Beware of COVID Vaccine Scams

A statewide alert has been issued for false telephone calls being made about COVID vaccination appointments. The COVID vaccination is FREE. Do not give out your social security number or medical insurance information to anyone over the phone. Also beware of online sites claiming to take reservations for the vaccine.

The Rhode Island Department of Health (RIDOH) has not yet launched a public vaccination signup website. State officials are planning to rollout a website for residents 75 and older to sign up for a COVID-19 vaccine and will also create a 1-800 hotline for those needing help or unable to register online. The vaccine registration will look similar to scheduling a COVID-19 test with the state.

Cities and towns throughout Rhode Island have been scheduling appointments for eligible residents at municipal vaccination clinics throughout the state. To learn more about your town’s process reach out to them directly. Appointments are required at all vaccination sites. On February 2, WPRI published a list of town vaccination plans and contacts.

RIDOH sends registration links to eligible people to register for their vaccination appointment. Unfortunately, it has come to RIDOH’s attention that these links are being shared. Anyone reporting to a vaccination clinic must show ID and will be turned away if they are not in an eligible vaccination group even if they registered. Unauthorized sharing of registration links denies an eligible person the opportunity to be vaccinated that day and delays the rollout of vaccine to all Rhode Islanders.

Q&A on Vaccines for DD Participants

Q. What is the status of vaccinations for the DD population?
A. Vaccinations in group homes are nearly complete and the next group will be those living in SLAs. The social caseworkers are making great progress in their outreach efforts to individuals who live alone or with family. Other efforts are being made (outside of BHDDH) to outreach to and vaccinate people living in housing authority residences and individuals on the special needs registry.

Q. I’ve heard seniors can be vaccinated at home because if they are unable to get out. Will this also apply to the special needs population who can’t get out or those who might need a contained setting, especially if they need to wait 15 minutes afterwards?
A. Vaccination clinics have allowed people to receive the vaccine and be monitored afterwards while in their car. For those who cannot get out and are getting home health services, we suggest talking with the home health provider. We will work with the Department of Health on how to reach others who may not be able to leave their home to get vaccinated.
Protect YOUR Household

With the abundance of vaccine hesitancy and misinformation, we hope that you can help to educate others with facts about the COVID-19 vaccine. This will help to build trust and adoption. How can you help? Explain the facts to those who are hesitant:

- **Stopping this pandemic is going to require all our tools:** handwashing, masks, social distancing, and vaccines. Together, these tools offer the only way we can get back to our normal routines.

- **The COVID-19 vaccine is safe.** All COVID-19 vaccines were tested in clinical trials involving tens of thousands of people to make sure they meet safety standards and protect adults of different ages, races, and ethnicities. There were no serious safety concerns.

- **No steps involving safety were skipped during the COVID-19 vaccine development process.** The same rigorous safety standards were used, as they were with other vaccines. Researchers around the globe came together to develop a vaccine quickly, because so many lives were at stake. But this speed did not compromise safety or scientific integrity.

Please spread the word that the vaccine is safe, free of charge, and effective in stopping this pandemic.

Your Questions and Our Answers About The COVID-19 Vaccine
For Direct Support Professionals

DSPs need reliable and sound information about the vaccines. In this recorded webinar, NADSP Medical Advisor, Rick Rader, MD and Biochemist, Mark Macbeth, PhD share details about the newly released COVID-19 vaccines. The presenters cover several aspects of the vaccines and will answer questions about the vaccine’s safety and efficacy. The presenters have distinguished expertise in developmental medicine and the study of mRNA technology which is the make-up of the COVID-19 Vaccine. This webinar is geared toward direct support professionals and management personnel who support people with disabilities.

The National Alliance of Direct Support Professionals (NADSP) values the full participation of people with disabilities in all aspects of community life through the provision of person-centered supports. We believe that high quality support requires all professionals to follow the individual path suggested by the unique gifts, preferences, and needs of each person they support, and to walk in partnership with the person, and those who love him or her, toward a life of opportunity, well-being, freedom, and contribution.
COVID-19 and People with Intellectual and Developmental Disabilities
Monday, February 22
12 PM – 1:30 PM
Register [brandeis.us19.list-manage.com]

Join the Lurie Institute and the Community Living Policy Center for a webinar discussion between disability community members, self-advocates, and policy researchers. This conversation will elevate the policy and lived experience impacts of COVID-19 among people with intellectual and developmental disabilities. Leaders and experts from the disability community will consider lessons learned, future federal policies, and ways that policies that promote Home and Community-based Services can provide more equitable social justice during this pandemic.

- Angel Miles, Healthcare/home and Community Based Services Policy Analysis at Access Living
- Julia Bascom, Executive Director at Autistic Self Advocacy Network
- Nicole LeBlanc, National Center on Advancing Person-Centered Practices and Systems Group Coordinator, Disability Policy expert.
- Scott Landes, Associate Professor of Sociology, Aging Studies Institute, Syracuse University
- Moderator: Joe Caldwell, Director of the Community Living Policy Center

CART services and ASL translation have been requested. For any other accommodations please contact lurie@brandeis.edu as soon as possible.

In Case You Missed It: Congressional Roundtable

On January 15, the Housing Network of RI was pleased to host our Congressional Delegation for a roundtable discussion on federal housing policy.

This roundtable discussion was facilitated by leading advocates and industry experts. It invited our representatives to define their goals, their barriers, and how we can collaborate with them towards homes for all. Watch or listen to the recording. For closed captioning, click the "CC" icon on the bottom right of the video.
Newport Film Series Streaming *The Reason I Jump*
Monday, February 8 – Thursday, February 11

The Newport Film series is offering a showing of a movie entitled *The Reason I Jump*, presented in partnership with The Autism Project; available to stream Monday 2/8 – Thursday 2/11 with a suggested $5 donation.

The film is a 2020 Sundance Film Festival Audience Award Winner in World Cinema Documentary. Based on the best-selling book by Naoki Higashida, THE REASON I JUMP is an immersive cinematic exploration of neurodiversity through the experiences of nonspeaking autistic people from around the world. The film blends Higashida’s revelatory insights into autism, written when he was just 13, with intimate portraits of five remarkable young people. It opens a window for audiences into an intense and overwhelming, but often joyful, sensory universe.

Moments in the lives of each of the characters are linked by the journey of a young Japanese boy through an epic landscape; narrated passages from Naoki’s writing reflect on what his autism means to him and others, how his perception of the world differs, and why he acts in the way he does: the reason he jumps.

The film distills these elements into a sensually rich tapestry that leads us to Naoki’s core message: not being able to speak does not mean there is nothing to say.

**WATCH THE TRAILER HERE**

**RSVP opens on Monday 2/8.** The details to stream will be sent in an email when you RSVP. RSVP and log in at [https://newportfilm.com/films/the-reason-i-jump/](https://newportfilm.com/films/the-reason-i-jump/)

**Live Virtual Q&A**
Thursday, February 11th at 5:30 PM

Join a live virtual Facebook Q&A with Jerry Rothwell (film director), Elizabeth Vosseller (film subject) and Joanne Quinn, The Autism Project Executive Director on February 11th at 5:30 PM.
Jewish Disability Awareness, Acceptance & Inclusion Month

(JDAIM) is a unified effort among Jewish organizations worldwide to raise awareness and foster acceptance and inclusion of people with disabilities and mental health conditions and those who love them.

### Upcoming Events

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
<th>Time</th>
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<tbody>
<tr>
<td><strong>Mental Health &amp; Isolation</strong></td>
<td>Monday, Feb. 8</td>
<td>3:00 PM</td>
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<tr>
<td><strong>Talk Saves Lives: An Intro to Suicide Prevention</strong></td>
<td>Tuesday, Feb. 16</td>
<td>7:30 PM</td>
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<tr>
<td><strong>Everyone's Welcome: Building Communities w/o Walls</strong></td>
<td>Tuesday, Feb. 9</td>
<td>1:00 PM</td>
</tr>
<tr>
<td><strong>The 2021 Disability Rights Policy Agenda</strong></td>
<td>Monday, Feb. 22</td>
<td>7:00 PM</td>
</tr>
<tr>
<td><strong>Celebrate Jews w Disabilities &amp; Diverse Identities</strong></td>
<td>Thursday, Feb. 11</td>
<td>7:30 PM</td>
</tr>
<tr>
<td><strong>Effective Advocacy for Inclusive Policy</strong></td>
<td>Tuesday, Feb. 23</td>
<td>3:00 PM</td>
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<tr>
<td><strong>Mindfulness for Neurodiverse Young Adults</strong></td>
<td>Sunday, Feb. 14</td>
<td>10:00 AM</td>
</tr>
<tr>
<td><strong>#OwnVoices: Children's Books by Autistic Authors</strong></td>
<td>Tuesday, Feb. 23</td>
<td>7:30 PM</td>
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Click here for more information on these and a lot of other JDAIM events!

### Panel Discussion on Disability Justice

**Sunday, February 14 at 10am | Click Here to Register [adasisrael.org]**

On Sunday Feb 14th, there will be a panel discussion with three activists for disability justice: Sheryl Grossman, Joe Shapiro and Jim Weisman, moderated by Rabbi Lauren Tuchman. This panel will be addressing the tremendous and often overlooked and underreported impact the COVID-19 pandemic has had on people with disabilities. People with disabilities, including elderly people, are the most likely to die. Many who do survive are left with lingering, possibly even lifelong, disabilities. Yet, people with disabilities are not always prioritized in this pandemic. Some people with significant disabilities were turned away from hospitals or didn’t get treatment like ventilators. People with intellectual disabilities who live in group homes did not get the same priority to personal protective equipment and vaccination that was guaranteed to residents of nursing homes.

### Supported Decision Making: A Practical Alternative to Guardianship

**Wednesday, Feb. 17. at 7 p.m. via Zoom | Register here**

Join Jewish Family Services and the Lehigh Valley Center for Independent Living (LVCIL) for a presentation about Supported Decision Making (SDM). SDM is a viable alternative to guardianship for young adults with intellectual and physical disabilities. Presenters from SDM New York will talk about the process of bringing Supported Decision Making to their community and how SDM empowers the lives of young adults with intellectual and physical disabilities to live more independent lives. Free to the community. Contact info@jfslv.org for more information.
Everyone’s Welcome-A Fresh Conversation About Disability

Everyone’s Welcome is a fresh virtual conversation series about disability inclusion hosted by Inclusion Innovations’ Shelly Christensen and Whole Community Inclusion’s Gabrielle Kaplan-Mayer. Join Shelly and Gabby as they sit down for conversations with people who share their stories and experiences around disability and mental health. Everyone’s Welcome is produced twice-monthly on Zoom.

February 9 Mental Health – Pastor Dave Eckert of Access Services – Intersect, and Gabrielle Spatt of The Blue Dove Foundation discuss supporting people with mental health conditions in faith communities. Register Here.

Past Episodes

Spirituality of People with non-speaking Autism Dr. Karenne Hills

Inclusive Arts and HBO’s Autism the Sequel Elaine Hall

Disability Policy and Self-Advocacy Liz Weintraub

Supporting People with Mental Health Conditions in Faith Communities Rev. Hollie Holt-Woehl

What Led Us to Become Disability Inclusion Advocates Gabby Kaplan-Mayer and Shelly Christensen

What the ADA Means to Faith Community Advocacy Aaron Kaufman

Autism Advocacy Dr. Stephen Shore

Inclusive High Holidays Rabbi Rebecca Dubowe

Disability Employment Month Deborah Fisher PsyD

The 4 A’s of Autism Dr. Stephen Shore

Inclusion and Social Distancing Liviya Mendelsohn

How to Support People Throughout the Holidays Rev. Bill Gaventa
It’s Not Just You: Everyone’s Mental Health Is Suffering

If you’re thinking, “Oh, I just need to suck it up,” stop. What you’re feeling is real. Here’s how to cope.

This is the first sentence I’ve written this week. I wrote it on a Thursday. Like many people right now, I’m finding work harder to get done, and even basic daily tasks feel heavier than usual. If that sounds familiar, you’re not alone. The pandemic has taken a toll on everyone’s mental health, and there’s data to prove it.

While there’s been ample discussion of the economic fallout from a global pandemic, the toll it takes on our collective mental health is harder to quantify. It’s almost impossible to stay at home for months on end, cancel years worth of events, and disrupt even basic routines like how we shop for groceries without a significant impact on our mental health. And yet, it can feel like the impact of these changes is “just stress,” and treat it as something to power through.

According to data from Mental Health America (MHA), however, more people are facing deteriorating mental health. From January through September of 2020, the number of people who have taken MHA’s anxiety screenings has increased by 93 percent over the entire previous year. The organization’s depression screening has seen a 62 percent increase over 2019’s totals. Before the year was even over, more people were trying to find out if they were suffering from anxiety or depression than ever before.

MHA isn’t the only organization with data pointing to the mental health impact of the pandemic. A survey from the Kaiser Family Foundation in July 2020 found that 53 percent of adults said the pandemic had a negative toll on their mental health. Data collected from the CDC found that 41 percent of adults experienced symptoms of an anxiety or depressive disorder in December 2020, compared to 11 percent in January-July of 2019.

All of which is to say, it’s not just you. Mental health troubles are a natural reaction to an ongoing traumatic event like a pandemic.

Why a Pandemic Spikes Mental Health Problems
The pandemic has disrupted most aspects of our lives, but the added isolation of quarantines, social distancing, and canceled events is one of the biggest tolls on our collective mental health. It’s not just that we miss our friends and family. The social bonds we have form support systems and safety networks. With those gone or reduced, it can lead to an increase in anxiety or depression symptoms.

MHA’s vice president for mental health and systems advocacy, Debbie Plotnick, explained that one of the ways this can manifest— particularly in young people—is self-harm. “In November, 53 percent of those 11 to 17 years old reported— so more than half of them—having frequent thoughts of suicide or self-harm.”

One of the top reasons, not just for self-harm thoughts among young people, but for the mental health problems in people of all ages, is the distance we’ve had to put up between each other. “We’ve been asking [the people who take MHA surveys] what troubles them—and remember, they’re not all young—and they’re telling us it’s loneliness and isolation.”

It might seem like isolation isn’t quite as bad as some of the other stressors that a pandemic can bring—a loss of income, political unrest, and disrupted schedules—but it’s a crucial one. We need other people, and while digital connections like Zoom meetings or Discord parties are great filler, it’s hard to be away from the people we care about for so long.
And then there’s the practical impact. As of September 2020, a quarter of US adults said they’d had trouble paying their bills since the start of the pandemic, according to a Pew Research Center survey. However, that number rises to 46 percent among lower-income households. “For folks who have jobs, they’re very grateful,” explained Plotnick. “For folks who are losing their jobs, this is excruciating.”

When practical supports—like financial stability, routines like going to work or school, or even spending time with friends and loved ones—are diminished, it makes it harder to handle the stress. This leads to increased anxiety and depressive symptoms.

Anxiety is a normal reaction to trauma and stress, but the feeling of being on guard and bracing for disaster can continue even long after the initial threat is gone. And when the traumatic event is ongoing—like a pandemic—it can lead to harmful coping habits that treat imminent disaster as though it’s always right around the corner.

Meanwhile, depression can be characterized by a variety of symptoms, including constant fatigue, loss of appetite, hopeless feelings, and difficulty focusing. These symptoms are exacerbated when there’s a major disruption to our routines—and especially when it’s impossible to create comparable new ones. Put simply, if you struggle with motivation, mood, or daily habits, being told to stay home for weeks or months on end isn’t going to help remind you to get fresh air, eat well, or socialize.

None of which is to say that following pandemic safety measures are bad. But it’s natural for following them to have a negative impact on our mental health. Which makes it all the more important to seek out help or to institute new, constructive habits wherever possible.

**What You Can Do About It**

There are no easy answers to solving mental health crises during a pandemic. It would be overly simplistic to say, “See a doctor” or “Call the National Suicide Prevention Lifeline”—though if either of these things will help you, then by all means do so. However, even seeing a doctor can be stressful during a pandemic. So, if you’re struggling to take a big step, you can try taking little ones to start with.

“Yes, people can go to their doctor. Most people don’t straight away,” Plotnick explained. This is where MHA’s screening tools come in. “The screens on the MHA website are the same validated screens that you would take in a physician’s office,” Plotnick said. For many people, it’s easier to take a test online than it is to brave a doctor’s visit to take what, in some cases, might be the same test.

Based on the results, MHA will direct users to additional resources. However, as MHA’s site suggests, even sitting with the knowledge that what you’re feeling is normal and identifiable can be a good first step. When you’re ready, you can try to find a therapist, talk to some friends, or even discuss the possibility of medication or other treatments with a doctor. If you can’t afford a doctor, you can try talking to friends (or even a therapy chatbot). But most of all, recognize that, like any physical illness, what you’re feeling is real, it’s normal, and you can make a plan to treat its symptoms.
Silver Linings

I can show people I am thankful by…

I can show people I am thankful by helping others,
Giving gifts, saying thank you, doing something for another
I would like to take this time to thank you all
Even the security people at the mall
For everything that you do
I am thankful for you
There are many ways to say thank you,
Sign language, obrigado, gracias, grazie,
I can buy someone a card
I want to thank the COVID workers who help test us
I say thank you to the people that keep us safe
Because they are working at a fast pace
No time to stop, no time to waste
Heroes working around the clock
I want to say thank you to Helping Hands
For letting me be a member
That is something I’ll always remember
I want to thank West Bay
For giving us fun activities on the computer every day
Thank you to those who helped with the vaccine
You don’t know how much that means
We made it to the New Year all together
Now we’re wishing for warmer weather
And things will definitely get better

by Keri Hickey, James Boucher, Joseph Henderson, Katherine Cottone,
Rodney Mouchon, Pamalyn Pavel, Kelly Olson

Thank you all for sharing your poem!
If you are experiencing a mental health crisis, BH Link is here for you

BH Link’s mission is to ensure all Rhode Islanders experiencing mental health and substance use crises receive the appropriate services they need as quickly as possible in an environment that supports their recovery. Call 911 if there is risk of immediate danger. Visit the BH Link website at www.bhlink.org or for confidential support and to get connected to care:

CALL (401) 414-LINK (5465) If under 18 CALL: (855) KID(543)-LINK(5465)
Visit the 24-HOUR/7-DAY TRIAGE CENTER at 975 Waterman Avenue, East Providence, RI

Stay Informed with Information on COVID-19

Rhode Island Department of Health COVID-19 Resources
Hotline (401) 222-8022 or 211 after hours;
Email RIDOH.COVID19Questions@health.ri.gov
Website https://health.ri.gov/covid/

Center for Disease Control COVID-19 Information
Website cdc.gov/coronavirus
Includes a link to ASL videos

BHDDH Information on COVID-19’s Impact on DD Services and the DD Community
Website bhddh.ri.gov/COVID

RI Parent Information Network (RIPIN)
Website https://ripin.org/covid-19-resources/
Call Center (401) 270-0101 or email callcenter@ripin.org

Advocates in Action – for videos and easy to read materials
Website https://www.advocatesinaction.org/
Website offers BrowseAloud, which will read the website to you

Sign Up for Our Email List

If you aren’t receiving email updates and newsletters from BHDDH, you can sign up on our website. From the main BHDDH page at bhddh.ri.gov, select What’s New, then go to bottom and click on DD Community Newsletter. The link to sign up for the BHDDH Newsletter is directly below the title, as shown in the picture at right.

Contacting DD Staff

DDD has put extended hour phone coverage in place with a central business hour phone number and an on-call number for nights and weekends.

If you have a vital need, please call the numbers on the next page. If you have any general questions or concerns, please email them if you can, in order to try to leave the phone lines free for those who need to call. We will do our best to address your questions directly or through future newsletters.
During business hours (Monday-Friday 8:30-4:00), for questions or support
(401) 462-3421
Para español, llame (401) 462-3014

For emerging or imminent care related questions,
Mon - Fri 4pm-10pm and weekends 8:30am-10pm
(401) 265-7461

Send general questions to the AskDD email address. Please do not email critical issues.
BHDDH.AskDD@bhddh.ri.gov

For medical or healthcare related emergencies, call your Primary Care Physician or 911
### WHO can get vaccinated in PHASE 1 of Rhode Island’s COVID-19 Vaccination Program?

#### Phase 1 Timeline

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<tr>
<th>PRIMARY GROUPS</th>
<th>VACCINATION SITE</th>
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| Hospital Staff, EMS, Home Health and Hospice Workers at Licensed Agencies, Nursing Home Staff and Residents | Started December 14  
Hospital Staff, EMS, Home Health and Hospice Workers at Licensed Agencies, Nursing Home Staff and Residents |
| COVID Vaccinators, Community Health Center Staff, COVID Specimen Collectors, Urgent Care Clinic Staff, Respiratory Clinic Staff (including clinical settings swabbing for COVID-19), Pharmacists, Corrections Medical Staff and Mental Health Workers, High-Risk Incarcerated Persons (65 and older, immunocompromised, or other high-risk factors), Other Long-Term Care Facility Staff and Residents (e.g., group homes that include individuals 65 and older, assisted living, elderly housing with residential services) | Started January  
COVID Vaccinators, Community Health Center Staff, COVID Specimen Collectors, Urgent Care Clinic Staff, Respiratory Clinic Staff (including clinical settings swabbing for COVID-19), Pharmacists, Corrections Medical Staff and Mental Health Workers, High-Risk Incarcerated Persons (65 and older, immunocompromised, or other high-risk factors), Other Long-Term Care Facility Staff and Residents (e.g., group homes that include individuals 65 and older, assisted living, elderly housing with residential services) |
| Firefighters; Law Enforcement; Residents of Central Falls and Other Targeted High-Density Communities*; COVID Testing Lab Staff; Other Public Health and Emergency Preparedness Workers; School Nurse Teachers; Harm Reduction Staff; Patient-Facing Clinical Students; Community and Family Caregivers Enrolled in the Independent Provider or Personal Choice Programs, and the Shared Living Program; Corrections Officers/Staff | Started January  
Firefighters; Law Enforcement; Residents of Central Falls and Other Targeted High-Density Communities*; COVID Testing Lab Staff; Other Public Health and Emergency Preparedness Workers; School Nurse Teachers; Harm Reduction Staff; Patient-Facing Clinical Students; Community and Family Caregivers Enrolled in the Independent Provider or Personal Choice Programs, and the Shared Living Program; Corrections Officers/Staff |
| Providers and Staff: in Dental, Primary Care, Dialysis Centers, and Other Outpatient Settings; in DCYF High-Risk Congregate Settings; Who Provide In-Person Services for Adults who Live with a Mental Health Condition, Substance Use Disorder, and/or a Developmental Disability; Who Conduct Blood, Organ, and Tissue Donation; and Who Serve as Morticians, Funeral Home Workers, Other Death Care Professionals; Adults Living in Group Homes for People with Mental Health Conditions, Substance Use Disorder, and/or a Developmental Disability; Licensed Healthcare Workers Providing In-Home Care | Started January  
Providers and Staff: in Dental, Primary Care, Dialysis Centers, and Other Outpatient Settings; in DCYF High-Risk Congregate Settings; Who Provide In-Person Services for Adults who Live with a Mental Health Condition, Substance Use Disorder, and/or a Developmental Disability; Who Conduct Blood, Organ, and Tissue Donation; and Who Serve as Morticians, Funeral Home Workers, Other Death Care Professionals; Adults Living in Group Homes for People with Mental Health Conditions, Substance Use Disorder, and/or a Developmental Disability; Licensed Healthcare Workers Providing In-Home Care |
| Adults age 75 and older | Started February  
Adults age 75 and older |

* Determined based on a combination of socioeconomic, COVID-19, and CDC Social Vulnerability Index data

There may be overlap among the groups listed above. It may take several months for everyone in Phase 1 to be vaccinated. Exact timing depends on demand, doses made available to Rhode Island, and other factors. Information on who can get vaccinated in future phases will be shared as soon as possible.

### HOW will different groups receive vaccine?

- **PRIMARY GROUPS**
  - Hospital Staff
  - Long-Term Care Residents and Staff
  - EMS, Home Health and Hospice Workers, Firefighters, Law Enforcement
  - Other Phase 1 groups

- **VACCINATION SITE**
  - Hospitals
  - Long-Term Care Facilities via CVS and Walgreens Partnership
  - Regional clinics run by municipal partners
  - Community or on-site vaccine clinics; other sites as available

As opportunities become available, the Rhode Island Department of Health (RIDOH) will communicate through employers, partner organizations, the media, and other channels to let groups know when, how, and where they can get vaccinated.

For additional details, visit [C19vaccineRI.org](http://C19vaccineRI.org) | Last updated 2/3/21
Vaccines (shots) are one of the tools we have to fight the COVID-19 pandemic.

To stop this pandemic, we need to use all of our prevention tools. Vaccines are one of the most effective tools to protect your health and prevent disease. Vaccines work with your body’s natural defenses so your body will be ready to fight the virus, if you are exposed (also called immunity). Other steps, like wearing a mask that covers your nose and mouth and staying at least 6 feet away from other people you don’t live with, also help stop the spread of COVID-19.

Studies show that COVID-19 vaccines are very effective at keeping you from getting COVID-19. Experts also think that getting a COVID-19 vaccine may help keep you from getting seriously ill even if you do get COVID-19. These vaccines cannot give you the disease itself.

The vaccines are safe. The U.S. vaccine safety system makes sure that all vaccines are as safe as possible. All the COVID-19 vaccines that are being used have gone through the same safety tests and meet the same standards as any other vaccines produced through the years. A system in place across the entire country that allows CDC to watch for safety issues and make sure the vaccines stay safe.

Different types of COVID-19 vaccines will be available. Most of these vaccines are given in two shots, one at a time and spaced apart. The first shot gets your body ready. The second shot is given at least three weeks later to make sure you have full protection. If you are told you need two shots, make sure that you get both of them. The vaccines may work in slightly different ways, but all types of the vaccines will help protect you.

www.cdc.gov/coronavirus/vaccines
When you get the vaccine, you and your healthcare worker will both need to wear masks.

CDC recommends that during the pandemic, people wear a mask that covers their nose and mouth when in contact with others outside their household, when in healthcare facilities, and when receiving any vaccine, including a COVID-19 vaccine.

Even after you get your vaccine, you will need to keep wearing a mask that covers your nose and mouth, washing your hands often, and staying at least 6 feet away from other people you do not live with. This gives you and others the best protection from catching the virus. Right now, experts don't know how long the vaccine will protect you, so it's a good idea to continue following the guidelines from CDC and your health department. **We also know not everyone will be able to get vaccinated right away, so it's still important to protect yourself and others.**

The vaccines may cause side effects in some people, like sore muscles, feeling tired, or mild fever. These reactions mean the vaccine is working to help teach your body how to fight COVID-19 if you are exposed. For most people, these side effects will last no longer than a day or two. **Having these types of side effects does NOT mean that you have COVID-19.** If you have questions about your health after your shot, call your doctor, nurse, or clinic. As with any medicine, it is rare but possible to have a serious reaction, such as not being able to breathe. It is very unlikely that this will happen, but if it does, call 911 or go to the nearest emergency room.
Supporting Meaningful Employment Training Series

A Person-Centered Approach to Career Planning, Job Development and Retention

NEW!
In response to COVID, the Association of Community Rehabilitation Educators (ACRE) has approved the SME Training Series for remote learning.

ACRE Certificate
To earn an ACRE Certificate, learners must attend an orientation session, 12 instructor-led modules, 4 mentor/fieldwork sessions and successfully complete fieldwork assignments. SME Training Schedule is below.

The Sherlock Center offers two paths to earn an ACRE Certificate. The recommended path is to register for the full ACRE series, which allow learners to complete the required modules and fieldwork assignments within 4 - 6 months.

The alternative path is to build an ACRE Certificate by completing three SME mini-series and required fieldwork assignments within a 24-month period. Complete details are available on the SME Training page of the Sherlock Center website www.sherlockcenter.org.

Technology Requirements
Learners will participate in instructor-led sessions using Zoom. To participate, learners will need a computer, laptop or tablet with reliable internet access with sufficient bandwidth, and a camera. It is recommended that learners have dedicated time and space when attending sessions.

Time Commitment
Each module for the spring session will be completed over two, instructor-led, remote sessions. Each session is 1.5 hours, for a total of 3 hours per module. Learners are also required to participate remotely in an orientation session (1.5 hours) and mentor / fieldwork sessions (1.5 hours each), in addition to satisfactory completion of fieldwork assignments.

Supervisors are asked to support learner success by monitoring fieldwork completion and support the implementation of relevant resources and strategies.

REGISTRATION

Register Online: http://bit.ly/2Lt4vTP
Registration and training schedule are also available on the Sherlock Center website www.sherlockcenter.org. Register by February 12.

Fees: Sessions are offered free of charge to participants working for a RI organization/school, including Self-Directed Supports staff/representatives.

Requests & Questions: If you need a reasonable accommodation (e.g. ASL Interpreter, closed captions, large print), please make your request known when you register. For registration questions, email Elaine Sollecito at esollecito@ric.edu or leave a message at 401-456-2764. For training questions email Vicki Ferrara at vferrara@ric.edu. Please allow extra time to respond to messages due to COVID-19.

Module 1: Foundations in Community Employment Services and Supports
Module 2: Work Incentives to Support Employment and Retention
Module 3: Vocational Assessment I - Getting to Know the Job Seeker
Module 4: Vocational Assessment II - Person-Centered Employment Planning - the process
Module 5: Vocational Assessment III - Strategies for Community Exploration & Individualized Job Search Planning
Module 6: Employment Law, Americans with Disabilities Act (ADA), and Disability Disclosure
Module 7: Job Development I - Job Search Practices to Support Meaningful Employment
Module 8: Job Development II - Employer Assessment and Individualized Approach to a Job Match
Module 9: Job Development III - Employer Relationships and Negotiations
Module 10: Job Retention and Coaching I - Foundations in Job Retention Success
Module 11: Job Retention and Coaching II - Teaching the Job - Task Analysis and Systematic Instruction
Module 12: Job Retention and Coaching III - Fading Support, Quality Services and Career Development
BACKGROUND ON QUESTION 3
The cost of housing is rising faster than incomes leaving workers, families, seniors, and veterans struggling to find a home or apartment they can afford, while also making ends meet. Now, with so many Rhode Islanders struggling with the health and economic effects of the COVID-19 pandemic, finding safe, affordable housing is more important than ever. By investing in housing opportunities for all Rhode Islanders we can address a housing shortage that is holding our economy back. Vote YES on Question 3 in Rhode Island’s March 2, 2021 special election to approve the $65 million Housing and Community Opportunity bond for the construction and rehabilitation of affordable homes and apartments across Rhode Island, and to help communities revitalize neighborhoods through redevelopment, new construction, and property acquisition. This smart investment will leverage millions in additional resources while creating much needed housing, construction jobs, and stronger communities.

It will take powerful supporters, like you, to help us win Question 3 this election! Here are 3 steps you can take to help.

STEP #1: HELP YOUR FRIENDS AND FAMILY MAKE A PLAN TO VOTE.
Rhode Islanders have 3 options for voting in the March 2 election – by mail, early in-person, or in-person on Election Day. Important dates to know are below. Make a plan to vote, and encourage your friends and family to make a plan!

- Jan. 31: Deadline to register to vote or update your voter information at vote.ri.gov.
- Feb. 9: Deadline to apply for a mail ballot. Applications were mailed to voters and can also be found at vote.ri.gov.
- Feb. 10 – Mar. 1: Vote early in-person at your local city or town hall during normal business hours.
- March 2: Special Election day – vote at your designated polling location!

STEP #2: SUPPORT YES ON 3 ON SOCIAL MEDIA (#VOTEYESON3)
Show your support for Yes on 3 by sharing content from the campaign pages (Facebook: @voteeyeson3 and Twitter: @voteeyeson3ri) and post your own content about why voting Yes on 3 is important. Messages to consider:

FOR HOMES:
- Question 3 supports the construction & rehab of homes & apartments. That RI workers, families, seniors & vets can afford.
- Funding from past housing bonds has created 3,200+ affordable homes & apartments for families, seniors & veterans in 34 communities across RI.
- In 2019, households earning $34,000 or less (just under the median renter income) could not affordably rent an average-priced 2-bedroom apartment in any RI city or town.
- Based on 2019 median single family home prices, a household earning the state’s median household income of $63,000 would be able to affordably buy a home in just one of RI’s cities and towns.

FOR JOBS:
- Voting Yes On 3 will create good paying jobs for Rhode Island’s building and construction workers.
- The $65 million housing bond will leverage millions in additional investments in our communities. Past housing bonds have generated a total of $780 million in public and private investment in RI.
- The availability of affordable homes is essential for RI employers to attract and grow our RI workforce.

FOR RHODE ISLAND:
- Safe, stable, affordable housing is critical to the health of residents & communities, especially during this pandemic.
- Redevelopment, new construction, and property acquisitions will improve public safety, increase property values & spark revitalization in neighborhoods & communities across RI.

STEP #3: SUBMIT A LETTER TO THE EDITOR SUPPORTING YES ON 3.
The Yes on 3 campaign is seeking supporters from all backgrounds throughout Rhode Island who are willing to voice their support through short letters to the editor. If you are interested in supporting this effort, we can help make this process quick and simple for you! Please email yeson3ri@gmail.com.

www.yeson3ri.org | Questions? Email yeson3ri@gmail.com
Be a Hero—Save a Life!

If you witness an overdose and call 911, Rhode Island’s Good Samaritan Law protects YOU.

The Good Samaritan Law provides immunity against prosecution to any person who calls for medical assistance when someone is experiencing an overdose.

The law also provides protection to the person who is experiencing the overdose.

I’m going to call 911 and get help.

Yes, make the call.

If you see these signs of an overdose, take action.

If the person:
- Is unconscious, passed out or unresponsive
- Is breathing very slowly, shallowly, or not at all
- Has lips, nails or skin with a blue or gray tinge
- Is choking, gurgling or vomiting
- Has a slow, erratic pulse or no pulse

Act fast! Call 911!

- Tell them a person needs emergency help for an overdose.
- If you havenaloxone, administer it.
- Stay with the person until help arrives.

No one should be afraid to make a phone call to save a life.
Protections Offered by the Rhode Island Good Samaritan Law

Who is protected by the Good Samaritan Law?

- Anyone who seeks medical help for someone during an overdose
- Anyone who administers naloxone to someone experiencing an overdose
- The person experiencing the overdose is also protected.

To get a naloxone kit:
For training in the prevention, recognition, and treatment of opioid overdoses and to obtain a free naloxone kit, visit poniri.org or preventoverdoseri.org/get-naloxone.

Preventing Overdose and Naloxone Intervention (PONI) is a program out of The Miriam Hospital.

For help finding treatment:
BHLink connects Rhode Islanders experiencing mental health and substance use crises to treatment and recovery services. Visit bhlink.org or call 401-414-LINK (5465).