat, we continue to deliver on our mission of making life a moving experience for all, helping more people enjoy every journey without fear.”

The Turny® Evo seat is long-lasting, durable and was built with several helpful features including:

- Fits more than 150 vehicles, including full-size vans, pickup trucks, most SUVs and minivans
- Depending on the vehicle, can be installed in both passenger, driver or mid-row seat positions
- Can be reinstalled in another applicable vehicle
- Comes with a posture vest and positioning belt for ease of use
- Fully powered, allowing it to rotate, extend and move up, down, forward or backward
- Includes a manual backup system to ensure full functionality
- Options like heated seat and armrests to help with balance and transfer also available
- Customers can use a simple, one-button handheld controller or a smartphone app to operate

The Turny® Evo seat is now available at mobility dealers across the country. To learn more or find a dealer near you that carries the seat, please visit www.braunability.com.

About BraunAbility

BraunAbility is the world’s leading manufacturer of mobility transportation solutions, including wheelchair accessible vehicles, wheelchair lifts and seating, storage and securement products. Founded nearly 50 years ago by Ralph Braun, the company has grown into the most well-known and trusted name in the mobility industry, bringing independence to millions of individuals across the world. BraunAbility is a wholly owned subsidiary to Patricia Industries, a division of Investor AB Group. Visit www.braunability.com for more information.
11 Safety Tips for Driver Rehabilitation Specialists: Keep Everyone Safe During Driver Evaluations

By Steve Pomponi, Vice President of PSA’s Risk and Safety Management Division

With more than 30 years in the safety field, I’ve noticed that when working with professionals in the mobility industry, they often forget that their own personal safety should be just as important as that of their clients’. Driver rehabilitation specialists can become overly focused on serving the needs of their clients, which is commendable, but they often risk their own safety in the process. I believe the two priorities should be balanced, which will ultimately result in happier clients with fewer accidents and claims. And, this approach should also be supported by leadership and senior management at any driver rehabilitation services organization.

How do you strike a balance?

Here are a few safety tips for driver rehabilitation specialists to keep everyone safe during driver evaluations. These may seem obvious, but you would be surprised how often these steps are overlooked, which can lead to accidents, and expensive claims. If you do not feel safe with a client for any reason, you have the right to STOP and reschedule an evaluation until your safety concerns have been resolved.

Set expectations: Review the safety expectations with the client. Explain to them that the most important part of this evaluation is to ensure your and their safety, and the safety of other motorists on the road. They need to understand that during this evaluation you expect them to follow your suggestions and requests. Stress that you will not tolerate any unsafe acts, especially distracted driving, and either of you can stop this evaluation at any time if one of you feels unsafe.

Verify clients’ credentials to drive (if applicable): Many of your clients are probably getting behind the wheel for the first time, so you will want to verify that they have a valid driver’s permit. If they are already licensed, inspect their driver’s license to the best of your abilities to make sure it is valid. Also, look for endorsements on the license stating they are required to wear corrective lenses or hearing aids. If they are, make sure they are complying with the endorsements before you get in the vehicle.

Use safety belts: Your client and all passengers should wear safety belts or be properly restrained if they are in a wheelchair when operating a vehicle. If the client refuses to wear their seatbelt/restraints or if your seat belt doesn’t work, do not proceed with the evaluation.

Ensure driver is not impaired: Make sure your client is not ill, injured, impaired, or under the influence of alcohol, drugs, prescription, or over-the-counter medication. You should also be certain that you are fit to drive. Even a minor cold could impact your ability to concentrate and recognize hazards while performing a driver evaluation.

Reinforce traffic laws: If you find yourself in the vehicle with a client who does not abide by all federal, state, and local motor vehicle regulations, laws and ordinances, you should ask them to stop. However, if they continue driving unsafely, such as speeding, braking abruptly, or running red lights after your request, end the evaluation.

Do not allow distractions: No distracting activities should be allowed while driving. Clients should not be engaged in making/receiving calls, reading/sending messages or emails, eating, or any other tasks that could divert their attention from driving.

Check vehicle condition: You should verify that the client’s vehicle is in safe driving condition. A quick two-minute safety inspection of walking around the vehicle should be sufficient. Look for obvious issues like a broken windshield, lots of dents, or broken headlights or taillights. Check to see if the headlights, brake lights, and turn signals work.

Require headlights-on: Clients should be required to drive with headlights on at all times regardless of the time of the day, as it improves your visibility to others on the road.

Mind adverse weather conditions: During adverse weather conditions, such as heavy snow, torrential rain, sleet, freezing rain or extreme fog, you should not conduct a driver evaluation. If visibility is less than a quarter mile, or traction is poor, you should proceed to a safe place until driving conditions improve. A good rule of thumb is to follow the school delays and closings, and delay or reschedule the driving evaluation accordingly. Similarly, if the government offices are closed, that usually indicates more severe weather, in which case you should not be conducting an evaluation either.

Trust your Spidey senses: Do not get in a vehicle that has any evidence of illicit drugs, alcohol, beverages, or firearms. Also, if you find yourself in a situation where your client is starting to get agitated or showing signs of road rage, trust your instincts, and ask them to pull over. Bottom line, if something doesn’t feel right, do not get in the vehicle or stop the evaluation.

Ensure fueling safety: If you need to refuel during the driver evaluation process, make sure the engine is shut-off and no one is smoking or vaping.

Remember, similar to putting your own oxygen mask on before you assist others on an airplane, protect yourself first so you can serve your clients better. For more driver rehabilitation specialist safety best practices, contact me at spomponi@psafinancial.com.

To see original article visit PSA’s Perspective.

About the Author: Steve Pomponi, VP of PSA’s Risk and Safety Management division at PSA, is a National Safety Council (NSC) award winner. With over 30 years of proven safety experience, Steve proactively assists clients with various risk management programs to prevent employee injuries, protect business properties, minimize business interruption, prevent fleet collision, and protect organizations from liability claims.

https://www.psafinancial.com/mobility-industry/ is the first link
http://www.psafinancial.com/NSCaward second link in the author’s bio.
WHAT’S HOLDING YOU(R) BACK.... IN AN ACCIDENT?

eFUTURE SAFE
HEAD & BACKREST

EASYPULL
WINCH & RESTRAINT SYSTEM

AMF-Bruns of America
www.amfbrunsamerica.com
800-677-1615
Newly Redesigned **Joey™**

More Compact. 
More Applications. 
More Simplicity.

- Install in SUVs, CUVs, minivans, vans
- Fastest cycle time on market
- Standard safety barrier
- Illuminated platform and hand control
- Easy loading, no belts required*

*Belts needed in only 5% of applications.

844-755-5543 • bruno.com

Bruno Independent Living Aids
Scooter lifts | Turning vehicle seats | Stairlifts | Vertical platform lifts
Please provide contact information as you want it to appear on the website directory:

Name: 
Credentials: 

Company: 
Telephone Number: 

Mailing Address: 
Fax Number 
E-Mail Address: 

Website Address:

☐ Directory Opt out: please DO NOT post my information on the www.aded.net membership directory
☐ Mailing Address change: I would like my ADED mail to go to this address:

<table>
<thead>
<tr>
<th>Membership Level</th>
<th>Individual Membership Dues</th>
<th>Facility Membership Dues</th>
</tr>
</thead>
</table>
| Individual Member | Individual RENEWING Member: Rate=$145  
Individual NEW Member: Rate=$155 | Facility Member-Level 1*: Rate=$290  
Facility Member-Level 2*: Rate=$580  
Facility Member-Level 3*: Rate=$1015 |

*PLEASE COMPLETE MEMBERSHIP INFORMATION SHEET ATTACHED

<table>
<thead>
<tr>
<th>Membership Level</th>
<th>Mobility Equipment Dealer Dues</th>
<th>Corporate Member Dues</th>
<th>Associate Member Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mobility Equipment Dealer</td>
<td>New membership Rate=$200</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Corporate Member</td>
<td>New membership Rate=$550</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Associate Member</td>
<td>New membership Rate=$125</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PLEASE RETURN THIS APPLICATION WITH PAYMENT IN US CURRENCY FOR PROPER PROCESSING.

REMIT TO: 200 First Ave NW Suite 505 Hickory N.C. 28601. Fax 828-855-1672

For credit card payments: complete the following information and fax to 828-855-1672 or mail to address above.

☐ VISA  Account #: ____________________________
☐ AMERICAN EXPRESS  Expiration Date: month: ___________ /year: ____________
☐ MASTERCARD  CVV# ____________
☐ DISCOVER  Card Holder’s Name: ____________________________

Zip Code of Billing Address: ____________________________

Card Holder’s Signature: ____________________________
## EXECUTIVE COMMITTEE-REPORTS TO BOARD PRESIDENT

<table>
<thead>
<tr>
<th><strong>EDUCATION SUBCOMMITTEE</strong></th>
<th><strong>CERTIFICATION SUBCOMMITTEE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2019 CHAIR (2ND TERM ENDS 2019):</strong> NATHALIE DROUIN</td>
<td><strong>2019 CO-CHAIR (2ND TERM ENDS 2019):</strong> SANDRA WATAOKA (AH/TS)</td>
</tr>
<tr>
<td>TEAM: JILL SCLEASE, ASHLEE RICOTTA, TAMALEA STONE, JON GEIGER</td>
<td><a href="mailto:SANDRAWATAOKA@GMAIL.COM">SANDRAWATAOKA@GMAIL.COM</a></td>
</tr>
<tr>
<td></td>
<td><strong>2019 CO-CHAIR (1ST TERM ENDS 2020):</strong> ANN CLARK (AH/TS)</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:ISAFC@AOL.COM">ISAFC@AOL.COM</a></td>
</tr>
<tr>
<td></td>
<td><strong>2019 CO-CHAIR (1ST TERM ENDS 2020):</strong> ANN CLARK (AH/TS)</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:ISAFC@AOL.COM">ISAFC@AOL.COM</a></td>
</tr>
<tr>
<td><strong>2019 CO-CHAIR (1ST TERM ENDS 2020):</strong> ANN CLARK (AH/TS)</td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td><strong>QUALITY COMMITTEE-REPORTS TO BOARD PRESIDENT ELECT</strong></td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td></td>
<td><strong>2019 CHAIR (1ST TERM ENDS 2020):</strong> JOHNELL BROOKS</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:JOBROOK@CLEMSON.EDU">JOBROOK@CLEMSON.EDU</a></td>
</tr>
<tr>
<td></td>
<td><strong>TEAM:</strong> MARY SHOTWELL, CHAD STROWMATT, THERESA PRUDENCIO</td>
</tr>
<tr>
<td><strong>LEADERSHIP DEVELOPMENT SUBCOMMITTEE</strong></td>
<td><strong>PROFESSIONAL DEVELOPMENT SUBCOMMITTEE</strong></td>
</tr>
<tr>
<td><strong>2019 CHAIR (2ND TERM ENDS 2019):</strong> AMY LANE <a href="mailto:LANEAK@UPMC.EDU">LANEAK@UPMC.EDU</a></td>
<td><strong>2019 CHAIR (2ND TERM ENDS 2019):</strong> ALYSSA MERILEES <a href="mailto:ALYSSA.MERILEES.CLETHB@SSSS.GOUV.QC.CA">ALYSSA.MERILEES.CLETHB@SSSS.GOUV.QC.CA</a></td>
</tr>
<tr>
<td>TEAM: LORI BENNER, MARYFRANCES GROSS, CHAD STROWMATT, LEA BERTONI</td>
<td>**TEAM: NATHALIE DROUIN (EDU. COMMITTEE LIAISON), JENNIFER BIRO, JESSE HUNTER, TIM DANTER</td>
</tr>
<tr>
<td><strong>RESEARCH SUBCOMMITTEE</strong></td>
<td>**TEAM: NIKKI SIMMONS, SUSIE TOUCHINSKY, STACI FRAZIER, LIZ GREEN (STAFF LIAISON)</td>
</tr>
<tr>
<td><strong>2019 CHAIR (1ST TERM ENDS 2020):</strong> JOHNELL BROOKS</td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td></td>
<td><a href="mailto:JOBROOK@CLEMSON.EDU">JOBROOK@CLEMSON.EDU</a></td>
</tr>
<tr>
<td></td>
<td><strong>TEAM:</strong> MARY SHOTWELL, CHAD STROWMATT, THERESA PRUDENCIO</td>
</tr>
<tr>
<td><strong>FINANCE COMMITTEE-REPORTS TO BOARD TREASURER</strong></td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td><strong>2019 CHAIR (1ST TERM ENDS 2019):</strong> CASSANDRA JOHNSON <a href="mailto:CDALTONJOHNSON@GMAIL.COM">CDALTONJOHNSON@GMAIL.COM</a></td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td></td>
<td><strong>TEAM:</strong> LIZ GREEN, EVA RICHARDVILLE, BRYAN GARRISON</td>
</tr>
<tr>
<td><strong>SCHOLARSHIP SUBCOMMITTEE</strong></td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td><strong>2019 CHAIR (1ST TERM ENDS 2020):</strong> ROBIN STRUP <a href="mailto:ROBINS@THERAMOBILITY.NET">ROBINS@THERAMOBILITY.NET</a></td>
<td><strong>TEAM:</strong> NATHALIE DROUIN, DANA MOORE-WILLS, KELLY WOOD, MARY SHOTWELL, AMY ANDERSON</td>
</tr>
<tr>
<td><strong>MARKETING COMMITTEE-REPORTS TO BOARD PAST PRESIDENT</strong></td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td><strong>2019 CHAIR (1ST TERM ENDS 2020):</strong> GINA LEWIS <a href="mailto:GINALEWIS@ADAPTSOLUTIONS.CA">GINALEWIS@ADAPTSOLUTIONS.CA</a></td>
<td><strong>TEAM:</strong> PUBLICATIONS LIAISON, JASON STROWMATT, JANETTE CONRAD, KELINA MOORE, LIZ GREEN (STAFF LIAISON)</td>
</tr>
<tr>
<td><strong>PUBLICATIONS SUBCOMMITTEE</strong></td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td><strong>2019 CHAIR (1ST TERM ENDS 2020):</strong> POSITION OPEN</td>
<td><strong>TEAM:</strong> AMY LANE, NIKKI SIMMONS, SUSIE TOUCHINSKY, STACI FRAZIER, LIZ GREEN (STAFF LIAISON)</td>
</tr>
<tr>
<td><strong>AD HOC COMMITTEES-REPORTS TO BOARD PRESIDENT</strong></td>
<td><strong>TEAM:</strong></td>
</tr>
<tr>
<td><strong>STANDARDS OF PRACTICE</strong> (SP GOAL #1) <strong>CHAIR:</strong> DAN ALLISON</td>
<td><strong>TEAM:</strong> DIANNA ROBERTSON, JIM KENNEDY, UTE SMITH, NICOLE WHITE, LIZ GREEN-STAFF LIAISON</td>
</tr>
<tr>
<td><strong>GOVERNMENT RELATIONS</strong> (SP GOAL #2) <strong>CHAIR:</strong> CASSY CHURCHILL</td>
<td><strong>TEAM:</strong> LIZ GREEN-STAFF LIAISON, ANNE DICKERSON, SUSIE TOUCHINSKY, TED KAHN</td>
</tr>
<tr>
<td><strong>ADED AMBASSADORS</strong> (SP GOAL #3) <strong>CHAIR:</strong> MARC SAMUELS</td>
<td>PAM WINPIGLER, BOBBIE MILLIKIN, BRIAN IADAROLA, EVA RICHARDVILLE, BRENDA BENNETT</td>
</tr>
<tr>
<td><strong>DRS RECRUITMENT</strong> (SP GOAL #5) <strong>CHAIR:</strong> LIZ GREEN</td>
<td><strong>TEAM:</strong> JAN STEPHANIDES, TAMMY PHIPPS, MONICA PHELAN, LYNN ROCAP-STAFF LIAISON</td>
</tr>
<tr>
<td><strong>DRS EXAM PREPARATION</strong> (SP GOAL #5) <strong>CHAIR:</strong> JOAN CRAMER</td>
<td><strong>TEAM:</strong> AMY DONABEDIAN, LIZ GREEN-STAFF LIAISON</td>
</tr>
<tr>
<td><strong>DRIVER REHAB. PROG. DEV. TASK FORCE</strong> <strong>CHAIR:</strong> LIZ GREEN</td>
<td><strong>TEAM:</strong> PEGGY GANNON, BETH GIBSON, ANNE HEGBERG, BRIGITTE KING, ERIC MANSFIELD</td>
</tr>
</tbody>
</table>
Executive Director reports to ADED Board of Directors

All staff report to ADED Executive Director

Lynn Mortilla-Rocap  
CAE, CMP  
EDUCATION SERVICES DIRECTOR  
Toll free: 866-672-9466  
direct line: 828-358-3346  
lynn@driver-ed.org

Robert Dant  
OFFICE MANAGER  
Toll free: 866-672-9466  
direct line: 828-358-3296  
robert@driver-ed.org
2019 ADED BOARD OF DIRECTORS

Marc Samuels
MS, OT, CDRS
PRESIDENT
650-771-2797
samuelsmarc@hotmail.com

Jenny Nordine
OTR/L, CDRS
PAST PRESIDENT
480-449-3331
Jenny
@drivingtoindependence.com

Leah Belle
OTR/L, CDI, CDRS
MEMBER AT LARGE
864-455-4959
lbelle@ghs.org

Cassandra Johnson
CDRS
TREASURER
817-637-4929
Cdaltonjohnson
@hotmail.com

Staci Frazier
OTR/L, CDI, CDRS
SECRETARY
603-793-9335
snpfraz@comcast.net

Tim Brant
CDI, CDRS
MEMBER AT LARGE
877-395-7011
timothy.brant
@brantsdrivingschool.com

Cassy Churchill
Clock Mobility
MOBILITY EQUIPMENT DEALER REPRESENTATIVE
616-698-9400
cassy@clockmobility.com

Jannette Conrad
VMI
CORPORATE REPRESENTATIVE
480-236-5898
jannettec
@vantagemobility.com

Cassy Churchill
Clock Mobility
MOBILITY EQUIPMENT DEALER REPRESENTATIVE
616-698-9400
cassy@clockmobility.com

Jannette Conrad
VMI
CORPORATE REPRESENTATIVE
480-236-5898
jannettec
@vantagemobility.com

Tim Brant
CDI, CDRS
MEMBER AT LARGE
877-395-7011
timothy.brant
@brantsdrivingschool.com

Cassy Churchill
Clock Mobility
MOBILITY EQUIPMENT DEALER REPRESENTATIVE
616-698-9400
cassy@clockmobility.com

Jannette Conrad
VMI
CORPORATE REPRESENTATIVE
480-236-5898
jannettec
@vantagemobility.com

Tim Brant
CDI, CDRS
MEMBER AT LARGE
877-395-7011
timothy.brant
@brantsdrivingschool.com

Cassy Churchill
Clock Mobility
MOBILITY EQUIPMENT DEALER REPRESENTATIVE
616-698-9400
cassy@clockmobility.com

Jannette Conrad
VMI
CORPORATE REPRESENTATIVE
480-236-5898
jannettec
@vantagemobility.com
The Carospeed Menox Hand Control is specifically designed to give physically limited drivers the benefit of control and ease when driving a vehicle. Driving becomes an easy and enjoyable experience with Carospeed Menox.

Common reasons for choosing Autoadapt Menox Hand Controls:
- Floor mounted push pull with more adjustability.
- "brake latch" enables use of right hand.
- Aesthetically designed to match vehicle style.
- Not an obstruction when moving in and out of vehicle.
- Transferable into future vehicle.
- Multi-function option for secondary controls.

Scott System Driving Controls

The Scott Driving System has been developed over the last 40 years and is a complete system which permits the physically challenged to safely perform all driving tasks without assistance, including entering and leaving the vehicle. The system provides for safe extended mobility for the driver who must remain in his or her wheelchair while driving. The system has been successful in a variety of disabilities. Patients with post polio, multiple sclerosis, muscular dystrophy, spinal muscular atrophy and spinal cord injury up to C4/C5 are successfully driving on a daily basis.

- Reliability
- Low Maintenance
- Long Service Life
- OEM Steering Option

dSi provides the technology necessary for disabled drivers to experience independence.

drive systems incorporated
16139 Runnymede Street Van Nuys CA 91406 U.S.A.
Tel: 818.782.6793 Fax: 818.782.6485
www.drivingsystems.com info@drivingsystems.com
Introducing the all-new Honda Infloor

The all-new BraunAbility® Honda Infloor offers the uncompromised performance you deserve, from the Most Recommended Name in Mobility.*

BraunAbility.com  844.334.2135

*Based on 2016 Dealer Service Technician Study