A while back, I introduced all of you to “The Van Accessible Parking Act (HB 1882)” which was brought forth by Representative Mayberry. The act passed. Again, do not let the word “Van” confuse you since a “Van” is NOT required.

I will highlight the requirements of the Act for clarification. This ACT defines authorized parking use of a Van-accessible parking space via a Van-accessible parking decal. It also specifically defines that the vehicle authorized to park in the Van Accessible Parking space must be used to transport a person with limited or no use of his or her legs and uses a wheelchair, a three or four wheeled scooter, a four-wheeled walker with a seat or similar device.

The purpose is clear since with the use any of these types of medical devices, you need the extra space created within the Van accessible parking space to open your doors wider for transfer and maneuvering.

The new law became effective on November 13, 2017. Hence, if you have not done so, you will need to visit your local healthcare provider to gain certification that shows you meet the requirement to use the Van Accessible Parking space. This will allow you to obtain the Van Accessible Parking decal from your local Revenue Department to affix in the left side window of your license plate. There will be a sticker for the placard/hang-tag as well.

This is important since enforcement of the law goes into effect on January 1, 2019. The new certification form is available on the

From the Director ~ Terra Patrom

Executive Director
Terra Patrom
Newsletter Editor
Adam Burnstone

ARKANSAS SPINAL CORD COMMISSIONERS
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Mike Cranford
Commissioners
Jimmy Ashley
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LeDanté Walker
**Contact Information**

**Phone:** (800) 459-1517  
**Email:** ascc@arkansas.gov  
**Website:** ascc.ar.gov

**Donations**

The Arkansas Spinal Cord Commission accepts tax-deductible donations to support ASCC.

Send your donation to:  
AR Spinal Cord Commission  
1501 North University Ave., Suite 470  
Little Rock, AR 72207

**Acknowledgments**

The ASCC would like to acknowledge donations made to the Commission...

**In Memory of Grover Evans:**
- Kitty Sloan

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Department of Finance and Administration website at the link below or it can be found under Quick Links on the ASCC website (http://ascc.ar.gov/).

**Decal Application Form:**

**Report Misuse:**
If you need to report misuse of accessible parking, please visit:
https://portal.dfa.arkansas.gov/MisuseParking

**Case Manager - New Contact Information**

Please note, the address for your Case Manager may have changed as of July 1, 2018. If your Case Manager was previously located in any of the following locations, be sure to save the new address listed below.

**Hot Springs** (Mona Ungefug)  
**Pine Bluff** (Bobby Johnson)

**New Address:**  
1501 North University Ave.  
Suite 470  
Little Rock, AR 72207

**Fayetteville** (Susie Hook; Myranda Rowe)  
**Russellville** (Lorie Hamilton)

**New Address:**  
400 Rogers Ave.  
Fort Smith, AR 72901

**Batesville** (Bruce Kelley)  
**West Memphis** (Elizabeth Drake)

**New Address:**  
2920 Longview Drive  
Jonesboro, AR 72401
Spinal Cord Injury/Disability Conference

We held our bi-annual SCI/D conference on September 7, 2018 at University of Arkansas, Pulaski Technical College, Grand Hall. Speakers from model-system facilities presented information on topics ranging from Therapeutic Recreation to Medical Marijuana, as well as, an SCI Survivor (EMT to Patient) session. Attendees enjoyed one-on-one interaction with vendors/exhibitors, interactive and informative presentations, and door prizes (including a wheelchair giveaway)! Lunch and snacks were provided between morning and afternoon sessions.

Look for information next year (2019) on mini-conferences to be held in a couple locations outside of central Arkansas. Our bi-annual conference will return in 2020 and will again be held in central Arkansas. The best ways to stay informed about upcoming events and conferences around the state are to read this newsletter and like or follow our Facebook Page at https://facebook.com/arspinalcord/. As always, conferences hosted by the Arkansas Spinal Cord Commission are free to attend for clients and one caregiver.
Planning a Bowel Program

After a spinal cord injury (SCI) the bowels lose voluntary control, so bowel movements require time, thought, and planning to avoid accidents and to prevent other complications (bowel impactions, autonomic dysreflexia and skin irritation that can result in pressure sores). The bowels are now under the control of your autonomic nervous system and that means several changes must be dealt with: the colonic transit time slows down, and the body’s processes for storing and removing stool from the body is no longer under voluntary control.

Normally, when stool moves into the rectum, the anal sphincter contracts and makes the person aware of its presence, so the person can voluntarily contract the anal sphincter until a toilet can be found. At the proper time nerve signals are then sent to relax the anal sphincter and contract abdominal muscles to have a bowel movement. A spinal cord injury slows down peristalsis (an automatic wave like action that propels stool through the gastrointestinal tract), impairs sensation of stool, prevents abdominal muscle control, and prevents control of the rectal sphincter.

Depending on the level of a spinal cord injury, an Upper Motor Neuron (UMN) bowel with spastic bowel or a Lower Motor Neuron (LMN) bowel with flaccid bowel is the result. In an UMN bowel, the goal is to maintain soft firm stools, but in a LMN bowel the goal is hard small stools. In both, the goal is a bowel movement (BM) in a controlled and scheduled manner. In order to avoid accidents, prevent constipation, and improve the quality of life.

In high level SCI resulting in an UMN bowel, spasticity is used to stimulate a bowel movement with digital stimulation or a suppository. In a lower level SCI resulting in a LMN bowel, there is a loss of peristalsis in the descending colon and no anal sphincter tone, so stool often stops there and will not pass unless manually removed, or “heaven forbid”, if liquid stool is present it moves freely out of the anal sphincter, as diarrhea. The goal in a LMN bowel is to produce well-formed stools and keep the rectal vault clear by frequent rectal checks and removal of stool.

Bowel programs have several components tailored to the individual: medication, rectal stimulation/evacuation, diet/fluid intake, and activity level. It is important to sit down with your health care provider and discuss the different options in these areas to maximize the control of the bowels. If you fail to develop a plan to manage your bowels in a proactive, positive manner you are at risk of finding yourself with the chronic complication of an over distended colon, or hospitalization for a bowel
impaction or even worse, a pressure sore caused by stool contamination of your skin. Additionally, if your spinal cord injury is T6 or higher, stool in the rectum or any method of rectal stimulation may cause autonomic dysreflexia (AD) and cause a fast, major increase in your blood pressure. To avoid AD, you can use a numbing agent like lidocaine ointment to minimize this painful stimulation or take a blood pressure lowering agent such as nitroglycerin to blunt the rise in blood pressure when doing rectal stimulation.

A bowel program is a plan to regain control of your bowel function after a spinal cord injury. A well-designed bowel program can help you lead a healthier life, prevent bowel accidents, reduce bowel constipation/impactions, avoid skin breakdown and put you back in control of bodily functions. People with a spinal cord injury need to stick to a regular schedule and technique of bowel care.

In the next newsletter, I will discuss the different options available to improve bowel management.
Accessible Recreation in Arkansas

Arkansas, being *The Natural State*, has quite a lot of nature to be enjoyed. We have fifty-two state parks to be exact. This beautiful state is home to many scenic spots including natural springs, mountains, waterfalls, botanical gardens, and wildlife preserves. Among the spots, you’ll find trails that lead to overlooks and historical markers. On the next page, you can find a list of trails that are marked accessible by the AR Department of Parks & Tourism. The Partners for Inclusive Communities at the University of Arkansas has partnered with several other organizations to create the Accessible Trails Project. They have created a website with a table of trails that have been navigated by wheelchair to determine whether the trails meet certain factors. They also have a YouTube channel with video of a number of trails. Website: [https://accessibletrailsorg.wordpress.com/](https://accessibletrailsorg.wordpress.com/)

In addition to trails, Arkansans also have access to a growing number of inclusive playgrounds and water-feature parks, such as:

- Mills Park in Bryant
- One Heart Playground at Burns Park in North Little Rock
- Richie Road Park in Cabot
- The Crossing at Angel Court in East End (Little Rock address)
- Citizens Park Playground (planning stage) in Bentonville
- Lake Valencia Play & Splash Park (planning stage) in Maumelle
- Splash Pad at Laurel Park in Conway (seasonal)
- Saracen Landing Splash Park and Playground in Pine Bluff
- Miracle League Park in Jonesboro
- Fort Smith Park in Fort Smith

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Spinal Connection
The Arkansas State Parks website currently lists 11 trails as accessible on the Trail Finder at https://www.arkansasstateparks.com/trails. You can choose to filter by the “Barrier Free (ADA)” option and see either a list with descriptions or a map of the sites. This is the current list:

- **Arkansas Trail**
  Pinnacle Mountain State Park in Little Rock
- **Heritage And Habitat Trail**
  Bull Shoals-White River State Park in Bull Shoals
- **Historic Van Winkle Trail**
  Hobbs State Park-Conservation Area in Rogers
- **Kingfisher Trail (National Recreation Trail)**
  Pinnacle Mountain State Park in Little Rock
- **Lake Ponder Trail**
  Crowley’s Ridge State Park in Paragould
- **Lakeside Trail**
  Bull Shoals-White River State Park in Bull Shoals
- **Louisiana Purchase Boardwalk (National Recreation Trail)**
  Louisiana Purchase State Park in Brinkley
- **Ozark Plateau Trail**
  Hobbs State Park-Conservation Area in Rogers
- **Slurger Creek Nature Trail**
  Lake Catherine State Park in Hot Springs
- **The Village Trail**
  Parkin Archeological State Park in Parkin
- **Waterleaf Interpretive Trail**
  Cossatot River State Park-Natural Area in Wickes

Health Benefits Associated With Regular Physical Activity

**Strong evidence**
- Lower risk of early death
- Lower risk of coronary heart disease
- Lower risk of stroke
- Lower risk of high blood pressure
- Lower risk of adverse blood lipid profile
- Lower risk of type 2 diabetes
- Lower risk of metabolic syndrome
- Lower risk of colon cancer
- Lower risk of breast cancer
- Prevention of weight gain
- Weight loss, particularly when combined with reduced calorie intake
- Improved cardiorespiratory and muscular fitness
- Prevention of falls
- Reduced depression
- Better cognitive function (for older adults)

**Moderate to strong evidence**
- Better functional health (for older adults)
- Reduced abdominal obesity

**Moderate evidence**
- Lower risk of hip fracture
- Lower risk of lung cancer
- Lower risk of endometrial cancer
- Weight maintenance after weight loss
- Increased bone density
- Improved sleep quality

https://health.gov/paguidelines/

Have a medical question?
Experiencing issues and need immediate answers?

TRIUMPH Help Line
1-855-767-6983
FREE 24 / 7 Access

Help & Information for Arkansans with Spinal Cord Injury & Healthcare Providers
Telecommunications Access Program (TAP)

Could you use an iOS, Android, or other assistive device to better communicate with friends, family, or colleagues? If so, be sure to check out the TAP program! They have recently added Android devices to the list of available equipment. Check the eligibility requirements and apply at: https://arktap.org/eligibility/

The Telecommunications Access Program (TAP) provides free telecommunication equipment to eligible Arkansans who are deaf, hard of hearing, deafblind, or who have a speech, visual, mobility, or intellectual impairment. TAP removes the barriers to telecommunication access through the provision of accessible communication technology.