

Computer/Electronic
Accommodations Program
Handbook for Providing Assistive Technology
to Wounded Service Members
Version 1.1

Support. Equip. Empower.



U.S. Department of Defense
Office of the Assistant Secretary for Health Affairs
TRICARE Management Activity

This page intentionally left blank

Letter from Dinah F.B. Cohen, Director Computer/Electronic Accommodations Program



Office of the Assistant Secretary of Defense (Health Affairs)
5111 Leesburg Pike, Suite 810, Falls Church, VA 22041-3206
T 703-681-8813, TTY 703-681-3978, F 703-681-9075
www.tricare.mil/cap



As many of our soldiers, sailors, airmen and marines return from deployment in Operation Enduring Freedom and Operation Iraqi Freedom with injuries, service providers at Military Treatment Facilities (MTFs) continue to ensure the highest quality of care and transition support services. As they are recovering from injuries sustained in the Global War on Terror, these service members also plan for their next assignments or jobs. To best prepare for these positions, the Department of Defense Instruction, Assistive Technology (AT) for Wounded Service Members (DoDI 6025.22), was produced to outline procedures and responsibilities for a successful AT program.

DoD established the Computer/Electronic Accommodations Program (CAP) in 1990 to provide assistive technology to allow federal employees with disabilities to access computer and telecommunication systems. For years, part of the CAP mission has been to assist the Military Health System (MHS) in providing equal access in patient care. More recently, CAP expanded this role to provide AT to wounded service members. Today, I am pleased to be working with our partners across the MHS and in other federal organizations to assist in the treatment and re-employment of our nation's heroes.

In support of DoDI 6025.22, CAP created this *CAP Handbook for Providing Assistive Technology to Wounded Service Members*. Our goal is to build upon successes and create an interdependent AT system that enables service members to identify and use AT early in their rehabilitation process. By partnering with medical professionals with this model, the MHS has been and will continue to make a difference in thousands of lives and families.

Thank you for your commitment and dedication. I look forward to working with you to provide the tools and pathways for wounded service members to rejoin the workforce as productive and independent employees.

Sincerely,

A handwritten signature in black ink that reads "Dinah F.B. Cohen".

Dinah F.B. Cohen
Director

Real Solutions for Real Needs

Support. Equip. Empower.

This page intentionally left blank

Table of Contents

Computer/Electronic Accommodations Program	6
Wounded Service Member Initiative	8
Support through Training and Needs Assessments	9
Equip with AT Solutions	10
Empower through Employment.....	16
Legislation and Instruction	18
Roles and Responsibilities.....	20
Procedures.....	22
Ongoing Support.....	26
Tracking of Services.....	28
Training and Materials	30
Appendices	32

Appendix A: CAP Agency Partnership List

Appendix B: Public Law 109-364, Section 561

Appendix C: DoD Instruction 6025.22

Appendix D: Memorandum of Understanding

Appendix E: CAP Wounded Service Member Fact Sheet

Appendix F: Resources

This page intentionally left blank

Computer/Electronic Accommodations Program



The Department of Defense (DoD) established the Computer/Electronic Accommodations Program (CAP) in 1990 to improve accessibility for people with disabilities throughout the DoD and remove the cost of accommodations. CAP provides assistive technology (AT) and related services to ensure access to computer and telecommunication systems for employees with disabilities. The TRICARE Management Activity (TMA), a field activity in the Office of the Assistant Secretary of Defense (Health Affairs), serves as the executive agent for CAP. CAP is housed in TMA's Office of the Chief Information Officer.

Via the National Defense Authorization Act of October 2000, Congress granted CAP the authority to provide AT, devices, and services free of charge to federal agencies that have a partnership agreement with CAP. Currently, CAP has a partnership agreement with 66 federal agencies outside of DoD. These partnerships will allow CAP to provide AT to service members and disabled veterans working in DoD and in many other federal agencies, including the Departments of Labor, Health and Human Services, and Veterans Affairs. A full list of CAP's DoD and Non-DoD partner agencies is located in Appendix A.

In 2006, legislation was passed via the National Defense Authorization Act, Public Law 109-364, Section 561 (See Appendix B), to provide AT to support wounded and injured service members and enable them to retain the equipment upon separation from active service. With the passage of this legislation, CAP began a new initiative and expanded its mission to include wounded service members.

CAP's *mission* is to provide AT and accommodations to ensure people with disabilities and wounded service members have equal access to the information technology, environment and opportunities in DoD and throughout the Federal government.

CAP's *vision* is to increase the employment of people with disabilities by ensuring they have access to accommodations throughout DoD and the Federal government.

This page intentionally left blank

Wounded Service Member Initiative



Since its beginning in 1990, CAP's disability accommodation experts have filled over 90,000 accommodation requests for federal employees with disabilities by bridging the gap between functional capabilities and job requirements. Using this experience in AT and disability accommodation, the CAP staff transferred this knowledge into a pilot project to assist wounded service members during their rehabilitation process. Recognizing the success of the pilot, Congress passed legislation ensuring retention of the AT, and CAP formally established its Wounded Service Member Initiative in 2004.

As stated in the Public Law 109-364, Section 561, and outlined in the DoD Instruction 6025.22, Assistive Technology for Wounded Service Members (Appendix C), CAP works closely with medical providers, therapists, case managers, and military treatment liaisons at military treatment facilities (MTFs) to increase awareness and availability of AT. CAP provides needs assessments, AT, and training to our nation's wounded service members with cognitive, dexterity, hearing, and visual impairments. Once the appropriate AT has been identified, CAP provides the solutions free of charge to support the service members' medical recovery and rehabilitation.

Based on several working with medical providers at several MTFs, the initiative is organized into the following phases to help transition service members from injury toward re-employment:

- Support through Training and Needs Assessments;
- Equip with AT Solutions; and
- Empower through Employment.

The rest of this section is organized by the phases listed above and provides details on services and resources CAP offers for service members and MTFs.

Support through Training and Needs Assessments

CAP partners closely with medical providers and other appropriate MTF personnel to establish needed communication and process channels. To begin, CAP will schedule training sessions to review the initiative, roles and responsibilities, and procedures. These trainings can be conducted onsite, via Video Teleconference (VTC) or via web-cast. More information on in-service trainings is provided on pages 22 and 30.

CAP works with service members and their medical providers by administering needs assessments. CAP needs assessments are a critical step in the accommodation process, where an evaluation of the limitations of the individual and identification of appropriate technologies to facilitate recovery and rehabilitation are necessary to adequately address a service member's injuries. Many service members sustain multiple injuries and require an individualized needs assessment to identify the most appropriate AT solutions. In an effort to streamline this process and provide the most appropriate solutions, the online needs assessment questionnaire may be the first step of the CAP process.



Needs Assessment Process

Needs assessments must be conducted on a case-by-case basis to ensure that the needs of the individual are being assessed fully and accurately. The online assessment walks the submitting physician, therapist, or case manager through the essential information fields that will give CAP's staff the best understanding of a service member's current functional limitations/ disabling conditions, their current job functions, their military status (continuing on active duty, MEB process, or plans to separate) and their future plans. Future plans can include a shift in job function while remaining on active duty, a return to school, or employment upon separation with either the public or private sector.

Once a needs assessment is completed online, a summary is populated with all entered information for the submitter's records and sent to CAP for review and AT determination. To learn more about the assessment of a service member and the selection of appropriate AT, please see the subsequent "Equip with AT Solutions" section, beginning on page 10, and the "Conduct Needs Assessments/Submit AT Requests" sub-sections, beginning on page 23.

Equip with AT Solutions

CAP *equips* service members with AT devices, accommodations and training. Many service members sustain multiple injuries and require a combination of AT devices. Accommodations and training are available for the conditions described below.

Cognitive Difficulties, including Traumatic Brain Injury (TBI)

For TBI and closed-head injuries, CAP provides various memory cueing aids and literacy softwares to service members who struggle with memory loss and other cognitive difficulties. Cueing aids can assist service members in remembering appointments, medication schedules, and personal contact information. Technology options can vary in complexity from simple cueing aids to powerful computer-based applications that provide voice output and word comprehension tools to promote understanding and retention.



Identifying cognitive deficits

Step 1: What is the nature of the injury causing the cognitive limitation? Concussive blasts, closed brain injury, and intrusive brain injuries can all affect cognitive functioning. Cognitive impairments are considered disturbances in brain functions, such as memory loss, problems with orientation, distractibility, perception, and processing of visual and auditory information.

Step 2: What does the service member experience in regards to cognitive function? Does the service member experience short term memory loss (forgetting appointments, medications, or assignments)? Does the service member's loss of memory affect their ability to perform familiar tasks? Does the service member have problems with receptive understanding of text or auditory information? Are they able to understand expressive language via text or speech? Does the service member experience disorientation and become lost frequently even when travelling in familiar locations? Does the service member have any difficulties understanding and/or retaining information?

Step 3: How does the service member currently compensate for loss of cognitive functioning? Is a family member or case manager taking the primary responsibility for assisting with memory or orientation? Is the service member currently using any tools (notebooks, cellular telephones, sticky notes) to assist with memory and scheduling?

Step 4: What is the current treatment and therapeutic regimens?

Step 5: What is the prognosis for change in the condition?

Step 6: Does the service member experience any other conditions (loss of vision, hearing, or use of upper extremities) which may impact their ability to learn or use any identified assistive technologies?

Identifying appropriate assistive technology

Step 1: What are the service member's future plans? (COAD, continuing education, work in the government or private sectors, etc)

Step 2: What are the specific tasks and tools associated with these duties? (Word processing, spreadsheets, email, web browsers, processing information in either hard-copy or verbal formats) What is the service member's comfort and knowledge level of information technology in general?

Step 3: What assistive technologies will the service members be comfortable with and still be able to use independently and efficiently?

a) If a service member is suffering short term memory loss, they may benefit from using a memory cueing aid. For individuals already working or learning in a computer environment, effective cueing aids may be tools already available in the existing software applications.

b) If a service member experiences difficulty with reading comprehension and logical thinking processes, they may benefit from the use of literacy software. Literacy software programs can assist with expressive and receptive processing of written information, recall, word prediction, and definitions. Certified training is available for those who need these tools.

c) In the most severe cases of TBI, where basic expressive and receptive verbal communication skills are significantly impacted, an augmentative communication device may be identified as an appropriate accommodation.

To learn more regarding cognitive AT solutions, visit:

www.tricare.mil/cap/wsm/accom_sol/technology.cfm?techID=2

For more information and organizations focused on cognitive impairments and brain injuries, please refer to Appendix F - Resources.

Dexterity Impairments, including upper extremity amputees

CAP provides devices to assist service members who have dexterity impairments. These impairments include nerve damage, fractures, burns, and amputations to their upper extremities. Solutions include compact keyboards, alternative pointing devices, and voice recognition software.



Identifying dexterity limitations

Step 1: What is the nature of the injury causing the dexterity limitation? Disabilities often impact range of motion, from minor to major movements of fingers, hands, wrists, arms and shoulders. These include (but are not limited to) quadriplegia, paraplegia, amputations of digits or limbs, burns, shrapnel, or blast trauma.

Step 2: What are the current treatment and therapeutic regimens?

Step 3: What is the prognosis for change in the condition?

Step 4: Does the service member experience any other conditions (vision loss, hearing loss, learning disabilities, traumatic brain injury, etc.) which may impact the ability to learn or use any identified assistive technologies?

Identifying appropriate assistive technology

Step 1: What are the service member's future plans? (COAD, continuing education, work in the government or private sectors, etc.)

Step 2: What AT will the service member be comfortable with and still be able to use efficiently? What is the service member's comfort and knowledge level with general information technology?

a) Alternative input devices allow for continued physical command and control while also accommodating adaptive positioning needs.

b) Speech recognition software allows for computer input by voice, and certified training is available. Some individuals may be best accommodated by a combination of voice recognition and alternative input devices. Potential other limitations, such as traumatic brain injury, must be considered when determining if voice recognition software is a practical application for an individual.

To learn more regarding dexterity AT solutions, visit:

www.tricare.mil/cap/wsm/accom_sol/technology.cfm?techID=5

For more information and organizations focused on dexterity impairments, please refer to Appendix F - Resources.

Hearing Loss

CAP supports service members who suffer from partial or full hearing loss, including fluctuating, progressive, or low-frequency hearing loss, tinnitus, and deafness. Assistive listening devices allow users to adjust amplification to match their need and reduce unwanted background noise. This technology also may benefit individuals with TBI, improving concentration on a single voice. Telecommunication devices are also available for hearing loss.



Identifying hearing deficits

Step 1: What is the nature of the injury that has caused the hearing loss?

Step 2: What is the nature of the hearing loss? Hearing loss can include diminished sound perception at different frequency levels and/or tinnitus (ringing in the ears). Is the hearing loss conductive (damage to the physical organs of hearing such as the eardrum, the bones of the middle ear, or damage to the cochlea) or sensorineural (diminished function of the cochlea or auditory nerve)? Is there complete or near complete hearing loss?

Step 3: What is the prognosis for change in the condition?

Step 4: What are the current treatment and therapeutic regimens?

Identifying appropriate assistive technology

Step 1: What are the service member's future plans? (COAD, continuing education, work in the government or private sectors, jobs with telephone-related duties, etc.)

Step 2: What are the specific working environments? (Amount of background or environmental noise, physical attributes of work location (typical office, medical facility, etc.)

Step 3: Has any Durable Medical Equipment (hearing aids) been prescribed or provided?

Step 4: What AT will the service member be comfortable with and be able to use efficiently?

Assistive listening devices can increase an individual's ability to perceive target sounds, while diminishing the effects of unwanted, or background, noises. The individual's level of hearing perception, along with the environments in which the individual will be working, must be considered in identifying the most appropriate accommodation. Along with personal listening devices, amplification options also exist to improve an individual's ability to hear on either land-line or cellular telephones.

To learn more regarding hearing AT solutions, visit:

www.tricare.mil/cap/wsm/accom_sol/technology.cfm?techID=4

For more information and organizations focused on hearing impairments, please refer to Appendix F - Resources.

Vision Loss

For service members that experience vision issues due to ocular or neurological trauma, screen magnification software and/or hardware may reduce eye strain, blurry vision, and eye fatigue. Software enlarges fonts and changes color contrasts, enabling users to customize the application for specific needs. Portable magnification devices are also available. For complete vision loss, CAP provides scanners and screen reader software with certified training.



Identifying vision deficits

Step 1: What is the sustained injury that has resulted in vision loss? Ocular trauma, traumatic brain injury, and burns are all types of injuries that can impact vision. The type of visual impact, as well as the prognosis, can vary depending on the type of injury.

Step 2: What does the service member experience visually? (Blurriness, blind spots, floaters, double vision, etc.). Does the service member experience headaches or other symptoms as a result of the vision loss?

Step 3: What are the current treatment and therapeutic regimens?

Step 4: What is the prognosis for change in the condition?

Step 5: Does the service member experience any other conditions (loss of use of the upper extremities, hearing loss, learning disabilities, traumatic brain injury, etc.) which may impact the ability to learn or use any identified assistive technologies?

Identifying appropriate assistive technology

Step 1: What are the service member's future plans? (COAD, continuing education, work in the government or private sectors, etc.)

Step 2: What are the specific tasks and tools associated with these duties? (Word processing, spreadsheets, email programs, web browsers, graphics programs, hard copy documents, etc.) What is the service member's comfort and knowledge level of general information technology?

Step 3: What assistive technologies will the service member be comfortable with and still be able to use efficiently?

a) If a service member suffers some minor vision loss or eye strain when using a computer, they may benefit from using screen magnification software to increase font size or change color contrast. A magnification device, such as a closed-circuit television (CCTV), can provide these same options for hard-copy materials.

b) In instances of complete vision loss, a screen reader software program can provide total auditory output of information coming from the computer. A scanner-reader software program allows for materials available only in hard-copy to be scanned into the computer and then verbalized for the user. Certified training is available for those who need these tools.

To learn more regarding vision AT solutions, visit:

www.tricare.mil/cap/wsm/accom_sol/technology.cfm?techID=1

For more information and organizations focused on visual impairments, please refer to Appendix F - Resources.

Other Accommodations

CAP also provides AT and related accommodations for service members with multiple disabilities. In some instances, service members experience polytrauma care, and we provide AT solutions that enable two pieces of AT to work together to augment recovery from injuries to different physical regions or organ systems. In other instances, service members may require devices to augment their communication due to injury. In all cases, CAP is available to assist in the needs assessment process, identify the appropriate AT, and equip the service member with the most appropriate tools to aid in their recovery and re-employment process.

Embedded Technologies

For those individuals that may require assistance accessing their computer but are not in need software as powerful as that provided by CAP, some accessibility features are built into their operating system. Within a computer's control panel, one can select the tab entitled "Accessibility Options" on Windows XP or earlier, "Ease of Access Center" on Windows Vista or later, or "Universal Access" on Mac OS X. All offer a screen reader, magnifier, on-screen keyboard, color contrast options, and other tools that enable the user to customize their computer for greater ease of use. These tools prove beneficial as supplemental tools to traditional access to the computer.

Empower through Employment

It is CAP's desire to empower our nation's heroes by providing them with the AT and accommodations they need to increase access to the workplace and to enable them to seek employment opportunities in the Federal government.

While CAP provides service members with AT to keep as their personal property once separating from the military, we also realize the importance of providing our Soldiers, Sailors, Airmen, and Marines with as much information as they may need as they make an informed decision to stay on active duty or pursue employment in the public or private sectors and plan for their future and that of their families. As the beginning of the CAP process is initiated with the integration of AT into a rehabilitation regiment, the end is the successful placement of a veteran in the workforce.

In order to witness this vision of increased employment for service members become a reality, CAP partners with organizations throughout the Federal government, non-profit organizations, and other entities who work to assist in the transition from rehabilitation to re-employment. An annotated list of partners to work with, as well as those who provide employment resources and internship opportunities, is included in Appendix F.

Available online in English at: <http://www.tricare.mil/cap/wsm/resources/>

This page intentionally left blank

Legislation and Instruction



Public Law 109-364 was passed in the 2007 National Defense Authorization Act. This legislation outlines the change in policy that allows a service member to retain the AT received from CAP upon separation from active service. The full text of the section of the act pertaining to CAP is located in Appendix B. This file is also available electronically at:

www.tricare.mil/cap/Documents/public_law_109-364.pdf.

In accordance with the new regulation, CAP developed an implementing instruction. This instruction, Department of Defense Instruction 6025.22 (DoDI 6025.22), entitled “Assistive Technology (AT) for Wounded Service Members,” was signed on September 9, 2008. The purpose of the instruction is defined below.

- Establishes the policy, defines terms, assigns responsibilities, and provides procedures for establishing AT programs within the Military Health System (MHS).
- Provides support for an interdependent AT system between the CAP Office and the MHS, providing specific guidance to MTFs to improve the delivery and quality of rehabilitative services to wounded service members in the Active Duty, Reserve, and Guard components.

In general, the DoDI was created to ensure all MTF’s are able to provide AT to service members in an appropriate timeframe without the burden of establishing internal AT experts and funding resources.

This instruction provides support for an interdependent AT system between the DoD CAP Office and the MHS, providing specific guidance to MTFs to improve the delivery and quality of rehabilitative services to wounded service members in the Active Duty, Reserve, and Guard components.

Service members with injuries/illnesses sustained while on active duty after September 11, 2001 are covered under the instruction.

The full instruction can be found in Appendix C. The file can also be accessed electronically at: www.dtic.mil/whs/directives/corres/pdf/602522p.pdf.

This page intentionally left blank

Roles and Responsibilities



The following roles and responsibilities are key factors to ensure the success of the interdependent AT system throughout the MHS to benefit the re-employment opportunities of wounded service members.

Assistant Secretary of Defense for Health Affairs

The Assistant Secretary of Defense for Health Affairs (ASD(HA)), under the authority, direction, and control of the Under Secretary of Defense for Personnel and Readiness, shall establish organizational priorities for AT programs within the MHS and establish a standardized methodology for implementing the CAP AT process at MTFs to increase awareness and impact of AT programs across the MHS.

Surgeons General

The Surgeons General (SGs) of the Military Departments shall establish as necessary comprehensive CAP and AT programs within MTFs serving wounded service members and implement a system for ongoing evaluation of such programs. The SGs shall also disseminate CAP policy and procedures to MTFs and facilitate coordination of qualified staff to support CAP and AT programs within the continuum of care. Finally, the SGs shall ensure MTF Commanders designate an individual (e.g., CAP Representative or Coordinator) with relevant clinical background to establish and oversee program activities promoting a targeted, coordinated AT plan for improving access and care for patients and, when applicable, employees.

MTFs

The MTF Commanders, in collaboration with CAP, shall establish an AT Plan. MTFs shall develop a coordinated plan for ensuring that eligible service members have access to AT services as part of existing rehabilitative services programs. The MTF Commanders shall also designate a CAP Representative. MTFs shall identify an appropriate individual to serve as CAP Representative, who will coordinate AT needs assessments and related services with the CAP Office to ensure eligible service members receive appropriate accommodations solutions. They shall complete a Memorandum of Understanding (MOU) (see Appendix D) and submit to the CAP office to establish a formal partnership and identify the MTF CAP Representative.

CAP

The CAP Director shall, in collaboration with MTFs, conduct needs assessments and acquisitions, and provide training support services to ensure delivery and integration of AT for wounded service members. The CAP Director shall also provide in-service training on CAP and the AT program to MTFs, as needed. CAP will also publish and maintain a *CAP Wounded Service Members Handbook* to support the implementation of AT programs at MTFs. Finally, CAP will distribute a report to MTF Commanders annually, which describes accommodation and AT activities, including cost savings achieved by MTFs as a result of collaboration with CAP.

Procedures

In order to establish a successful partnership with CAP, it is recommended that specific program development phases be implemented.

Steps Toward a Successful Partnership with CAP



Step 1: Sign the CAP Memorandum of Understanding (MOU)

As stated in the DoDI, MTF Commanders shall identify a CAP Representative via a signed MOU (Appendix D). This would provide a single point of contact to ensure process and procedures are clearly identified and improves information dissemination. The MTF CAP Representative must have the ability to:

- Provide CAP with updated medical and accommodation-related information on service members;
- Submit CAP requests;
- Track CAP inventory; and
- Disseminate CAP information.

If an MTF is uncertain who is the most appropriate staff member to be the CAP Representative, it is appropriate to contact CAP's Director to discuss. Each MTF has unique processes and requirements that may dictate who might be selected for this role.

Step 2: Train the MTF CAP Representative

The MTF CAP Representative shall be involved in the needs assessments, acquisition process, and support the training of the AT on-site. For example, the MTF CAP Representative may be an Occupational Therapist who identifies service members who could potentially benefit from the utilization of AT and related services.

As most service providers currently understand, this generation of wounded service members has all types of disabling conditions, including - but not limited to - a variety of upper extremity trauma (amputations, neuropathies etc.), cognitive disabilities, visual deficits and complete blindness (i.e. no light perception), communication deficits, deafness/auditory impairments,

and hand dexterity deficits secondary to fractures and/or other musculoskeletal condition(s). This being the case, multiple medical providers are invited and encouraged to be active partners with CAP. However, for administrative and accountability purposes, it is important that a single person serves as the formal MTF CAP Representative for formal correspondence, accommodation distribution, and stakeholder reports.

Step 3: Implement the Partnership

CAP is able to provide a variety of in-service trainings to ensure an MTF integrates the partnership in a useful and appropriate manner. The following are a few avenues that have been successfully utilized in pilot programs.

- **Teleconferences:** CAP may provide regular training via teleconferences with the MTF CAP Representatives to ensure support for the service members, updated information, new technology and a venue for information exchange.
- **VTCs:** CAP may provide VTCs instead of teleconferences if preferred by MTFs.
- **Onsite In-services:** After reviewing the partnership needs, CAP staff members are able to visit and conduct on-site trainings. CAP prefers to do these in-service trainings in conjunction with other wounded service member events, such as Hiring Heroes Career Fairs.
- **Webinars:** CAP may provide webinars regarding the DoDI, new technologies, CAP policies, and general training upon request. Two introductory Webinars are currently archived at the CAP website at www.tricare.mil/cap/wsm/events/webinars.cfm.

Step 4(A): Conduct Needs Assessments

The MTF and CAP share the responsibility of conducting needs assessments to identify appropriate AT for eligible service members. The MTF CAP Representative shall identify when CAP staff members are required to assist in the assessment process.

The MTF CAP Representative shall complete the needs assessment evaluation of AT needs and training as part of the rehabilitation evaluation process or separately based on the needs of the individual. The MTF CAP Representative may also go through the needs assessment portal on the CAP Wounded Service Member Initiative homepage at www.tricare.mil/cap/wsm. This provides additional options to help you familiarize with the types of technology and determining the most appropriate technology. A sample of areas for consideration has been included in this handbook beginning on page 9.

Posted under "Wounded Service Member Initiative" on left side of web page are the following links:

- **Submit WSM Needs Assessments**
www.tricare.mil/cap/wsm/accom_process/request.cfm?type=NA

This online process guides you through the identification of appropriate AT based on a case-by-case approach. Accommodation needs must be evaluated in light of an individual's job functions, technical environment (e.g. workstation configuration) and vocational interests. To ensure that the individual may receive the most appropriate accommodation, CAP recommends you complete a needs assessment that evaluates three areas: Focus on the service member, Analyze Computer and/or Telecommunication Access, and Identify Accommodations.

- Accommodation Solutions
www.tricare.mil/cap/wsm/accom_sol/

This section provides quick access to various types of AT, as previously discussed. If you already have a specific product identified for a particular individual, there is less need to browse the AT.

Step 4(B): Submit AT Requests if AT solution has been identified

Requests for AT should be submitted to CAP to review the requested AT device(s), assessment details, and the accommodation justification. The MTF CAP Representative shall submit the request directly to CAP via the CAP website at:

www.tricare.mil/cap/wsm/accom_process/request.cfm?type=request

There are some cases that require additional information, as identified below.

- **Computer Specifications Form:** A Computer Specifications Form should be completed in addition to the electronic accommodations request form when computer software is being requested. This form ensures that the individual's computer can support the software they will receive, and will be sent to the customer and POC by CAP staff upon receipt of the request.
- **Cognitive Impairment:** CAP requires supporting medical documentation (i.e. NeuroPsych evaluation, speech evaluation, SF 600, medical notes) for all cognitive injuries or impairments and some dexterity injuries/impairments. CAP prefers that a request for technology is submitted to CAP by a treating physician or therapist.

When appropriate, the AT shall be procured by CAP and delivered to the MTF or other appropriate location at no cost to the MTF or location. If requested, CAP shall also procure training and technical integration support services for the service members.

Step 5: Training on AT

The MTF CAP Representative shall inform CAP of specific training on the AT as needed. As part of the original assessment, an analysis of training is included as part of the accommodation request (see steps above). In some cases, there are extra requirements to ensure a successful training experience.

-
- **Software:** Once the need for AT software has been identified, a request for an appropriate number of training hours should be submitted through CAP depending on need.
 - **PDA:** The MTF CAP Representative shall assess the service member's need for training on the different functions and features of the PDA once the device has been received by the individual. The MTF CAP Representative shall ensure that the individual is capable and competent in controlling the basic features of PDA device and can operate the key features/ functions prior to submitting the request. The MTF CAP Representative should have a basic knowledge of the PDAs before recommending a specific device. CAP can provide some of the different PDA devices to CAP Representatives and rehab staff at the MTFs so they can become familiar with the capabilities of, and differences between, the different devices. For technical support on any device provided by CAP, the particular manufacturer should be contacted. Contact information for two manufacturers that are used often follows.

Hewlett-Packard: 1-800-474-6836

Ablelink Technologies: 719-592-0347

Service members are required to provide a serial number, product name, model number, and a brief description of the problem when requesting technical support.

The MTF CAP Representative, in conjunction with the CAP staff, will provide information on general needs assessments and training options. At times, CAP will utilize vendors that are suggested by the MTFs to provide training.

Ongoing Support



Service members shall be provided access to ongoing support from CAP following receipt of an AT device until separation from active duty service, at which time, AT provision and rehabilitative services shall become the responsibility of the Department of Veterans Affairs. The AT provided by CAP remains with the disabled veteran as their property.

Transitions to Other Locations

As service members move from the MTF to a home base/ convalescence leave, the AT shall move with them. At various locations, it has been the current practice to log the AT into the MTF for informational purposes and safe delivery. The MTF CAP Representative should check with the Supply/Logistician Officer for the MTF practice and protocol.

The MTF CAP Representative and other MTF medical providers should also include the following information in the electronic medical record (AHLTA) notes section:

- Date CAP needs assessment was conducted;
- Date AT was received; and
- Progress/changes to the functional limitation and recovery.

Providing this information in the medical record will assist in the transition to another MTF or to the VA. It will also assist other service providers in determining if the AT is assisting in the recovery and rehabilitation process.

In accordance with Section 561 of Title V of Public Law 109-364, the AT is authorized by law to become the property of the wounded service member at his or her separation from active service. Therefore, the AT can and should remain with the service members as they transition to other locations or leave the military.

Upgrades on Equipment

Any software upgrades, while the service member remains on active duty, will be reviewed and filled on a case by case basis. Both AT software and hardware may need to be updated. If the person remains on active duty or becomes employed within DoD or one of CAP's partner agencies, he or she may request an upgrade from CAP. Upgrades will be provided on a case-by-case basis in support of service member needs. Service members are encouraged to register all software or hardware accommodations with the manufacturer upon receipt of the equipment to ensure that manufacturer warranties are activated.

Lost Equipment

CAP cannot replace lost, stolen, or damaged equipment. If the equipment malfunctions through no fault of user error, CAP will consider replacements on a case by case basis.

New Training Needs

As the service member continues on his or her road to recovery, he or she may need to have additional training on the AT. A CAP Request Form should be submitted with the required training and justification.

Tracking of Services

It is CAP's goal to have a positive health care impact on the rehabilitation and recovery of the WSM by introducing them to AT. To ensure that information on the delivery and effectiveness of assistive technologies and services are captured in the Electronic Health Record, CAP request that specific notes be entered to capture the AT experience:



- Date of needs assessment;
- Date AT was received; and
- Progress/changes to the functional limitation/recovery.

CAP will, in turn, provide the MTFs with an annual stakeholders report with a complete list of the accommodations, costs and training. CAP will also include the number of trainings and other actions provided at the MTFs in support of WSMs.

This page intentionally left blank

Training and Materials



As described in several sections of this handbook, CAP staff members provide a variety of training and support to the MTFs and service members. The list of training options below are available for MTF personnel.

or onsite.

Train the MTF Representative: CAP will ensure a proper and full orientation for the CAP MTF Representative. These sessions may be conducted one-on-one via the telephone, video teleconference,

In-Service Training: CAP staff members will provide training to MTF personnel on CAP operations, AT options, and other related services to optimize the CAP partnership in each medical department. CAP will provide these via teleconference, webinar, or, when possible, with onsite sessions coordinated by the MTF representative.

AT Training for Service Members: As part of the original assessment, an analysis of training is included as part of the accommodation request. CAP will review the request and, when appropriate, provide training for the service members.

Program Updates: In order to provide updates on AT, process improvements, and other program elements, CAP staff members will provide webinars and teleconferences to ensure service providers in the MTFs have the latest information and resources regarding AT and CAP.

In order to support the MTFs and compliment the training described above, CAP has several tools available for information dissemination. Please ensure widest dissemination of the following items:

- CAP Wounded Service Member Fact Sheet (Appendix D)
- CAP Website: www.tricare.mil/cap/wsm
- CAP WSM Mailing List: sign up at: www.tricare.mil/cap/news/Subscribe.cfm
- CAP WSM Training Slides



This page intentionally left blank

Appendices

Appendix A: CAP Agency Partnership List

Appendix B: Public Law 109.364, Section 561

Appendix C: DoD Instruction 6025.22

Appendix D: Memorandum of Understanding

Appendix E: CAP Wounded Service Member Fact Sheet

Appendix F: Resources

This page intentionally left blank

Appendix A: CAP Agency Partnership List

DoD Agency List

American Forces Information Service
Army and Air Force Exchange Service (AAFES)
Defense Acquisition University (DAU)
Defense Advanced Research Projects Agency
Defense Commissary Agency (DeCA)
Defense Contract Audit Agency (DCAA)
Defense Contract Management Agency (DCMA)
Defense Finance and Accounting Service (DFAS)
Defense Information Systems Agency (DISA)
Defense Intelligence Agency (DIA)
Defense Legal Service Agency
Defense Logistics Agency (DLA)
Defense Prisoner of War/Missing Personnel Office
Defense Security Cooperation Agency
Defense Security Service (DSS)
Defense Technical Information Center (DTIC)
Defense Threat Reduction Agency (DTRA)
Department of Defense Education Activity (DoDEA)
Department of the Air Force
Department of the Army
Department of the Navy/Marine Corps
DoD Human Resource Activity
Joint Chiefs of Staff
Missile Defense Agency
National Geospatial-Intelligence Agency (NGA)
National Reconnaissance Office
National Security Agency (NSA)
Office of Economic Adjustment
Office of the Inspector General (DoDIG)
Office of the Secretary of Defense
Pentagon Force Protection Agency
TRICARE Management Activity
Washington Headquarters Service (WHS)

Non-DoD Agency Partner List

African Development Foundation
Agency for International Development
American Battle Monuments Commission
Architectural and Transportation Barriers Compliance Board (Access Board)
Committee for the Purchase from People Who are Blind or Severely Disabled

Commodity Futures Trading Commission
Consumer Product Safety Commission
Corporation for National and Community Service
Court Services and Offender Supervision Agency for the District of Columbia
Department of Agriculture
Department of Commerce
Department of Energy
Department of Health and Human Services
Department of Homeland Security
Department of Interior
Department of Justice
Department of Labor
Department of State
Department of Transportation
Department of the Treasury (excluding the Internal Revenue Service)
Department of Veterans Affairs
Environmental Protection Agency
Equal Employment Opportunity Commission
Executive Office of the President
Export - Import Bank of the United States
Farm Credit Administration
Federal Communications Commission
Federal Deposit Insurance Corporation
Federal Election Commission
Federal Energy Regulatory Commission
Federal Housing Finance Board
Federal Labor Relations Authority
Federal Maritime Commission
Federal Mine Safety and Health Review Commission
Federal Trade Commission
General Services Administration
Holocaust Memorial Museum
Institute of Museum and Library Services
International Broadcasting Bureau
International Trade Commission
John F. Kennedy Center for the Performing Arts
National Aeronautics and Space Administration
National Archives and Records Administration
National Council on Disability
National Credit Union Administration
National Endowment for the Humanities
National Gallery of Art
National Indian Gaming Commission

National Labor Relations Board
National Science Foundation
National Transportation Safety Board
Nuclear Regulatory Commission
Occupational Safety and Health Review Commission
Office of Government Ethics
Office of Personnel Management
Office of Special Counsel
Overseas Private Investment Corporation
Peace Corps
Pension Benefit Guaranty Corporation
Railroad Retirement Board
Securities and Exchange Commission
Selective Service System
Small Business Administration
Smithsonian Institution
Surface Transportation Board
Trade and Development Agency

Appendix B: Public Law 109-364, Section 561

Public Law 109–364
109th Congress

John Warner National Defense Authorization Act for Fiscal Year 2007
Oct. 17, 2006
[H.R. 5122]

TITLE V—MILITARY PERSONNEL POLICY
Subtitle G—Matters Relating to Casualties

SEC. 561. AUTHORITY FOR RETENTION AFTER SEPARATION FROM SERVICE OF ASSISTIVE TECHNOLOGY AND DEVICES PROVIDED WHILE ON ACTIVE DUTY.

(a) IN GENERAL.—Chapter 58 of title 10, United States Code, is amended by inserting after section 1150 the following new section:
“§ 1151. Retention of assistive technology and services provided before separation

“(a) AUTHORITY.—A member of the armed forces who is provided an assistive technology or assistive technology device for a severe or debilitating illness or injury incurred or aggravated by such member while on active duty may, under regulations prescribed by the Secretary of Defense, be authorized to retain such assistive technology or assistive technology device upon the separation of the member from active service.

“(b) DEFINITIONS.—In this section, the terms ‘assistive technology’ and ‘assistive technology device’ have the meaning given those terms in section 3 of the Assistive Technology Act of 1998 (29 U.S.C. 3002).”

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by inserting after the item relating to section 1150 the following new item:

“1151. Retention of assistive technology and services provided before separation.”

Appendix C: DoD Instruction 6025.22

Available online at: www.dtic.mil/whs/directives/corres/pdf/602522p.pdf



Department of Defense INSTRUCTION

NUMBER 6025.22
September 9, 2008

USD(P&R)

SUBJECT: Assistive Technology (AT) for Wounded Service Members

- References:
- (a) DoD Directive 5124.02, "Under Secretary of Defense for Personnel and Readiness (USD(P&R)), June 23, 2008
 - (b) Section 561 of title V of Public Law 109-364, "John Warner National Defense Authorization Act for Fiscal Year 2007," October 17, 2006
 - (c) Sections 794d and 3002 of title 29, United States Code

1. PURPOSE. In accordance with References (a) through (c), this Instruction:

a. Establishes policy, defines terms, assigns responsibilities, and provides procedures for establishing AT programs within the Military Health System (MHS).

b. Provides support for an interdependent AT system between the DoD Computer/Electronic Accommodations Program (CAP) Office and the MHS, providing specific guidance to medical treatment facilities (MTFs) to improve the delivery and quality of rehabilitative services to wounded Service members in the Active Duty, Reserve, and Guard components.

2. APPLICABILITY. This Instruction applies to OSD, the Military Departments, the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Office of the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities, and all other organizational entities in the Department of Defense (hereafter referred to collectively as the "DoD Components").

3. DEFINITIONS

AT. Technology that provides people with disabilities with equal access to computer and telecommunication work environments. Technology of this type does not include durable medical equipment and is divided into two categories: devices and services.

AT device. Any item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of individuals with disabilities (a list of available devices can be found at <http://www.tricare.mil/cap/wsm>). The devices assist individuals in accessing computer and telecommunication systems and/or gaining improved access to care and decision making. Examples include voice recognition and speech output software, assistive listening devices, and communication boards.

AT service. Any service that directly assists an individual with a disability in the selection, acquisition, or use of an AT device. Services may include needs assessments, acquisition, integration, coordination of services with rehabilitation plans, training, and technical assistance.

CAP. CAP provides AT to increase access to computer and telecommunication systems by employees with disabilities within the Department of Defense and Federal partner agencies, and Service members with cognitive, communication, dexterity, hearing, and vision impairments.

4. POLICY. In accordance with References (a) and (b), it is DoD policy that:

a. Strategies for utilizing AT during rehabilitation shall be aligned with generally accepted standards for health promotion and maximum functional outcomes.

b. MTFs shall incorporate AT into rehabilitative services programs as part of an organization-wide, interdisciplinary adoption of computer and telecommunication accessibility practices.

(1) MTFs shall incorporate CAP into rehabilitative services programs that include AT as part of the recovery and rehabilitation process.

(2) In coordination with CAP, AT programs shall track health care outcomes related to the introduction of AT, which shall be integrated into efficiency tracking for recovery and rehabilitation costs.

(3) AT service provision and utilization shall be documented within the integrated rehabilitation care plan using the electronic medical record system (EMRS).

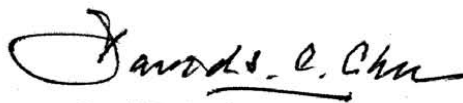
5. RESPONSIBILITIES. See Enclosure 1.

6. PROCEDURES. See Enclosure 2.

7. RELEASABILITY. UNLIMITED. This Instruction is approved for public release. Copies may be obtained through the Internet from the DoD Issuances Web Site at <http://www.dtic.mil/whs/directives>.

DoDI 6025.22, September 9, 2008

8. EFFECTIVE DATE. This Instruction is effective immediately.



David S. C. Chu
Under Secretary of Defense
Personnel and Readiness

Enclosures

1. Responsibilities
2. Procedures

TABLE OF CONTENTS

RESPONSIBILITIES5

 ASSISTANT SECRETARY OF DEFENSE FOR HEALTH AFFAIRS (ASD(HA)).....5

 SURGEONS GENERAL OF THE MILITARY DEPARTMENTS5

 DIRECTOR, TRICARE MANAGEMENT ACTIVITY (TMA).....5

 DIRECTOR, CAP.....6

 MTF COMMANDERS.....6

PROCEDURES.....7

 PROVISION OF GENERAL USE AT.....7

 NEEDS ASSESSMENTS.....7

 AT REQUESTS.....7

 ONGOING SUPPORT7

 RETENTION OF AT.....7

 OUTCOME MEASUREMENT7

ENCLOSURE 1
RESPONSIBILITIES

1. ASSISTANT SECRETARY OF DEFENSE FOR HEALTH AFFAIRS (ASD(HA)). The ASD(HA), under the authority, direction, and control of the Under Secretary of Defense for Personnel and Readiness, shall:

- a. Establish organizational priorities for AT programs within the MHS.
- b. Ensure that CAP and AT policy is established and monitored in accordance with References (a) and (b) and that AT activities meet all applicable confidentiality, privacy, security, and disclosure requirements.
- c. Establish a standardized methodology for implementing the CAP AT process at MTFs to increase awareness and impact of AT programs across the MHS.

2. SURGEONS GENERAL OF THE MILITARY DEPARTMENTS. The Surgeons General of the Military Departments shall:

- a. Establish as necessary comprehensive CAP and AT programs within MTFs serving wounded Service members, and implement a system for ongoing evaluation of such programs.
- b. Disseminate CAP policy and procedures to MTFs.
- c. Facilitate coordination of qualified staff to support CAP and AT programs within the continuum of care (DoD Component Wounded Service Member Programs, community-based healthcare organizations, the Veterans Administration Polytrauma rehabilitation centers, and other similar programs).
- d. Ensure MTF Commanders designate an individual (e.g., CAP Representative or Coordinator) with relevant clinical background to establish and oversee program activities promoting a targeted, coordinated AT plan for improving access and care for patients and, when applicable, employees.

3. DIRECTOR, TRICARE MANAGEMENT ACTIVITY (TMA). The Director, TMA, shall ensure that the TRICARE Area Offices and TRICARE Regional Offices make available personnel to serve as CAP liaisons to support:

- a. Incorporation of the CAP process in healthcare promotion, programs, and procedures.
- b. Communication and dissemination of policies and other information related to CAP.

- c. Coordination of CAP education and training activities within local and regional areas.

4. DIRECTOR, CAP. The Director, CAP, shall:

- a. In collaboration with MTFs, conduct needs assessments and acquisitions, and provide training support services to ensure delivery and integration of AT for wounded Service members.
- b. Provide in-service training on CAP and the AT program to MTFs, as needed.
- c. Publish and maintain a CAP Wounded Service Members Guide to support the implementation of AT programs at MTFs.
- d. Distribute a report to MTF Commanders annually, which describes accommodation and AT activities, including cost savings achieved by MTFs as a result of collaboration with CAP.

5. MTF COMMANDERS. The MTF Commanders, in collaboration with CAP, shall:

- a. Establish an AT Plan. MTFs shall develop a coordinated plan for ensuring that eligible Service members have access to AT services as part of existing rehabilitative services programs.
- b. Designate a CAP Representative. MTFs shall identify an appropriate individual to serve as CAP Representative, who will coordinate AT needs assessments and related services with the DoD CAP Office to ensure eligible Service members receive appropriate accommodations solutions.

ENCLOSURE 2

PROCEDURES

1. PROVISION OF GENERAL-USE AT. CAP shall provide general-use AT to MTF programs, as requested, to enable onsite assessments and improved integration of AT into rehabilitation services.

2. NEEDS ASSESSMENTS. The MTF and CAP share the responsibility of conducting needs assessments to identify appropriate AT for eligible Service members. The MTF CAP Representative shall identify when CAP staff members are required to assist in the assessment process. Needs assessments shall include identification of training needs, technical specifications for computers and/or telecommunication systems, and aspects of Service members' functional limitations and computing or communication tasks. Once completed, the needs assessment information shall be submitted to CAP as part of the AT request.

3. AT REQUESTS. Requests for AT shall be submitted to CAP to review the requested AT device(s), assessment details, and the justification for accommodation information as required by References (b) and (c). When appropriate, the AT shall be procured by CAP and delivered to the MTF or other appropriate location at no cost to the MTF or location. If requested, CAP shall also procure training and technical integration support services for the Service members.

4. ONGOING SUPPORT. Service members shall be provided access to ongoing support from CAP following receipt of an AT device until separation from active duty service, at which time, AT and rehabilitative services shall become the responsibility of the Veterans Administration.

5. RETENTION OF AT. In accordance with Reference (b), the AT is authorized by law to become the property of the wounded Service member at his or her separation from active service.

6. OUTCOME MEASUREMENT. In order to better understand the impact of AT on rehabilitation services and re-employment, MTFs and CAP shall conduct annual reviews of activities, including measuring healthcare and re-employment outcomes. MTFs and CAP shall enable this review by maintaining records of activities, to include at a minimum, AT and training provided to Service members and the volume of activity at each location using EMRS and other reporting mechanisms.

Appendix D: Memorandum of Understanding

Available online at: www.tricare.mil/cap/wsm/dodi



Computer/Electronic
Accommodations
Program

Designation of Computer/Electronic Accommodations Program (CAP) Representation at the Military Treatment Facility

In accordance with the Department of Defense Instruction 6025.22, Assistive Technology (AT) for Wounded Service Members, the Commanding Officer at the Military Treatment Facility (MTF) shall designate an appropriate individual to serve as the CAP Representative. The CAP Representative will coordinate AT needs assessments, requests and related services with the DoD CAP Office to ensure eligible Service members receive appropriate accommodation solutions. The MTF CAP Representative shall identify when CAP staff members are required to assist in the assessment process. Needs assessments shall include aspects of Service members' functional limitations, computing or communication tasks, technical specifications for computers and/or telecommunication systems, and identification of training needs. Once completed, the needs assessment information shall be submitted to CAP as part of the AT request.

CAP, located in Falls Church, VA, provides a centrally funded process to increase accessibility of electronic and information technology systems. CAP provides AT to increase access to computer and telecommunication systems by employees with disabilities within the Department of Defense, Federal partner agencies, and Service members with cognitive, communication, dexterity, hearing, and vision impairments. The CAP mission is to *provide assistive technology and accommodations to ensure people with disabilities and wounded Service members have equal access to information and opportunities.*

Department of Defense CAP Contact Information:

DoD Computer/Electronic Accommodations Program
Ms. Dinah F. B. Cohen, Director
5111 Leesburg Pike, Suite 810
Falls Church, VA 22041

Voice: 703-681-3976
Fax: 703-681-9075
Email: Dinah.Cohen@tma.osd.mil

MTF CAP Representative Contact Information:

MTF: _____
Name: _____
Title: _____
Address: _____
City, State, Zip _____
Voice: _____
Fax: _____
Email: _____

Approval:

Signature _____	Print Name _____
Title _____	Date _____
Email Address _____	Telephone _____

Please fax agreement to 703-681-9075.

Support. Equip. Empower.

Appendix E: CAP Wounded Service Member Fact Sheet

Available online in English at: <http://www.tricare.mil/cap/Documents/WSM.pdf>

Available online in Spanish at: http://www.tricare.mil/cap/Documents/WSM_Spanish.pdf

WSM Initiative

Computer/Electronic Accommodations Program
Office of the Assistant Secretary of Defense (Health Affairs)



CAP Supports Wounded Service Members

CAP provides needs assessments, assistive technology, and training to our nation's wounded service members throughout all phases of recovery and the transition to employment.

Support. Equip. Empower.

The Department of Defense (DoD) Computer/Electronic Accommodations Program (CAP) provides real solutions for real needs while ensuring that people with disabilities and wounded service members have equal access to the information environment and opportunities in the Federal government.

As outlined in the recently signed Department of Defense Instruction 6025.22, CAP works closely with medical providers, therapists, case managers, and military liaisons at military treatment facilities (MTFs) to increase awareness and availability of assistive technology (AT). Once the appropriate AT has been identified, CAP provides the solutions, *free of charge*, to support a service member's medical recovery and rehabilitation.

The ability to use AT during the early phases of recovery promotes positive rehabilitation outcomes and future employment opportunities. Wounded service members may retain these devices upon separation from active service, further promoting their equal access to the information environment.

Support Through Training and Needs Assessments

CAP supports wounded service members, working closely with medical providers, therapists, case managers, and military liaisons at military treatment facilities to increase awareness and availability of AT.

Trainings can be conducted onsite, via Video Teleconference (VTC) or web-cast. In-service trainings include the following objectives:

- Discuss how CAP provides needs assessments and AT to wounded service members throughout the recovery and rehabilitation process.
- Review and demonstrate available AT for various disabling conditions.
- Identify methods to integrate AT into rehabilitative services and settings using best practice partnerships and training models as examples.

Needs assessments are a critical step in the CAP accommodation process. Many service members sustain multiple injuries and require an individualized needs assessment to identify the most appropriate AT solutions.

In an effort to streamline this process and provide the most appropriate solutions, the needs assessment



questionnaire is required as the first step of the CAP process. Additionally, medical documentation may be required for certain requests. It is recommended to disclose

all functional limitations, disabling conditions, and the service member's current status (i.e. Medical Evaluation Board (MEB) status, Continue on Active Duty (COAD) plans) when completing the questionnaire in order to maximize potential outcomes.



www.tricare.mil/cap/wsm

Support. Equip. Empower.

The CAP Office requires service members and their families to coordinate the submission of the needs assessment questionnaire with their medical providers and/or therapists. Once coordinated with appropriate providers, either the service members, family members, medical providers, therapists, or case managers can submit the questionnaires via the CAP Wounded Service Member Website: www.tricare.mil/cap/wsm.

Equip with Assistive Technology Solutions

CAP is available to provide training and in-services to medical personnel interested in learning more about needs assessments, AT, and the CAP process.



CAP equips service members with AT devices, accommodations and training. Many service members sustain multiple injuries and require a

combination of AT devices. Accommodations and training are available for the conditions described below.

Dexterity

CAP provides devices to assist service members who have sustained nerve damage, fractures, burns, and amputations to their upper extremities, including compact keyboards, alternative pointing devices, and voice recognition software with certified training.

Cognitive Difficulties, including Traumatic Brain Injury (TBI)

For TBI and closed-head injuries, CAP provides various cueing aids to service members who struggle with memory loss and other cognitive difficulties. Cueing aids can assist service members in remembering appointments, medication schedules, and personal contact information. Technology options can vary in complexity, from simple cueing aids to powerful computer-based applications.

Vision Loss

For service members that experience vision issues due to ocular or neurological trauma, screen magnification software and/or hardware may reduce eye strain, blurry vision, and eye fatigue. Software enlarges fonts and changes color contrasts, enabling users to customize the application for specific needs. Portable magnification devices are also available. For complete vision loss, CAP provides scanners and screen reader software with certified training.

Hearing Loss

CAP supports service members who suffer from hearing loss, including fluctuating, progressive, or low-frequency hearing loss and tinnitus. Assistive listening devices can be used at an individual's discretion, allowing the user to adjust the level of amplification to their needs and reduce unwanted background noise. This technology can also be beneficial to individuals with TBI.

Empower through Employment



It is CAP's mission to empower our nation's heroes by providing them with the AT and accommodations they need to increase access and employment

opportunities in the Federal government.

Contact Us

For more information about the CAP Wounded Service Member Initiative or to request a presentation and/or in-service training, please contact the CAP Wounded Service Member Team at WSM@tma.osd.mil.



To submit a CAP Wounded Service Member Needs Assessment Questionnaire or to request technology, please visit www.tricare.mil/cap/wsm.



Computer/Electronic Accommodations Program (CAP)
5111 Leesburg Pike, Suite 810, Falls Church, VA 22041-3206
T 703-681-8813, TTY 703-681-3978, F 703-681-9075
www.tricare.mil/cap

To learn more about CAP's WSM Initiative, visit www.tricare.mil/cap/wsm

Support. Equip. Empower.

This page intentionally left blank

Appendix F: Resources

Interagency Program for Military Support Services

National Resource Directory

www.nationalresourcedirectory.org

The National Resource Directory provides wounded, ill and injured service members and veterans, their families, families of fallen and those who support them, with a web-based directory of valuable resources. It is maintained by the Departments of Defense, Labor, and Veterans Affairs. The information in the directory is from federal, state and local government agencies; veteran service and benefit organizations; non-profit community-based and faith-based organizations; academic institutions, professional associations and philanthropic organizations. The directory delivers information on, and access to, the full range of medical and non-medical services and resources needed to achieve their personal and professional goals across the transition from recovery to rehabilitation to community reintegration.

DoD Programs for Recovery and Rehabilitation

Military OneSource / Wounded Warrior Resource Center

www.militaryonesource.com

Military OneSource (MOS) is an information and referral service available via telephone (1-800-342-9647) and the internet. MOS established the Wounded Warrior Resource Center, also available via email at wwrc@militaryonesource.com, for service members and their families to request support 24/7/365 support. A personal and family readiness tool, MOS also extends the existing family support system for all service branches' Active Duty, Reserve and Guard (regardless of activation status) and their immediate family members at no cost to participants. Whether it's help with child care, personal finances, emotional support during deployments, relocation information, or resources needed for special circumstances, MOS is there for military personnel and their families. Specific information is also available on the website under the Wounded Warrior section.

Military HOMEFRONT

www.militaryhomefront.dod.mil

Military HOMEFRONT is the official DoD Web site for reliable Quality of Life information designed to help troops and their families, leaders and service providers. Whether you live the military lifestyle or support those who do, you'll find what you need at this site. Information and links for Heroes to Hometowns, Operation Warfighter, Special Needs resources, and much more information to improve the Quality of Life for wounded service members is available from this website.

Warrior Transition Brigade / Army Wounded Warrior Program

www.AW2.army.mil

The Department of the Army's Wounded Warrior Program (AW2) provides its severely disabled Soldiers and their families with a system of advocacy and follow-up to provide personal support that assists them in their transition from military service and into the civilian community. The AW2 website includes news, FAQ's, and resources for service members.

Marine Wounded Warrior Regiment

www.manpower.usmc.mil/wwr

This mission of the Marine Wounded Warrior Regiment is to provide and facilitate assistance to wounded/injured/ill Marines, Sailors attached to or in support of Marine units, and their family members throughout the phases of recovery. Established in April 2007, the WWR is headquartered in Quantico, VA with battalions on both the East and West Coast. The WWR is a unique organization spawned from a combination of the 2005 Marine For Life ill/injured support section and the 2004 wounded warrior barracks located in Camp Lejeune, NC. Specific services include:

- Oversight of USMC WII process
- Non-medical case management
- Accountability and tracking
- Pay/Benefits/Charitable support
- Assist with employment & vocational rehabilitation benefits
- Smooth transition from DoD to VA
- Traumatic Servicemember's Group Life Insurance (TSGLI)

Navy Safe Harbor Program

www.npc.navy.mil/CommandSupport/SafeHarbor

The mission of the Navy Safe Harbor program is to serve as the focal point for the non-medical case management of severely wounded, ill, or injured (SWII) Sailors and their families. Safe Harbor provides non-medical Case Managers assigned to all major Navy MTFs, VA Polytrauma Centers, and Brooke Army Medical Center to support SWII Sailors: pay/personnel issues, invitational travel orders, lodging and housing adaptation, child and youth programs, transportation needs, legal and guardianship issues, education and training benefits, commissary and exchange access, respite care, TBI/PTSD support services, and much more.

Air Force Wounded Warrior

www.woundedwarrior.af.mil

The Air Force Wounded Warrior Program (AFW2) was created in 2005 as a Department of Defense and Air Force initiative to provide personalized care to Airmen who are separated or

retired as a result of illness or injury received in support of Operation Enduring Freedom or Operation Iraqi Freedom.

DoD Community Relations

www.ourmilitary.mil

The Department of Defense launched this nationwide program to recognize citizens' support for our military men and women and communicates that support to members of our Armed Forces at home and abroad. Through this Web site, you will find more than 300 nonprofit organizations that have joined through the DoD's "Citizen Support for Our Troops" initiative that are dedicated to helping you and your families.

Transitional Services

Returning Service Members - Operation Enduring Freedom/ Iraqi Freedom

www.oefoif.va.gov

This is the Department of Veteran Affairs site that offers assistance to veterans of Operation Enduring Freedom and Operation Iraqi Freedom while they transition into civilian life. The areas of interest are: Benefits, Medical, Dependents, Transition Assistance, Active Duty and Reservists/National Guard.

Transition Assistance Program (TAP)

www.dol.gov/vets/programs/tap/main.htm

The Transition Assistance Program (TAP) was established to meet the needs of separating service members during their period of transition into civilian life by offering job-search assistance and related services. Service members leaving the military with a service-connected disability are offered the Disabled Transition Assistance Program (DTAP) from the Veterans Affairs representatives. DTAP includes the normal three-day TAP workshop, plus additional hours of individual instruction to help determine job readiness and address the special needs of veterans with disabilities.

DoD Transition Assistance Program

www.turboTAP.org

In partnership with the Department of Labor, the Department of Defense has released a website as a reference point for those going through the Transition Assistance Program. TurboTAP is intended to supplement the services offered by the Transition Assistance Office and provide a single location to access the resources necessary to understand the counseling and education benefits afforded to separating service members.

Heroes to Hometowns

www.legion.org/heroes

Heroes to Hometowns (H2H) is designed to welcome home service members who, because of injuries sustained, can no longer serve in the military. H2H focuses on reintegration back

home, with networks established at the national and state levels to better identify the extraordinary needs of returning families before they return home and to work with local communities to coordinate government and non-government resources necessary for long term success. State Heroes to Hometowns Committees are the link among the military Services and Veteran's Affairs case workers at the military and VA hospitals, the severely injured member, their families, and their local community.

Employment Resources

FedsHireVets.gov

www.fedshirevets.gov

FedsHireVets.gov is the U.S. Office of Personnel Management's Government-wide Veterans Employment website. It is a direct result of Executive Order 13518, Employment of Veterans in the Federal Workforce, which was signed by President Barack Obama on November 9, 2009. With the passage of this order, the Veterans Employment Initiative was established, providing a strategic approach to hire and retain the men and women who have served our country in the military as employees of the Federal Government. The website is the preeminent source for Federal employment information for our Veterans, transitioning service members, their families, Federal human resource professionals, and hiring managers.

America's Heroes at Work!

www.AmericasHeroesAtWork.gov

America's Heroes at Work is a U.S. Department of Labor (DOL) project that focuses on the employment challenges of returning service members living with TBI and/or Post-Traumatic Stress Disorder (PTSD). Designed for employers and workforce development professionals, the website provides information and tools to help returning service members affected by TBI and/or PTSD succeed in the workplace. Featured resources include educational fact sheets, veterans' employment success stories and information on promising practices such as job coaching, mentoring and simple workplace supports for employees with TBI and PTSD.

DoD Vets

www.dodvets.com

This website provides a wide range of information relating to DoD employment opportunities for disabled veterans. Sections include:

- Disabled Veterans General Information
- Disabled Veterans Questions & Answers
- Internships
- Scholarships and Fellowships
- Grants, Loans, and Financial Aid
- Education and Training

-
- Manager General Information
 - Manager Questions and Answers
 - Transition Centers

Always a Soldier

www.amc.army.mil/alwaysasoldier

The “Always a Soldier” program provides service-connected disabled veterans opportunities to seek employment, career advancement, job mobility, family economic well-being, and greater financial security. The program is an Army Material Command based initiative, and the Web site provides information regarding the program, employment opportunities, and important links.

REALifelines - Recovery and Employment Assistance Lifelines

www.dol.gov/vets/programs/Real-life/main.htm

REALifelines is a program dedicated to providing individualized job training, counseling, and reemployment services to wounded service members. Their Web site provides contact information for enrollment, as well as FAQ’s.

eVets

www.dol.gov/elaws/evets.htm

The e-VETS Resource Advisor assists veterans preparing to enter the job market. It includes information on a broad range of topics, such as job search tools and tips, employment openings, career assessment, education and training, and benefits and special services available to veterans.

Hire Heroes USA

www.hireheroesusa.org

Hiring Heroes USA serves as a bridge to career opportunities nationwide for returning service members to ensure they have the opportunity to enjoy the freedoms they fought to preserve. Hiring Heroes USA specializes in career placement for those wounded or with any level of disability.

Warriors to Work

<https://wtow.woundedwarriorproject.org>

Wounded Warrior Project's Warriors to Work program helps individuals recovering from severe injuries received in the line of duty connect with the support and resources they need to build a career in the civilian workforce. Warriors to Work is a free service for the new generation of service men and women who have been injured in the line of duty.

VetSuccess

<http://vetsuccess.gov/>

This program's primary function is to help veterans who have service-connected disabilities become suitably employed or maintain employment. While providing tools to transitioning service members to learn the skills necessary to find employment opportunities when separating, VetSuccess offers a database for Veterans to build and post a resume, search for jobs, and locate job fairs in their area.

Job Opportunities for Disabled American Veterans

www.jofdav.com

“Job Opportunities for Disabled Veterans” aims to directly decrease unemployment by opening networks for communication between potential employers and prospective hires. On the site, Veterans can access over 5,000 job listings throughout the country, set up a personal profile with a customizable resume for direct submission to hiring companies, and find resources to assist in professional development as one goes through the process of identifying and applying for a job.

VA Vocational Rehabilitation and Employment Services

www.vba.va.gov/bln/vre/index.htm

This VA Web site provides a variety of resources for Veterans, including information regarding employment and vocational services and assistance.

Internship Programs

Workforce Recruitment Program for College Students with Disabilities

www.wrp.gov

The Workforce Recruitment Program for College Students with Disabilities (WRP) is a recruitment and referral program that connects federal sector employers nationwide with highly motivated postsecondary students and recent graduates with disabilities who are eager to prove their abilities in the workplace through summer or permanent jobs. Co-sponsored by the U.S. Department of Labor's Office of Disability Employment Policy (ODEP) and DoD with the participation of many other federal agencies, the WRP has provided employment opportunities for nearly 4,500 students since 1995. Recently, WRP has included internship opportunities for wounded service members seeking experience in the federal sector.

Operation Warfighter (DoD)

www.militaryhomefront.dod.mil/operationwarfighter

Operation Warfighter is a temporary assignment/internship program for service members who are convalescing at MTFs in the National Capital Region. Operation Warfighter is designed to provide recuperating service members with meaningful activity outside of the hospital environment that assists in their wellness and offers a formal means of transition back to the civilian workforce. Open to Active Duty, National Guard and Reserve components, Operation

Warfighter represents a great opportunity for service members in a medical hold status to build their resumes, explore employment interests, develop job skills, and gain valuable federal government work experience that will prepare them for the future. The program simultaneously enables participating federal agencies to avail themselves of the considerable talent and dedication of these recuperating service members.

Employment Rights Information

Equal Employment Opportunity Commission

www.eeoc.gov

The five-member Commission makes equal employment opportunity policy and approves most litigation. The General Counsel is responsible for conducting EEOC enforcement litigation under Title VII of the Civil Rights Act of 1964 (Title VII), the Equal Pay Act (EPA), the Age Discrimination in Employment Act (ADEA), and the Americans with Disabilities Act (ADA). EEOC has several disability initiatives, including Leadership for the Employment of Americans with Disabilities (LEAD) to help increase employment of people with disabilities in the federal sector to two percent of the total civilian workforce.

The ABCs of Schedule A

www.eeoc.gov/eeoc/initiatives/lead/abcs_of_schedule_a.cfm

The EEOC has addressed the declining number of employees in the federal government with targeted disabilities by introducing the LEAD initiative. LEAD staff is working to encourage federal agencies to hire and advance more individuals with severe disabilities and have taken a crucial role in informing the general public of the Schedule A appointing authority. Using Schedule A, qualified candidates who meet the Office of Personnel Management's (OPM) guidelines can be hired non-competitively by a Federal agency. LEAD has issued "The ABCs of Schedule A" – five informational guides – to inform hiring officials and applicants with disabilities of the benefits and methods of utilization of Schedule A.

VetGuide

<http://opm.gov/staffingPortal/Vetguide.asp>

This website provides an expounded dialogue of the history of Veterans' Preferences for Federal appointments and their specific use by men and women who have served our country in the military.

ADA: Know Your Rights – Returning Service Members with Disabilities

<http://www.ada.gov/publicat.htm#servicemember>

This 28-page booklet is designed to provide military service members who have been seriously wounded in Operation Iraqi Freedom or Operation Enduring Freedom a basic understanding of their rights under the ADA and where to turn for additional information and assistance.

Disability and Accommodation Resources

Computer/Electronic Accommodations Program (CAP)

www.tricare.mil/cap/wsm

The Computer/Electronic Accommodations Program (CAP) is committed to providing assistive technology to returning wounded Service members. Accommodations are available for service members with injuries that have caused vision or hearing loss, dexterity impairments, including upper extremity amputees, as well as communication and cognitive difficulties.

CAP works with DoD and the Department of Veterans' Affairs to assist in the "reemployment process." If a service member remains on active duty or becomes a civilian within DoD or another Federal agency, CAP can provide the work related accommodation to the agency free of charge for internship and/or permanent employment.

Job Accommodation Network (JAN)

<http://askjan.org>

JAN is a free consulting service designed to increase the employability of people with disabilities by:

- 1) providing individualized worksite accommodations solutions
- 2) providing technical assistance regarding the ADA and other disability related legislation
- 3) educating callers about self-employment options.

Disability.gov

www.disability.gov

A comprehensive online resource designed to provide people with disabilities with quick and easy access to the information they need. With just a few clicks, the site provides access to disability-related information and programs available across the government on numerous subjects, including benefits, civil rights, community life, education, employment, housing, health, technology and transportation.

Disabilities | The White House

www.whitehouse.gov/issues/disabilities

The White House's website on disability issues provides an overview of President Barack Obama's driving principles in the creation and maintenance of disability legislation. Relevant updates are also posted to inform the general public of recent progress in reinforcing and strengthening the Americans with Disabilities Act and other law-sanctioned disability provisions.

Resources for Cognitive Injuries

Defense and Veterans Brain Injury Center

www.dvbic.org

The mission of the Defense and Veterans Brain Injury Center (DVBIC) is to serve active duty military, their dependents and veterans with traumatic brain injury (TBI) through state-of-the-art medical care, innovative clinical research initiatives, and educational programs.

Defense Centers of Excellence

www.dcoe.health.mil

The Defense Centers of Excellence (DCoE) For Psychological Health & Traumatic Brain Injury offers an up-to-date resource for warriors and their families who need help with psychological health and traumatic brain injury issues. By addressing adequate treatment, continuing rehabilitation, and eventual reintegration into the work force, DCoE provides current research, education programs, and resilience planning tools to the public to equip service members, veterans, their families, and military leadership the necessary outlets for educated recovery.

Brain Injury Association of America

www.biausa.org/index.html

The Brain Injury Association of America (BIAA) is the leading national organization serving and representing individuals, families and professionals who are touched by a life-altering, often devastating, traumatic brain injury (TBI). Together with its network of more than 40 chartered state affiliates, as well as hundreds of local chapters and support groups across the country, the BIAA provides information, education and support to assist the 5.3 million Americans currently living with traumatic brain injury and their families.

The National Center for Posttraumatic Stress Disorder

www.ncptsd.va.org/ncmain/index.jsp

The National Center for PTSD (NCPTSD) aims to advance the clinical care and social welfare of U.S. Veterans through research, education and training on PTSD and stress-related disorders.

CAP partners with other organizations to ensure recovering service members have access to appropriate and useful transition information and services. CAP also recognizes that our resource list can expand and welcome suggestions. To learn more, please visit:

www.tricare.mil/cap/wsm/resources.

Support. Equip. Empower



Office of the Assistant Secretary of Defense (Health Affairs)
TRICARE Management Activity
Computer/Electronic Accommodations Program
Wounded Service Member Initiative
5111 Leesburg Pike, Suite 810, Falls Church, VA 22041-3206
www.tricare.mil/cap/wsm