Easter Seals Program Application

Easter Seals' mission is to provide exceptional services to assure that all people with disabilities or special needs and their families have equal opportunities to live, learn, work and play in their communities.

A brief description of each Easter Seals program follows to assist you in finding the service that will best meet your needs. Please feel free to contact the Easter Seals Iowa Outreach Coordinator at 515-309-1783, or toll free at 1-866-533-9344 or 515-289-4069 (tty) with any questions you may have, or to request the application in an alternative format. Visit our website at www.eastersealsia.org

Job Training & Employment Services

Employ Ability
The Employ Ability program is a pre-vocational internship program for individuals with disabilities to learn community safety skills, employability skills, and work skills. Individuals will increase skills in the area of transportation and community safety skills, professional dress and hygiene, emergency procedures, social skills, and job task completion.

Child Development Center
High-quality child care can be difficult for any parent to find, and the challenge is even greater for parents of children with disabilities. Easter Seals provides a safe and nurturing setting in which children of all abilities can explore their environments, develop new skills, and learn from each other. The Bob and Billie Ray Child Development Center serves children, with and without disabilities, between the ages of 6 weeks to 5 years of age. Daily activities are educational, and the curriculum is driven by appropriate practices to meet each child’s physical, educational, social, emotional, and developmental needs.

Camping, Recreation, & Respite Services

Resident Camping at Easter Seals Camp Sunnyside
Easter Seals gives children and adults with disabilities ages 5 and older the chance to try new activities and enjoy traditional camp favorites at Camp Sunnyside. Weeklong resident camp sessions are held each summer and are structured on a variety of fun and interactive themes. Camp Sunnyside is located on 130 acres of wooded land north of Des Moines and features a lake for canoeing, an animal farm, horseback riding, archery, an indoor sports facility, and a heated indoor pool. Camp and respite services require a separate application. Contact info@eastersealsia.org to request an application or visit www.eastersealsia.org to download an application.

Summer Day Camp
Easter Seals Summer Day Camp programs are fully integrated so children with and without disabilities can participate to their fullest ability. Children entering first grade to 12 years old experience an interactive environment with an emphasis on developing physical and personal growth.

Respite Services
Easter Seals Respite Services provides temporary care for children and adults with and without disabilities, allowing parents or caregivers breaks to focus on other areas of their lives. Regularly scheduled respite sessions are held at Easter Seals Camp Sunnyside. Young adult sessions and 24-hour respites are also scheduled throughout the year. In the event of an emergency, Easter Seals will attempt to provide respite services; however, this service can not be guaranteed.
Day Habilitation

*Life Club*

Easter Seals Life Club is an alternative day program for individuals with disabilities who are approaching retirement age or for other reasons are unable to work in the community. Located at Camp Sunnyside, Life Club provides members with social activities, skill building, and volunteer activities.

CSI: Consumers Socially Integrated

Easter Seals CSI is a long-term, community-based day program that focuses on consumers learning transferable skills that lead to independent community integration. All activities occur in the community.

Supported Community Living

*Hourly Supported Community Living*

Easter Seals offers Supported Community Living programs for children and adults. Each at-home and community-based program provides support to individuals with disabilities so they may live independently. Individualized programs vary by the participants’ needs or age.

*24-Hour Supported Community Living*

The 24-Hour SCL program provides housing for individuals with a variety of disabilities. 24-Hour SCL consumers reside in an independent living house learning the life skills necessary to enhance their individual independence, and move toward their goal of living on their own. Skills such as meal planning and preparation, budgeting & banking, and social interaction are the focus of the 24-Hour SCL program.

Rural Solutions

Easter Seals Rural Solutions provides on-site rural rehabilitation services to farm families adjusting to the permanent disability of a family member. Easter Seals assists families by promoting increased independence through adaptive equipment, modifications, and support services that enable a family to continue their livelihood on the farm and remain active in their community. Easter Seals provides home accessibility assessments to Veterans referred by the Veterans Administration.

AIM*

AIM (Achieving Independent Methods) is a unique managed care plan for people with mental retardation and developmental disabilities. The program offers a full range of direct services including employment, housing, health services, recreation, and socialization. Clients, who must be referred by Polk County Health Services, benefit from a team approach to identifying and accessing services needed daily in their lives.

*An application is not needed for the AIM program. Participants must be assigned to the program by Polk County.

Case Management Services

Case Management Services assists participants to become as independent in their daily lives as possible. Easter Seals Case Managers help participants and family members make choices about the type of services available and how they can access them. Case Managers also advocate for participants' rights, monitor services, and link participants to appropriate providers.

Assistive Technology Center

Easter Seals Assistive Technology Center, located at Camp Sunnyside, houses three statewide programs: Equipment Loan, the Demonstration Center, and the Assistive Technology Lending Library. Appointments for these three programs can be made with an Easter Seals staff to visit the AT Center by calling 515-309-2395 (phone) or 515-289-4069(TDD).

Equipment Loan

Equipment Loan provides refurbished durable medical equipment to individuals who either cannot afford it or do not have access to it. Equipment may include electric hospital beds, electric and manual wheelchairs, and adaptive bathroom devices. Easter Seals accepts donations of quality, durable medical equipment. Availability is based on donations received.
Demonstration Center
The Demonstration Center showcases different types of assistive technology that allows consumers to try equipment before it is brought into the home.

Assistive Technology Lending Library

Equipment and resources are available for individuals, families, counselors and schools. Up to 5 pieces of equipment can be checked out for 30 days to find out if it will work for them before deciding to purchase from vendors.

ADMISSION CRITERIA
Easter Seals strives to provide quality programs that produce outcomes desired by the applicant and the funding source. Easter Seals’ Intake Coordinator will consider all applicants and try to be flexible in meeting individual needs. Applicants must meet the following admission criteria to begin the intake procedure:

- All applicants must have a funding source. Easter Seals residential camping program has a limited amount of campships available. Applicants may request financial assistance forms from the Intake Coordinator.
- All applicants will be reviewed for any safety issues that may be potentially harmful to themselves, others, and/or property.

ADMISSION PROCESS
Referral of applicants should be made to the Easter Seals Intake Coordinator, either by completing the attached application or by calling 515-309-1783. The Intake Coordinator may request one or more of the following to determine the necessity of an intake staffing:

- medical examination
- social history
- results of vocational testing or training
- educational evaluation and information
- an individual service plan, when applicable
- other agency reports

No person will be denied Easter Seals services without a minimum intake. When no intake is necessary the applicant will be accepted immediately and provided an estimated date when Easter Seals services will begin. The intake staffing shall consist of the Easter Seals Intake Coordinator, the applicant, the referring party, and/or funding source. At the intake staffing the applicant will be informed of the expectations of the program and its participants. The expected outcome of the services and estimated time needed for services will be determined at the intake staffing. A decision regarding the applicant’s admission to an Easter Seals program will be made within fourteen (14) business days following the intake staffing. If admission is recommended, the applicant and the referring agency will be notified by letter that the applicant will be put on the approved list and admitted as space becomes available. If it is determined that the applicant does not meet admission criteria or that the services for which the applicant was referred does not meet their needs, the applicant and the referring counselor will be notified by letter. When possible, a referral to another agency will be recommended. If you have questions about the intake process, please contact the Easter Seals Intake Coordinator.

APPEAL PROCESS FOR INTAKES
In the event an applicant is not satisfied with the intake decision, the following appeal process may be conducted:

- The applicant, guardian, and/or their referring counselor must notify the Easter Seals Intake Coordinator with an explanation as to why they are requesting an appeal. This explanation should be received within five (5) business days following the receipt of decision.
- The Intake Coordinator will meet with the applicant and referring counselor to discuss the situation. If an agreement cannot be reached, the applicant may proceed to the next step.
- Inform the Intake Coordinator of their dissatisfaction with the outcome. The Intake Coordinator will notify the Easter Seals Vice President of Program Services.
- The Vice President of Program Services and the Director of the involved program will meet with the applicant and the referring party to discuss the situation and review the intake information. They will make a decision within ten (10) business days following the meeting.

Information regarding program certification, accreditations, and outcomes are available on request.
Please check programs of interest. (See attached sheet for description)

- Case Management
- Child Development Center
- Day Habilitation-Life Club
- Day Habilitation-CSI
- Employ Ability
- Respite Services
- Rural Solutions
- Summer Day Camp
- Summer Residential Camping
- Supported Community Living

Applicant’s name: __________________________________________________________________________

(Last)    (First)                 (Middle)

Current address: __________________________________________________________________________

(Street)   (City)         (County)              (State)       (Zip)

Telephone number: (____)_________________________   Cell Phone:(      )___________________________

E-mail address ________________________    Social Security Number:_______________________________

Date of Birth: _____/_____/_____                        Medicaid/State ID Number:___________________________

Gender: □ Male    □ Female

Military status:
  o Active duty
  o National Guard/reserve
  o Veteran
  o Member of Military/Veteran family (child, spouse, parent)
  o N/A

Group Home Name (if applicable): _____________________________________________________________

(Contact name)

Address (if different from above):

(Street)   (City)       (State)  (Zip)  (Phone Number)

Legal Guardian’s Name (if applicable): __________________________________________________________

(Last)     (First)

Address (if different from above):

(Street)   (City)       (State)  (Zip)  (Phone Number)
E-mail address_________________________________________________

Diagnosis:_______________________________________________________________________________________________________
(Primary)                                           (Date of on-set)

(Secondary)                                          (Date of on-set)

Emergency Contact (if not guardian):__________________________
(Last Name)                                           (First Name)

Emergency Contact Phone numbers:__________________________
(Home phone number)         (Work phone number)         (Cell phone number)

Referral Source (if applicable):__________________________
(Name)                                           (Agency)        (Telephone number)

E-mail address:_______________________________________________________________________________________________

Primary Funding Source:__________________________________
(Name)                                           (Agency)        (Telephone number)

Secondary funding source:_______________________________
(Name)                                           (Agency)        (Telephone number)

Why are you interested in Easter Seals?__________________________________________________________________________
__________________________________________________________________________________________

Do you require alternative format documents (large type, Braille, etc) or utilize alternative communication (i.e. sign language)?  □ Yes  □ No

If yes, please explain:_______________________________________________________________________________________
__________________________________________________________________________________________

Signature of applicant:___________________________________________  Date: ______________________

Person completing form:_________________________________________  Date: ______________________

Signature of Legal Guardian (if applicable):___________________________________________________________

Submit this application to Outreach Coordinator at:
Easter Seals Iowa
2920 30th Street
Des Moines, Iowa 50310

For questions contact 515-309-1783 (voice),  515-289-4069 (tty) or info@eastersealsia.org.