Vision Access

A Magazine by, for and about People with Low Vision

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Vision Access welcomes submissions from people with low vision, from professionals such as ophthalmologists, optometrists, low vision specialists, and everyone with something substantive to contribute to the ongoing

discussion of low vision and all of its ramifications. Submissions are best made as attachments to email or may also be made in clear typescript. Vision Access cannot assume responsibility for lost manuscripts. Deadlines for submissions are March 1, June 1, September 1, and December 1. Submissions may be mailed to Mike Keithley, Editor, 191 East El Camino Real #150, Mountain View, CA 94040; 650-386-6286, editor@cclvi.org.

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From the Editor's Desk	

by Mike Keithley

Welcome to the spring, 2015 issue of Vision

Access. This issue features a very useful article

from the Pennsylvania Council of the Blind on organizing low Vision seminars. Seems to me to be an excellent resource all of us can use. We also hear from Sarah Peterson about her job searching adventure. And Dan Smith tells about the reintroduction of HR 729, The Medicare

Demonstration of Coverage for Low Vision

Devices Act of 2015. Let's all encourage our representatives to co-sponsor this bill.

Organization News

CCLVI is Springing Forward

by Charles Glaser, CCLVI President

We can say goodbye to the abnormally cold winter of 2015 as the temperatures are starting to rise. As it turned out, having to stay inside for much of winter was not such a bad thing for CCLVI.

I, along with more
than half of our board
of directors, attended
the ACB Legislative
Seminar in Washington
D.C. This seminar
afforded us the
opportunity to become
familiar with proposed
legislation that will be
beneficial for people

with low vision. This includes house bill 729, which would create a demonstration project that would provide low vision devices for Medicare recipients. We also took time to visit our elected officials on **Capital Hill to** encourage them to support legislation that benefits people with low vision. We hope the senate will also introduce a companion bill.

Our Webmaster Robert Spangler has also been busy improving our website. Students interested in applying for our scholarships will now find a downloadable application. New members will be able to use the interactive membership application on the website. Soon our members and friends will be able to pay their dues and make donations directly through the CCLVI

website. Robert is very dedicated to this project and intends to continue to improve our online presence.

The annual CCLVI convention is a great place to renew old acquaintances, make new friends and learn about our community. **CCLVI's convention** committee, led by our convention chairperson Jim Jirak, is preparing informative and thought provoking sessions that address

the needs and desires of the low vision community. There will also be fun things to do, such as a game night and our annual mixer. Leslie Spoone, **CCLVI's chairperson** for fundraising, will have many opportunities for attendees to support our work.

As always, thank you for your interest in CCLVI. I look forward to seeing many new faces in July.

Current Legislation Important to People with Low Vision

by Dan Smith, CCLVI Legislation Committee Chair

Last fall I informed you about legislation that would begin to permit visually impaired Medicare recipients to obtain vision aids. That bill has been reintroduced. Please see the information below

from ACB regarding
this important
legislation. It was
distributed by Eric
Bridges, Director of
External Relations and
Policy.
It is important for
CCLVI members to

contact their congressional representatives. Please request that they support and sponsor HR 729, a step in the right direction to make magnification devices available to Medicare recipients. If you don't know who your representative in Congress is, you can find out at www.hous.gov/repres entative/find. This site will allow you to find your representative by entering your address. **Most representatives**

have websites, and you can email your comments to them from there.

Eric's article follows.

Background

In November 2008, the Centers for Medicare and Medicaid Services (CMS) promulgated a regulation that has had a detrimental impact on the lives of countless individuals who are blind or visually impaired.

To the dismay of the blind community, the **Durable Medical** Equipment, **Prosthetics, Orthotics,** and Supplies (DMEPOS) Competitive **Acquisition Rule** contains a provision entitled "Low Vision Aid Exclusion," which states that all devices, "irrespective of their size, form, or technological features that use one or more lens to aid vision or provide magnification of images for impaired

vision" are excluded from Medicare coverage based on the statutory "eyeglass" exclusion. ACB is well aware that this extremely restrictive reading of the "eyeglass" exclusion has resulted in the denial of vital assistive devices for seniors and other Medicare beneficiaries who may have disabilities, particularly those with vision loss, who need to use such devices to

live healthy, safe and independent lives.

Impact of the Exclusion

This proposal has had a significant impact on beneficiaries with vision impairments who depend on assistive technology that incorporates one or more lenses to aid in their vision. The expansion of the eyeglass exclusion has prevented access to devices such as handheld magnifiers, video

monitors, and other technologies that utilize lenses to enhance vision. These tools are often essential for individuals with low vision who, without the aid of assistive technology, cannot read prescriptions, medicine bottles, and other important materials containing content that is vital to their personal health and safety.

In short, these devices allow individuals with

low vision to live independently and safely, and to perform activities of daily living.

Without the aid of such assistive devices, many more individuals will be forced into care facilities as our population ages.
Seniors on fixed incomes often find the cost of such devices burdensome and therefore are unlikely to be able to afford to

purchase them on their own.

The initial impact of this unreasonably narrow interpretation of the eyeglass exclusion has meant a decrease in access to current devices, since prior to this rule change, it was not uncommon for administrative law judges to require **Medicare to provide** them to beneficiaries who had visual impairments and could

demonstrate the requisite necessity. We believe the proposal will have an even more detrimental impact in the long term. The expansion of the statutory eyeglass exclusion to include any technology that uses "one or more lens for the primary purpose of aiding vision" serves as a preemptive and unwarranted coverage denial for any new technology designed to assist individuals with vision loss.

ACB believes that this preemptive coverage denial is particularly harmful because it serves as a tremendous disincentive to innovators and researchers to develop new and progressive vision technology. Medicare coverage policies often drive the coverage policies of private health plans, which are influential when it comes to investments in research and

development. If

Medicare continues to

maintain this coverage

exclusion for lowvision aids, we will

undoubtedly see a

decrease in innovation
in this area.

Legislative Proposal

ACB urges the House of Representatives to promptly pass H.R. 729, the Medicare Demonstration of Coverage for Low Vision Devices Act of 2015.

This legislation would evaluate, through a five-year national demonstration project administered by the **Department of Health** and Human Services, the fiscal impact of a permanent change to the Social Security Act. This legislation would allow reimbursement for certain low-vision devices that are the most function-rich, most powerful, and most expensive. The devices would be

considered durable medical equipment. Individuals will be eligible to participate in the demonstration project only after completing a clinical evaluation performed by an ophthalmologist or optometrist who would then deem a low-vision device as medically necessary.

The national demonstration project is designed to provide a rich, well-structured and defined data set that can yield Medicare-programwide evidence-based conclusions using appropriate statistical methods.

Fund Raising

by Leslie Spoone, CCLVI Fundraising Committee Chair

The CCLVI Fundraising
Committee has been

hard at work. The committee will have

several fundraising
events at the CCB
Summer 2015
conference and
convention in Dallas,
TX.

We will have a table at the Marketplace on Monday and Tuesday mornings of July 6 and 7. We are raffling off exciting items such as a bracelet and coffee mugs, plus coffee and coffee gift cards. We

are also raffling off a certificate for a Honey Baked Ham and 50 dollar Visa gift card at our mixer on Sunday, July 5. In addition, we will be doing a 50/50 at our game night. So if you are at convention, drop by the table in the Marketplace and enjoy all of our exciting events in Dallas. Hope to see you all there!

CCLVI: Come See What We're Up To! 2015 CCLVI Convention

by Jim Jirak

As I write this brief article, finishing touches have been finalized for the 2015 **CCLVI** convention program. Your convention committee, consisting of Jim Jirak, Omaha NE as chair and committee members Bianca Knight, Nashville, TN, Dan Smith, San Lorenzo CA, and Lindsey Tilden, Vista CA have worked tirelessly to ensure the convention program is

memorable for all of the right reasons.

CCLVI programming is tentatively slated to run from July 4 to 8. **Unless otherwise** determined by the **Board of Directors at a** future meeting, the **CCLVI Board of Directors will meet** July 4. Sunday, July 5 we begin programming at 9 AM with introductions, the reading of any proposed

constitutional amendments and resolutions followed by the popular Low Vision **Showcase affording** venders the opportunity to display the latest in low vision technology. That afternoon from 4 PM to 6 PM, attendees of our mixer will be provided the opportunity to meet our scholarship winners.

Monday, July 6 from 1:15 PM to 2:30 PM, CCLVI will partner with **ACB's Rehab Task** Force and discuss the pros and cons of **Structured Discovery** and Conventional Methodology in the rehabilitative process. Certified O and M **Instructor, Michael Byington of Wichita KS** and Mark Bulger of Omaha NE, ACB of **Nebraska's Executive** Council plan an informative, lively and perhaps interactive discussion on understanding both methodologies and

how to advocate for affective rehabilitative service delivery back home. From 2:45 PM to 4:00 PM, we will partner with ACB Next Generation. This partnership will have a panel of those that use Apps on a regular basis present not only low vision friendly Apps, but also Apps of interest. Then unwind and have some fun from 8 PM to 11 PM with our ever popular game night. Relive the game shows of the past as we resurrect

Peter Marshall and Gene Rayburn by way of Michael Byington and play the **Hollywood Squares** and Match Games. The price of admission includes two beverages of your choosing from the available cash bar. Following the **business meeting July** 7, Wednesday, July 8 at 1:15 PM, a representative from Comcast will discuss low vision friendly accessibility features contained within the

X1 Platform. X1 allows Comcast subscribers to control their TV's right from their phone using voice commands to change channels, search for shows, and get recommendations. Then from 2:45 PM to 4 PM we plan to hear from Leandre Jo, **General Manager from Uber in Dallas about** how they can help

visually impaired nondrivers.

to watch not only this publication, but also ACB's Preregistration information for the finalized schedule. I and the entire convention committee hope to see many in Dallas at our programs and events.

Quality of Life

Laughing at Days to Come

By Sarah Petersen

[Editor's note: Sarah is a long-time contributor to Vision Access. She was born with congenital cataracts and diagnosed with glaucoma at age five. **Nearly legally blind,** she has 20/60 acuity and 30 degrees of peripheral vision. She was the 2009 Fred **Scheigert Scholarship** winner.] Six months ago, if you would have told me I would be employed at my dream job, I would

have just laughed at you.

After college graduation in 2013, I received an offer from my alma mater to work as the institution's temporary writing center director. Hoping to eventually fill the position with someone holding a master's degree in writing pedagogy, they intended to keep me on staff for only 9 months. Around spring break, however,

colleagues began
whispering behind
closed doors about the
possibility of me
returning as the next
year's assistant
director.

"Everyone's in favor of you returning! It'll be a while before the paperwork is filled out, but we're pretty positive this will work," professors would say in hushed tones to me after glancing over their shoulders. As my

former English
professors, close
friends, and extremely
influential members of
the college community,
I had every reason to
trust what they saideven though nothing
was certain without
those signatures.

Six months ago, I couldn't imagine living any other life. After attending college in that quaint, artsy little Midwestern town, I could've probably walked its peaceful

nature trails blindfolded. I had a goal to spend long, contemplative hours writing in the local coffee shops to eventually try every drink they offered. The thought of not being able to say, "God Jul!" in celebration of the town's Swedish heritage during Christmas time made me feel like crying, and Easter just didn't feel right without participating in the community's overcentury old tradition of

performing Handel's "Messiah." I was comfortable in my little niche of a basement apartment directly across the street from the college, enjoying the freedom of walking wherever I liked while not being able to drive. Hearing the pitterpatter of all my friends coming down the concrete stairs to visit me made my heart sing. I had just joined a Reformed Presbyterian Church, developed an intense crush on someone in

enjoyed my job. I was certain that nothing could be better than instilling in college students the confidence to write and showing them how to enjoy it. What other job could possibly be out there for a nerdy English major like me?

It was a muggy June morning when my world fell apart. My dear English professors, having faithfully advocated for

my return without
possessing the power
to make the final
decision, had
scheduled to meet with
me. They had the
verdict and wanted to
tell me in person.

"That MUST be a good thing," I thought confidently as I made the long, difficult walk to our meeting place.

It had been the most agonizing month of my entire life since my temporary contract

ended in May. They had said it would be a while before they knew my situation, but I couldn't leave town and give up my apartment while I waited. So there I was, sticking it out and continuing to pay rent, living on my savings from the previous year. Waiting, waiting, waiting. WAITING. I was bound and determined each day to wake with courage, refusing to have a nervous breakdown. Soon I would know; I

just had to be patient.
That month ended up
teaching me quite a lot
about contentment,
patience, and solitude,
the latter being one of
my worst fears.

Have you ever watched everything you know and love seem to shatter and scatter around the room in a billion pieces, sitting there helpless because you have no idea where to start putting it all back together? That's what happened to me in that room.

The budget was tight and an assistant writing center director position wasn't the college's priority. Suddenly, after all of that waiting and spending a month fighting the nausea in my stomach, the coffee shops, Handel's "Messiah," the pitterpatter of my friends' feet on my steps, and teaching the students writing was gone. Just like that.

It was time to be a big girl, place my pain and

disappointment aside somehow, and decide what was next. I was an unemployed college graduate with a B.A. in **English. Forget finding** a job about words or writing; those were only for those with doctorate degrees. I just needed a job in a place where I could be independent. Even when the bad news hit me so hard it nearly knocked the breath out of me, I knew what needed to happen. It was time to start

applying for jobs in Lincoln, Nebraska. Being the only child, I was always close with my cousins growing up, and I especially saw the two girls as my sisters. My mother's sister's family lived in Lincoln, and when we were kids we'd talk long into the night with flashlights under one sheet, giggling and wishing that someday we could live in the same place. When we got a little older, the dream started to make

sense as I felt the imminence of seeking employment after graduation. Of course, Lincoln became Plan B once I accepted my college's writing center offer. My cousin Rachel's invitation to room with her was still there for the taking, so Lincoln suddenly became Plan A.

Staying in town long enough only until my next rent check was due and until I had said goodbye to my friends, I scratched

several drinks off my list at the local coffee shop while I sat in the back room pouring over job applications. Having fallen in love with the college environment, I hit **UNL's website first and** filled out about six applications. I scoured Craigslist and registered with multiple job search websites. I submitted applications for lawyer's assistants, academic communication

production specialists,
administrative
secretaries, sales
representatives,
bookstore clerks, and
library aides.

Days went by, I
stripped my apartment
bare, and gave all my
friends one last
squeeze before
heading to western
Kansas to live with my
parents for a bit. The
farm, wide-open sky
ablaze with sunsets,
and the familiarity of
my own room was

comforting-but not for too long. Soon I began smoldering under the pressure of a seemingly useless degree and society's expectations. I loved my parents, but I couldn't stay there. I **love Jane Austen** novels, but this was no Regency-era Britain, and handsome, wealthy Mr. Darcy was not coming to sweep me off my feet and support me with his fortune.

Kansas sunflowers nodded goodbye in the breeze the day Mom drove me to Lincoln, every nook and cranny of the SUV crammed full with my things. Rachel's spacious, comfortable house exceeded every expectation. After helping me move out of my basement apartment several weeks ago, she brought many of my things with her to Lincoln and had my room prepared just the way I would've done it

myself. It was all ready for my arrival, everything from great grandma's wool comforter on the queen-sized bed to my vintage Billie Holiday picture hanging on the wall. Rachel's kindness and the thrill of being in a new place eased the pain of remembering what I had left behind. It didn't take me long to realize I was home.

But I needed money to contribute to rent. I

needed a job as a reason to stay. Never receiving a reply from my previous applications, I continued the search, spending quiet mornings basking in the light that streamed in from the patio windows, my hands wrapped around large mugs of hazelnut coffee. Rachel had her own job, so I spent the entire day job searching and stopped long enough to make us dinner. I whipped

out more applications
for lawyer's assistants,
academic
communication
production specialists,
administrative
secretaries, sales
representatives,
bookstore clerks, and
library aides. About a
month passed.
Nothing.

One day, after scrolling past all of Career Builder's absurd and irrelevant suggestions of truck driver, medical assistant, and appliance installation

technician, I saw an advertisement for a corporate journalist position. My heartbeat quickened. I didn't have a journalism degree, but I majored in English. Wasn't that close enough? A job of writing about real people and events, communicating important messages to the world, was something I only dared to daydream about. But there it was, right in front of my face. A visit to the company's website only solidified

that I had found my dream job. Suddenly I had never wanted anything so much before in my life. But did they want me?

didn't seem to come through on your online application. Feel free to send it directly to me!"

I took a shot. I filled out the online application and took a day or two to compile a writing portfolio I planned to deliver to them in person.

I was amazed. Surely that must be a good thing! I went to my closet and picked out a tribal-patterned skirt, modest blouse, and black stilettos to wear when I dropped off my portfolio. It wasn't an interview, but delivering a good impression definitely couldn't hurt. I

"Hi, Sarah," a representative from the company emailed me. "Your résumé

dropped off my portfolio with the gentleman who emailed me and spent the next two days absorbed with the writing test he sent me. I had to write a story based off an audio interview he sent using AP style, something I was entirely unfamiliar with but willing to learn in two days. **Upon receiving my** completed writing test, he requested an interview. To say I was nervous was an

understatement, but I also knew I was a perfect fit for the company and my passion for writing made me highly qualified.

But passion wasn't
enough. I interviewed
with the individual I
had been
corresponding with,
who was one of the
nicest and most
sincere people I had
ever met. I only
thought more highly of
him when it occurred
to me that he was

wasting his time to interview me, but that he still wanted to hear what I had to say nevertheless.

"Sarah, are you aware of what our company writes about?" he asked kindly after giving me an opportunity to talk a bit about myself.

"Oh, yes!" I said. "You guys produce newsletters, press releases, and a variety of other things for

other businesses like the railroad, right?"

"Yes, that's correct," he said, pausing to take a breath before continuing. "See, our journalists travel all the time. They travel at least ten days out of the month, mostly to very remote railroad or construction sites far away from large cities. Is that something you'd be interested in doing?" I don't know how to explain to you why I

knew what he was really asking. He couldn't legally inquire about my vision and whether or not it prevented me from performing the job, but he was a smart man. He saw Rachel drop me off at the establishment twice and he had read through my portfolio, which contained several articles I have written for this very publication. It wouldn't take a rocket scientist to put the clues together and

figure out I couldn't drive, even before the interview.

"Oh-oh," I stammered, my face growing warm. "I just saw that thing on your website where journalists travel anywhere from New York to Seattle, from Baltimore to Atlanta. I guess I assumed that meant journalists always traveled to urban locations by plane or bus."

At this point during the interview, everything remains just a blur in my mind. I don't know how openly I admitted to him I couldn't drive or if I even needed to. We both just sat there and knew I couldn't work there even if he wanted to offer me a iob. Somewhere in the conversation he mentioned that the only non-traveling positions were editing promotions offered after working there for ten years. Silently

reminding myself I
was a big girl and
could handle
disappointment, I
somehow managed a,
"Thank you," accepted
the apology in his
eyes, and followed him
to the front door.

I don't know how long
I spent lying on my
bed and staring at the
ceiling once I got
home. I was too
depressed to have the
energy for crying, and
at one point I even
dared to angrily ask

God why He made me this way. Why can't I drive? Why must something I can't help keep me from being an adult woman with a job she loves? WHY? **Eventually, I knew I** had to stop asking "why," reprimanded myself for not having more faith, and continued to fill out more applications for lawyer's assistants, academic communication production specialists, administrative secretaries, sales

representatives, bookstore clerks, and library aides. Panic attacks were a real thing for me during that time. Suddenly the fear of the unknown would grip my chest so tightly that I literally couldn't breathe. One night I actually questioned whether or not Lincoln was the right choice, after all. What if I was wasting all this time in the wrong place when there were jobs elsewhere? Should I

take a risk and apply for a job in a large city where I had no contacts? What if I couldn't get a job **ANYWHERE** and my **English degree was** useless? Were all the hours of study and impassioned classroom discussions all for nothing? I had always been known as the girl that had it all together, but that night I felt like a withered leaf tossed about in the cruel, unfeeling wind called life. I refused to

be comforted by the truth that "God has a plan," which should be relied upon the most during times like these. I was lost, and perhaps a failure.
And then came the phone call. That next morning, I had a voice message from a Lincoln number.

"Sarah, this is Dave, please give me a call as soon as you can, thanks," said the message. It was the gentleman who had

interviewed me at the journalism office.

Because you've been kind enough to read my story for nearly four pages, I won't bore you with a detailed description of how he offered me a job, or how every day since my first day there has been nothing short of a fairy tale. I won't bore you with describing my experiences of calling strangers all across the country, interviewing them, and

writing their stories, or how my primary task is to provide news for **Union Pacific's** information television system. I won't go into detail about how graciously my coworkers have treated me and how I have found the most fulfilling sense of camaraderie with them, or how every day assures me more and more that I'm where I'm supposed to be. So I will leave you with a few quotes instead. There's a

Corrie ten Boom saying I like that says, "When a train goes through a tunnel and it gets dark, you don't throw away the ticket and jump off. You sit still and trust the engineer." I find this especially appropriate now that my job consists largely of interviewing railroaders and gathering news for **Union Pacific. Another** favorite comes from **Proverbs 31:25, which** says, "She is clothed with strength and

dignity; she can laugh at the days to come."

Several months ago, if you told me to have faith through that dark, scary tunnel, I would've laughed from disbelief in a destination better than my wildest dreams. But now I know that faith can give us courage to laugh in the face of fear or doubts about the future. In hindsight, I know I had no reason to be afraid; I should've

trusted my engineer.

Learning this reminds
me of what to do when
I'm plunged into
another tunnel of the
unknown. I share my
story because fears
and tunnels are real,
but everything
happens for a reason.

The next time your train goes through a tunnel and your journey takes an unexpected turn, enjoy the thrill and tilt your head back to laugh, because the light will shine soon enough.

Department of Justice Unveils New On-line Americans with Disabilities Act Complaint Form

from the ACB leadership email list

The Department of Justice is pleased to

announce that individuals wishing to

file ADA complaints with the Department will be able to fill out the form and submit it completely electronically. Filers will also immediately receive a "reference number" that can be used whenever contacting the Department about that complaint. Please visit www.ada.gov to view the new electronic form.

Effective March 15, 2015, e-mail complaints will no longer be accepted by the Department. However, complaints will still be accepted by U. S. mail. Contact the **Department's ADA Information Line at** 800-514-0301 (v), 800-514-0383 (TTY) to receive a paper complaint form by mail.

Guidelines for Conducting a Low-Vision Seminar by the Low Vision Committee of the Pennsylvania Council of the Blind

On October 2, 2013, the day before our annual state convention, in collaboration with **Vision Resources of** Central Pennsylvania, our Low Vision Committee held a seminar for the general public. After the event, we began searching for available resources to help plan and conduct a future low vision seminar, finding that a great

deal of information regarding eye diseases that affect vision is readily available. However, except among organizations and agencies of and for the visually impaired (and persons who consider themselves to be members of the low vision community), the term "low vision" is often misunderstood. Little information is available in brochure or pamphlet form that

addresses related concerns, such as the social/psychological aspects of low vision and strategies for coping and adjustment.

Consequently, a large

Consequently, a large number of people who have low vision don't know where to turn for help.

One way to provide education and information about low vision is to plan, publicize, and hold a local low-vision

seminar for the general public. **According to** information provided by The American Foundation for the Blind, the prevalence rates of vision loss in Pennsylvania in 2012 by gender was: 113,571 males and 153,316 females. The term "vision loss" refers to individuals who reported serious difficulty seeing, even when wearing glasses or contact lenses, as well as those who are

legally blind or unable to see at all.

and conducting the seminar.

Based on our experience planning and conducting a low vision seminar, we offer the following guidelines:

Maintain a checklist of assigned tasks that each participant has agreed to perform and keep track of progress through completion.

Determine how much time is needed. Plan for at least a six-month process.

Remember that the goal of your seminar is to attract people living with low vision; their families and friends, who have little or no knowledge about aspects of this condition; those who may need guidance

Establish a planning team and assign tasks to the areas of planning, publicity,

adjusting to vision changes; and those needing guidance navigating the services, organizations, and agencies that are available to them. Invite them to become a part of the low vision community. Along with working within your own organization, consider collaborating with other agency or organization members in your geographic area with whom you

have a good relationship. Working with other groups may provide additional resources and contacts.

Next, decide what topics will be covered, who will be presenting the information, the date and time of the event, and how long the seminar will be. Give consideration to covering the following three areas:

The medical aspects of low vision with an introduction to the use of low vision devices that are designed to maximize remaining vision, which cannot be improved by eye surgery. Engage an ophthalmologist knowledgeable about the subject, and an optometrist who specializes in the assessment and prescription of low vision aids, often referred to as "Low **Vision Specialists."** Depending on logistics,

many Low Vision
Specialists will be glad
to set up a display of
low-vision devices that
he or she can show to
those in attendance.

Techniques and strategies (tips and tricks) that people with low vision can use for accomplishing the tasks of daily living. Presenters best suited to cover this topic would be professionals such as rehabilitation teachers of the visually impaired, occupational therapists trained to

work with people who are blind or visually impaired, and low-vision therapists.

The social, psychological, and emotional effects of vision loss. Choosing a presenter for this topic requires careful consideration, because if not handled properly, more harm than good may result. This topic must be covered in a way that is sensitive to those who are experiencing

low self-esteem, depression, and not knowing how to find help, so that they will leave with a positive attitude toward their sight loss. The presenter for this topic must be able to discuss this topic in a frank and open manner that gives hope to members of the audience who are struggling to make the adjustments they need to make in order to move forward in dealing with their low vision issues, as well

as to seek to become a part of the low vision community. An ideal presenter for this topic would be a person with low vision, certified in the area of counseling people who are visually impaired.

There is definitely a place in a low vision seminar for peers living with low vision to inform as well as provide motivation to those who are struggling and would benefit from embracing and

employing coping strategies. For example, as part of the "tips and tricks" and psycho-social aspects portion of the seminar, consider offering a panel discussion that consists of an appropriately selected moderator. Invite several members who have low vision, are well adjusted, articulate and encouraging, to be on the panel to share their experiences of living with low vision in everyday situations,

as they relate to the topics under discussion.

to take contact information from attendees as they arrive.

Things to consider when selecting a location:

Remember to have contact information for key facility staff in charge of such areas as audio visual equipment, room setup, and personnel at the front desk.

Accessibility: A room large enough to accommodate the audience size, as well as provide an area for exhibitors

Make an appointment to visit the facility so that you may familiarize yourself with the layout of the

Space for registration:
Be sure that you have assigned people to welcome guests, and

facility and the room
where the event will
take place. Since your
audience will be made
up of people with
varying degrees of
vision loss, alert staff
to the fact that
adequate lighting in
the meeting area is a
necessity.

Publicizing your seminar is crucial.
Prepare a flyer with the details of your event. The earlier you can distribute your flyer, the better. Think of as many agencies,

organizations and individuals as you can and distribute your flyers to them. Spread the word. The flyer does not have to contain specific details at this point, but it must be written in an attention-grabbing manner. Provide the basic information: location, time, date, topics to be covered, and cost, if any. Adding graphics will increase flyer appeal. Write a press release or public service announcement.

Provide media outlets with all of the information you wish to convey as concisely as possible.

If you don't have a list of media outlets in your area, compile a database of newspapers, television stations, radio stations, schools, agencies, organizations, etc. **Contact each outlet** and find out how they would like to receive the information, e.g.

email, regular mail, a live interview, etc. Also find out how much time in advance of your event each outlet would prefer to receive the information. Don't overlook social media. Consider posting information about your event on Facebook, Twitter, blogs and group lists. If you need more help in developing a publicity strategy, The Public Awareness and **Relations Committee of** the PCB is ready to assist you.

Prepare an agenda that can be distributed to target people and groups before the event, and will be available to each attendee upon their arrival. Include arrival time for registration, the presenter's name, title, topic being covered, time each presenter will begin, and time of breaks. By following an agenda, the audience and presenters will have a

sense of structure and assurance everything will run smoothly.

Make sure everyone involved in the seminar is in agreement with the details of the agenda by allowing enough time for input from all before finalizing it.

Regarding audience participation, remember that the agenda is like a road map containing specific directions for getting from your point of origin to your final

destination. With this image in mind, each presenter is responsible for covering his or her material as indicated in the agenda. Some presenters are comfortable inviting questions from the audience while others are not. As a rule, you can count on your presenters to handle their responsibilities competently with whatever style they prefer. Inviting questions from the

audience outside of the agenda is not recommended. You are deviating from your road map, so to speak, and risk getting lost. Perhaps allow a block of time at the conclusion of the agenda for questions and comments from the audience. This way, you have control of how much time will be available for audience participation while also knowing that you have covered

all material within the agenda time frame.

As the day of the event approaches, contact all presenters to confirm that they are ready to participate. On the day of the event, plan for all those in charge to arrive at the facility prior to the beginning of the seminar, so that you can be sure that the room is set up as agreed upon. It is a good idea to arrange for a facility coordinator to do a walk-through with you, who can be of
assistance to you in
the event that last
minute changes are
needed. During this
preparation time,
anyone with displays,
hand-outs, and
demonstration
equipment will have
time to get things in
order.

After the seminar, allow time for attendees to speak with the presenters, obtain hand-outs and other materials, and become acquainted

with the low vision aids and devices that may have been made available. During this time period, you will have an opportunity to get a sense of the attendees' impressions of the strengths and possible weaknesses of the program. You may want to prepare a short, large-print survey form with a return address envelope, which is distributed along with the agenda, information packet, or

any other materials each person receives prior to the start of the program. Attendees can either fill out the large print survey before leaving or complete it later. The survey sheet might be in the form of a questionnaire, employing a numeric rating scale for each question, e.g.:

Do you feel that today's seminar was:

1. Excellent, 2. Very

good. 3. Fair, 4. Poor,5. Very poor.

Be sure to take the time to evaluate the feedback that you have acquired and make use of what you have learned when you plan your next low vision seminar. You may also want to consider using other survey formats, such as email, web site (e.g. Survey Monkey) or telephone. You could even choose to employ a combination of survey formats in

order to achieve the

maximum level of response from those in attendance.

Finally, keep a written record of all of the steps you took to plan and conduct your seminar. This documentation will prove to be extremely valuable and helpful as a tool that you can use to make the next event even better and to ensure that you don't have to "re-invent the wheel." **Because of your hard**

work in planning your

low vision seminar,
you will be pleased and
rewarded with the
efforts everyone
involved made to bring
knowledge about low
vision to those having
little or no

understanding of the multifaceted realm between total blindness and 20/20 vision.

If you have any questions or comments

about these guidelines, feel free to get in touch with us:

Low Vision Committee
Chair, Ed Facemyer:
email:
efacem@verizon.net

Phone: 610-647-3365.

Committee Members:
Steph McCoy, Yvonne
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Williams, Sherri
Rodgers, Diane Krek,
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GE Works with Kentucky School for the Blind to Design Braille Kit for Artistry Electric Range

The simplicity of GE's **Artistry Series of** appliances--an affordable suite of appliances targeted to first-time homebuyers and Millennials--lends itself to a unique market segment: people who are visually impaired. Working with students from the Kentucky School for the Blind, **GE** engineers and

designers in Louisville,
KY, developed an
accessory kit of braille
overlays for the new
Artistry electric range
controls. These
controls help users
who have low vision
and braille skills use
its cooktop and oven
functions.

According to an American Foundation for the Blind article,

stoves are the least accessible class of appliances. Many ranges today have smooth, push buttons on a back control panel. The ADA**compliant Artistry** range offers frontcontrol knobs that are within reach, and a straightforward design that lends itself to a braille accessory kit for users who are blind or visually impaired.

education," says Lee Lagomarcino, a GE product manager who initially championed the project and **observed Kentucky** School for the Blind students interacting with ranges. "As we developed the Artistry electric range, we knew its simplicity made it more universally appealing and ideal for a braille application."

"Both my parents taught special

High, low and off heat settings were added to

the braille overlay on GE's Artistry range controls to help the visually impaired use the cooktop functions.

A focus group of students at the school came up with ways to make ranges more user friendly--using puffy paint and brightly contrasting colors to showcase their ideas. GE took those ideas and turned them into the customdesigned braille kit. Students also tested

the initial designs for ease of use.

Kentucky School for the Blind Program **Coordinator Paula** Penrod said, "Many times, manufacturers will introduce a new product, then seek comments from consumers with disabilities. Consumers who are blind and visually impaired have unique needs when using appliances. By working with GE during the production stage, our students

were able to
demonstrate the type
of braille modifications
that would be most
helpful. We appreciate
GE for seeking our
students' input on the
front end of GE's
Artistry range project."

As a thank you to the Kentucky School for the Blind and its students for their help, GE donated a full suite of Artistry kitchen appliances to the school's campus on

Frankfurt Avenue in Louisville, KY.

Pricing and Availability

The GE Artistry electric ranges and braille kits are available in black and white and can be purchased nationwide where GE appliances are sold. For help locating a dealer, go to www.geappliances.co m and use the Dealer Locator tool or call the **GE Answer Center at** 800-626-2000. The estimated retail price

of the Artistry electric range is \$599, and the Braille kit is \$15.75 (Retailers Pub number 4-A034 fits the black Artistry range model ABS45DFBS, and pub number 4-A024 fits the white Artistry range model ABS45DFWS.)

braille kit for common buttons on its microwave ovens. The kit (pub number 4-A212) can be ordered where GE appliances are sold.

Note that retailers set their own prices.

In addition to the braille kits for ranges, GE offers a standard

Science and Health

Health and Research

FDA Approves
VisionCare's Telescope
Implant for Macular
Degeneration in
Patients 65 Years and
Older

Smaller than a pea, the telescope implant uses wide-angle micro-optics to improve vision for patients with End-Stage AMD, the most advanced form of macular degeneration. (PRNewsFoto/VisionCa re Ophthalmic Tech)

VisionCare Ophthalmic Technologies, Inc. ("VisionCare"), a developer of advanced visual prosthetic devices for the treatment of agerelated macular degeneration (AMD), announced on October 13, 2014, that the U.S. **Food and Drug Administration** approved the Implantable Miniature Telescope (by Dr. Isaac Lipshitz) for use in patients living with

age-related macular degeneration who are age 65 or older. The telescope implant is the only FDA approved surgical device for end-stage AMD and is Medicare eligible.

The telescope implant is the integral component of VisionCare's comprehensive treatment program called CentraSight®. This treatment program helps patients follow the steps

necessary for proper diagnosis, surgical evaluation, implantation, and postoperative care. The telescope implant improves visual acuity and quality of life for suitable patients with AMD whose sight is permanently obstructed by a blind spot in their central vision, making it difficult or impossible to see faces, read, and perform everyday activities such as watching TV, preparing meals, and self-care.

End-stage AMD is uncorrectable by any other treatment including glasses, vitamins, drugs, or cataract surgery and is associated with increased stress and depression as vision diminishes.

"Despite all the great pharmacotherapy advances in AMD treatment, some patients will unfortunately progress to end stage AMD where their straight

ahead, central vision is permanently blocked," said Dr. David Boyer, of Retina Vitreous **Associates Medical** Group, Beverly Hills, **CA.** "Once end-stage **AMD** patients have lost their central vision, cataract surgery will not provide them with as much benefit to their quality of life as the telescope implant."

AMD is the leading cause of vision loss in Americans aged 60 and older, affecting an

estimated 15 million people. Of those, 2 million Americans are living with end-stage AMD and that number will increase as the Baby Boomer cohort ages.

"We are pleased and excited about this important FDA decision," said Allen W. Hill, President and Chief Executive Officer, VisionCare Ophthalmic Technologies. "We developed the telescope implant to help older adults

who've missed seeing moments in their life and lost much of their independence. Now, younger individuals, those age 65 to 74, will also have access to this important therapy for treating end-stage AMD."

The telescope implant is not a cure for Endstage AMD. As with any medical intervention, potential risks and complications exist with the telescope implant. Possible side

effects include
decreased vision or
vision impairing
corneal swelling. The
risks and benefits
associated with the
telescope implant are
discussed at
www.CentraSight.com.

About CentraSight and the Telescope Implant

The telescope implant was previously approved by the FDA for patients greater than or equal to 75 years of age. FDA

approval to expand access to those age 65 and older was based on clinical data provided by the pivotal safety and efficacy study, IMT-002, and long-term studies IMT-002-LTM and IMT-002-LTME, which followed patients to 5 and 8 years, respectively.

The Implantable
Miniature Telescope
(by Dr. Isaac Lipshitz)
is indicated for
monocular
implantation to

improve vision in patients greater than or equal to 65 years of age with stable severe to profound vision impairment (bestcorrected distance visual acuity 20/160 to 20/800) caused by bilateral central scotomas (blind areas) associated with endstage AMD. This level of visual impairment constitutes statutory (legal) blindness. Smaller than a pea, the telescope is implanted in one eye in an outpatient surgical

procedure. In the implanted eye, the device renders enlarged central vision images over a wide area of the retina to improve central vision, while the non-operated eye provides peripheral vision for mobility and orientation.

Patients and physicians can learn more about the telescope implant by visiting www.CentraSight.com

or calling 1-877-99-

SIGHT.

Request for Contributions

CCLVI gratefully accepts contributions from readers and members to help pay for the costs of publishing Vision Access, the costs related to our 800 line and Project Insight, and for funding the Carl E. Foley and Fred Scheigert Scholarships. Please send contributions to CCLVI Treasurer, Linda Allison, 6010 Lilywood Lane, Knoxville, TN 37921

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