

**Volunteer Training Manual**

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**Welcome as a Volunteer for Blue Ridge Adaptive Snow Sports!**

We appreciate your time and interest in our program. Volunteers make up the Blue Ridge Adaptive Snow Sports (BRASS) team, from instructors to on-the-snow volunteers, administrative, fundraising and more. ***You are integral to the success of BRASS***. Without your help, BRASS would not be able to provide the quality service we give to our clients. Volunteers fill many roles in the organization so, if you have something you do well or something you are interested in, we would love to know.

Your help enables us to create an amazing experience for our clients, and we believe your time and effort are very valuable. Thank you.

Leslie and Dick White

BRASS Founders

Jeff Brown

President of the Board

The BRASS Board

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# INTRODUCTION

***Blue Ridge Adaptive Snow Sports, Inc. (BRASS)*** is a nonprofit organization that seeks to enhance the lives of people with disabilities through adaptive snow sports and recreational opportunities. BRASS supports the adaptive snow sports program at Liberty Mountain Resort in Carroll Valley, Pennsylvania.

BRASS offers instruction in snow sports (alpine skiing and snowboarding) for people with a broad range of disabilities such as:

* *Visual Impairment* – A person with complete or partial blindness that needs to be guided while skiing or snowboarding.
* *Developmental or Cognitive Disabilities* – Someone with a physical or mental ability that affects his/her ability to process information and/or coordinate and control his/her body.
* *Mobility Impairment* – A person has the use of only one leg (3 Track); someone who needs assistance with balance and may walk with a cane, crutches or braces (4 Track); or a person that uses a wheelchair or can only walk short distances or periods of time (Sit-Down). Depending upon the nature of the disability, the student may either use a twin-ski, mono-ski or a bi-ski.

BRASS operates at Liberty Mountain Snow Sports School providing instruction for people with disabilities. All of the instructors are volunteers who participate in extensive training in snow sports instruction and teaching people with disabilities. Many of the instructors have adaptive instructor certification through the Professional Ski Instructors of America. Our goal is to have all instructors achieve certification within the first three years of their adaptive teaching career.

Organization

Blue Ridge Adaptive Snow Sports, Inc. is a nonprofit organization incorporated in the State of Maryland. A volunteer Board of Directors elected by the membership governs the organization. BRASS is a chapter of Disabled Sports USA, the premier sports organization for people with disabilities. Disabled Sports USA is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1954 and contributions to Disabled Sports USA are deductible under Section 170(c)(2) of the Internal Revenue Code of 1954 (or corresponding provision of any future United States Internal Revenue law). BRASS, as a chapter of Disabled Sports USA, falls within its group exemption number 2599. Therefore donations to BRASS are tax deductible to the fullest extent allowed by law.

BRASS is a membership organization with minimal membership fees used to finance the administration aspects of operating an adaptive snow sports program. We encourage the students and their families to become members of BRASS but it is not a requirement to participate in the program.

Clientele Served

Blue Ridge Adaptive Snow Sports, Inc. serves people with disabilities of all ages. The students include children and adults with varying levels of skiing and riding ability. BRASS strives to enable anyone with a disability to enjoy the sport of skiing and snowboarding regardless of the nature of his or her disability.

Our clientele live and work in south central Pennsylvania and the greater Baltimore-Washington metropolitan area including Northern Virginia. We have had students from Mexico, New York, Florida and North Carolina participate in the program.



History

The Adaptive Program began during the 1997-1998 season on a very limited basis. Liberty’s Ski School Director and General Manager saw the need for an adaptive program at the mountain. Through their support, we purchased used sit down equipment from another adaptive program and subsidized the teaching certification process for the program director. The program recruited volunteer instructors from the ski school and began training them in adaptive techniques. Due to a core group of very dedicated volunteers, lessons were provided and a nonprofit organization was created.

BRASS was incorporated in 2001 and the volunteer board was elected. Today, BRASS has over 30 snow sport instructors, 10+on snow volunteers, an active Board and a strong core group of students and supporters. We teach over 300 lessons each season. Our growth has been achieved primarily through word of mouth since BRASS was hesitant to actively advertise for fear of the inability to meet the demand. The demand and need for adaptive snow sports lessons and opportunities is large and it is BRASS’s goal to meet this need. One of the ways we address this need is to develop partnerships with businesses and other organizations serving people with disabilities.

Partnerships

Blue Ridge Adaptive Snow Sports, Inc. partners with many organizations to enable people with disabilities to enjoy snow sports.

***Easter Seals Western and Central Pennsylvania*** is anotherpartner whereby its recreation program provides the opportunity for its clientele to receive adaptive snow sports instruction at Liberty Mountain Resort. Two weekends each season, Easter Seals offers a program for its clients to enjoy skiing and snowboarding.

***Special Olympics Maryland*** (SOMD) has a Modified Alpine program in conjunction with its other Winter Games sports of alpine and cross-country skiing. As one of only a few state programs within the Special Olympics movement that offers the opportunity for sit-down skiers to train and compete at the state level. Many of the BRASS instructors are also coaches. BRASS and SOMD share equipment and resources to expand the opportunity for people with disabilities to enjoy various snow sports. Many of our instructors help with training coaches and athletes.

Korean American Disabled Peoples Association has hosted a family weekend of snowsports instruction and fellowship at Liberty Mountain Resort since February 2000. BRASS provides snowsports lessons for approximately 20 children during the weekend. Many of the children came for lessons throughout the season.

Columbia Lighthouse for the Blind enjoyed bringing a group of clients to learn to ski and snowboard and hopes to continue as an annual program.

Warfighters

IN THE PAST

Wounded Warrior Disabled Sports Project was a joint program between the Wounded Warrior Project and Disabled Sports USA that offered recreational sports opportunities to military personnel wounded while fighting the global war on terrorism. BRASS hosted several injured military personnel from Walter Reed Military Hospital and other for military bases for a weekend of skiing and snowboarding. In the past, the weekends were also generously supported by the Times and News Publishing Company, publisher of The Gettysburg Times, American Legion Post 202 (Gettysburg), the Gettysburg Quality Inn, DynCorp and various private donations.



TODAY

Warfighter Sports is a program of Disabled Sports USA which offers recreational opportunities to all active and veteran military personnel that have sustained an injury affecting any of their life skills. BRASS has hosted weekend events as well as a development program for the appropriate military personnel, and continue to do so in the coming year.

Adaptive Program Contact Information (2022-2023 Season)

**Important Telephone Numbers:**

* BRASS 717-256-1844-
* BRASS alt 717-559-0239
* Liberty Ski Patrol: 717-642-7014 (Direct)
* Paul Oswald - Program Coordinator, cell: 571-334-92787
* Steve Gurney - Program Coordinator/Board Member, cell: 703-966-6182
* Tom Estock - Program Coordinator/Board Member, cell: 443-837-5511

**Important Web sites and Email Addresses**

* BRASS - [www.brasski.org](http://www.brasski.org),
* Email - brassadapt@gmail.com
* Facebook - <https://www.facebook.com/groups/54975729458/>
* Liberty (general) - [www.libertymountainresort.com](http://www.libertymountainresort.com),

Mailing Address:

**BRASS**

To Be Updated

Lessons

**Lessons are available by reservation only**. To make a reservation, go to our web site, http://www.brassadapt@gmail.com with your requests, or visit Reservations - Blue Ridge Adaptive Snow Sports at brasski.org/reservationsReservations are on a first come, first served basis.

**Lesson Days:** PrimarilySaturday & Sunday’s andsome weekdays dependent upon instructor availability, Martin Luther King Day, and President’s Day

**Lesson Time:** 10:00 am to Noon and 1:30 – 3:30 pm.

*Instructors and volunteers must report by 9:40 pm for morning lessons and 1:10 pm for afternoon lessons to meet and assess your student. You should be in uniform, booted up and ready to start the lesson.*

***Adaptive Lesson Packages***

Email [brassadapt@gmail.com](mailto:brassadapt@gmail.com) with your requests. Sign up for a lesson and bring the required forms[.](https://brasski.org/wp-content/uploads/student-info-form.pdf) We strongly recommend students contact their physician before signing up for a skiing or snowboarding lesson. BRASS offers the following Adaptive packages to meet the needs of students:

* **Pricing: 2 Hour Session (AM or PM) $110**
  + The adaptive lesson price includes a lift ticket, lesson and coaching, and rental equipment (such as skis/snowboard & boots) and/or special equipment.
* **Pricing: Full Day Sessions (AM + PM) $170**
* **Pricing with Season Pass: $60 per 2 hour session ($120 for a full day)**
  + ​Includes lesson and coaching, and rental equipment (such as skis/snowboard & boots) and/or special equipment.
* Reservations are honored on a first come, first serve basis and based on instructor availability. Email [brassadapt@gmail.com](mailto:brassadapt@gmail.com)

Email [brassadapt@gmail.com](mailto:brassadapt@gmail.com) with your requests. Sign up for a lesson and bring the required forms[.](https://brasski.org/wp-content/uploads/student-info-form.pdf) We strongly recommend students contact their physician before signing up for a skiing or snowboarding lesson. BRASS offers the following Adaptive packages to meet the needs of students:

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* Reservations are honored on a first come, first serve basis and based on instructor availability. Email [brassadapt@gmail.com](mailto:brassadapt@gmail.com)

**Student Information & Waiver Form**

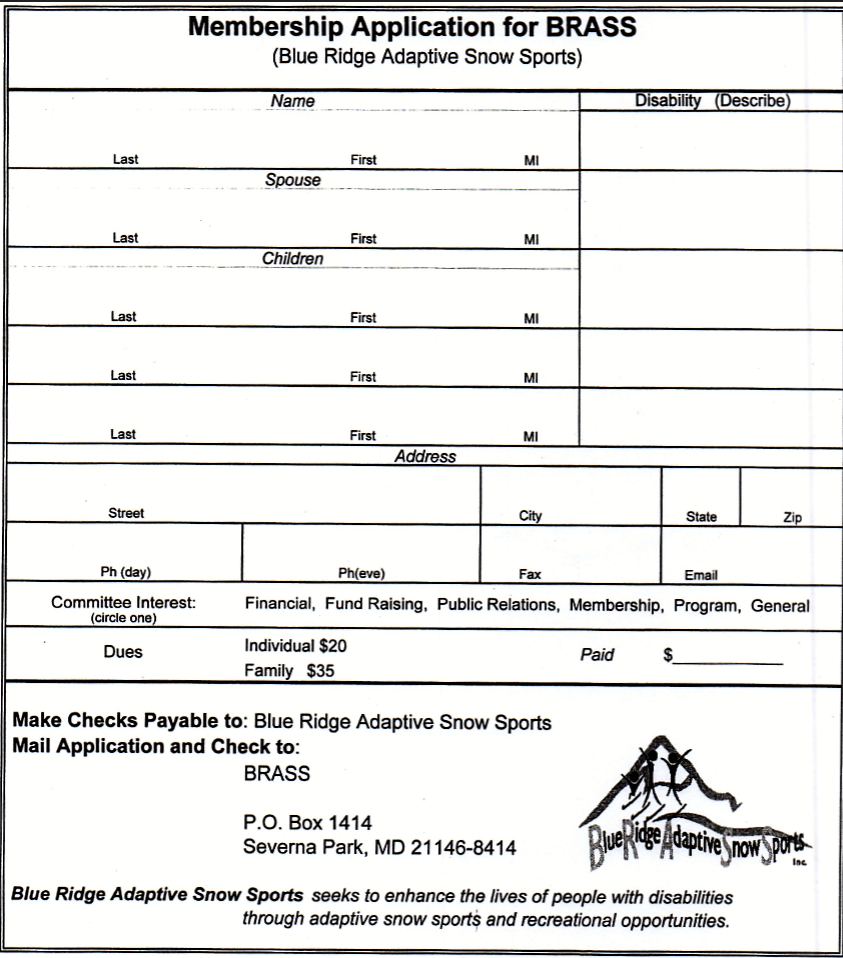
Each student will be required to complete a Student Information and Waiver form before the lesson. The form can be downloaded from the BRASS web site.

Become a Member

Support the great things we do by [becoming a BRASS member and making a donation.](http://www.brasski.org/downloads/membership-form.pdf)

Your BRASS membership helps us promote the our program and enhance the lives of even more people. BRASS raises money with the following focus:

* To put students on the snow with qualified instructors
* To purchase and maintain proper adaptive equipment
* To train and certify volunteer adaptive instructors
* To expand our outreach
* To teach as many students as possible



# VOLUNTEERS

Blue Ridge Adaptive Snow Sports is an all-volunteer operated nonprofit organization and as such we are always searching for people to help us achieve our mission of bringing the joy of snow sports to people with disabilities and their families. Our volunteer opportunities include:

Volunteer Adaptive Instructor

***Description*** *–* An instructor performs an assessment of the student to identify the adaptive equipment needs, teaches the student (new or experienced) to ski or snowboard while using adaptive equipment as needed.

***Qualifications***

* Intermediate skier or rider
* Minimum Age *-* 16 years
* Experience with teaching snow sports preferred but not required.
* Desire and/or previous experience working with people with disabilities

***Training Requirements***

* Instructor Training Clinic – All new instructor candidates must attend the classroom session in the fall and on-snow training in early January.
* Liberty Mountain Snowsports School Instructor Training Clinic (ITC) - If no previous experience teaching skiing or snowboarding, must attend the Liberty Mountain Resort’s Instructor Training Clinics which consists of one-day classroom training (late November) and two-day on-snow training (early December/January)
* Apprentice - After successfully completing the ITC sessions you will receive adaptive training and be an apprentice with an experienced instructor before teaching a lesson independently.

***Time Commitment*** – We offer flexible arrangements for volunteer help.and prefer a minimum of 5 days (primarily weekends) during the season. Daily lift passes will be provided for those volunteer days. However, to be provided a Epic Local Pass (a season pass, good across US Vail resorts minus blackout days (peak holidays) you will need to commit to volunteering for 12 days during the season.

Assistant (On-Snow)

***Description*** *-* Assist the adaptive instructor with the lesson both indoors and on-the-hill. The assistant is also an ambassador to the student and his/her family explaining the Adaptive Program and their involvement. Outside activities involve skiing/riding with the lesson while helping the instructor as needed including helping the student on and off the chairlift.

***Assistant Volunteer's Role***

The volunteer's role will be covered in training sessions. While on lessons, volunteers:

* Should be in tune with the student's needs and comfort level. Watch facial expressions; adjust hat or gloves, etc.
* Assist in ensuring the safety of others.
* Assist with bringing equipment out to the snow and return to storage.
* Assist in loading and unloading on the chair lift.
* When a mono or bi-ski is stopped, ski below and help stabilize the student.
* Demonstrate skiing/riding tasks as needed.
* Assist in crowd and traffic control and related safety concerns.
* Assist in lift-lines when appropriate.
* Assist students when they fall.
* Different instructors have different teaching styles. Before the lesson goes outside, talk with the instructor to become familiar with the student and the initial lesson plan.
* The instructor is responsible for teaching the lesson. The on-snow volunteer should not provide instruction, so as not to confuse the student. Any concerns should be discussed with the instructor after the lesson, not in front of the student.

***Qualifications***

* Advanced beginner skier or rider
* Minimum age - 16 years
* Desire and/or previous experience working with people with disabilities

***Training Requirements***

* Adaptive orientation session – Half day
* On-snow training – Half day training

Equipment Manager

Someone with mechanical capabilities to check and maintain the adaptive equipment, repair as needed. Keep spare parts stocked and inventory equipment.

Administrative Assistant

This person is responsible for the administrative activities before and after the lessons. Ensure that the Student Information Waiver form is completed before the lesson begins and that the instructors complete the Lesson Evaluation form. File and maintain the student records.

Organizational Volunteers

***Board Member*** – BRASS has a Board of Directors with a maximum membership of twelve (12) people. Board members are elected by the membership. Board officers include a president, vice president, secretary-treasurer and any other officers we think we need from the Board.

***Planning Committee*** – The Planning Committee is responsible for developing the short term and long term plans for BRASS. We need new strategic and operational plans to continue to move the organization forward and meet the needs of our clients.

***Finance Committee*** – As a public charity BRASS has a fiscal and fiduciary responsibility to the public, its donors, members and students to use its funds appropriately. The Finance Committee is responsible for the financial oversight of BRASS including budgeting.

***Membership*** – BRASS is a membership organization so we need a committee to focus on membership recruitment and retention. .

***Fundraising*** – Fundraising is a critical component for any nonprofit organization. BRASS depends upon primarily individual donations but has received many grants and corporate donations. Fundraising is a constant activity with the need for energetic people.

***Publicity/Public Relations*** – Publicity and public relations are first cousins to fundraising. This committee’s task is to generate publicity and public awareness about BRASS and the Adaptive Program at Liberty Mountain Resort. This committee will work closely with both the Membership and Fundraising committees.

Appearance and Behavior Guidelines

Instructors must wear black ski pants, black shirts/turtlenecks, and your BRASS or old black Jacket or vest. On snow volunteers, must wear nice ski pants and jacket on your lesson. Please arrive looking good!

Helmets are mandatory, for all BRASS participants and volunteers.

Drug and/or alcohol use are not permitted or tolerated.

Please remember we are sponsored by Liberty Mountain Resort and as such, follow their policies. All guests get our utmost respect and it is our privilege as instructors, to teach on the mountain and use the ski school line.

Please be friendly and helpful to everyone who walks through our door.

Never give out home or work numbers of volunteers. If necessary, take the person's name and number and forward the message on to the person with whom they are trying to get in touch.

Be on time for all volunteer/instructor activities and training. Notify Leslie or Dick White, or the ski school; as soon as possible, if you will be absent or late for your scheduled activity.

Attend orientations, trainings, staff meetings in order to provide the best possible service to our participants.

Policies

Background Checks

***Volunteer Adaptive Instructors***

All volunteer instructors, who will be interacting with BRASS participants during snow sports programs, must complete a background check through Liberty Mountain Resort and be fingerprinted as mandated by The Pennsylvania Child Abuse Law. You will be provided with the appropriate forms.

***Volunteer On Snow Assistants***

All on-snow volunteers will only be required to complete the BRASS background check process.

***Worker's Compensation Insurance***

As volunteers, BRASS instructors and assistants are not eligible for workers compensation coverage.

Code of Ethics

Confidentiality

BRASS is committed to keeping the confidentiality or our participants, volunteers and staff. As such, Volunteers of BRASS will not disclose confidential information to anyone who is not a volunteer with BRASS, or anyone who does not need to know such information to assist in rendering services. The disclosure, distribution, electronic transmission or copying of BRASS confidential information is prohibited and subject to disciplinary action.

***Media***

***Pictures/Video***: To take pictures or video the student of the parents/guardians must sign the Media Release portion of the DSUSA/BRASS. The release gives BRASS consent to use the pictures/videos. The Media Release is optional for students and you must honor their wishes.

All BRASS volunteers are ambassadors for BRASS and Liberty Mountain Resort. Follow guidelines when using photographs, videos, etc., particularly in regard to social media. Do not defame or discredit, air grievances, disclose personal information, discuss accidents, etc. Respect the privacy of our students and volunteers, promote our resort and organization in a positive light. When in question, refer to Liberty Mountain Resort policy as stated in their employee handbook.

***Your Responsibility Code***

* Always stay in control and be able to stop or avoid other people or objects.
* People ahead of you have the right of way. It is your responsibility to avoid them.
* You must not stop where you obstruct a trail or are not visible from above.
* Whenever starting downhill or merging into a trail, look uphill and yield to others.
* Always use devices to help prevent runaway equipment.
* Observe all posted signs and warnings.
* Keep off closed trails and out of closed area

**Know the code. It is your responsibility!**

**SMART STYLE – TERRAIN PARK SAFETY**

**All adaptive instructors must be signed off by Liberty Mountain Ski School to use the terrain park for teaching. Once you are certified, use the Smart Style model for enjoying your skiing/riding.**

**START SMALL -**Work your way up. Build your skills.

**MAKE A PLAN**- Every feature. Every time.

**ALWAYS LOOK -**Before you drop.

**RESPECT -**The features and other users.

**TAKE IT EASY -**Know your limits. Land on your feet.

Medical and Safety Concerns

Safety is a top priority at BRASS. If you have any pre-existing conditions such as a bad back, a blown-out knee, a serious allergy, or anything that we should be concerned about, please immediately bring it to our attention. If for any reason, you do not feel comfortable doing something we ask, please just let us know. We never want to put you an uncomfortable position or compromise your safety. Also, check with the instructor about where is your student going to ski and make sure the terrain is up to your level.

Allergies

**Staff and volunteers are not authorized to administer medications to participants!**

**Epi-Pen**

EpiPen is an injection containing epinephrine, a chemical that narrows blood vessels and opens airways in the lungs. These effects can reverse severe low blood pressure, wheezing, severe skin itching, hives, and other symptoms of an **allergic** reaction.

If a student marks epi-pen on their Student Information form, it is required that they also fill out an additional Epi-Pen form.

The epi-pen should be carried by the student unless not possible. You are not authorized to administer medications. The student must administer their epi-pen or ski patrol when they arrive.

**Food Allergies**

Determine if your student has any food or other allergies. Do not give the student any food unless it has been pre-approved by the parents/caregivers.

***NUT allergies are very common so please don’t bring any food containing nuts into the Nova Room.***

The Outdoor Environment

It’s important to keep our students skiing and riding comfortably in the winter. There are a few things to beware of, particularly when areas of poor circulation or little feedback contribute to cold weather challenges. Warm clothing is priority and BRASS has additional clothing, gloves, goggles, neck gators, etc. available for students.

Frostbite

**Definition:** The actual freezing of a body part when the heat produced in a body part, plus the heat carried to this body part by the blood, are insufficient to counteract the effects of below freezing temperatures. Skiers/riders are very susceptible to frostbite. Body areas with a higher risk of developing frostbite include the hands, feet, ears, nose and cheeks.

**Prevention:** Be sure to adequately cover the head, ears, hands and feet. Coverings should not be too tight as to restrict blood circulation. If socks or mittens get wet, dry them or replace them. Never touch ski bindings or other metal objects with bare fingers, fingers can freeze to these objects.

Hypothermia

**Definition**: Hypothermia or exposure refers to the cooling of the body to a core temperature below 95 degrees. This can occur in temperature well above and below freezing. The combination of cold, wind and water is especially dangerous. When the body temperature falls progressively, the body will initiallytrigger shivering. This is followed by clumsiness, stumbling, falling, slow reactions, mental confusion and difficulty speaking. Shivering usually ceases as the body temperature drops, and then the body will not be able to warm itself without outside help.

**Prevention**: Appropriate clothing is very important. Cotton garments, like denim and corduroy, should not be worn because of poor insulating values. BRASS has ski pants available for student’s use. Layer clothing to prevent chilling. Wind proof and waterproof outer garments are important, as is a hat. BRASS requires all volunteers and students to wear helmets and hats can go under them if necessary. Heat production can be increased by increasing the level of muscular activity so swinging arms and wiggling toes and fingers does help. AND, KNOW WHEN TO QUIT!

Sunburn

**Definition**: A first or second degree skin burn caused by Ultraviolet light. It is very easy to sunburn while skiing. The snow reflects the sun, amplifying the risk.

**Prevention**: Use sunscreen. For everyone, even if the sky is overcast. Get in the habit! Reapply when skiing/riding for a full day.

Windburn

**Definition**: Irritation of the skin that resembles a first degree sunburn caused by cold wind.

**Prevention**: Apply sunscreen and face masks are good, or keeping neck gators pulled up so as to protect the face.

Snowblindness

**Definition**: This is sunburn of the conjunctiva of the eye (the lining of the eyelids and covering the eyeball). Symptoms develop 6-12 hours after exposure. The eyes feel irritated and are sensitive to light. The conjunctiva are reddened, excessive tearing occurs, there is swelling around the eyes and pain with eye movement.

*Remember* - The snow reflects the sunlight, magnifying the sun’s effect.

**Prevention**: Wear suitable dark glasses or goggles. BRASS has googles available for students.

Standard Precautions

Standard Precautions are a set of precautions that the Centers for Disease Control and Prevention (CDC) has called for in order to minimize the risk that you will catch an infection from a patient or spread infection among patients.

You may have heard the term "Universal Precautions"--these were developed beginning in the 1980s specifically to protect you from blood borne pathogens. These are now the Standard Precautions you as a volunteer with BRASS should be following.

* Avoid needlesticks and other sharp injuries by using all sharp items carefully, making use of safety devices which are available, and disposing of all sharps appropriately.
* Wear gloves when touching blood, body fluids, secretions, excretions, and contaminated items. Put on clean gloves just before touching a patient's mucous membranes and non-intact skin. ***BRASS provides kits with gloves, tissues and ziplocs for your use during lessons.***
* Wash hands after touching blood, body fluids, secretions, excretions, and contaminated items, whether or not gloves had been worn.
* Protect and shield your own eyes, nose and mouth when possible where there is the possibility of splashes or sprays of blood, body fluids, secretions or excretions.
* Handle used patient care equipment soiled with blood, body fluids, secretions and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of microorganisms to other patients and environments. USE the ziplocs in your BRASS kit to dispose of tissues, contaminated items. Dispose the soiled items in the Hazaradous Waste containers in the Ski Patrol Room.

***BASIC RULE OF THUMB***: Take precautions when working with students and bodily fluid. Use the supplies in your kit!

**Standard Precautions must be observed with ALL students at ALL times, regardless of their age, gender, or diagnosis.**

Back Injury Prevention

Flexibility and physical fitness play an important part in reducing fatigue and injury.

Stay fit to be a volunteer! BRASS has gait belts (lifting belts) to use when transferring students.

Lifting & Loading Clients in Ski Equipment

If you do not feel comfortable with the lift, please immediately advise the supervisor (Leslie White).

The lead instructor is in control of the lift and explains the process to the assistant.

***Always do a practice lift at the beginning of each lesson.***

You will have opportunities for training for lifting and loading.

Transfer Guidelines

Wheelchair Transfer

Some patients who use wheelchairs can transfer themselves, but others need assistance. The extent of your involvement will depend on the patient's or caregiver's ability to help. Most people can be transferred safely from wheelchair to equipment and back by using the two-person method. The following outline describes a safe transfer with a minimum of apprehension for the patient and clinician. Practice these steps before doing an actual patient transfer.

1. Ask the student or caregiver about the preferred transfer method and their ability to help.
2. Prepare the wheelchair by:

Remove/move the footrests.

Position the wheelchair close to the equipment.

Lock the wheels in place and turn the front casters forward.

Remove/move the wheelchair armrest next to the equipment.

1. Two Person Transfer

Use a Gait Belt for the transfer.

One persons should be the leader in the transfer process. The leader will “call” the load., usually 1-2-3 lift.

First person: Stand behind the patient and grab the gait belt. Help the patient cross his arms across his chest.

Second person: Place both hands under the patient's lower thighs. Grasp your opposite wrists. Lead the lift with the prearranged count (1-2-3-lift).

***IMPORTANT BODY POSITION FOR TRANSFERS***

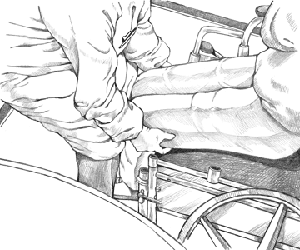
Get as close to the person as possible to reduce using our back. Using your leg and arm muscles while bending your back as little as possible, squatting in a way that engages your leg muscles only, your back straight. Gently lift the patient's torso and legs at the same time.

Secure the student in the equipment or replace the armrest in the wheelchair. Store the wheelchair in the appropriate place. Do not operate a motorized wheelchair, have the caregiver move the chair.

**THE TWO-PERSON TRANSFER**



First clinician stands behind the patient.



Second clinician initiates the lift

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Forms

**Forms for Volunteers with BRASS**

**You must complete the following forms:**

* Blue Ridge Adaptive Volunteer Registration Form – each year
* Liberty Mountain Volunteer Form – each year
* Your Work Schedule
* Appropriate Background Check

**Forms for the students**:

* Student Information, Waivers and Releases - a new one must be completed each season
* Waivers – there are Waivers for DSUSA/BRASS and Liberty Mountain Resort.

Media releases are optional on DSUSA form

* Epi Pen form (as needed)
* Rental Equipment Form
* Lesson Evaluation Form – must be completed at the end of each student’s lesson by the instructor and assistant.

LESSON EVALUATION

# 

**Student’s Name: Date:**

**Instructor’s Name: Assistant:**

**Type of Skier/Rider:**  VI  Cog  3 Track  4 Track  Bi-Ski  Mono-Ski

**Adaptive Equipment Used:**

Skis/Board (Type & Length):Boots: **.** Helmet: **\_\_\_\_\_\_\_**

Outriggers (type & setting):.  Ski Bra  Spacer  Reins

 Bamboo  Bi-Ski:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Mono-Ski: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Other:.

**COMMENTS:**

*Weather:*  Sunny  Cloudy  Rain  Fog  Snow Temperature: **.**

*Snow Conditions:*  Packed  Powder  Hard Pack  Ice  Crud  Slush

*Lifts Used:* **.**

*Trails Used:* **.**

*Skiing Level:*  Straight run  Wedge  Wedge Turns  Wedge Christy

 Open Parallel  Dynamic  Racing/Gates

*Riding Level:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Motor Coordination:*  Poor  Good  Excellent

*Communication:*  Poor  Good  Excellent

*Two instructors required:*  Yes  No *Preferred:*  Yes  No

**REMARKS & WHAT IS NEXT:**

**Instructor:**  .

Snowsports Injury Procedures

**Important Telephone Numbers:**

* Liberty Ski Patrol: 717-642-7014 (Direct)
* BRASS 717-256-1844

In the event of an injury:

1. Secure the area. Cross skis or place snowboard in the snow above the injured party to warn other skiers of the injured party.

2. Make sure all participants in your group are secure. Specifically direct them where to go, and where to wait for you if appropriate.

3. Contact Ski Patrol at 717-642-7014

Send someone to a lift to report the injury if no cell phone is available. It is recommended that you enter the Ski Patrol number in your cell phone prior to skiing/riding with A BRASS participant.

4. Stay with the injured party until the ski patrol arrives.

***Do you know your student?***

***Ski Patrol will need to know any important information such as medical conditions and considerations. Such as diabetes, seizures, epi pens, shunts and so on. Pay attention to your student forms.***

5. After the ski patrol arrives and assumes control of the situation, stay with the participant.

***Snow sports Injury Procedures continued***

6. If another person is involved in the accident/incident, ask them to stay until Ski Patrol arrives on the scene. All parties involved must remain at the scene until cleared by the ski patrol.

7. Contact your BRASS supervisor who is on duty, so BRASS can provide the Student Information form to Ski Patrol and contact the parents or family.

8. Following any accident, involving Ski Patrol, the instructor must complete the Liberty Snowsports Accident form (and obtain the file number from Ski Patrol) and the DSUSA Incident Form.

9. Complete, in detail, all areas of the Incident Report using the following steps:

* Provide sufficient details to ensure that anyone who did not witness the incident will be able to understand exactly what occurred at the incident
* When needed, attach additional pages to completely detail the incident
* When additional witnesses viewed the incident, request a copy of the Ski Patrol Report to secure contact information from the witnesses. Each witness shall complete a separate incident Report Form to ensure all details are captured.
* Keep all narratives to known objective facts. Do not speculate on injuries or medical information that has not been verified by a trained medical professional (i.e. "Susie complained of pain in her knee" vs. "Susie sprained her knee") Describe behavior, not subjective.
* Use first names when detailing the incident, avoid the use of pronouns (he, she, they, we)
* Attach all relevant documentation to ALL forms.
* The completed incident report form along with the waivers and Release Forms must be submitted immediately to a BRASS supervisor.



# DISABILITY AWARENESS

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***Adaptive Disciplines***

**3 TRACK:** Using one ski and outriggers for balance. The outriggers provide a three-point balance system, enabling the student to maintain dynamic balance while skiing.

Common Disabilities (include but are not limited to):

Amputations Diseases or trauma that affect one leg

Post Polio Stroke and brain trauma

**4 TRACK:** Using 2 skis with 2 outriggers. Because these students usually experience balance problems or general weakness in the lower extremities, they must have at least four points of contact with the snow.

Common Disabilities: Brain Trauma Cerebral Palsy Multiple Sclerosis Muscular dystrophy

Post Polio Spina bifida

Spinal Cord Injury Traumatic brain injury

**MONO-SKI:** A sit ski with a molded bucket seat and one ski that enables people with disabilities affecting their legs to ski. A mono ski allows the skier to eventually ski independently and to perform at a higher level than a bi-ski.

Common Disabilities: Brain Trauma Cerebral Palsy

Double Amputee Spinal cord injury

Post Polio Multiple Sclerosis

Muscular Dystrophy Spina bifida

**BI-SKI:** Skier is seated in a device attached to an articulating undercarriage, which is mounted on two uniquely designed skis. This enables a person with a high level disability to ski while being tethered by their instructor.

Common Disabilities: Cerebral Palsy Multiple Sclerosis

Muscular dystrophy Quadruple amputee

Spinal cord injury Spina bifida

Severe epilepsy Severe balance impairments

**VISUAL IMPAIRMENTS:** Skier is often times a stand-up skier (2 track) with standard equipment. Blind skier or Visually impaired and guide bibs are necessary and, other aids may be used.

Common Disabilities: Albinism Blindness

Cataracts Partial-Sightedness

Corneal disease Glaucoma

Macular degeneration Optic nerve disease

Tunnel vision Retinal damage

Diabetes Trauma

**COGNITIVE DISABILITIES:** Usually 2-track with special aids, such as ski bras, tethers, bamboo poles, etc. Snowboarding is also an effective teaching discipline.

Common Disabilities: Autism

Cerebral Palsy

Epilepsy

Fetal Alcohol Syndrome

Learning disabilities

Muscular dystrophy

Multiple sclerosis

Traumatic Brain Injury

Parkinson’s Disease

**Common Disabilities**

You can find a good and brief explanation of Disabilities in the Professional Ski Association’s Adaptive Study Guide. The Study Guide is full of great information that can help you become a better volunteer. It can be downloaded, free of charge.

1. Go to [www.psia-e.org](http://www.psia-e.org)
2. Click on Education
3. Choose Adaptive Education on the drop down bar
4. Choose the Adaptive Study Guide

A brief list of disabilities includes:

Amputations Intellectual Disabilities

Aphasia Learning Disabilities

Attention Deficit Disorder Multiple Sclerosis

Autism Muscular Dystrophy

Cerebral Palsy Neuromuscular Diseases

Cognitive Disabilities Polio/Post Polio Syndrome

Blind/Visually Impaired Stroke

Deaf/Hearing Impaired Spina Bifida

Diabetes Spinal Cord Injury

Down Syndrome Traumatic Brain Disorder

Epilepsy/Seizure Disorder Post Traumatic Stress Disorder

Medications

Every BRASS student completes a Student Information Form. This form allows us to prepare for a lesson before the student arrives. All of the information is very important, especially the medications the student is currently taking, and if they are current on their medication intake schedule. The following table lists some common medications you may encounter. Please note side effects and problems with missed dosages. If there are any questions, you can ask the student, parent/caregiver or “google it”.

**Staff and volunteers are not authorized to administer medications to participants!**

|  |  |  |
| --- | --- | --- |
| **ANALGESICS** | | |
| Used for | | Pain relief |
| Examples | | Narcotics: Tylenol with codeine, Percocet, Darvocet Non-narcotics: Tylenol, aspirin, Advil, Aleve, Ultram |
| Side effects | | Narcotics: drowsiness, difficulty with concentration, circulatory problems, constipation |
| Missed dosages | | Pain interferes with everything |
|  | |  |
| **ANTICHOLINERGICS** | | |
| Used to | | Control bladder spasms, abdominal cramping |
| Examples | | Ditropan, Daricon, Donnatal |
| Side effects | | Dry mouth, blurry vision, constipation, urinary retention |
| Missed dosages | | Intestinal or bladder cramping--quite painful. If severe enough, can cause reflex sympathetic dystrophy |
|  | |  |
| **ANTICOAGULANTS** | | |
| Used to | Prevent &/or treat blood clots (which are often cause by immobile extremeties) | |
| Examples | Heparin (given SQ) or Coumadin (oral) | |
| Side effects | Easy bruising, excessive bleeding from a minor wound | |
| Missed dosages | Risk of blood clot, usually in legs. Symptoms won't show for a few days, sometimes first symptom will be shortness of breath, indicative  of a clot that has formed and traveled to the lungs | |
|  |  | |
| **ANTICONVULSANTS** | | |
| Used to | | Control seizures |
| Examples | | Dilantin, Phenobarbital, Tegretol, Depakene, Clonopin |
| Side effects | | Drowsiness, gum overgrowth |
| Missed dosages | | Risk of seizures increases |
|  | |  |
| **ANTIEMETICS** | | |
| Used to | | Control nausea, vomiting |
| Examples | | Comazine, Phenergan, Vistaril, Tigan |
| Side effects | | Drowsiness, circulatory problems, dry mouth |

|  |  |
| --- | --- |
| Missed Dosages | Nausea, vomiting |
| **ANTI-INFLAMMATORIES** | |
| Used to | Treat all kinds of inflammation, from swelling in the brain (with a tumor of post-trauma), to inflammatory responses in the skin or joints (rheumatiod arthritis, severe psoriasis), to minor injuries of the extremeties. |
| Examples | Either steroids (Decadron) or NSAI's (Naprosyn, Advil, Aleve) |
| Side effects | Gastrointestinal irritation and bleeding |
| Missed Dosages | Pain |

Common Intellectual Disabilities

***Learning Disabilities***

* Messages to the brain become jumbled, thus making it difficult for person to learn by traditional methods. Visual and/or auditory.

***Attention Deficit Hyperactivity Disorder***

* Neurological syndrome caused by deficiencies in “neurotransmitters” the chemicals that either send or stop messages relayed in brain. Chemical, not an emotional or psychiatric disease. Normal or better intelligence.
  + Predominantly Hyperactive - Impulsive
  + Predominantly Inattentive
  + Combined

***Emotionally Disturbed***

* Has difficulty controlling emotions, often “acts out”

***Intellectual Disabilities***

* Person who from childhood develops at a below average rate and experiences moderate to severe delays in learning, social/emotional adjustment, and economic productivity.
* Causes – Any condition that hinders or interferes with cognitive development before or during birth or in early childhood years. Over 250 known causes
  + Down Syndrome
  + Fragile X Syndrome
  + Fetal Alcohol Syndrome

***Autism Spectrum Disorders (ASD)***

* A category of neurological disorders characterized by (DSM-5):
  + Persistent deficits in social communication & social interaction across contexts
  + Restricted, repetitive patterns of behavior, interests, or activities

Common Behaviors

* Easily distracted
* Short attention span, tends to be very inattentive
* Impulsive behavior
* Easily frustrated
* Difficulty completing tasks or strong need to finish task
* Confused if asked to do two things simultaneously
* Difficulty staying still
* Problems with organization
* May be very passive, may be aggressive
* Resistant to change, cannot deal with change
* Difficulty expressing needs
* Repeats words or phrases instead of normal, responsive language
* Uneven gross or fine motor skills
* Impaired ability to understand messages (processing difficulties)
* Inappropriate social responses
* Very narrow range of interest (perseverates on a few interests)
* Can’t read social cues

General Guidelines Working with People with Disabilities

**Always ask before you help –** People with disabilities want to be treated as independent people. Offer assistance only if the person appears to need it - *ask before you act*.

**Always use “people first” language –** Always put the person first and disability second when communicating; mention the person first and any relevant description of a disability second. Say “person with a disability” not “disabled person.” For specific disabilities, say “person with cerebral palsy,” person with autism.” Avoid antiquated terms like “handicapped,” “crippled;” avoid jargon, euphemistic terms like “physically challenged,” “differently-abled.”

**People with disabilities are individuals -** Emphasize abilities instead of limitations. Do not assume that the way you help one person with a disability will be the same for all people with similar disabilities.

**When discussing a person do not reference their disability unless this information is relevant to the conversation.**

**It is okay to use every day phrases that may relate to the person’s disability –** It’s fine to say “Let’s walk over here,” to someone using a wheelchair or, “It is nice to see you,” to someone who is blind.

**Always talk to the person -**Always speak directly to the person with a disability, not the companion, aide or sign language interpreter. Talk to the person as you would anyone else.

**Be sensitive about physical contact –**Some people with disabilities depend on their arms for balance. Grabbing them – even if your intention is to assist – could knock them off balance.

**Be polite.** The Golden Rule of treating others as you would hope to be treated certainly applies here.

* Do not expect yourself to know how to be helpful; ask if and how you can be helpful or of assistance
* The person with a disability has more experience dealing with him/herself and with you than you do. Ask him/her what the best way to do something is.
* Make sure to inform the person you are working with exactly what you are going to do before you do it.
* A wheelchair is very much a part of the person who uses it. Leaning or sitting on a person's wheelchair is akin to leaning or hanging on a person and is usually considered annoying or rude.
* When a person with a disability falls, wait for them to give you a cue. If the individuals can get up by themselves, they may prefer doing that. If they need help, they will tell you the easiest way to assist them.

***Interaction/Conversation***

* A lack of response does not indicate rudeness. Some people respond in unconventional ways while they may appear to be ignoring you.
* Be aware of the individual's communication needs. To speak with your voice may not be enough--use your face, hands, and body.
* Lack of clear speech does not reflect a person's intelligence. Never assume that a person with impaired speech is cognitively impaired; they may simply have difficulty speaking due to muscle problems. Never pretend to understand someone if you do not.
* Talk directly to the person who has the disability, not to a third party. In the case of a person with a hearing impairment, look and speak directly to them, not to their interpreter.
* If you are conversing with someone in a wheelchair, consider sitting down to share eye level. Place yourself at the wheelchair user's eye level to spare both of you a sore neck.
* Don't get hung up on using words like "walking" or "running" with people who use wheelchairs. Likewise, saying "see you later" to a person with a visual impairment is also acceptable.
* Keep in mind that just because a person has a disability doesn't mean that they can't hear you. Talk in a normal voice unless otherwise instructed.

***Mobility***

A number of disabilities may make it difficult for the person to stand for prolonged periods of time or move around. People may use assistive aides – canes, walkers, crutches, scooters or wheelchairs. People who use wheelchairs have different disabilities and varying abilities. Some can use their arms and hands. Some can get out of their wheelchairs and even walk for short distances.

* Always ask before giving assistance; always ask before you even touch the person's wheelchair and then let them know exactly what are you doing. Ask: "What works best for you?"
* Make sure the route is clear and accessible.
* The wheelchair is an extension of the individual’s personal space. Never touch or lean on the chair. Don’t lean over someone in a wheelchair to shake another person’s hand or ask the wheelchair user to hold coats.
* Put yourself at eye level with the person – kneel or come around your desk or counter and sit down so the person does not have to constantly look up toward you.
* Offer to open heavy doors (accept “no”). Do not expect a wheelchair user to pass through the door under your arm.
* Have a clipboard available as a writing surface.
* People who use canes or crutches need their arms to balance themselves, so never grab them. People who are mobility-impaired may lean on a door for support as they open it. Pushing the door open from behind or unexpectedly opening the door may cause them to fall. Always ask before offering help.

***Wheelchair Safety***

* Keep the wheelchair in control at all times.
* Always put the brakes on when you leave a chair sitting.
* Make sure the person's feet are on the foot pedals to prevent dragging.
* When using ramps, go up frontward using your whole body to push, and watch your footing when going down.
* When going up or down a staircase, it is safest to have two people assisting, one in front and one in back. Use proper lifting techniques. If you do not know proper lifting techniques, please ask an ASC employee before proceeding.
* If you need assistance with a wheelchair, always ask an instructor or fellow volunteer.

***Visually Impairments***

The extent of visual impairment ranges from totally blind to partially blind. People with visual impairment know how to orient themselves and get around on the street. They are competent to travel unassisted, though they may use a cane or guide dog.

* When greeting a person with a visual impairment, always identify yourself and others. Speak in a normal tone of voice and indicate when the conversation is over.
* Clearly state who you are as you approach the person and tell him/her your role if it’s appropriate, such as security guard, usher, receptionist, etc.
* Don’t touch the person’s cane. The cane is a part of the person’s personal space. If the person puts the cane down, don’t move it. Let him know if the cane is in the way.
* Don’t touch the person’s cane or guide dog. The dog is working and needs to concentrate – **do not pet!** If the dog is distracted from its work, its owner can be in danger. Always ask permission of the owner before interacting with the dog.
* If the person has a guide dog, walk on the side opposite the dog. As you are walking, describe the setting, revolving doors, doors, any objects protruding from the wall and any other obstacles.
* When offering assistance to a person with a visual impairment, allow that person to take your arm; do not grab theirs. Let them hold your arm so that they can anticipate your movements. If they pull your arm or tighten their grip, you may be traveling too fast. Remember to mention steps, ice, curbs, ramps, etc.
* If you need to move to another area, offer to serve as a guide. Offer your arm – don’t take his/her arm. Allow the person to hold your arm and lead by walking slightly in front. Hesitate slightly before taking a step up or down. Let the person know when you arrive at steps (or an elevator) and indicate whether they are going up or down.
* When giving directions be specific and descriptive.
* If giving a warning, be specific. Hollering “Look out!” does tell the person if he should stop, run, run, duck or jump.
* If giving directions, give specific, nonvisual information. “Walk forward to the end of the aisle and make a full right.”
* If assisting a person on a stairway, guide their hand to the banister. If assisting someone about to sit, place their hand on the back of the chair.
* When offering a seat, place the individual’s hand on the chair back or arm and then move away.
* If you need to leave the area, let the person know. Let him know where the exit is, then leave him near a wall, table, or some other landmark. Do not leave the person in the middle of the room.
* Count out change so that they know which bills are which. If available, offer written information in large print, audio type, computer disk and Braille. Offer to read written information.

***Verbal Expression***

Some people may have difficulty expressing themselves. This may be related to physical production of speech that may result in not being able to be understood quickly or easily. A cognitive impairment may also lead to difficulty with word finding, speaking about certain topics or an inability to speak at all. Keep in mind that the ability to speak is not necessarily correlated to a person’s level of intelligence.

* Concentrate on what the person is saying.
* When the person pauses in speech indicate what you do understand; if you do not comprehend something, let the person know. For example “Your name is Mary, but I did not understand the rest of what you said.”
* Be patient. The person may have to repeat what is said a number of times before you understand what is being conveyed. Try writing the message down if, after several attempts, the person cannot be understood.
* Avoid attempting to complete the person’s thoughts or sentences.
* Try to meet in a quiet and distraction-free area.

***Auditory Impairments***

Some people may not be able to hear, and others may be able to hear a little, Many individuals will use hearing aids, read lips or use sign language.

* If the individual does not tell you, then ask – either verbally or in writing – how you should communicate.
* If necessary, gain the person’s attention before you begin to talk by gently waving your hand or lightly touching the individual on the shoulder.
* Use a normal tone unless you are asked to raise your voice. Shouting will usually be of no help; speak expressively. A person with a hearing impairment may not hear subtle changes in tone, which may indicate sarcasm or seriousness, and many will rely on your facial expression, gestures, and body movement to understand you.
* Speak directly to the person. Speak clearly and distinctly, but don't over-exaggerate. Use normal speed unless asked to slow down.
* Provide a clear view of your mouth. Waving your hands or holding something in front of your lips makes lip-reading impossible.
* If the person asks to speak to them, but repeatedly has trouble understanding what you are trying to communicate, try writing the message down.
* If you are having trouble understanding a person's speech, ask them to repeat. If that doesn't work, use a paper and a pen. Communication is your goal; the method doesn't matter.
* If you know any sign language, try using it. Usually your attempts will be appreciated and supported.
* If the person is going to read your lips, speak at a normal pace or slow down if your normal pace is fast, and speak clearly. Use your hands and body movements if it helps get the point across. Do not look down and continue to speak; remember the person needs to be able to see your lips to communicate.
* If accompanied by an interpreter, look and speak to the person with the disability. Speak at a normal pace; the interpreter will let you know if you need to slow down.

***Cognitive Impairments***

Some individuals may have difficulties with learning because of problems associated with memory, attention and concentration and other cognitive skills.

* Keep your concepts clear and concise. Don't use complex sentences.
* Don't patronize or be condescending. Speak directly to the person as an adult if they are an adult, not as a child.
* Repeat information or questions more than once if the person does not seem to comprehend what is said.
* Rephrase information or questions in a different way, if needed.
* Ask the person to paraphrase what is understood to help clarify what additional information is needed.
* If the person has trouble paying attention, eliminate distractions and move so you are closer to and/or within their line of vision and hearing.
* If possible, give the person adequate time to make decisions.
* It is okay to offer help but wait until your offer is accepted. You may think someone needs assistance but they may prefer doing it themselves.

Guidelines from the Society for Human Resource Management: “Dismantling Attitudinal Barriers to Employment for People with Disabilities”

People with disabilities are the nation’s largest minority, and the only one that any person can join at any time and usually quite unexpectedly. If you do not currently have a disability, you have about a 20% chance of becoming disabled at some point during your work life. People with disabilities cross all racial, gender, educational, socioeconomic and organizational lines.

People with disabilities face barriers daily. Often, according to the 1999 SHRM/Cornell University survey on The ADA At Work: Implementation of the Employment Provisions of the Americans with Disabilities Act, the most difficult barrier to overcome is dealing with the attitudes of other people regarding people with disabilities. Whether born form ignorance, fear, misunderstanding or hate, these attitudes and perceptions become barriers to achievement for people with disabilities. The most pervasive negative attitude is focusing on a person’s disability rather than on their abilities. Some attitudinal barriers encountered by people with disabilities include the following:

***Inferiority***

Because a person may be impaired in one of life’s major functions, some people believe that individual is a “second-class citizen.” However, most people with disabilities have skills that compensate for and/or take priority over the impairment.

***Pity***

People feel sorry for the person with a disability, which tends to lead to patronizing attitudes. People with disabilities generally do not want pity and charity, just equal opportunity to earn their own way and live independently.

***Hero Worship***

People consider someone with a disability who lives independently or pursues a profession to be brave or “special” for overcoming a disability. But most people with disabilities do not want accolades for performing day-to-day tasks. The disability is there; the individual has simply learned to adapt by using his or her skills and knowledge.

***Ignorance***

People with disabilities are often dismissed as incapable of accomplishing a task without the opportunity to display their skills. In fact, people with quadriplegia can drive cars and have children. People who are blind can tell time on a watch and visit museums. People who are deaf can play baseball and enjoy music. People with developmental disabilities can be creative and maintain strong work ethics.

***The Spread Effect***

People assume that an individual’s disability negatively affects other senses, abilities or personality traits, or that the total person is impaired. For example, many people shout at people who are blind or don’t expect people with wheelchairs to have the intelligence to speak for themselves. Focusing on the person’s abilities rather than his or her disability counters this type of prejudice.

***Stereotypes***

The other side of the spread effect is the positive and negative generalizations people form about disabilities. For example, many believe that all people who are blind are great musicians or have a keener sense of smell and hearing, that all people who use wheelchairs are docile or compete in Paralympics, that all people with developmental disabilities are innocent and sweet natured, that all people with disabilities are sad and bitter. Aside from diminishing the individual and his or her abilities, such stereotypes can set too high or too low a standard for individuals who are merely human.

***Backlash***

Many people believe individuals with disabilities are given unfair advantages, such as easier work requirements. Employers need to hold people with disabilities to the same job standards as co-workers, though the means of accomplishing the tasks may differ from person to person. The Americans with Disabilities Act (ADA) does not require special privileges for people with disabilities, just equal opportunities.

***Denial***

Many disabilities are “hidden,” such as learning disabilities, psychiatric disabilities, epilepsy, cancer, arthritis and heart conditions. People tend to believe these are not bona fide disabilities needing accommodation. The ADA defines “disability” as an impairment that “substantially limits one or more of the major life activities.” Accommodating “hidden” disabilities that meet the above definition can keep valued employees on the job and open doors for new employees.

***Fear***

Many people are afraid they will “do or say the wrong thing” around someone with a disability. They therefore avert their own discomfort by avoiding the individual with a disability. As with meeting a person from a different culture, frequent encounters can raise the comfort level.

Unlike physical and systematic barriers, attitudinal barriers that often lead to illegal discrimination cannot be overcome simply through laws. The best remedy is familiarity, getting people with and without disabilities to mingle as coworkers, associates and social acquaintances. In time, hopefully the attitudes will give way to respect for the individual and their abilities.<http://www.shrm.org/diversity/disabilities/dismant.asp>

Behavior Management Techniques

*The following is to help volunteers gain insight into handling behavioral issues that may arise in a lesson, including dealing with family relations; class-handling tactics for dealing with students who fall into the general classification of Autistic Spectrum Disorders (ASD), Attention Deficit Disorders (ADD), Traumatic Brain Injuries (TBI) or Post Traumatic Stress Disorder, (PTSD).*

***Managing Disruptive Behavior (environment)***

* Know your students – Triggers, what pushes their buttons, they will push your buttons
* Organize the environment – Organizational issues, create structure, routines
* Teach/model skills – You need to be organized. Help them be organized (put in notebook & wait) agenda book signed all
* Reward positive behavior – positive referrals – reward positive behavior. When you see positive behavior, write up reward for parents. Tell parents. If get so many, get picture on wall.
* Monitor students
* Establish rules & routines
* Engage learners
* Be consistent
* Don’t take things personally – May win the battle but lose war.

***Setting Limits***

* Be specific & clear
* Be simple & brief
* Be positive
* Offer alternatives/choices
* Do not use threats
* Avoid labeling – People first – a person with a disability
* Replace authoritative words – “I need for you to steer your tips” not, “You need to steer your tips.
* Use external references – Give example from real world – “When the clock says 5:15 you have to do…” Putting it on something else instead of you, the teacher
* Acknowledge child’s feelings
* Follow through

***Challenging behavior***

An explosive outburst – like other forms of disadvantageous behavior – occurs when cognitive demands being placed upon a person outstrips the person’s capacity to respond adaptively.

TEACHING TIPS

* Keep your speech simple – to a level they understand but age appropriate
* Keep instructions simple, only give one direction/one task at a time
* Make all directions as clear and concise as possible
* Confirm that they understand what you are talking about/or asking – don’t rely on a stock yes or no
* Use lots of visuals when teaching
* Give extra time for each task
* Keep lesson structured
* Maintain eye contact during instructions; explain why they should look at you when you speak to them (autism – Rarely make eye contact)
* Encourage them, give lots of praise for any achievement
* Limit choices to 1 or 2
* Use turn taking activities
* Pre-warn them of any changes, and give warning prompts if you want them to finish a task … “when you’re done with a straight run, we will . . . ” (1st, then statements)
* Must keep all promises and threats you make – be consistent. Do what you said you would do, if 1 more run then only do 1 run
* People with autism often like structure and schedules
* Don’t always expect them to “act their age” they may be immature, make some allowances for it (developmental age not chronological age)
* Find a way of coping with behavior problems – try to ignore if not too bad or other discipline techniques (time out)
* Try to re-direct instead of correct repetitive behaviors or inattention

***Remember the student may get easily frustrated so stay calm.***

Summarizing the Basic Considerations

* Keep in mind that everyone is unique-every person requires different or special needs.
* Work with the individual's abilities, not disabilities.
* Ask before providing assistance.
* Be aware of the individual's communication needs.
* Encourage the person to be independent- let them do as much by themselves as possible.
* Use your imagination to be flexible and adaptable.
* Help provide successful experiences for the individual.

***The Adaptive Teaching Cycle***

**DETERMINE GOALS AND PLAN OBJECTIVES**

* Jointly set goals based on the skier's potential and disability.
* Select and fit appropriate adaptive equipment.
* Plan learning objectives relevant to the student's goals.
* Formulate a logical lesson progression. Fit the progression to the adaptive technique and the skier's needs.
* Choose suitable terrain and snow conditions for lesson activities.
* Provide the correct amount of practice time.
* State general goals as well as the student's goals.

**PRESENT AND SHARE INFORMATION**

* Demonstrate the appropriate adaptive technique and, if possible, use the adaptive equipment.
* Vary styles of presenting information to be suitable to the situation. Styles include:
* Cognitive: explaining the rationale behind the technical, mechanical, and tactical
* elements in a logical and concise manner.
* Visual: creating clear and meaningful images of specific movements and patterns.
* Kinesthetic: developing body awareness and sensations associated with different movements.
* Trial-and-error: allowing the student the opportunity to experiment with new information.
* Adjust pacing of information according to the student's capacity to receive it.
* Schedule time for feedback and reinforcement.
* Address the student's attitude toward process or outcome orientation.
* Divide the lesson into appropriate portions of information delivery, practice, and skiing time.

**GUIDE PRACTICE**

* Set practice tasks that are appropriately challenging.
* Include both process-oriented and outcome-oriented activities.
* Provide specific feedback to the student.
* Reinforce student performance with appropriate comments.
* Use a variety of approaches to practice.
* Guide initial practice and prepare the student for effective continuing practice.

**CHECK FOR UNDERSTANDING**

* Verify the student's level of physical understanding based on skiing performances that are consistent with the lesson objectives.
* Determine the student's level of cognitive understanding by listening to and evaluating verbal statements and responses relating to the lesson objectives.

**SUMMARIZE THE LEARNING SEGMENT**

* Review the learning segment goals and objectives and describe the degree of accomplishment to the student.
* Preview the next learning segment and encourage further development.
* Establish independent practice guidelines for each student.

**PROFESSIONAL SKI INSTRUCTORS OF AMERICA**

**EASTERN DIVISION**

1-A Lincoln Avenue

Albany, NY 12205-4907

(518)-452-6095

www.psia-e.org