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"Title VII, Part B Continuation Grant Application Texas Rehabilitation Commission" [1984]

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TITLE VII. PART B
CONTINUATION GRANT APPLICATION
TEXAS REHABILITATION COMMISSION

HCIL/ARCIL
May 7, 1984

FEDERAL ASSISTANCE

2. APPLICANT'S
APPLICATION

1. NUMBER

N/A

b. DATE

19 84 05 07

3. STATE
APPLICATION
IDENTIFIER

1. NUMBER

4-05-50-010

b. DATE

Year month day

ASSIGNED

19 84 05 07

L. TYPE
OF ACTION☐ PREAPPLICATION
☒ APPLICATION

(Mark appropriate box)

☐ REPORT OF FEDERAL ACTIONLeave
Blank

4. LEGAL APPLICANT/RECIPIENT

a. Applicant Name : Texas Rehabilitation Commission
 b. Organization Unit : Division of Vocational Rehabilitation
 c. Street/P.O. Box : 118 E. Riverside Drive
 d. City : Austin
 e. State : Texas
 f. Contact Person (Name & telephone No.) : Ted M. Thayer (512) 445-8285

a. County : Travis
 b. ZIP Code : 78704

5. FEDERAL EMPLOYER IDENTIFICATION NO.

1-74-1647061-A1

6. PROGRAM
(From Federal Catalog)

a. NUMBER

8 | 4 | 0 | 1 | 3 | 2

b. TITLE

CENTERS FOR INDEPENDENT LIVING

7. TITLE AND DESCRIPTION OF APPLICANT'S PROJECT Texas Rehabilitation Commission Ctrs. for Independent Living. Plan provides for contracting with private non-profit organizations for the operation of Ctrs. for IL. The Texas Rehabilitation Commission will be accountable for the administration of the ctr. programs thus established and assures that the ctrs. operated by contractors will adhere to the requirements by P.L. 95-602, Title VII, Part B.

8. TYPE OF APPLICANT/RECIPIENT

A-State
 B-Interstate
 C-Substate
 D-Country
 E-City
 F-School District
 G-Special Purpose District

H-Community Action Agency
 I-Higher Educational Institution
 J-Indian Tribe
 K-Other (Specify):

Enter appropriate letter

A

9. TYPE OF ASSISTANCE

A-Basic Grant
 B-Supplemental Grant
 C-Lease

D-Insurance

E-Other

Enter appropriate letter(s)

A

10. AREA OF PROJECT IMPACT (Names of cities, counties, States, etc.)

State of Texas

11. ESTIMATED NUMBER OF PERSONS BENEFITING

600

12. TYPE OF APPLICATION

A-New
 B-Renewal
 C-Revision
 D-Continuation
 E-Augmentation

Enter appropriate letter

D

13. PROPOSED FUNDING

a. FEDERAL \$ 400,000 .00
 b. APPLICANT .00
 c. STATE .00
 d. LOCAL .00
 e. OTHER .00
 f. TOTAL \$ 400,000 .00

14. CONGRESSIONAL DISTRICTS OF:

a. APPLICANT

10

b. PROJECT

Statewide

15. PROJECT START DATE Year month day
 1984 07 15

17. PROJECT DURATION
 12 Months

18. ESTIMATED DATE TO BE SUBMITTED TO FEDERAL AGENCY

Year month day
 19 84 05 07

15. TYPE OF CHANGE (For 12a or 12b)

A-Increase Dollars
 B-Decrease Dollars
 C-Increase Duration
 D-Decrease Duration
 E-Cancellation

F-Other (Specify):

N/A

Enter appropriate letter(s)

19. EXISTING FEDERAL IDENTIFICATION NUMBER

G008302180

20. FEDERAL AGENCY TO RECEIVE REQUEST (Name, City, State, ZIP code)

U.S. Department of Education, Application Control Center, Washington, D.C. 20202

21. REMARKS ADDED

☒ Yes ☐ No

22. THE APPLICANT CERTIFIES THAT:
 a. To the best of my knowledge and belief, data in this preapplication/application are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is approved.

23. CERTIFYING REPRESENTATIVE
 a. TYPED NAME AND TITLE
 Vernon M. Arrell
 Commissioner
 b. SIGNATURE
 Vernon M. Arrell
 c. DATE SIGNED
 Year month day
 19 84 05 07

24. AGENCY NAME

25. ORGANIZATIONAL UNIT

27. ADMINISTRATIVE OFFICE

25. APPLICATION RECEIVED Year month day
 19

26. FEDERAL APPLICATION IDENTIFICATION

30. FEDERAL GRANT IDENTIFICATION

31. ACTION TAKEN

☐ a. AWARDED
☐ b. REJECTED
☐ c. RETURNED FOR AMENDMENT
☐ d. DEFERRED
☐ e. WITHDRAWN

32. FUNDING

a. FEDERAL \$.00
 b. APPLICANT .00
 c. STATE .00
 d. LOCAL .00
 e. OTHER .00
 f. TOTAL \$.00

33. ACTION DATE

Year month day

19

35. CONTACT FOR ADDITIONAL INFORMATION (Name and telephone number)

34. STARTING DATE Year month day
 19

36. ENDING DATE Year month day
 19

37. REMARKS ADDED

☐ Yes ☐ No

38. FEDERAL AGENCY ACTION
 a. If the agency approves the request, it must provide a response to the applicant within 30 days of the date of the request.
 b. If the agency denies the request, it must provide a response to the applicant within 30 days of the date of the request.
 c. If the agency requires additional information, it must provide a response to the applicant within 30 days of the date of the request.

PART II PROJECT APPROVAL INFORMATION

ITEM 2

Does this assistance request require State, or local
advisory, educational or health clearances?

Name of Agency or
Board _____

☐ Yes ☒ No (Attach Documentation)

ITEM 3

The application/preapplication was made available
for review to the State process under Executive
Order 12372

The application/preapplication was not made available
for review to the State process under Executive Order
12372.

☒ Yes ☐ No ☐ Not Covered ☐ Not Selected

ITEM 10

Is there other related assistance on this project previous,
pending, or anticipated?

See instructions for additional information to be
provided.

☐ Yes ☒ No

PART III - BUDGET INFORMATION

SECTION A - BUDGET SUMMARY

GRANT PROGRAM, FUNCTION OR ACTIVITY (a)	FEDERAL CATALOG NO. (b)	ESTIMATED UNOBLIGATED FUNDS		NEW OR REVISED BUDGET		
		FEDERAL (c)	NON-FEDERAL (d)	FEDERAL (e)	NON-FEDERAL (f)	TOTAL (g)
1. Centers for Independent Living	84.132	\$ -0-	\$	\$ 400,000	\$	\$ 400,000
2.						
3.						
4.						
5. TOTALS		\$ -0-	\$	\$ 400,000	\$	\$ 400,000

SECTION B - BUDGET CATEGORIES

6. OBJECT CLASS CATEGORIES	GRANT PROGRAM, FUNCTION OR ACTIVITY				TOTAL (5)
	(1) Centers for Ind. Living	(2)	(3)	(4)	
a. PERSONNEL	\$	\$	\$	\$	\$
b. FRINGE BENEFITS					
c. TRAVEL					
d. EQUIPMENT					
e. SUPPLIES					
f. CONTRACTUAL	393,050				393,050
g. CONSTRUCTION					
h. OTHER					
i. TOTAL DIRECT CHARGES	393,050				393,050
j. INDIRECT CHARGES	6,950				6,950
k. TOTALS	\$ 400,000	\$	\$	\$	\$ 400,000
7. PROGRAM INCOME	\$ -0-	\$	\$	\$	\$ -0-

SECTION C - NON-FEDERAL RESOURCES

(a) GRANT PROGRAM	(b) APPLICANT	(c) STATE	(d) OTHER SOURCES	(e) TOTALS
8.	\$	\$	\$	\$
9.				
10.				
11.				
12. TOTALS	\$	\$	\$	\$

SECTION D - FORECASTED CASH NEEDS

	TOTAL FOR 1ST YEAR	1ST QUARTER	2ND QUARTER	3RD QUARTER	4TH QUARTER
13. FEDERAL	\$	\$	\$	\$	\$
14. NON-FEDERAL					
15. TOTALS	\$	\$	\$	\$	\$

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) GRANT PROGRAM	FUTURE FUNDING PERIODS (years)			
	(b) FIRST	(c) SECOND	(d) THIRD	(e) FOURTH
16. Centers for Independent Living	\$ 400,000	\$ 400,000	\$	\$
17.				
18.				
19.				
20. TOTALS	\$	\$	\$	\$

SECTION F - OTHER BUDGET INFORMATION (attach additional sheets if necessary)

21. DIRECT CHARGES: See attached annotated budgets

22. INDIRECT CHARGES: Calculated at 13.9% of the first \$25,000 of each subcontract (\$3,475 per subcontract), in accordance with the Indirect Cost Rate Proposal submitted by the Texas Rehabilitation Commission on April 4, 1984.

23. REMARKS: State funds totaling \$31,950 are being committed, as shown on the attached budgets, to supplement the Federal funds.

PART IV - PROGRAM NARRATIVE (attach per instructions)

PART V
ASSURANCES

The Applicant hereby assures and certifies that it will comply with the regulations, policies, guidelines and requirements, including OMB Circular No. A-95, and FMC 74-4 and 74-7, as they relate to the application, acceptance and use of Federal funds for this federally-assisted project. Also the Applicant assures and certifies:

1. It possesses legal authority to apply for the grant; that a resolution, motion or similar action has been duly adopted or passed as an official act of the applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the person identified as the official representative of the applicant to act in connection with the application and to provide such additional information as may be required.
2. It will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and in accordance with Title VI of that Act, no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance and will immediately take any measures necessary to effectuate this agreement.
3. It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d) prohibiting employment discrimination where (1) the primary purpose of a grant is to provide employment or (2) discriminatory employment practices will result in unequal treatment of persons who are or should be benefiting from the grant-aided activity.
4. It will comply with requirements of the provisions of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 (P.L. 91-646) which provides for fair and equitable treatment of persons displaced as a result of Federal and federally-assisted programs.
5. It will comply with the provisions of the Hatch Act which limit the political activity of employees.
6. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act, as they apply to hospital and educational institution employees of State and local governments.
7. It will establish safeguards to prohibit employees from using their positions for a purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties.
8. It will give the sponsoring agency or the Comptroller General through any authorized representative the access to and the right to examine all records, books, papers, or documents related to the grant.
9. It will comply with all requirements imposed by the Federal sponsoring agency concerning special requirements of law, program requirements, and other administrative requirements.
10. It will insure that the facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify the Federal grantor agency of the receipt of any communication from the Director of the EPA Office of Federal Activities indicating that a facility to be used in the project is under consideration for listing by the EPA.
11. It will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973, P.L. 93-234, 87 Stat. 975, approved December 31, 1976. Section 102(a) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurance is available as a condition for the receipt of any Federal financial assistance for construction or acquisition purposes for use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase "Federal financial assistance" includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect Federal assistance.
- It will assist the Federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 U.S.C. 470), Executive Order 11593, and the Archeological and Historic Preservation Act of 1966 (16 U.S.C. 469a-1 *et seq.*) by (a) consulting with the State Historic Preservation Officer on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see 36 CFR Part 800.8) by the activity, and notifying the Federal grantor agency of the existence of any such properties, and by (b) complying with all requirements established by the Federal grantor agency to avoid or mitigate adverse effects upon such properties.

CIVIL RIGHTS CERTIFICATE

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, AND THE AGE DISCRIMINATION ACT OF 1975

The applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other Federal financial assistance to education programs or activities from the Department of Education.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d *et seq.*, which prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance.
2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving Federal financial assistance.
3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 *et seq.*, which prohibits discrimination on the basis of sex in education programs and activities receiving Federal financial assistance.
4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 *et seq.*, which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance.
5. All regulations, guidelines, and standards lawfully adopted under the above statutes by the United States Department of Education.

The applicant agrees that compliance with this Assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contractors, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to its students or employees in connection with its education programs or activities are not discriminating in violation of the above statutes, regulations, guidelines, and standards against those students or employees. In the event of failure to comply the applicant understands that assistance can be terminated and the applicant denied the right to receive further assistance. The applicant also understands that the Department of Education may at its discretion seek a court order requiring compliance with the terms of the Assurance or seek other appropriate judicial relief.

The person or persons whose signature(s) appear(s) below is/are authorized to sign this application, and to commit the applicant to the above provisions.

May 7, 1984

Date

Vernon M. Arrell
Authorized Official(s)

Vernon M. Arrell

Name of Applicant or Recipient

118 E. Riverside Drive

Street

Austin, Texas 78704

City, State, Zip Code

COALITION FOR BARRIER FREE LIVING
(HOUSTON CENTER FOR INDEPENDENT LIVING)
ANNOTATED BUDGET FOR FUNDING FROM
THE TEXAS REHABILITATION COMMISSION
July 15, 1984 through July 14, 1985

	<u>Base</u>	<u>Time %</u>	<u>Total Costs</u>	<u>Federal Funds</u>	<u>State Funds</u>
PERSONNEL					
Executive Director	\$22,000	100	\$ 22,000	20,900	1,100
Accountant	17,000	100	17,000	16,150	850
Administrative Secretary	16,000	100	16,000	15,200	800
Receptionist	13,000	100	13,000	12,350	650
Deaf Services Coordinator	17,000	100	17,000	16,150	850
Instructional Programs Coordinator	17,000	100	17,000	16,150	850
Community Services Coordinator	17,000	100	17,000	16,150	850
Community Services Coordinator	17,000	100	17,000	16,150	850
Staff Interpreter	16,000	38	6,000	5,700	300
Total Personnel			142,000	134,900	7,100
FRINGE BENEFITS (F.I.C.A., Workers Compensation, Health Insurance, Unemployment Insurance, etc.)			22,000	20,900	1,100
TRAVEL (Staff training, consultation with other CIL's, meetings with TRC management, etc.)			1,700	65	1,635
EQUIPMENT (Copier lease/purchase, adaptive equipment, replacement and maintenance of office equipment, etc.)			3,000	2,850	150
SUPPLIES (Copier supplies, typical expendable office supplies, etc.)			1,000		1,000
OTHER					
Rent (includes utilities and maintenance)			22,800	21,660	1,140
Telephone			12,000	11,400	600
Liability Insurance			500		500
Postage			1,000		1,000
Publications and Printing (Promotional and informational printing for public relations, community education, and outreach activities, etc.)			1,000		1,000
Consultants (Technical assistance with accounting and financial matters, grants management, program development and evaluation, in-service training, etc.)			5,000	4,750	250
In-Town Travel			500		500
TOTAL			<u>\$212,300</u>	<u>196,525</u>	<u>15,975</u>

COALITION FOR BARRIER FREE LIVING
HOUSTON CENTER FOR INDEPENDENT LIVING
BUDGET NARRATIVE

The following represent significant changes from the fourth year continuation budget for this project and narrative justification for those changes:

1. Restructuring of job titles and assignments has occurred in the center and is noted as follows:
 - A. The special services coordinator position has been renamed deaf services coordinator.
 - B. The outreach specialist position has been renamed instructional programs coordinator.
 - C. The peer counseling specialist and information and referral specialist positions have been renamed community service coordinator. This action has been taken to provide more effective utilization of staff within the center and to make job titles more accurately correlate with actual duties.
2. A part-time staff interpreter position has been added to relate to the needs for interpreter services in the center.
3. The budgeted amount for travel has been significantly reduced in the Title VII, Part B budget and supplemented significantly with state general revenue funds.
4. The budget categories for materials for staff development and client training and professional membership dues/conference fees have been totally eliminated from the budget because of limited availability of funding.
5. The budget categories for liability insurance, postage, publications and printing, consultants, and in-town travel have been eliminated from the Title VII, Part B budget. These categories will be funded with state general revenue funds.
6. The category for supplies has been eliminated from the federal budget and will be funded through state general revenue funds.
7. State general revenue funds will be utilized to supplement and, in some instances, supplant Title VII, Part B funding for some items in the budget. Utilization of these funds is clearly designated in the budget by line item category.

AUSTIN RESOURCE CENTER FOR INDEPENDENT LIVING
 ANNOTATED BUDGET FOR FUNDING FROM
 THE TEXAS REHABILITATION COMMISSION
 July 15, 1984 through July 14, 1985

	<u>Base</u>	<u>Time %</u>	<u>Total Costs</u>	<u>Federal Funds</u>	<u>State Funds</u>
PERSONNEL					
Executive Director	\$24,446	100	\$ 24,446	23,224	1,222
Fiscal Officer	17,384	100	17,384	16,515	869
Program/Peer Counseling Coordinator	18,471	100	18,471	17,548	923
Information and Referral/Housing Coordinator	17,275	100	17,275	16,411	864
Personal Care Attendant Coordinator	17,275	50	8,638	8,206	432
Financial/Legal Advocacy Coordinator	17,275	100	17,275	16,411	864
Community Outreach Coordinator	16,605	100	16,605	15,775	830
Job Development and Placement Coordinator	17,275	100	17,275	16,411	864
Secretary	11,952	100	11,952	11,354	598
Receptionist	9,789	100	9,789	9,300	489
Clerk/Typist	11,516	50	5,758	5,470	288
Total Personnel			164,868	156,625	8,243
FRINGE BENEFITS (Unemployment Insurance, Worker's Compensation, Health/Life Insurance, Social Security)			19,796	18,806	990
EQUIPMENT (Copy machine rental, maintenance of equipment, new and replacement equipment)			2,819	2,678	141
SUPPLIES (Copier supplies, typical expendable office supplies)			2,700	2,565	135
OTHER					
Rent and Utilities			10,435	9,913	522
Consultants (independent audit, technical assistance in program areas, etc.)			147		147
Personal care attendants, readers, drivers and interpreters			1,927	362	1,565
Telephone			5,869	5,576	293
Publications and Subscriptions			200		200
Printing			300		300
Fees for Conference			50		50
Postage			814		814
Property and Liability Insurance			600		600
Advertising (recruitment of personal care attendants, severely disabled employees, etc.)			275		275
In-Town Travel (outreach, community development, etc.)			1,700		1,700
TOTAL			\$212,500	196,525	15,975

AUSTIN RESOURCE CENTER FOR INDEPENDENT LIVING
BUDGET NARRATIVE

The following represent significant changes from the fourth-year continuation budget for this project and narrative justification for those changes:

1. Basic staff for the center has not changed and Title VII, Part B funding committed to staff positions has, in fact, been slightly decreased. State general revenue funds have been utilized to supplement staff salaries as well as other line items in the budget.
2. Fringe benefits have been significantly increased to coincide with escalating costs of benefits. Previous commitment of Title VII, Part B funds to this resource was quite inadequate to cover the cost of benefits and the balance had to be paid from local funds.
3. The budgeted amount for rent and utilities has been decreased to more accurately coincide with costs.
4. Budgeted amounts for consultants, personal care attendants, publications and subscriptions, printing, fees for conferences, postage, property and liability insurance, advertising, and in-town travel have either been eliminated entirely from Title VII, Part B funding or substantially reduced. State general revenue funds are utilized to supplant or supplement Title VII, Part B funding for those budget items.
5. Out-of-town travel has been eliminated as a budget item because of unavailability of funding to meet all priorities of the center.
6. Utilization of state general revenue funding is noted separately by line item in the budget.

The Texas Rehabilitation Commission is the designated State unit within the meaning of that term in Section 7(3) of the Act and it is, therefore, eligible for assistance under Part A, Title VII, State plan program and would receive funds under that program if funds were available and it submitted a State plan which was approved.

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ABSTRACT

In this application, the Texas Rehabilitation Commission proposes to provide fifth-year funding for centers for independent living in Austin and Houston. Centers for independent living were previously established in those locations through Title VII, Part B funds acquired through a grant from the Department of Education. The project period for that previous grant began on July 15, 1980.

The centers for independent living in Austin and Houston are administered by cross-disability consumer organizations in those cities. Contracts with the Texas Rehabilitation Commission provide the basis for administration of the centers. The majority of the Boards of Directors and the staffs of the respective centers are severely disabled individuals. This is in keeping with the legislative mandates related to such centers and the spirit and intent of the independent living movement.

During their existence, the Austin Resource Center for Independent Living and the Houston Center for Independent Living have developed into viable service delivery systems in their respective communities. Project goals in terms of clients served and numbers of services provided have been exceeded throughout the project period and the centers have had considerable success in carrying out their advocacy responsibilities in their respective communities. Moreover, both centers have developed viable working relationships with other community resources to augment services delivered through the centers.

Considerable efforts have also been directed toward fund-raising and utilization of volunteers to augment resources available through Title VII, Part B funds. Recently, state general revenue funds have been made available to the centers by the Texas Rehabilitation Commission to supplement Title VII, Part B funding. The centers have used this funding to supplement Title VII, Part B funds and have expanded their programs through this funding and other funding generated from resources in their respective communities.

The centers both offer a comprehensive array of independent living services but tailor specific services to the particular needs of the disabled in their respective communities. Examples are the transitional living facility in the Austin Resource Center for Independent Living and the extensive deaf services component in the Houston Center for Independent Living.

During the next budget year, both centers will focus attention upon refinement of administrative, management, and service delivery systems. They will also focus considerable attention upon refinement of program evaluation activities to comply with federal requirements.

In summary, the centers have established themselves as mature, viable service delivery and advocacy resources in their respective communities and it is anticipated that the funding requested through this proposal will enable the centers to continue the highly successful independent living service programs that have been developed.

INTRODUCTION:

During Fiscal Year 1980, the Texas Rehabilitation Commission applied for and received a Title VII, Part B grant to establish centers for independent living in Austin and Houston. The initial grant was in the amount of \$200,000 per year but was subsequently increased during 1980 to a total of \$400,000 per year through supplemental Title VII, Part B funds. The funding was divided equally between the two centers--the Austin Resource Center for Independent Living and the Houston Center for Independent Living. The initial three-year project period for that grant terminated on July 14, 1983, and the project was subsequently extended through a one-year Title VII, Part B continuation grant that will terminate on July 14, 1984. This application is for the purpose of continuing the two above-referenced centers through July 14, 1985.

In establishing centers in Austin and Houston, the Commission elected to contract with two cross-disability consumer organizations--MIGHT! in Austin and the Coalition for Barrier-Free Living in Houston (CBFL). The Austin center has subsequently incorporated as a legal entity known as the Austin Resource Center for Independent Living (ARCIL). The contract with CBFL resulted in the establishment of the Houston Center for Independent Living (HCIL). Both contracts will remain in force during the budget year for this proposal. The contracts may be terminated by either party and that portion of the contracts dealing with federal funds will not extend beyond September 30, 1986, unless additional funding becomes available.

In implementing the two centers, the Texas Rehabilitation Commission's Consumer Consultation Committee, an advisory committee consisting largely of severely disabled individuals, provided valuable input in the planning and development phases. Both centers are located in architecturally barrier-free facilities and while the services offered in the two centers vary somewhat to reflect individual needs in their respective communities, both centers offer the following basic independent living services:

1. Intake Assessment and Counseling
2. Information and Referral
3. Advocacy
4. Independent Living Skills
5. Housing, Transportation, and Attendant Care Coordination
6. Peer Counseling
7. Outreach
8. Job Development and Placement
9. Publication of newsletters focusing upon issues of interest to disabled individuals.

The major differences between services provided in the centers include a transitional residential facility operated by the Austin Center (Herndon House) and a large deaf services component in the Houston Center. Both of those services are uniquely designed to meet identified needs in their respective areas.

The two centers will have been in existence for approximately four years by the time this application becomes effective. They have developed into effective service delivery systems within their communities and have established impressive records of service delivery. Their performance has been well-documented in Project Performance Reports and continuation grant applications; consequently, the remainder of this narrative will focus upon activities during the fourth year of the project and planned goals and activities for the future.

PROJECT NARRATIVE (Houston Center for Independent Living)

The following narrative focuses upon the degree to which the Houston Center for Independent Living has met the basic objectives of the project. Each objective is restated and followed by a narrative discussion of the progress made related to that objective.

1. Develop a system for providing or coordinating independent living services.

Changes in the administrative and functional structures of the center over the past year have significantly enhanced the development of a systematic approach to the provision/coordination of independent living services to disabled individuals. Although economic constraints continue to be a limiting factor in the provision/coordination of services, the revised structure for service provision has permitted an increase in the number of clients served and allowed for better follow-up and evaluation of services provided.

Although the structure in which services are provided has been modified, the basic types of services provided through the center have remained constant. These services include the following:

- A. Intake Services
- B. Information and Referral
- C. Outreach Services
- D. Independent Living Skills Training
- E. Peer Counseling
- F. Interpreter Services
- G. TTY/Voice Exchange Services
- H. Advocacy
- I. Coordination of Community Resources for the Disabled and Support Services such as Attendant Care, Housing, etc.

The restructuring of the service delivery system came about following the hiring of a new executive director, who started work on a part-time basis in August, 1983, and became full-time in September, 1983. During the months of August, September, and October, 1983, the executive director undertook an extensive review of all functions and staff positions of the center. The results of this review indicated that the existing staff structure did not facilitate either service delivery or documentation of delivered services at optimum levels. Consequently, the administrative structure was modified in such a manner as to eliminate the positions of outreach specialist, information and referral specialist, peer counseling specialist, and special services coordinator. Those functions were reassigned to staff members in the center who were involved in carrying out those functions as a routine part of their jobs. Peer counseling and information and referral responsibilities for clients other than the deaf were combined into a new job position called community service coordinator and two persons were assigned to that position. Information and referral for deaf clients was designated as the responsibility of the deaf services coordinator, who also had responsibility for providing interpreter services, TTY/voice exchange services, and counseling services as appropriate for deaf clients. In addition to this reassignment of responsibilities, a new position of instructional program coordinator was created to centralize the functions associated with planning and implementing instructional programs for clients, other service providers, volunteers, and community members in general. The functions associated with outreach became the responsibility of all center staff, with a major share of the responsibility resting with the community service coordinators, the deaf services coordinator, and the instructional program coordinator.

The effectiveness of this restructuring is evidenced by the significant increase in the numbers of clients served since the new structure took effect on November 1, 1983. After an initial period of adjustment and role clarification in November and a slow down associated with the holiday season in December, the contacts with new clients and delivery of services has exceeded the ability of current center staff to provide services. Exclusive of deaf services and clients wanting only information and referral services, the two community services coordinators have done intake processing on 52 new clients between January 1, 1984, and March 31, 1984. In addition to those 52 new clients requesting services, the community services coordinators have been providing an average of 160 information and referral services per month.

The deaf service component of the center has been equally busy. Between January 1, 1984, and March 31, 1984, interpreter services have been provided for 495 deaf clients, 2,690 TTY/voice exchange calls have been handled, and 290 information and referral requests have been filled for deaf clients. This represents a significant increase in service delivery resulting from the restructuring of the service delivery components.

Based upon current service delivery statistics, it is projected that in excess of 2,000 information and referral requests will be filled; more than 200 physically and/or mentally impaired individuals will receive services over and above information and referral services; more than 2,000 requests for interpreters for deaf clients will be filled; in excess of 10,000 TTY/voice exchange calls will be handled; and more than 200

individuals will participate in instructional programs offered by the center during the current grant period. This represents a significant increase in the quantity of services delivered and is indicative of a services delivery system that is extremely cost effective. Highlights of service delivery activities are provided in a later section of this proposal.

In providing services to persons with a variety of disabling conditions ranging from orthopedic impairment, HCIL cooperated with a variety of organizations. These include the following:

- Texas Rehabilitation Commission
- Texas Commission for the Deaf
- Texas Department of Human Resources
- Texas Employment Commission
- Texas Commission for the Blind
- Governor's Planning Council for Developmental Disabilities
- Governor's Committee for Disabled Persons
- Coalition of Texans with Disabilities
- Texas Society of Interpreters for the Deaf
- Deaf Council of Greater Houston
- Children's Resource and Information Services
- Greater Houston Interpreters for the Deaf
- City of Houston Police Department
- Community Service Option Program
- Houston Independent School District
- Southwest Wheelchair Athletic Association
- Houston Child Guidance Center
- Veterans Administration
- Mental Health/Mental Retardation Authority
- VISTA/Action
- Houston Consumer Credit Counseling Service
- National Registry of Interpreters for the Deaf
- United Cerebral Palsy
- Lee College
- Social Security Administration
- Harris County Committee on Employment of the Handicapped
- Voluntary Action Center
- Spina Bifida Association
- Houston Deaf News Center
- Houston Association for the Deaf
- Hear-Say
- Vocational Guidance Center
- Lighthouse of Houston
- The Institute for Rehabilitation and Research
- Gulf Coast Legal Foundation
- Jesuit Volunteer Program
- Easter Seals Society
- Association for Rights of Children with Handicaps
- Multiple Sclerosis Society
- Baylor College of Medicine
- Rice University
- Texas Woman's University
- University of Houston
- Texas A. & M University
- National Aeronautics and Space Administration
- City of Houston Community Development Program
- L & L Management Corporation
- Independent Living Research Utilization Project
- Independent Life Styles
- Texans for the Improvement of Nursing Homes
- Houston Area Women's Center
- Covenant House for Under 21
- Hill Country Citizens Concerned with Handicaps
- National Wheelchair Athletic Assn.
- Richmond State School
- Multiple private employers and corporations
- Multiple Houston area entertainment resources
- Multiple Houston area churches and synagogues
- Multiple Houston area hospitals and health services providers
- Multiple entities of city, county, and state government
- Other social, health, and welfare agencies and organizations
- City of Houston Public Library Systems

-United Way
-Greater Houston Hospital Council
-Houston Community College System

-City of Houston Fire Department
-Greater Houston Services for the
Hearing Impaired

2. Persons with severe disabilities will participate in policy-making, management, and staff roles in the center.

The Boards of Directors of the Coalition for Barrier Free Living (CBFL) governs the operation of the Houston Center for Independent Living and is responsible for establishing policy for the center and overseeing the implementation of established policies. The Board of Directors is composed primarily of persons with disabilities and people with extensive knowledge of disability. The current CBFL Board of Directors is composed of the following persons (notation in parenthesis indicates the type of disability the person has or the person's experience with disability):

Michelle Bailey (deaf)
Guy Bell (Quadriplegic)
Jean Cole (rehabilitation professional)
Kathleen DeSilva (quadriplegic)
Jack Emmott (polio residuals)
Carl Fasser (health care professional)
Joyce Frieden (paraplegic)
Laurie Gerken (paraplegic)
William Richard (amputee)
Donald Rossi (polio residuals)
Mary Sawyer (polio residuals)
Avril Thompson (parent of a deaf child)
Nita Weil (polio residuals)

The day-to-day operation of the center is, likewise, carried out by a staff composed of persons who are either disabled or have an intimate knowledge of disability through education and/or experience. The current staff of the center is composed of the following persons (parenthetical notations indicate type of disability or experience with disability for each staff member):

Cathy DeLaCruz (muscular dystrophy)
Kathy Donoho (severe degenerative arthritis)
Linda Ferguson (blind)
*Sheila Grady (deaf)
Van Gunn (deaf parents)
Deborah Gunter (deaf parents)
Vickie Harris (quadriplegic)
**Mary Jo Leddy (nondisabled)
Rand Metcalfe (cerebral palsy)
Johann Paoletti-Schelp (deaf parents)
***Lee Sanders (quadriplegic)
Quentin Smith (health care professional)

*Part-time (hourly) peer counselor for the deaf
**Full-time JVC Volunteer
***Full-time VISTA Volunteer

In addition to these very significant roles played by persons with disabilities or significant knowledge of disability, certain recent initiatives have been undertaken to further enhance the involvement of disabled persons in the planning and operation of the center. These initiatives are discussed in detail in a later section of this proposal.

3. The center director will commit effort to seeking ways to continue operation of center programs beyond the initial grant period.

During the past year of operation, Title VII, Part B funds have continued to provide the primary source of financial support for center activities. These federal funds have been augmented by state general revenue funds provided through the Texas Rehabilitation Commission. A concerted effort has been put forth to secure funding from other sources to support center activities. In addition to improving the efficiency of management functions to comply with requirements for continued state funding, efforts have been put forth in preparation of a request for funding from the United Way as well as from two local foundations in the Houston area. These efforts are in addition to funding being sought through various grant-related activities at the center that are project-specific. Over the past year, financial support for center activities has been received from the following sources:

- The Longenbaugh Foundation
- Southwestern Bell Telephone Company
- The Houston Parking Association
- St. John's United Presbyterian Women's Group
- Texas Eastern Company
- Gerland's Food Fair Supermarkets
- Adams Petroleum Center
- Houston Area Rehabilitation Association
- Loomis Answering Service
- Gulf Coast Combined Federal Campaign (United Way)
- Baylor College of Medicine
- Contract funds from the Deaf Council of Greater Houston
- Fees for Provision of Interpreter Services
- Fees for Provision of Technical Assistance
- Fees for Sign Language Classes
- Gifts from Individuals
- Gifts from Other Organizations

With fund-raising activities underway, it is anticipated that this listing will increase significantly within the next three to six months and that a far larger percentage of support for center activities will come from non-Title VII sources.

4. A major project objective will focus upon advocacy for both disabled individuals and groups of disabled individuals...advocacy will be viewed as a thread that permeates all activities and services of the center.

Advocacy continues to constitute one of the major activities of the center, its staff, and its Board of Directors. The center has continued to retain the services of an attorney, funded from non-Title VII sources, to provide legal counsel and advocacy without cost to severely disabled clients. The

services are augmented by advocacy training for clients that includes both planned classes and one-to-one peer counseling. The existing services have recently been supplemented by the acquisition of the services of a part-time deaf peer counselor who will be paid through non-Title VII funds.

HCIL continues to work cooperatively with a variety of community agencies in advocating for the rights of disabled persons. The areas in which advocacy services are provided have been somewhat expanded to include more active involvement in advocacy activities that are intended to protect the legal rights of disabled individuals. Specific advocacy-related topics with which HCIL staff are involved include the following:

- expanded educational opportunities;
- improved access to housing, public facilities, and transportation;
- expanded employment opportunities;
- participation in recreational, social, and cultural activities;
- application of technology to reduce the effects of disability;
- legislation and public policy affecting the disabled;
- protection of disabled persons' legal rights;
- promotion of issues relevant to independent living for disabled persons

Specific initiatives relating to the advocacy efforts of HCIL are discussed in more detail in an ensuing section of this proposal.

5. Considerable emphasis will be placed upon outreach activities to make services of the center available to severely disabled individuals who cannot ordinarily participate in the service delivery system and who are in dire need of services.

The restructuring of center staff positions that became effective on November 1, 1983, eliminated the position of outreach specialist as a separate position. The reasons for eliminating the position were two-fold. First, the entire staff of the center was and remains actively involved in outreach activities. Second, it is fairly self-evident that a single person cannot be an expert in the intricacies of all facets of the center. Each staff member has his/her own areas of interest and expertise that can be drawn upon in presenting relevant information to particular audiences. As a result of this change in structure, the staff have made conscientious efforts to become more aware of the various programs and activities of the center and to improve their skills as presenters and spokespersons for the center in particular and independent living in general.

Two new public service announcements for local television have been produced in the past year; the number of presentations to social and civic groups has increased dramatically, and the participation of various HCIL staff and Board members in various committees and community activities has increased significantly. In fact, because of staff limitations and service delivery commitments, it has become necessary to carefully monitor the demands associated with outreach activities in order to avoid over-commitment by the staff. Fortunately, the modified staff structure allows for adequate back-up in most positions to free up staff for presentations in most situations.

It should be noted that priority is given to outreach activities in regard to minorities and HCIL has been quite successful in recruiting minority clients.

The relationship between HCIL and the Texas Rehabilitation Commission has continued to be excellent. A TRC liaison counselor works closely with the center at the local level and the TRC central office continues to provide substantial support and technical assistance in the areas of program planning, fiscal management, and program evaluation. The number of referrals for client services, excluding information and referral only, remains high with 16 new TRC-referred clients completing the intake process in the first three months of calendar year 1984 alone. A more detailed discussion of current and future outreach efforts is provided in the ensuing sections of this proposal.

6. A major objective will involve making the activities and services of the center available and meaningful for a broad range of disability groups.

The services of HCIL have traditionally focused upon the two disability groups in the Houston area for whom the least amount of services were available. Those two groups are the deaf and the mobility impaired. The majority of clients being served by the center continue to be from these two groups. During the past year, however, a conscious effort has been put forth to identify and serve persons with disabilities other than hearing impairment or mobility impairment. Since these efforts were initiated, a significant increase in the numbers of clients with cerebral palsy, learning disabilities, closed-head injury, and non-spinal cord injury neurological problems has been noted. Although most persons with visual impairments are referred to the Commission for the Blind or an affiliated agency, blind and visually impaired individuals are provided services where appropriate.

OTHER HCIL ACTIVITIES:

The restructuring of HCIL staff has resulted in a more responsive and dynamic organization. Several major activities of the center are indicative of the commitment of center staff to the enhancement of quality of life for disabled persons and are worthy of additional discussion. These include the following:

1. Initiation of a major housing program for mobility impaired individuals.

This program probably represents the most ambitious new initiative undertaken by the center in the past 12 months. Working with the Houston City Council, the Houston Housing Authority, the Texas Department of Human Resources, Independent Life Styles, Inc., and several private residential management/development companies, the center has encouraged the modification or new construction of 65 apartment units in various sections of Houston since August, 1983. With HCIL acting as the primary contact and screening agency for identifying mobility-impaired persons requiring wheelchair-accessible living accommodations, 42 persons have been placed in these units with appropriate support services such as rent subsidy, attendant care, and transportation. An additional 21 clients have been identified for existing units and are waiting for inspections and other paperwork to be completed prior to relocation. Similarly, four additional builders/developers have expressed an interest in modifying existing units or initiating new

construction of wheelchair-accessible units and HCIL is serving in a consultant role for these new initiatives.

2. Initiation of an Independent Living Services Program.

Another major new activity of the center relates to its collaboration with the Texas Rehabilitation Commission in a program to provide independent living support services to disabled persons who are ineligible or inappropriate for TRC's Vocational Rehabilitation Program. HCIL is the primary referral source to TRC for this program and the services are designed to augment services available through the center. Examples of available services to independent living clients are wheelchairs, adaptive equipment, TTY's, physical restoration, etc. Approximately \$90,000 of TRC state funds are committed to HCIL clients during the current year and all clients served through this program are joint TRC/HCIL clients. More than 20 clients have been served through this program since January 1, 1984, and an additional 20 referrals are pending for services. The purpose of these services, like those provided directly by the center, is to enable severely disabled individuals is to enable severely disabled individuals to live as independently as possible in their respective families and communities.

3. The cooperative program with Richmond State School.

A program that has produced very remarkable results is the cooperative program that HCIL has been operating with the Richmond State School for the mentally retarded. Since that program was initiated in 1983, 18 residents of the school, with varying degrees of mental impairment and/or learning disability, have been involved in independent living training programs through the center. Virtually all of these individuals have spent the greatest portion of their lives in institutional environments and, as a direct result of HCIL services, four have already moved into community living settings. An additional four clients are preparing to move to community settings after completion of their training at HCIL. This program represents an excellent example of what can be accomplished through cooperative efforts of a center for independent living and a state school for the mentally retarded.

4. Maintenance of a high-quality deaf services component.

The deaf services component has always been one of the strongest service delivery components of the center. As recent service delivery statistics indicate, deaf services continue to constitute a major portion of services delivered. The demand for deaf services continues to grow and the center employs a staff interpreter to deliver interpreting services in the community. Additional interpreter services are coordinated through the center and, in response to identified needs, the center has recently acquired the services of a deaf peer counselor to work with clients as needed. Funding for the deaf peer counseling services will come from sources other than Title VII funds. The center currently serves an average of 250 deaf or hearing impaired clients per month and, in addition, provides an average of nearly 1,000 TTY/voice exchange services per month.

5. Ongoing advocacy efforts.

In the area of advocacy, one particular initiative of the center deserves mention. Members of the HCIL staff and CBFL Board have been actively involved in reviewing and modifying the building codes of the City of Houston to enhance accessibility to public facilities for all citizens, regardless of disability. Two HCIL staff and two CBFL board members have been serving on the Houston Task Force on Architectural Barriers and have been actively involved in formulating recommendations for changes in the city building code that will insure accessibility for severely disabled individuals. The recommendations formulated will include not only standards for construction of facilities, but also strategies for enforcement of the codes as well.

6. Expanded instructional programming.

The center's instructional programming has also been considerably expanded in the past year to include six new instructional programs. These include the following:

- Job-seeking skills for deaf client
- Living arrangement for mobility-impaired clients
- Mobility options for mobility-impaired clients
- Time management for mobility-impaired clients
- Conversational sign language
- American sign language

These classes have been well-attended with an average of eight persons in each class. Additional classes are being scheduled and cooperative agreement to provide independent living skills training to selected clients at the Richmond State School has been finalized. Funding for the program was provided through a grant from the Texas Commission for the Deaf to the Deaf Council of Greater Houston with HCIL serving as the primary technical assistance resource for identification of faculty, preparation of instructional materials, and program implementation. This represents an excellent example of the collaborative relationships that HCIL has cultivated with other community agencies serving disabled persons.

7. Other accomplishments.

In addition to the above-referenced major programmatic endeavors, HCIL has also participated in numerous other programs and activities designed to enhance community living for disabled persons. These include the following:

- Establishment of a mechanism for monitoring the quality of transportation services provided by the Houston Metrolift system;
- Development of a new system for documenting information and referral activities of the center;
- Convening of a consumer advisory board and a service provider advisory board to monitor the quality of deaf services provided through the center;
- Upgrading of case management procedures to provide better follow-through in the client management process;

- Planning and implementation of numerous workshops and seminars focusing upon issues in independent living;
- Offering of two major social gatherings within the center, each of which attracted more than 100 persons, including disabled clients, service providers, and friends of the center;
- Participation in the planning for the city multiservice center being established for disabled persons;
- Initiation of a voter registration drive to enroll disabled persons in the electoral process;
- Implementation of an instructional program to teach health care professionals in hospitals about the rights of deaf and hearing-impaired patients and approaches for protecting those rights.

With respect to the six specific management/administrative objectives formulated in previous continuation grant applications, a great deal has been accomplished. Progress to date can be summarized as follows:

1. Restructuring of the HCIL bookkeeping system. A qualified accountant has been added to the staff of the center and his efforts in upgrading the accounting system and implementing sound fiscal management procedures have been quite successful. Moreover, the fiscal management policies and procedures of the center have been recently reviewed and revised to promote greater fiscal accountability.
2. Acquisition of technical assistance regarding program and personnel evaluation. Program evaluation continues to be provided by the Texas Rehabilitation Commission and a recent evaluation of the center's activities indicated that substantial improvement had occurred in virtually all aspects of the center's operation. Procedures for personnel evaluation have been significantly improved through the efforts of the new executive director who has a Master of Science Degree in the Health Care Administration and extensive experience in personnel management. In addition, technical assistance in case management has been provided by both the Texas Rehabilitation Commission and The Institute for Rehabilitation and Research. Additional evaluative data concerning deaf services will be forthcoming from the advisory boards being established to review and comment on this service delivery component.
3. Review of CBFL and HCIL organizational structure to increase involvement of community leaders. The make-up of the CBFL Board continues to reflect broad-based community support. Moreover, the establishment of the aforementioned advisory boards is intended to enlist additional community support from the deaf community. The activities of HCIL staff on various advisory boards, etc., have also been instrumental in garnering the support of community leaders.
4. Improvement of special transportation services for the disabled in the Houston area. HCIL and CBFL have been extremely active in advocating for improved transportation in the Houston area for disabled individuals. Recent efforts in this regard have begun to yield results and a definite improvement in the quality of public transportation for disabled individuals has been noted.

HCIL has initiated a system for dealing with consumer complaints regarding the transportation system and making those complaints known to city management.

5. Refinement of HCIL job descriptions. The restructuring of center staff in late 1983 required the revision of job descriptions. The new job descriptions are more detailed and provide more specific guidance for employees.

PROJECT NARRATIVE (Austin Resource Center for Independent Living)

The following narrative focuses upon the degree to which the Austin Resource Center for Independent Living has met the basic objectives of the project. Particular emphasis is placed upon the fourth year's activities as previous years have been adequately covered in continuation grant applications and project performance reports.

1. Develop a system for providing or coordinating independent living services.

The Austin Resource Center for Independent Living has had outstanding success in meeting this objective during the past three and three-quarter years. A well-managed comprehensive program of services has been developed and the various program components are closely coordinated to provide maximum benefit to the clientele served. The services currently offered are as follows:

- A. Intake Services
- B. Information and Referral
- C. Outreach Services
- D. Independent Living Skills Training
- E. Peer Counseling
- F. Financial/Legal Advocacy
- G. Coordination of Personal Care Attendant Services
- H. Housing, Counseling, and Referral
- I. Job Development and Placement
- J. Transitional Residential Services
- K. Shared Attendant Services

Client statistics for the ARCIL program reflect the degree to which the program is finding and serving severely disabled individuals. During the first three-quarters of the current budget year, the center served 134 severely disabled clients, not counting those individuals who received information and referral as the only service. These clients received a total of 361 services, not including information and referral. Finally,

a total of 350 information and referral services have been provided thus far this year. Since these statistics reflect only the first three quarters of the year, final numbers will be appreciably higher. More detailed statistics concerning client services, client characteristics, referral sources, etc., are provided in the ARCIL quarterly reports (Appendix D).

As a result of the center's ongoing assessment of client needs, a major new program activity will soon be added. This involves the development of a "shared attendant" program for ARCIL clients. The need for this program became apparent as ARCIL staff sought independent living options for severely disabled clients who needed more than the state-allotted 20 hours of attendant care per week. Most such clients only receive SSI benefits and thus also require subsidized housing that is accessible. ARCIL located six wheelchair-accessible, rent-subsidized apartments that were in close proximity to each other and vacant. A proposal was then developed and submitted to the Department of Human Resources for 24-hour attendant care to be shared by these six clients. After extensive research and negotiation, DHR has agreed to fund the program. ARCIL is currently advertising for program staff and plans to begin services by June 1, 1984.

ARCIL has continued to operate its transitional living facility (Herndon House) during the current year. Through this program, intensive services have been provided to a total of 12 severely disabled clients. Thus far, three have moved into more independent settings, five are still in training, and three have returned to former settings with increased independent living skills. Activities this year have been focused upon obtaining certification from the Texas Rehabilitation Commission in order that reimbursement for TRC clients can be received by the center. This certification was received early this year and TRC sponsorship of clients is now underway. Also, further remodeling is taking place to enclose a patio, thus creating a dining/recreation room for residents. Community Development block grant funds were obtained from the City of Austin for this purpose. Developmental Disabilities funding was received to continue the program as were funds from the City of Austin, Travis County Human Services, and the Department of Human Resources. Private donations resulted in the purchase of a new refrigerator and washing machine and labor for cleaning, painting, and landscaping the house has been donated. It should be noted that this component is totally funded from sources other than Title VII, Part B.

The ARCIL administration and staff are keenly aware of the fact that in order to receive maximum benefits for its clients, ARCIL services must be closely coordinated with the services of other community resources. The following is a list of organizations with which ARCIL has a close working relationship:

- University of Texas, Services for Handicapped Students
- Capital Area Rehabilitation Center
- Austin State Hospital
- Texas Department of Health
- United Cerebral Palsy of Austin
- Austin/Travis County Department of Mental Health/Mental Retardation
- Austin Parks and Recreation Department
- Veterans Administration
- Texas Parks and Wildlife Department
- Austin Women's Center

- Association for Retarded Citizens, Austin
- Department of Human Resources
- Local home health agencies
- Local nursing homes
- Local hospitals
- Austin Housing Authority
- Travis County Housing Authority
- Texas Rehabilitation Commission
- Texas Commission for the Blind
- Texas Commission for the Deaf
- Travis Medical Supply
- Patterson House
- Alameda House
- Austin Independent School District
- City of Austin Human Relations Department
- City of Austin neighborhood centers
- Austin State School
- Travis State School
- Vaughn House
- Texas Association for the Deaf
- Coalition of Texans with Disabilities
- Travis County Services for the Deaf
- Austin Area Human Services Association
- Governor's and Mayor's Committees for Disabled Persons
- Governor's Planning Council for Developmental Disabilities
- Lutheran Social Services
- Austin Community College
- Austin Volunteer Center
- Lift Aids of Texas
- Community Bound
- Goodwill Industries
- Action
- National Coalition of Independent Living Programs
- Texas Rehabilitation Association
- Muscular Dystrophy Association
- Secretary of State, Voter Registration Office

2. Persons with severe disabilities will participate in policy-making, management, and staff roles in the center.

The majority of the ARCIL Board of Directors are severely disabled. Their disabilities include cerebral palsy, severe spinal cord quadriplegia, polio residuals, blindness, etc. Similarly, the ARCIL staff includes persons with a variety of disabilities. Of the 13 total ARCIL staff members, including those funded by sources other than Title VII, Part B, eight are severely disabled. The disabilities represented include spinal cord quadriplegia, blindness, cerebral palsy, and polio residuals. The executive director of ARCIL is quadriplegic as a result of spinal cord injury.

3. The center director will commit effort to seeking ways to continue operation of center programs beyond the initial grant period.

This year's fund-raising efforts have been quite fruitful for the ARCIL program. ARCIL successfully obtained funding from the Department of Human

Resources in the amount of \$30,000 for the Herndon House program and \$67,000 for the new shared attendant program. ARCIL's endowment fund has grown from \$40,000 to approximately \$70,000. Other small fund-raising efforts have added revenue to the program through cooperative efforts with the Coalition of Texans with Disabilities and local fund-raising organizations. The second annual barbeque was held to honor ARCIL founders and was instrumental in recruiting new founders and renewing efforts of current founders. The transitional living component, Herndon House, received certification by the Texas Rehabilitation Commission which allows for TRC reimbursement for their clients. Finally, the Texas Rehabilitation Commission has allotted state general revenue funds to augment the general operational funding for ARCIL through Title VII, Part B. State general revenue funds are also utilized by the Commission to provide independent living services to ARCIL clients, thus increasing the scope of services offered. These services are provided in the same manner as discussed earlier in this proposal.

4. A major project objective will focus upon advocacy for both disabled individuals and groups of disabled individuals...advocacy will be viewed as a thread that permeates all activities and services of the center.

Advocacy efforts at ARCIL have always been considered an integral part of the center. In addition to numerous advocacy services provided to individual clients of the center, ARCIL staff have participated in public hearings, committee meetings, and other forums dealing with a wide variety of issues related to disabled persons. Of particular note this year, ARCIL staff have taken an active role in assisting disabled people to register to vote, to understand their voting rights, and to avail themselves of adaptive voting methods available to them. Additionally, ARCIL sponsored, along with four other disability organizations, a candidate's forum at which candidates for state office presented their views on disability issues. Staff have also participated with the Secretary of State's office in an attempt to better educate election officials about voting methods for disabled persons. Much effort has been taken by ARCIL staff to promote compliance with a new Texas law requiring accessibility of public polling places.

Another major advocacy effort involves the preservation of "lifeline" telephone services for disabled and elderly persons. This service is based upon the fact that having a telephone creates greater security and promotes the independence of disabled persons. "Lifeline" rates insure that persons on fixed incomes would be able to afford telephones despite the escalating costs for regular service.

ARCIL staff have participated in advocacy efforts related to other issues such as accessible transportation, housing, attendant care, recreation, legislation, and employment. Also, ARCIL staff serve on various boards and committees that involve advocacy roles. These include the following:

- Texas Rehabilitation Association, Board of Directors
- Texas Rehabilitation Commission, Consumer Consultation Committee
- Texas Commission for the Blind, Consumer Advocacy Committee
- Governor's Committee for Disabled Persons
- Mayor's Committee for Disabled Persons

- Coalition of Texans with Disabilities
- Developmental Disabilities Council
- Fair Housing Task Force
- Austin Human Relations Commission
- Austin Manpower Advisory Committee
- Disabled Women's Group

5. Considerable emphasis will be placed upon outreach activities to make services of the center available to severely disabled individuals who cannot ordinarily participate in the service delivery system and who are in dire need of services.

Outreach continued to be a major focus of the ARCIL program this year. Contacts with many disability groups, community organizations, and agencies were maintained and developed throughout the year. Newspaper, radio, and television contacts provided continuing cooperation in coverage of important events and in disseminating information about ARCIL. In addition, numerous presentations to a wide variety of organizations have been an integral part of ARCIL's outreach efforts this year.

Upgrading the ARCIL newsletter has been a recent priority. The format has been changed to provide a more professional appearance and content has been increased to address a wider range of interests while still providing information about ARCIL.

Preparation for computerizing the newsletter mailing list has been made. This will increase ARCIL's ability to network within the community.

The ARCIL brochure is in the process of being revised to more accurately reflect current services. The new format will include services developed since the original format was developed.

Advances were also made this year in recruiting for categories other than "founder" in the Friends of ARCIL Committee. Aside from the fund-raising benefit of these efforts, they serve to significantly increase involvement of clients and other individuals with ARCIL.

In response to national, state, and local emphasis on voter registration, outreach efforts were also focused on involving disabled persons in the election process. Information packets on the voting rights of disabled persons were developed and disseminated to voter registration drives, legislative and election staff, and disabled persons. ARCIL staff were deputized to register persons to vote and coordination of registration efforts with disability groups was accomplished. In addition, ARCIL and several other organizations sponsored a candidates forum. The election and registration work has afforded contacts with several minority organizations with which ARCIL has not had much previous involvement. Minority recruitment has been and will continue to be a priority outreach effort for ARCIL.

A special outreach project begun this year focused on disabled women. A conference addressing disabled women's issues was held and, due to public demand, an ongoing discussion group has evolved from the initial conference. Originally the project had targeted disabled women under the age of 18 who

were living at home. However, demand was such that the focus was expanded to all disabled women.

6. A major objective will involve making the activities and services of the center available and meaningful for a broad range of disability groups.

Since its inception, ARCIL has attempted to make its services available to clients with a wide range of disabling conditions. The center has been reasonably effective in this objective and the disabilities served include blindness, deafness, orthopedic impairments, amputation, mental illness, mental retardation, and a variety of other impairments. Traditionally, orthopedic and "other" impairments have been the largest groups served and the current project year is no exception. It should be noted, however, that efforts during the past year to increase ARCIL's involvement with the elderly disabled have been quite successful. That effort was directed toward making the center's services available to the ever-increasing disabled geriatric population.

OTHER ARCIL ACTIVITIES:

In keeping with ARCIL's commitment to effective management and accountability, a number of specific objectives were formulated and reported in the last continuation grant application. The following accomplishments have been documented for the first three-quarters of the current year in regard to those objectives:

1. Three hundred fifty requests for information and referral have been provided.
2. Twenty-six disabled persons have been evaluated in terms of their need for advocacy services and appropriate services provided.
3. Twenty-eight disabled persons have received extensive financial and/or legal advocacy.
4. Technical assistance regarding right and benefits has been provided in the following ways:
 - Twelve individual requests filled
 - Twenty-two workshops provided
 - Nine forums attended with testimony provided
 - Eighteen articles written and published
5. Thirty-one disabled individuals have found personal care attendants through ARCIL referrals.
6. Five hundred six client contacts have been made to provide referrals and/or counseling regarding attendant care.
7. Fifty-five personal care attendants have been screened with 15 receiving training in attendant work.

8. Fifty-five disabled persons have been evaluated regarding their need for job development services and 33 have received services in this area.
9. Twenty-six disabled persons have been placed in competitive employment this year.
10. Forty-seven disabled persons have been evaluated regarding their need for housing services and 26 have been placed in new housing situations.
11. Technical assistance in the housing area has been provided to 13 individuals and seven sites have been surveyed regarding physical accessibility.
12. Six new attendants for the transitional living facility have received a total of 69 hours of training.
13. A total of 1,459 hours of training in independent living skills has been provided to the residents of the transitional living facility.

PROGRAM EVALUATION (both centers):

Program evaluation has been considered a major priority of both the Texas Rehabilitation Commission and the centers for independent living since the inception of this project and it will continue to be so in the future. Its purpose, as viewed by both the Commission and the centers, is to assure delivery of meaningful, effective, independent living services from both qualitative and quantitative perspectives. Moreover, program evaluation activities are focused upon assuring that services are delivered within the philosophical context of the independent living movement (substantial consumer involvement, etc.), are in compliance with relevant state and federal laws and regulations, and are delivered in accordance with generally accepted standards of accountability.

Program evaluation strategies and activities by the centers include the following:

1. Collection and analysis of data concerning client characteristics, referral sources, services provided, relationships with other agencies and organizations, client progress, etc.
2. Regular staffings to acquire staff input regarding program effectiveness, client progress, identification of problem areas, and recommended solutions.
3. Utilization of questionnaires and related measures to obtain input from clients and referral sources regarding the effectiveness of services, problem areas, and additional service needs.

Program evaluation of center activities conducted by the Texas Rehabilitation Commission include the following:

1. Review and analysis of statistical and narrative reports by the centers on a quarterly and annual basis. This review and analysis includes comparison of current activities and performance of the centers with past performance reports.
2. Regular on-site evaluations of center activities and performance. These on-site evaluations include review of client and administrative records, inspection of physical premises, and analysis of the degree to which the centers are meeting planned objectives. Results of on-site evaluations are provided in written form to the centers' executive directors and board presidents including deficiencies noted, recommendations for improving areas of deficiency, and recommended technical assistance if necessary and appropriate.

In addition, the following evaluation plan and current performance levels are submitted regarding Section 711(c)(3) requirements:

1. Accurate statistics are and will be maintained by the centers concerning the numbers and types of handicapped individuals assisted (see Appendices for current performance data).
2. Accurate data is and will be maintained concerning the extent to which individuals with varying handicapped conditions are served (see Appendices for current performance data).
3. The centers currently offer the following comprehensive programs of independent living services:
 - A. Information and Referral
 - B. Community Development and Education
 - C. Outreach Services
 - D. Employment Assistance
 - E. Independent Living Skills Training
 - F. Housing Counseling, Assistance, and Referral
 - G. Transportation Counseling, Assistance, and Referral
 - H. Transitional Residential Services
 - I. Personal Care Attendant Services, and Referral
 - J. Peer Counseling
 - K. Advocacy

L. Accessibility Consultation

M. Interpreter Coordination

N. TTY/Message Relay Services

(NOTE: Some services are available in only one center)

(See Appendices for current performance data)

4. Accurate financial records are and will be maintained concerning sources of funding for center activities (see budget and above narrative for current funding data).
5. Data will be maintained concerning the percentage of resources committed to each type of service provided.
6. Client records are and will be maintained to document how services provided contributed to the maintenance of or the increased independence of handicapped individuals assisted. These records will be periodically reviewed by administrative staff to determine the effectiveness of services delivered.
7. Handicapped individuals have played the primary role in management and decision-making in the center since the inception of the program. Administrative efforts will be directed at assuring continuation of this role by handicapped individuals in the future (see above narrative for current performance regarding this issue).
8. Considerable effort has and will continue to be directed toward capacity building activities including collaboration with other agencies and organizations (see above narrative for current performance regarding this issue).
9. Considerable focus has been and will continue to be directed toward catalytic activities to promote community awareness, involvement, and assistance (see above narrative for current performance regarding this issue).
10. Outreach efforts are and will continue to be a major priority of the centers and the impact of those efforts is analyzed in terms of the numbers of clients referred by various community resources and served by the center (see above narrative and Appendices for current performance regarding this issue).
11. Prior years' activities will be compared on a regular basis with the most recent year's activities. This comparison will include all of the evaluation areas noted above in this section.

APPENDIX A

HCIL HOUSTON CENTER FOR INDEPENDENT LIVING
(a service of the Coalition for Barrier Free Living)

November 27, 1983

Mr. Ted M. Thayer
Program Specialist
Texas Rehabilitation Commission
118 East Riverside Drive
Austin, Texas 78704

Dear Ted:

Please find attached the Quarterly Report for the First Quarter of Year Four of Title VII, Part B Funding from TRC. As I did with the previous report, I picked up from the point where the last reporting period left off, in this case August 1, 1983. This report covers the entire months of August, September, and October 1983. This arrangement has worked out well for me, since the changes in staff associated with restructuring of the Center will produce program changes in the next quarterly report that would be more awkward to report if I had to "change horses in mid stream." As it works out the beginning of my next reporting cycle corresponds to the date that the staff changes went into effect.

I believe that this report is thorough and accurate. Please let me know if any additional information is required.

Sincerely



Quentin W. Smith
Executive Director

Attachment

cc: CBFL Board of Directors
Mary Valentini
Jim Brinfdley

COALITION FOR BARRIER FREE LIVING/
HOUSTON CENTER FOR INDEPENDENT LIVING
First Quarterly Report for the Fourth Year
Title VII, Part B Funding
August 1, 1983 - October 31, 1983

The first quarter of funding for the fourth year of operation of HCIL represents a period of restructuring and stabilization for the Center. With the hiring of a new Executive Director and the election of a new Board of Directors for the Coalition for Barrier Free Living (CBFL), many staff members and representatives of other community agencies expressed the opinion that they were anticipating significant growth for the Center and the assumption of a major role as a service provider within the community. The continued funding provided through TRC at levels somewhat higher than in previous years, also represents a source of considerable optimism for the Center and its operations.

ORGANIZATION

This period could best be described as a period of major restructuring for HCIL. With the assumption of the Executive Director's position by Quentin Smith in late August, a two-month assessment of HCIL and its service delivery components was begun. Upon assuming the E.D.'s position it became fairly obvious that certain components of the Center were not operating as effectively as they should be. This was especially true for the Information and Referral component and the Outreach component of the Center. These two components, though providing fairly extensive services, were poorly defined in terms of responsibilities and reporting requirements. Many staff members were involved in I&R and/or Outreach, but often failed to properly record service encounters. It was obvious as well that the people who were most appropriate for I&R and outreach activities for mobility-impaired clients might be less appropriate for I&R and Outreach activities for hearing-impaired clients and vice versa. What was less obvious, however, was whether it was necessary to bring in new staff to handle some of these responsibilities or whether the situation could be remedied through restructuring of positions and reassignment of existing staff.

After approximately 45 days of observation and assessment, the Executive Director made the decision to restructure positions and reassign staff. Following consultation with individual members of the staff, new job descriptions were prepared that eliminate the positions of Outreach Specialist, Information and Referral Specialist, Peer Counseling Specialist, and Special Services Coordinator. New positions will be created that combine I&R, Outreach, and Peer Counseling into one job description under the title of Community Services Coordinator. Two people will be assigned to this position. Because of the scope of the position, two people will be able to provide support and back-up for each other in meeting the diverse needs of the community. The focus for these two people will be on mobility-impairment. Hearing impaired and deaf clients will be referred to the Deaf Services Coordinator for Information and Referral services. The Deaf Services Coordinator will be responsible for interpreter coordination, TTY/Voice Exchange services, I&R for hearing impaired and deaf clients, and Outreach activities designed to reach this same population. The Deaf Services Coordinator will be assisted in this job by a Staff Interpreter, for whom 50% funding from Title VII funds is being requested. It is anticipated that 50% of this full-time staff person's time will be devoted to interpreting assignments

for which he will be paid from fees for service. The other 50% of his time will be devoted to assisting the Deaf Services Coordinator in I&R, Outreach, Interpreter Coordination, and TTY/Voice Exchange services; Title VII funds will be used to support this portion of the position. The new position of Instructional Program Coordinator will be created to plan and implement independent living skills modules and other appropriate learning activities for clients, including hearing impaired and mobility impaired people, as well as professionals and others within the community.

These staff changes are scheduled to go into effect on November 1, 1983. Copies of the new job descriptions can be found in Appendix A.

In addition to these organizational changes in the HCIL structure, the CBFL Board of Directors has undergone some changes that should ultimately benefit the delivery of services within the community. Following a vote by the membership in September, the size of the Board was reduced from 15 to 13 members. The reductions resulted from the combining of the Telephone Committee Chair position with the Membership Committee Chair position; combining the Newsletter Chair position with the Community Relations Chair position; assigning the Program Chair responsibilities to the Vice President, thereby eliminating that position on the Board. In addition, the new Board position of Nominations, Elections, and Awards Chair was created to bring some consistency to the nominations and elections process and to provide a vehicle for recognizing the contributions of people within the community.

These Board changes should make the Board more efficient and should eliminate some of the ambiguity that has existed relative to responsibilities. The Board has also created an ad hoc committee to develop job descriptions for Board members, further defining the roles of various Board members and allowing for greater accountability. The job descriptions should be finalized by the end of calendar year 1983.

These changes in the organization of HCIL and the CBFL Board are expected to significantly improve the operations of both entities.

PERSONNEL

Several personnel changes occurred in the Center during this reporting period. These include:

Quentin Smith - assumed position of Executive Director (part-time on August 16, 1983, full-time on September 1, 1983).

Van Gunn - resigned from position of Outreach Specialist on August 15, 1983 for personal reasons.

Mary Jo Leddy - assumed position of Jesuit Volunteer Corp (JVC) Volunteer Coordinator on August 13, 1983.

William Richard - resigned from the position of Accountant on September 23, 1983 to assume his former position as an accountant with NASA.

Rand Metcalfe - assumed position of Accountant on September 26, 1983.

Linda Ferguson - assumed position of Receptionist/Clerk Typist on September 16, 1983.

Johann Paoletti-Schelp - assumed position of Interpreter Coordinator on permanent basis on September 16, 1983 (had been Acting Interpreter Coordinator since June 30, 1983).

Bill Richard and Van Gunn had made very substantive contributions to the Center and their presence will be missed. Bill, more than anyone else, was responsible for establishing a sound financial management system for the Center that included policies and procedures that insured fiscal accountability. Van had been with the Center for years and was well-known within the community for his work in behalf of hearing impaired and mobility impaired individuals.

Our new staff members are expected to make very significant contributions to the operation of the Center. Rand Metcalfe has a degree in accounting from Texas A&M University and comes to us from a job at NASA. Linda Ferguson comes to us from the Lighthouse of Houston and has considerable experience in switchboard management. Both Rand and Linda are disabled. Johann has done an extremely good job with Interpreter Services in an acting capacity, and his assumption of these duties on a regular basis is welcomed.

The Outreach position will remain unfilled pending the restructuring of staff in November. The restructuring process will change Johann's title to Deaf Services Coordinator, while moving Debbie Gunter to Instructional Program Coordinator. Vicki Harris and Kathy Donoho will become the Community Services Coordinators. This will result in a vacancy in the Administrative Secretary's position and appropriate candidates for the position will be sought.

PROGRAMS

Although this past quarter represented a period of restructuring, some rather significant accomplishments were realized with respect to program areas. These are briefly described in the following paragraphs.

Peer Counseling/Independent Living Skills. A new series of Independent Living Skills Modules was offered during August and September 1983. These modules were attended by mobility impaired clients referred by the Richmond State School, TIRR, and United Cerebral Palsy. As in the past, transportation proved to be a problem and many clients were unable to attend one or more of the modules because of the unreliability of Metro-Lift. Notwithstanding transportation problems, however, this set of modules was described by clients as well as staff as the "best series yet."

A major undertaking by Vicki Harris, Independent Living Skills Specialist, involves a housing project being done jointly with City Councilwoman Eleanor Tinsley's office and L&L Management, a private residential management firm. This project has grown into a very substantial task. After placing the first eleven disabled clients in accessible apartments, efforts were undertaken to identify other people who might be placed appropriately. It has turned

out to be a more formidable task than originally anticipated. The work of determining if potential tenants have the financial support, attendant care services, and other resources necessary for independent living is very time consuming as is the job of coordinating with the various agencies involved, i.e. Department of Human Resources, Houston Housing Authority, Independent Lifestyles, and L&L Management. Approximately 500 people have now been surveyed on housing needs, 23 have been placed in accessible apartments, 10 more are about to be placed in apartments that have been modified, and 24 new units with roll-in showers and central control panels for lighting and other environmental control factors are nearing completion and the task of identifying tenants for these apartments is well underway. Lee Sanders the VISTA Volunteer, has taken responsibility for coordinating the survey of disabled people in the community. Vicki Harris and Kathy Donoho are providing coordination with other community agencies. Sample copies of survey instruments are in Appendix B.

In addition to these major accomplishments, Vicki Harris has been active in a number of Outreach activities that include making a presentation to medical students at Baylor College of Medicine on disability, hosting tours of the Center for Texas Woman's University occupational therapy students, and working with the Southwest Wheelchair Athletic Association in encouraging clients to participate in the annual fishing/fieldtrip to Fenoglio's in Freeport, Texas.

With the restructuring to occur in November, the tasks of planning and implementing instructional programs will fall to Debbie Gunter, Instructional Program Coordinator. Debbie has been conferring with Vicki Harris and several new programs are currently being planned, including a "Good Neighbor" program to assist disabled people with no previous independent living experience in adjusting to community living and a sign language class to improve communication between hearing people and deaf people who use manual language. Vicki Harris and Kathy Donoho will continue to provide peer counseling services to mobility impaired clients and will serve as faculty in instructional programs when appropriate.

Information and Referral. Information and Referral continues to present somewhat of a problem in terms of procedures and documentation. Although the services are being provided, the recording of information on service provision continues to be sporadic and incomplete. New procedures are being developed for implementation in November when the staff assume their new positions. It is expected that the new procedures will eliminate a good part of the problems that have been experienced in the past. Under the new procedures, I&R on housing will be referred to Lee Sanders, I&R on mobility impairment will be referred to Vicki Harris and Kathy Donoho, and I&R on hearing impairment will be referred to Johann Paoletti-Schelp. In each case the persons receiving the I&R call will be aware of the forms to be completed and the procedures to be followed in gathering and reporting data on I&R services.

One particular I&R case is worth mentioning here. In August a 38 year-old woman came into the Center seeking legal help because she was concerned that her brother was trying to have her declared mentally incompetent. The woman, who has a learning disability, had been left a home and sizable estate in the form of cash and investments by her mother who wished that she be provided for at the time of the mother's death several years ago. The woman's

brother, who had also been left a sizable bequest had been trying to arrange for a psychiatrist and psychologist to testify that the woman was mentally incompetent and incapable of managing her own affairs. The brother was seeking power of attorney over the woman's share of the estate. After talking with the woman Vicki Harris referred her to an attorney from the Gulf Coast Legal Foundation who agreed to take the case. The attorney then requested help from Quentin Smith in locating a psychiatrist who could do an independent evaluation of the woman's mental status. Quentin Smith arranged for a faculty member from Baylor College of Medicine to evaluate the woman and his findings were that the woman is mentally competent and capable of managing her own affairs. The case is now in Federal Court and we will continue to monitor it to determine the outcome.

Deaf Services. The growth of HCIL's services to deaf and hearing impaired clients is evidenced by the fact that Houston was the only local council in the state to receive an increase in funding for interpreter services from the Texas Commission for the Deaf (TCD). TCD increased funding to the Deaf Council of Greater Houston by 20% over last year. HCIL has a subcontract with Deaf Council of Greater Houston to provide interpreter and TTY/Voice Exchange services.

With the demand for TTY/Voice Exchange services continuing to grow, hours of service were expanded to provide evening services. TTY/Voice Exchange services are now available Monday through Friday from 9:00 a.m. to 10:30 p.m. TTY/Voice Exchange calls are now averaging approximately 1000 per month.

Johann Paoletti-Schelp and Quentin Smith revised the agreements for interpreter services and prepared a cover letter to be sent with the agreement to agencies which use the service. All agencies which have used interpreter services on a regular basis in the past are receiving the cover letter and a copy of the agreement in order to keep them informed on current procedures and charges. A copy of the cover letter and agreement are provided in Appendix C.

Johann Paoletti-Schelp had another active quarter with respect to community and professional involvement. In addition to meeting with representatives from several community agencies (Deaf-Shop, Deaf Council of Greater Houston, Texas Rehabilitation Commission, Lighthouse of Houston, and others) Johann hosted the first meeting of the Interpreter Support Group at HCIL, addressed a meeting of the Knights of Columbus, did a presentation at a statewide conference of counselors from the Texas Employment Commission, and attended a workshop on Deaf-Blind Sensitivity Training in Dallas. Johann was also asked to serve on the Advisory Board of Houston Community College's Hearing Impaired Program. Johann's ongoing commitment to his profession and his personal development is commendable. His attitude toward his work continues to be excellent and his documentation procedures will provide a model for other components of the Center.

Outreach. Outreach activities continued to be numerous and diverse during this reporting period. With Van Gunn resigning as Outreach Specialist on August 15, 1983, it fell to other staff members to pick up the slack with respect to Outreach. Quentin Smith and Debbie Gunter appeared on two segments of "Mid Day" the University of Texas Health Science Center show offered in the Texas Medical Center. Quentin discussed the Center and its programs and

Debbie discussed services for the deaf and hearing impaired. Quentin also addressed a group of management personnel from the Internal Revenue Service concerning employment of people with disabilities. Debbie Gunter also addressed several hospital groups concerning deafness and hearing impairment and the availability of services to deal with this communication barrier.

One particular event worth noting with respect to Outreach activities, relates to the reception to welcome Quentin Smith to HCIL. The reception, held on September 29, 1983, was attended by approximately 100 people representing community agencies and the media. Many of the attendees were people with disabilities. The comments of the people attending the reception appeared to indicate a very favorable impression of the Center and its services and the overwhelming majority of attendees expressed support for the Center.

With the restructuring of jobs in November, it is anticipated that outreach activities will increase substantially and a revised reporting system is being developed to improve the reporting of these activities. Of particular interest are plans to produce public service announcements on the Center and its programs and to arrange for better media coverage for many of the Center's future activities. Commitments have already been received from Channel 11 and Channel 13 to assist HCIL in these efforts.

SUMMARY

In summary, this three month period has been very productive. The restructuring of positions within the Center, the changes on the Board of Directors for CBFL, and the positive feedback received from community agencies bode well for the future of the Center. Efforts to address the concerns expressed by TRC in their review of the Center and its operations are proceeding at a steady pace and many of the problem areas have already been corrected. Two priorities are of utmost concern for the immediate future, however. These are improving program evaluation and increasing funding for the Center so that services can be maintained and expanded during the next nine months.

New approaches to program evaluation have already been planned and will be implemented in November. These approaches include evaluation by the clients as well as simulation activities to determine if clients have benefited from their experiences at the Center. Staff will also be required to examine their work in a more rigorous fashion and community agencies with which we work will be surveyed concerning HCIL and its services. This multiphasic approach to evaluation should provide a much clearer picture of the strengths and weaknesses of the Center.

The second priority area--fund raising--will require significant areas in diverse areas, including grant-writing, solicitation of gifts and contributions, and the implementation of fee-for-service activities to generate revenue. Work on these activities has already begun, but a good deal more effort will need to be expended if we are to continue to see growth and improvement within the Center.

With these two priorities established for the immediate future, the Center has its work cut out. We have made considerable progress over the past three months, but the major work is still ahead of us.

OFFICE OF HUMAN DEVELOPMENT
REHABILITATION SERVICES ADMINISTRATION
WASHINGTON, D.C. 20201

OMB No.

COMPREHENSIVE SERVICES FOR INDEPENDENT LIVING

QUARTERLY REPORT FOR THE PERIOD ENDING October 31, 1983, TITLE VII, PART B FUND:

PRIMARY
GRANTEE

Name Houston Center for Independent Living	Phone No. (713) 795-4252
Number and Street 6910 Fannin, Suite 120	State Zip Houston, Texas 77030

CHARACTERISTICS OF CLIENTS SERVED DURING THIS REPORT PERIOD

AGE	No. Served	RACE	No. Served
(1) Under 21	15	(1) White	466
(2) 21-29	118	(2) Black	88
(3) 30-39	72	(3) American Indian or Alaskan Native	
(4) 40-49	44	(4) Asian or Pacific Hispanic	47
(5) 50-59	24	(5) Not Available	231
(6) 60 and Over	5		
(7) Not Available	554*		

SEX	No. Served	VR AGENCY REFERRALS	No. Served
(1) Male	465	(1) Referred to VR	
(2) Female	367	(2) Referred from VR	26

DISABILITY	LIVING SITUATION AT REFERRAL				
	ALONE	RELATIVES OR FRIENDS	FOSTER OR GROUP HOME	INSTITUTION	OTHER
(1) Blind					64*
(2) Deaf					336*
(3) Orthopedic Impairment	12	11		2	
(4) Absence of Limbs					
(5) Mental Illness				1	
(6) Mental Retardation				19	178*
(7) Other Impairments	7	11			

SERVICES PROVIDED CLIENTS DURING THIS REPORT PERIOD Non-disabled 19

SERVICES	SOURCE OF SERVICES	PROGRAM STAFF	PUBLIC AGENCIES	PRIVATE AGENCIES
		No. Served	No. Served	No. Served
(1) Information & Referral Only		89		
(2) Intake Counseling		19		
(3) Diagnosis and Evaluation				
(4) Attendant Care Counseling		21		
(5) Attendant Care Assistance				
(6) Rights & Benefits Counseling		8		
(7) Peer Counseling		37		
(8) IL Skills Counseling & Training		63		
(9) Housing Assistance-Independent		675		
(10) Housing Assistance-Group Living				
(11) Special Services-Blind				
(12) Special Services-Deaf		3,055		
(13) Vocational Services		7		
(14) Health Services				
(15) Physical Restoration				
(16) Transportation Assistance		17		
(17) Social & Recreational Services		9		
(18) Homemaker Services				
(19) Emergency Services				
(20) Other Services				

*Information not requested on housing survey

**Information not collected for I&R clients

HCIL HOUSTON CENTER FOR INDEPENDENT LIVING
(a service of the Coalition for Barrier Free Living)

April 26, 1984

Mr. Ted Thayer
Director of Independent Living
Texas Rehabilitation Commission
118 East Riverside Drive
Austin, Texas 78704

Dear Ted:

Attached please find the Quarterly Report for the Second Quarter of the Fourth Year of Title VII Part B Funding for the Houston Center for Independent Living. The report is quite lengthy and reflects a very substantial increase in the level of activity over previous quarters. As the report indicates, the Center now finds itself in the position of having a greater demand for services than we have the capacity to meet. I have been and will continue to be devoting a considerable portion of my time to identifying additional sources of funding to support current programs and to allow for expansion of Center services.

I apologize for the lateness of this report, but with administrative requirements, both internal and external, I have had to defer finishing the narrative summary for several weeks. I believe, however, that the report is both comprehensive and indicative of the tremendous effort that HCIL staff have put forth in recent months to improve the quality and increase the quantity of services that we provide to severely disabled people in Houston.

I look forward to seeing you in the near future and appreciate your ongoing support. Should you have any questions concerning this report, please don't hesitate to contact me.

Sincerely,



Quentin W. Smith
HCIL Executive Director

Enclosure

cc: CBFL Board of Directors
Leigh Ann Meissner

COALITION FOR BARRIER FREE LIVING/
HOUSTON CENTER FOR INDEPENDENT LIVING
Second Quarterly Report for the Fourth Year
Title VII, Part B Funding
November 1, 1983 - January 31, 1984

During the second quarter of funding for the fourth year of operation of HCIL, significant restructuring of the staff and reassignment of responsibilities took place. Although there was some sorting out associated with the assumption of new responsibilities and the clarification of roles, the quantity of services increased significantly over the quantity delivered in the previous quarter. A brief description of significant accomplishments and events that occurred during the quarter is provided below.

ORGANIZATION

Perhaps the most dramatic change in the Center during the past quarter related to the restructuring of the Center staff. On November 1, 1983, the new staff structure alluded to in the previous quarterly report went into effect. The result of this restructuring was the elimination of the positions of Outreach Specialist, Information and Referral Specialist, Peer Counseling specialist, and Special Services Coordinator. The functions of these positions were reassigned to positions with new job titles. Essentially, information and referral and peer counseling services for mobility impaired clients became the responsibilities of two staff members, both with the title of Community Services Coordinator. Information and referral for deaf and hearing impaired clients became the responsibility of the Deaf Services Coordinator, who will receive assistance from a Staff Interpreter, a newly created position, with 50% funding coming from Title VII funds and 50% coming from funds generated from fees for services. The rationale for allocating the funding between these two sources was based on the premise that approximately one-half of the Staff Interpreter's time will be spent in the field in interpreting assignments and approximately one-half of the time will be spent providing support for the Deaf Services Coordinator in locating interpreters, providing information and referral services, and maintaining service logs and other records. The other significant change in organization in the Center relates to the creation of the position of Instructional Programs Coordinator. This person will be responsible for planning, implementing, and evaluating all instructional programs for the Center, including those for clients, other service providers, and members of the community. Outreach responsibilities have become the responsibility of all staff under the new structure, with requirements for documentation stipulated for outreach activities.

After three months of operation under the new structure, it appears that the changes have been very positive with respect to carrying out of responsibilities and the impact on client services. A dramatic increase in the numbers of clients receiving services has been documented and initial indicators appear to indicate improvement in the quality of services as well. Efforts are currently underway to finalize protocols for assessing the quality of services and these should be ready for implementation by the end of the third quarter of the grant year.

The changes in Center structure, when considered in concert with changes in the CBFL Board composition, alluded to in the previous quarterly report, appear to have had very positive impact on the operation of HCIL and its

service delivery component. An ongoing effort to monitor Center operations and efficiency over the long term will ultimately provide evidence of the value of the restructuring effort. This ongoing monitoring will be carried out and appropriately documented.

PERSONNEL

As indicated in the section on ORGANIZATION, numerous personnel changes took place during this quarter. The changes include both reassignment/promotion of existing personnel and hiring of new personnel. Personnel changes are summarized as follows:

Vicki Sorrells Harris - reassigned from Peer Counselor to Community Services Coordinator, effective November 1, 1983.

Kathryn Donoho - promoted from Administrative Secretary to Community Services Coordinator, effective November 1, 1983.

Deborah Gunter - reassigned from Information and Referral Specialist to Instructional Programs Coordinator, effective November 1, 1983.

Johann Paoletti-Schelp - promoted from Interpreter Coordinator to Deaf Services Coordinator, effective November 1, 1983.

Van Gunn - hired as Staff Interpreter, effective November 1, 1983 (NOTE: Mr. Gunn had previously worked as Outreach Specialist for the Center and had resigned on August 15, 1983 for personal reasons).

Cathy DeLaCruz - hired as Receptionist, effective November 1, 1983.

Lee Bryant Sanders (VISTA Volunteer) - designated Housing Coordinator, effective November 1, 1983.

These personnel changes were made with the intent of making optimal use of the talents and abilities of various staff members. The rehiring of Van Gunn as Staff Interpreter was particularly positive, since Van possesses a wealth of knowledge about the Center and other resources available to disabled people in the community. This knowledge complements Van's skills as an interpreter for the deaf.

Our newest staff member, Cathy DeLaCruz, is a graduate of the University of Houston with a bachelor's degree in psychology. In addition to being fluent in Spanish, Cathy's training in counseling and interactive skills should be a valuable asset to her in her role as the first contact person that many people encounter when entering the Center. Cathy is mobility impaired. It is anticipated that Cathy will be seeking to secure a position that will allow her to make better use of her education and skills.

The promotions of Kathy Donoho and Linda Ferguson to Community Services Coordinator and Administrative Secretary respectively, represent actions designed to recognize outstanding job performance and the acquisition of

enhanced work skills. Both Kathy and Linda have done excellent jobs in their former positions and have demonstrated abilities to assume additional responsibilities and meet new challenges.

The reassignment of Vicki Sorrells Harris and Deborah Gunter to new positions is also intended to capitalize on their skills and knowledge in a more effective manner. Both of these staff have long-standing service records with the Center and have acquired a wealth of knowledge about disability and independent living during their tenures with the Center. The reassignment of Vicki Sorrells Harris from Peer Counseling Specialist to Community Services Coordinator is not indicative of a major shift in job responsibilities, but rather represents an expansion of her responsibilities to more effectively draw upon Vicki's talents as a counselor and resource person. The reassignment of Deborah Gunter from Information and Referral Specialist to Instructional Programs Coordinator is intended to make better use of Debbie's considerable planning and organizational skills.

Consolidation of deaf services under Johann Paoletti-Schelp, Deaf Services Coordinator should result in a more coordinated approach to delivery of services to deaf/hearing impaired clients. Johann's abilities with respect to organization and attention to detail are amply documented in previous reports and service logs and his assumption of responsibility for deaf services represents a very positive development.

The designation of Lee Sanders as Housing Coordinator is intended to provide a focal point for the coordination of the large scale housing program in which HCIL is participating. Lee has been with the Center as a VISTA Volunteer for several months and is very knowledgeable about disability, independent living, housing and support services.

PROGRAMS

The very substantial accomplishments realized in the various programmatic areas of the Center during the second quarter are even more remarkable in light of the restructuring activities that were occurring and the assumption of new roles and responsibilities by staff members, requiring adjustment and reorientation. The programmatic accomplishments are briefly described under the new programmatic titles adopted in conjunction with the restructuring of Center staff and responsibilities.

Community Services. The responsibilities assumed by the two Community Services Coordinators following the reorganization of staff are considerable, with two new program areas being particularly demanding. The two program areas requiring the greatest attention are the housing program and the independent living services program. As indicated in the previous quarterly report, the housing program represents a major cooperative effort involving HCIL, Councilwoman Eleanor Tinslet's office, L&L Management Corporation, the Houston Housing Authority, the City Department of Human Resources, and Independent Lifestyles, Inc. The program involves the modification of apartments in various parts of the city to accommodate persons in wheelchairs and the identification and placement of disabled persons in those units with support services necessary to maintain optimal inde-

pendence in the community. The coordination of these complex services is the responsibility of the Community Services Coordinators. In order to lessen some of the burden associated with the coordination of this program, Mr. Lee Sanders, HCIL VISTA Volunteer was designated Housing Coordinator effective November 1, 1983. Working under the supervision of the Community Services Coordinators, Lee has coordinated the production and mail-out of a housing questionnaire to more than 500 disabled individuals and numerous organizations within the community and has followed up on the responses to the questionnaire. As a result of these efforts, 34 disabled persons have been placed in wheelchair accessible apartments in three areas of the city and an additional 22 units have been completed with move-in expected before the end of March 1984. Assuring that rental subsidies are available when needed, attendant care is provided, and transportation and other support services are available presents a formidable task and the two Community Services Coordinators and the Housing Coordinator are to be commended for the fine work that they have done in this complex task.

The independent living services program represents a cooperative effort of HCIL and the Texas Rehabilitation Commission (TRC). Under this program, approximately \$75,000 has been made available to provide services to severely disabled persons who might potentially live independently, but who are ineligible or inappropriate for TRC's vocational rehabilitation program. It is anticipated that a substantial number of HCIL clients and other disabled individuals in the community will qualify for this program and the Community Services Coordinators are responsible for completing intake procedures and maintaining case files on all clients considered for the program. Kathy Donoho and Vicki Sorrells Harris have been working closely with Leigh Ann Meissner, the TRC Liaison Counselor for HCIL, in identifying and screening potential service recipients.

In addition to these major efforts in housing and independent living services, the Community Services Coordinators have continued to provide peer counseling services, information and referral services, and have been actively involved in outreach activities during the second quarter. Due in large part to the housing program, information and referral statistics have been very high during the quarter and this increase in services is reflected in the attached quarterly statistical report. Plans for revising the information and referral documentation procedures are proceeding, with several community service organizations having been contacted to examine various methods for recording information and referral information. The revised system should be finished and ready for implementation by the end of March 1984. Outreach activities of the Community Services Coordinators are described in a later section of this report.

Instructional Programs. Under the new structure for the Center, all instructional programs, whether for clients, service providers, or members of the community, are planned and implemented under the direction of the Instructional Programs Coordinator. This approach was adopted to capitalize on the knowledge and skills of the person filling the role, to improve reporting functions for instructional efforts, to plan programs in a more rational fashion, to use available resources in a manner that is reasonable and cost effective, and to avoid conflicts that could arise in the programming of instructional activities.

With these guiding precepts and a job description outlining tasks and responsibilities, the Instructional Programs Coordinator set about planning and promoting new instructional programs in November and December 1983. After completing a needs assessment process that included interviews with clients, Center staff, Center volunteers, and service providers, eight programs were prepared for implementation in January 1984. The eight programs offered and the number of participants registering for each are as follows:

<u>Program</u>	<u>Number of Participants</u>
Job Seeking Skills for Deaf Clients	8
Living Arrangements for Mobility Impaired Clients	11
Mobility Options for Mobility Impaired Clients	7
Time Management for Mobility Impaired Clients	10
Communication Skills for Non-hearing Impaired Clients	3
Communication Skills for Hearing Impaired Clients	5
American Sign Language	12
Conversational Sign Language	11

With the exception of the sign language classes, all classes were presented by persons with disabilities who had first-hand experience in dealing with problems in the community. The American Sign Language class and Conversational Sign Language class were presented to service providers, Center volunteers and staff, and community members interested in improving their communication abilities with deaf/hearing impaired persons. These classes were presented by a certified interpreter for the deaf and a deaf person with previous teaching experience.

Each instructor was required to submit, in advance, program objectives, a lesson plan, a description of instructional activities, and a brief biographical sketch. The Instructional Programs Coordinator developed evaluation techniques for each program and the results of these evaluations will be reported in the next quarterly report. It should be noted that space limitations and transportation for clients continue to represent problems in offering instructional programs. It should also be mentioned that, although instructors are paid on an hourly basis for their efforts, Title VII funds are not used for payment of instructors. New initiatives are being planned for later in the year and will be appropriately reported in ensuing quarterly reports.

Deaf Services. Deaf services continue to constitute a major component of the Center and demand for these services continues to remain high. Under the restructured format for the Center, information and referral for deaf and hearing impaired clients has become the responsibility of the Deaf Services Coordinator, allowing for collection of some revenues for these services from the Texas Commission for the Deaf (TCD). Funds received from TCD for services provided are still far from adequate to cover the actual costs of providing those services, notwithstanding funding received from TRC.

The addition of the Staff Interpreter has allowed some degree of control in meeting interpreter requests, while providing back-up support for the Deaf Services Coordinator and a means of generating some revenue to support the deaf services component. However, the deaf services component remains very understaffed considering the volume of service provided, and the securing of additional funding to hire additional staff for this component of the Center remains a high priority. Currently plans are being formulated to secure the part-time services of a deaf peer counselor to be paid from funds generated through fees for service. Plans are also underway to convene two advisory boards, one composed of consumers and one composed of service providers, to develop and submit recommendations on deaf services and steps that might be taken to improve those services. This action should help to insure that high quality services are provided to deaf and hearing impaired clients of the Center.

Generally speaking, Deaf Services remains a very strong component of the Center. Interpreter requests have averaged approximately 150 per month during the quarter, TTY/Voice Exchange services have averaged approximately 900 per month, and information and referral services to deaf and hearing impaired clients are averaging approximately 85 per month. The problem now facing Deaf Services, is to maintain the quality and quantity of services with the current level of staffing while seeking addition support for the program.

Outreach. As indicated previously in this report, outreach has now become the responsibility of all HCIL staff rather than just the responsibility of an Outreach Specialist. Although this does tend to decentralize the function and creates some problems with reporting of activities, it provides for greater flexibility in responding to information requests and allows for more staff members to interact with others in the community. Some of the outreach activities carried out by Center staff during the past quarter include:

November

- presentation by Kathy Donoho to employees of Southwestern Bell on disability and employment;
- participation in meeting on housing needs for disabled persons attended by Kathy Donoho, Vicki Harris, Lee Sanders, and Quentin Smith;
- participation in the Interpreter Support Group meeting at the Lighthouse of Houston by Johann Paoletti-Schelp and Quentin Smith;
- participation in forum on attendant care by Kathy Donoho;
- participation in meeting on accessibility at the Downtown YMCA by Kathy Donoho;
- presentation to deaf and hearing impaired students at Houston Community College by Johann Paoletti-Schelp;

- meeting with administrators of the Texas Department of Human Resources to discuss HCIL services and how to access them by Quentin Smith;
- participation in program on "Promoting Independence" sponsored by the Houston Area Rehabilitation Association by Quentin Smith;
- appearance of Vicki Sorrells Harris on "Focus" television show airing on Channel 11 to discuss housing program;
- participation in panel discussion on sexuality and disability for Baylor College of Medicine students by Vicki Sorrells Harris;
- presentation to the Texas Paralyzed Veterans Association on housing and transportation by Vicki Sorrells Harris;

December

- appearance on "Crossroads" television show aired by Channel 13 by Vicki Sorrells Harris to discuss housing program;
- attendance at a reception for the Occupational Therapy Program at Texas Woman's University by Johann Paoletti-Schelp;
- meeting with representatives of Metro-Lift by Kathy Donoho to discuss transportation needs of disabled people;
- meeting with disabled individuals moving into Village Green apartments to discuss service needs by Lee Sanders and Quentin Smith;
- participation in seminar offered jointly by HCIL and The Institute for Rehabilitation and Research on family life and disability (participants from HCIL included Vicki Harris, Kathy Donoho, Van Gunn, Deborah Gunter, and Quentin Smith);
- presentation to deaf clients of TRC on HCIL deaf services by Johann Paoletti-Schelp;
- meeting with representatives of the Houston Independent School District to plan a new program for disabled students by Kathy Donoho and Vicki Harris;
- presentation to staff of Houston Community College on services available for deaf students by Johann Paoletti-Schelp;
- production of a public service announcement by Channel 11 on HCIL's housing progra, coordinated by Vicki Harris and Kathy Donoho;
- presentation to Social Work staff of The Institute for Rehabilitation and Research on HCIL services by Vicki Harris;

- meeting with staff of Richmond State School to discuss Hcil services and the best approach for calloration between the two agencies by Vicki Harris and Deborah Gunter;
- meeting with Texans for the Improvement of Nursing Homes to discuss efforts to improve conditions for people residing in nursing home facilities by Vicki Harris and Lee Sanders;
- meeting with representatives of Deaf Council of Greater Houston to discuss collaboration on provision of deaf services by Johann paoletti-Schelp and Quentin Smith.

January

- Participation in reception and news conference at Airport Landing Apartments to promote availability of accessible units by Quentin Smith, Kathy Donoho, and Lee Sanders;
- participation in panel discussion on services for disabled students at the University of Houston - Clear Lake City by Quentin Smith;
- meeting with representatives of Deaf Council of Greater Houston to discuss provision of deaf services by Johann Paoletti-Schelp and Quentin Smith;
- presentation on sexuality and disability to staff of the Medical Center Del Oro by Vicki Harris;
- promotion of HCIL instructional programs through announcements in the Houston Post and Houston Chronicle, posting on the cable T.V. community bulletin board, inclusion in the TTY news, announcement in the Houston Public Library Newsletter, posting at the Houston Association for the Deaf Club, and dissemination to TRC counselors (coordinated by Deborah Gunter);
- meeting with architecture students from Rice University to discuss needs for building modifications (included all Center staff);
- presentation to faculty and staff of the Baylor College of Medicine Speech and Audiology Department to discuss HCIL services by Vicki Harris and Linda Ferguson;
- meeting with representative from the Easter Seal Society to discuss collaborative efforts by Quentin Smith;
- meeting with representative from the Mental Health/Mental Retardation Association to discuss development of collaborative programs between the two agencies by Quentin Smith.

These activities represent a major portion of the outreach activities, carried out by the Center staff over the three-month period covered in this report. Other activities were carried out on a day-to-day basis, such as short meetings with potential clients and service providers and daily telephone contact with potential consumers of HCIL services. One outreach activity that deserves special mention is the CBFL/HCIL Christmas Party held on December 16, 1983. This event was attended by over 100 clients, staff, volunteers, board members, service providers, and friends of CBFL/HCIL. It was very well received and provided an opportunity for persons with all types of disabilities to interact socially.

Although advocacy does not constitute a separate program area of the Center, it does constitute one of the key elements of the Center's purpose. A few special advocacy efforts deserve to be cited in this report. The first one relates to the work of CBFL Board members and HCIL staff on the Task Force on Architectural Barriers convened by Councilwoman Eleanor Tinsley. This task force has been reviewing building codes for the city and been developing recommendations for improving accessibility for all citizens of the city. Quentin Smith and Vicki Harris of HCIL have been actively involved in the Task Force, as have Guy Bell and Nita Weil of the CBFL Board. The work that has gone into this effort is considerable and deserves special recognition.

Another activity that can be categorized under the heading of advocacy relates to the involvement of Quentin Smith, Vicki Harris, and Lee Sanders in the planning for the multi-service center being constructed by the city for disabled citizens. These individuals, along with Carl Fasser of the CBFL Board, have advocated actively for complete accessibility of the facility for consumers of services as well as for disabled employees. A substantial amount of work has gone into the planning process for the facility and CBFL/HCIL will remain active in advocating for a truly functional and accessible facility.

The case described in the last quarterly report involving the woman with the learning disability whose custody was granted to a brother is still ongoing in the courts. Through the efforts of the attorney and medical/psychiatric professionals located through the Center, the woman was determined to be mentally competent to manage her affairs and was released from the custody of her brother. The issue of the constitutionality of the action taken by the brother remains unsettled, however, and CBFL/HCIL will continue to provide support for the woman until the case is fully resolved.

These represent but a few of the more significant advocacy efforts of HCIL and do not begin to detail the numerous day-to-day efforts put forth in the areas of housing, transportation, employment and other areas in which disabled persons have been historically discriminated against. Advocacy will continue to be a major functional emphasis for the Center and its staff.

SUMMARY

In summary the second quarter of year four of funding has been an extremely active and productive one for HCIL. The quality of services provided has improved considerably according to the available indicators. The quantity of client services continues to increase at a significant rate and the numbers of referrals to the Center has exceeded staff capabilities to respond to all requests. There continues to remain some administrative requirements to be addressed and resolved, but these are being addressed in as timely a manner as possible and should soon be completely met. The upgrading of Center evaluation protocols is continuing and new approaches to evaluating service delivery and Center operations are being implemented as they are finalized. The challenge now facing HCIL is to generate adequate funding necessary to maintain high quality services and to meet the increasing demands for services. This challenge will require the full attention of HCIL staff and the CBFL Board.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF HUMAN DEVELOPMENT
REHABILITATION SERVICES ADMINISTRATION
WASHINGTON, D.C. 20201

OMB No.

COMPREHENSIVE SERVICES FOR INDEPENDENT LIVING

QUARTERLY REPORT FOR THE PERIOD ENDING January 31, 1984, TITLE VII, PART B FUNDS

PRIMARY
GRANTEE

Name Houston Center for Independent Living		Phone No. (713)795-4252	
Number and Street 6910 Fannin, Suite 120	Houston	State Texas	Zip 77030

CHARACTERISTICS OF CLIENTS SERVED DURING THIS REPORT PERIOD

AGE	No. Served	RACE	No. Served
(1) Under 21	5	(1) White	339
(2) 21-29	435	(2) Black	518
(3) 30-39	339	(3) Hispanic Hispanic Hispanic	219
(4) 40-49	259	Hispanic Hispanic Hispanic Hispanic	
(5) 50-59	114	(4) Asian or Pacific Islander	
(6) 60 and Over		(5) Not Available	332*
(7) Not Available	256*		

SEX	No. Served	VR AGENCY REFERRALS	No. Served
(1) Male Not Available	562	(1) Referred to VR	27
(2) Female 257	589	(2) Referred from VR	48

DISABILITY	LIVING SITUATION AT REFERRAL				
	ALONE	RELATIVES OR FRIENDS	FOSTER OR GROUP HOME	INSTITUTION	OTHER
(1) Blind					205*
(2) Deaf	18	34			565*
(3) Orthopedic Impairment	34	89		6	13*
(4) Absence of Limbs		12			9*
(5) Mental Illness					11*
(6) Mental Retardation				8	306*
(7) Other Impairments	16	54		28	

SERVICES PROVIDED CLIENTS DURING THIS REPORT PERIOD

SERVICES	SOURCE OF SERVICES	PROGRAM STAFF	PUBLIC AGENCIES	PRIVATE AGENCIES
		No. Served	No. Served	No. Served
(1) Information & Referral Only		276	////	////
(2) Intake Counseling		42	////	////
(3) Diagnosis and Evaluation		136		
(4) Attendant Care Counseling		18		
(5) Attendant Care Assistance		289		
(6) Rights & Benefits Counseling		44		
(7) Peer Counseling		314		
(8) IL Skills Counseling & Training				
(9) Housing Assistance-Independent				
(10) Housing Assistance-Group Living				
(11) Special Services-Blind				
(12) Special Services-Deaf		3,123**		
(13) Vocational Services		145		
(14) Health Services				
(15) Physical Restoration				
(16) Transportation Assistance		80		
(17) Social & Recreational Services		64		
(18) Homemaker Services				
(19) Emergency Services				
(20) Other Services				

*Information not gathered on all clients

**Deaf service statistics not included in other statistical report

APPENDIX B

HOUSTON CENTER FOR INDEPENDENT LIVING
INTAKE FORM

INTAKE DATE: / /

General Information

Name: _____ Phone: () _____

Address: _____ Zip: _____

SS#: _____ Birth Date: _____ Age: _____ M / F

Married / Single / Widowed / Divorced Children: _____

Referred by: _____

TRC Counselor?: _____ Phone: _____

Type of services requested:

☐ Independent Living training

☐ Peer Counseling

☐ Vocational services

☐ Transportation

☐ Attendant Care

☐ Roommate

☐ Housing

☐ Legal/Paralegal Counseling

Will this assist you to live independently? ☐ How? _____

Applicant was by self / accompanied by parents or relative / spouse / friend

Communication skills & appearance: (Counselors observations)

☐ Cooperative

☐ Uncooperative

☐ Friendly

☐ Quiet

☐ Talkative

☐ Polite

☐ Nervous

☐ Dressed Appropriately

☐ Good Hygiene

☐ Unkept

☐ Obese

Medical/Psychological

Reported Disability: _____

Onset of disability & Etiology: _____

Hospitalizations: What: _____

When: _____

Where: _____

Physicians: _____

Medical History: _____

Functional limitations: _____

Current medications & treatments: _____

Effects of Medication(s) (if any): _____

Attitude toward disability (Counselors observations): _____

Education

Education Level: Highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

GED: Yes No When: _____ Where: _____

College education: Years completed Degree(s)
When: _____
Where: _____

He/She has a (good / limited / poor) command of English / ASL / Braille.

Second language: _____

Work History

Current or last Employer: _____

Type of work: _____

Length of employment: _____

Reason for leaving: _____

Other training (specify): _____

Describe career goals: _____

Current leisure time is spent how? (include interests & hobbies): _____

Social interactions: _____

Financial Information

Sources of income are:

Employment \$ _____ SS \$ _____ SSI \$ _____

SSDI \$ _____ VA \$ _____ Workmans Comp \$ _____

Unemployment Insurance \$ _____ Medicare \$ _____ Medicaid \$ _____

Current transportation: _____

Financial obligations: _____

Immediate Problem / Need (Counselors observations): _____

Action to be taken

Explanation of HCIL: _____

Application & other required forms were signed by applicants: _____

Request for records: _____

Need for a psychological or any other specialized exam: _____

HCIL HOUSTON CENTER FOR INDEPENDENT LIVING

(a service of the Coalition for Barrier Free Living)

CONSENT OF DISCLOSURE OF RECORDS HOUSTON CENTER FOR INDEPENDENT LIVING

TO: _____
ADDRESS: _____

I, _____, by this instrument authorize you to release any and all of the following information the THE HOUSTON CENTER FOR INDEPENDENT LIVING or to _____ for the purpose of pursuing a claim for _____ (Check applicable information):

- ___ 1. Medical information while I was your patient from _____ to _____, especially regarding _____ (Morris v. Hoerster, 377 S.W. 2d 841 (Tex. Civ. App.--Austin 1964); Texas Atty Gen. Op. H- 390 (Sept. 3, 1974). Note I exercise my common law right to these records under Texas law.
- ___ 2. Vocational, rehabilitational and social service information from _____ (date) to my representative even if the medical or psychological information may be harmful to me (TRC Rehab. Service Manual, No. 20-1, Item E (12/10/75): Hutchins v. TRC, 544 S.W. 2d 802 (Tex. Civ. App.—Austin, 1976).
- ___ 3. Wage information.
- ___ 4. Social Security Act records regarding _____ benefits. I understand a criminal offense may occur if this information is requested under false pretences by the Privacy Act, 5 U.S.C. §522a, incurring a \$5000. fine. See also disclosure to an entity like this program (SSA CM 7306 (B) (3) (2/77).
- ___ 5. Other information: _____

I further release you from any liability which you may incur by the disclosure of this information. I also make this authorization effective for the entire period for which my claim is pending. I authorize copies of this release to be substituted. Finally, I have described myself below in order to assist you in locating this information:

6. I was born on the _____ day of _____ 19__.
7. I have the following Social Security number _____.
8. I have the following Harris County Hospital District account number _____.
9. I live at _____ Zip: _____

COMMENTS: _____

DATED*: _____ SIGNED: _____

*A consent undated is invalid.

PROGRESS NOTES

CASE # _____

[illegible]

I N D E P E N D E N T L I V I N G P L A N

Social Security Number _____

e and ividuals sent	Planned Objectives (Steps to reach the goal)	Responsibilities of participant/client	Responsibilities of H.C.I.L.	Target date	Actual completed date

CONTRACT

INDIVIDUAL SIGNATURE & DATE

Rev. 10-26-83

CASE MGR. SIGNATURE

NAME _____ DATE _____

Address _____ Phone # _____

SS# _____

Birth Date _____ Referral _____

Current Arrangements:

- ☐ Apartment
- ☐ House
- ☐ Institution
- ☐ Other _____

Employment Status:

- ☐ Student
- ☐ Full-time job
- ☐ Part-time job
- ☐ Unemployed

Benefits:

- | | | | | |
|--|-----------------------------------|--|--------------------------------------|---------------------------------------|
| ☐ SS | ☐ SSDI | ☐ SSI | ☐ VA | ☐ TRC |
| ☐ Workers Comp: | ☐ Medicaid | ☐ Medicare | ☐ Food Stamps | ☐ Private Ins. |
| ☐ DHR | ☐ HHA | ☐ Unemployment Ins. | | |
| ☐ Other (specify) _____ | | | | |

Area of town preferred _____

How much for rent: \$ _____ Need an Attendant? ☐ Yes ☐ No

Satisfied with current attendant arrangement? ☐ Yes ☐ No

Preferred attendant arrangement: ☐ Friend ☐ Family Member ☐ Nurse
☐ Shared ☐ Private ☐ Other _____

How do you currently pay for attendant services? _____

Transportation: ☐ Have my own transportation ☐ Rely on family ☐ Rely on friends
☐ Use city bus ☐ Use Metro-Lift ☐ Other _____

Presently on Medication? ☐ Yes ☐ No If Yes, would you like to have medication delivered to your home? ☐ Yes ☐ No

How soon could you move to an accessible apartment? _____

What modifications would you require? ☐ ramps at entrances ☐ wide doors
☐ lever door handles ☐ roll-in shower ☐ wide sidewalks ☐ low shelves
☐ raised electrical outlets ☐ lowered light switches and thermostats
☐ handicapped parking ☐ other _____

Number of bedrooms needed: _____

Have you ever lived independently before? ☐ Yes ☐ No

Would you be interested in independent living skills classes? ☐ Yes ☐ No

If yes, in what areas? _____

What is your disability? _____

dis. code		DATE			CALLER		RACE		AGE	
		1 JAN	0 0	AM	INDIVIDUAL	WHITE	0-4			
		2 FEB	1 1	PM	AGENCY	BLACK	5-9			
0 0		3 MAR	2 2		3RD PARTY	HISPANIC	10-14			
1 1		4 APR	3 3		POLICE	OTHER	15-19			
2 2		5 MAY	4				20-24			
3 3		6 JUN	5				25-34			
4 4		7 JUL	6		SPANISH SPEAKING	SEX	35-44			
5 5		8 AUG	7		YES	MALE	45-54			
6 6		9 SEP	8			FEMALE	55-64			
7 7		10 OCT	9				65+			
8 8		11 NOV								
9 9		12 DEC								

WORKER DAILY

COMMENTS

NO. OF MINUTES

[illegible]

DO NOT WRITE IN SHADED AREA

HCIL INFORMATION & REFERRALS

PROBLEMS

- 1 Abuse/neglect (child)
- 2 Abuse/neglect (adult)
- 3 Advocacy
- 4 Alcohol
- 5 Architectural barriers (removal of)
- 6 Attendant care (personal care)
- 7 Campaign/fund raising
- 8 Clothing
- 9 Complaint/agency
- 10 Consumer complaint
- 11 Day care
- 12 Dental
- 13 Directory, brochure, resource list
- 14 Disaster relief
- 15 Donation
- 16 Drugs
- 17 Education
- 18 Emergency services
- 19 Employment
- 20 Family or interpersonal relations
- 21 Financial aid (medical)
- 22 Financial aid (housing)
- 23 Financial aid (money management)
- 24 Financial aid (other)
- 25 Food (meals on wheels)
- 26 Food (other)
- 27 Foster care
- 28 Furniture or appliances
- 29 Handicapped parking (stickers, signs, spaces)
- 30 Housing (apartment)
- 31 Housing (house)
- 32 House repairs
- 33 Hearing
- 34 Income tax
- 35 Independent living training
- 36 Independent living (other cities)
- 37 Information (HCIL)
- 38 Information (CBFL)
- 39 Juvenile delinquency
- 40 Job training
- 41 Legal aid
- 42 Live-in
- 43 Light house keeping
- 44 Medical equipment
- 45 Peer counseling
- 46 Rape
- 47 Recreation
- 48 Runaway
- 49 Sex/obscene
- 50 Speech
- 51 Suicide
- 52 Support group services
- 53 Social services (i.e. DHR, TRC, SS, etc.)
- 54 Temporary shelter
- 55 Transportation

- 56 Utilities
- 57 Veneral diseases
- 58 Vision
- 59 Volunteer
- 60 Physical therapy
- 61 Sheltered workshop
- 62 Speakers, films, tours
- 63 Nursing homes
- 64 Discrimination (job)
- 65 Discrimination (housing)
- 66 Discrimination (employment)
- 67 Other

DISABILITY CODES

- 1 AMP - Amputee
- 2 MD - Muscular Dystrophy
- 3 SC(Q) - Spinal Cord - quadraplegic
- 4 SC(P) - Spinal Cord - paraplegic
- 5 H - Hearing
- 6 V - Visual
- 7 CP - Cerebral Palsy
- 8 MS - Multiple Sclerosis
- 9 MR - Mentally retarded
- 10 E - Emotional
- 11 MH - Multiple handicap
- 12 N - Neurological (strokes, brain tumor etc.)
- 13 HI - Head Injury
- 14 P - Polio

HCIL INFORMATION & REFERRAL

REFERRALS/RESOURCES

- | | | | |
|----|---|----|--|
| 1 | | 58 | Santa Maria Hostel |
| 2 | Co Medical | 59 | Senior Employment Project |
| 3 | American Cancer Society | 60 | Sheltering Arms, Telephone Reassurance |
| 4 | American Red Cross | 61 | Social Security |
| 5 | Baylor College of Medicine | 62 | Speech & Hearing Institute |
| 6 | Better Business Bureau | 63 | Star of Hope Mission |
| 7 | Birthright | 64 | SWAA |
| 8 | Catholic Charities | 65 | Texas Employment Commission |
| 9 | Cerebral Palsy Treatment Center | 66 | Texas Rehabilitation Commission |
| 10 | Child Care Council | 67 | T.I.R.R. |
| 11 | Children's Resource Information Services | 68 | Traveler's Aid Society |
| 12 | Coalition for Barrier Free Living | 69 | TRIMS |
| 13 | Community Legal Services Center | 70 | United Way |
| 14 | Consumer Credit Counseling | 71 | University of Houston |
| 15 | County Tax Assessor | 72 | University of Texas |
| 16 | Covenant House | 73 | United Cerebral Palsy |
| 17 | Crisis Intervention of Houston, Inc. | 74 | Volunteer Action Center |
| 18 | Depelchin/Crittenton Services | 75 | Visiting Nurses Association |
| 19 | Department Human Resources | 76 | Vocational Guidance Services |
| 20 | Easter Seals | 77 | YMCA |
| 21 | Golden Years Council | 78 | YWCA |
| 22 | Gulf Coast Community Services Assoc. | 79 | Houston Center for Independent Living |
| 23 | Gulf Coast Legal Foundation | 80 | Veteran's Administration |
| 24 | Gulf Coast Metro. Senior Citizens, Inc. | 81 | Texas Commission for the Blind |
| 25 | Greater Houston Services for Hearing Impaired | 82 | Goodwill |
| 26 | Harris County Child Welfare | 83 | No resource needed |
| 27 | Harris County Health Dept. | 84 | No resource avail./location |
| 28 | Harris County Hospital District | 85 | No resource avail./financial limitation |
| 29 | Harris County Social Services | 86 | No resource avail./client dislike |
| 30 | Houston Housing Authority | 87 | No resource avail./age, race, sex |
| 31 | Houston Community College | 88 | No resource avail./time |
| 32 | Houston Area Women's Center | 89 | No resource avail./service capacity full |
| 33 | Houston Child Guidance | 90 | No resource avail./other |
| 34 | Houston Health Department | 91 | Other |
| 35 | Houston Volunteer Lawyers | | |
| 36 | Houston Park & Recreation | | |
| 37 | Houston Public Library | | |
| 38 | Houston Regional Council on Alcoholism | | |
| 39 | Houston Independent School District | | |
| 40 | Jeff Davis Hospital | | |
| 41 | Jobs for Progress | | |
| 42 | Lawyer Referral (Juantia Jeys) | | |
| 43 | Lift-Aids of Texas | | |
| 44 | Lighthouse of Houston | | |
| 45 | Independent Lifestyles | | |
| 46 | Medical Center del Oro | | |
| 47 | Mental Health Association | | |
| 48 | Mental Health Mental Retardation Assoc. | | |
| 49 | Muscular Dystrophy Association | | |
| 50 | Multiple Sclerosis Association | | |
| 51 | Metropolitan Transit Authority | | |
| 52 | Metrolift | | |
| 53 | Paralyzed Veteran's Association | | |
| 54 | Planned Parenthood | | |
| 55 | St. Vincent de Paul | | |
| 56 | Safety Lights Company | | |
| 57 | Salvation Army | | |

FOLLOW-UP CODES

NO CONTACT WITH AGENCY

- 1 Client never made contact with agency
- 2 Client resolved problem on own

CLIENT CONTACTED THE AGENCY - ENGAGED

- 5 Client placed on waiting list
- 6 Application being processed
- 7 Service in process - client pleased
- 8 Service in process - client dissatisfied

CLIENT CONTACTED THE AGENCY - DISENGAGED

- 12 Problem resolved
- 13 Client dropped out before service completed
- 14 Client dropped out - dissatisfied with service

SERVICE UNAVAILABLE

- 18 Service unavailable - agency did not offer the service
- 19 Service unavailable - caseload too full
- 20 Service unavailable - too expensive
- 21 Service unavailable - client ineligible

MISCELLANEOUS

- 25 Client chose one of the alternate referrals
- 26 Other problems identified
- 27 Other

TOTAL CALLS: _____

HCIL - INFORMATION & REFERRAL
MONTHLY STATS REPORT

19

AGE:	RACE:	PROBLEMS:
0-4 _____	WHITE _____	1 _____ 12 _____ 23 _____ 34 _____ 45 _____ 56 _____ 67 _____
5-9 _____	BLACK _____	2 _____ 13 _____ 24 _____ 35 _____ 46 _____ 57 _____
10-14 _____	HISPANIC _____	3 _____ 14 _____ 25 _____ 36 _____ 47 _____ 58 _____
15-19 _____	OTHER _____	4 _____ 15 _____ 26 _____ 37 _____ 48 _____ 59 _____
20-24 _____		5 _____ 16 _____ 27 _____ 38 _____ 49 _____ 60 _____
25-34 _____	EMPLOYED:	6 _____ 17 _____ 28 _____ 39 _____ 50 _____ 61 _____
35-44 _____	YES _____	7 _____ 18 _____ 29 _____ 40 _____ 51 _____ 62 _____
45-54 _____	NO _____	8 _____ 19 _____ 30 _____ 41 _____ 52 _____ 63 _____
55-64 _____		9 _____ 20 _____ 31 _____ 42 _____ 53 _____ 64 _____
65+ _____		10 _____ 21 _____ 32 _____ 43 _____ 54 _____ 65 _____
		11 _____ 22 _____ 33 _____ 44 _____ 55 _____ 66 _____

REFERRED BY:	DISABILITY:	REFERRALS/RESOURCES:
PHONE BOOK _____	1 _____	1 _____ 17 _____ 33 _____ 49 _____ 65 _____ 81 _____
AGENCY _____	2 _____	2 _____ 18 _____ 34 _____ 50 _____ 66 _____ 82 _____
RADIO/TV _____	3 _____	3 _____ 19 _____ 35 _____ 51 _____ 67 _____ 83 _____
BROCHURE _____	4 _____	4 _____ 20 _____ 36 _____ 52 _____ 68 _____ 84 _____
NEWSPAPER _____	5 _____	5 _____ 21 _____ 37 _____ 53 _____ 69 _____ 85 _____
PREVIOUS CLIENT _____	6 _____	6 _____ 22 _____ 38 _____ 54 _____ 70 _____ 86 _____
FRIEND _____	7 _____	7 _____ 23 _____ 39 _____ 55 _____ 71 _____ 87 _____
CLIENT _____	8 _____	8 _____ 24 _____ 40 _____ 56 _____ 72 _____ 88 _____
OTHER _____	9 _____	9 _____ 25 _____ 41 _____ 57 _____ 73 _____ 89 _____
	10 _____	10 _____ 26 _____ 42 _____ 58 _____ 74 _____ 90 _____
SERVICE:	11 _____	11 _____ 27 _____ 43 _____ 59 _____ 75 _____ 91 _____
INFO. SIMPLE _____	12 _____	12 _____ 28 _____ 44 _____ 60 _____ 76 _____
INFO. COMPLEX _____	13 _____	13 _____ 29 _____ 45 _____ 61 _____ 77 _____
REF. SIMPLE _____	14 _____	14 _____ 30 _____ 46 _____ 62 _____ 78 _____
REF. COMPLEX _____		15 _____ 31 _____ 47 _____ 63 _____ 79 _____
		16 _____ 32 _____ 48 _____ 64 _____ 80 _____

HCIL HOUSTON CENTER FOR INDEPENDENT LIVING

(a service of the Coalition for Barrier Free Living)

INTERPRETER SERVICES AGREEMENT

The following is an agreement between _____
and Houston Center for Independent Living to provide interpreter services.

Houston Center for Independent Living agrees to:

- a) provide a suitably qualified interpreter, when available, upon request. Your agency will be contacted in a timely fashion if a suitably qualified interpreter is not available.
- b) coordinate, supervise and pay all interpreters requested through our agency.
- c) bill your agency monthly for services rendered the previous month based upon hours worked and interpreters rate schedule in effect at the time that this agreement is signed. Records of service will be sent to your agency with your monthly bill.
- d) provide orientation/in-service regarding proper use of interpreters and working with deaf clients upon request.

_____ agrees to:

- a) provide interpreter requests via telephone at least two (2) working days prior to the scheduled appointment.
- b) provide time of appointment, place of appointment, date of appointment, name of contact person, phone number of contact person, directions to assignment, parking fees and hearing impaired person's name. This information is needed before an interpreter is sought.
- c) provide notice of cancellation, if necessary, at least one (1) working day prior to the interpreting assignment, or pay the two (2) hour minimum interpreter fee plus the service charge.
- d) pay Houston Center for Independent Living for services rendered the previous month within thirty (30) calendar days upon receipt of billing (Billing will be based on attached rate schedule).

Expiration Date: _____

Signature

Kevin T. [illegible]

Signature

Position/Title

Position/Title

Date Signed

Date Signed

RATE SCHEDULE

Interpreters will be paid a two hour minimum per request.

Charges for emergency call out time (less than 24 hours) will be billed at one (1) and one-half ($\frac{1}{2}$) of the amount indicated in the scale below.

Pay begins when Interpreter leaves home and assignment ends when Interpreter arrives home.

A fixed-fee service charge of \$7.50 will be billed for each request filled.

Interpreters shall be paid based on their certification level.

SCALE

LEVEL V, (has no equivalent)	\$16.00/hr.
LEVEL IV, MCSC	14.00
LEVEL III, CSC, OIC:C, RSC (deaf)	12.00
LEVEL II, ET/EI, OIC:S/V, OIC:V/S, RSC (hearing)	10.00
LEVEL I, GISC	8.00
P.P.	6.00
N.C.	5.00

Levels I, II, III, IV, V are certifications from Texas Commission for the Deaf.

The other certifications are from Registry of Interpreters for Deaf.

The abbreviations are as follows:

MCSC - Masters Comprehensive Skills Certification
CSC - Comprehensive Skills Certification
OIC:C - Oral Interpreting Certification: Comprehensive
RSC - Reverse Skills Certification (sign to voice)
ET/EI - Expressive Transliteration/Expressive Interpreting
OIC:S/V - Oral Interpreting Certification: Spoken to Visible
OIC:v/S - Oral Interpreting Certification: Visible to Spoken
GISC - General Interpreting Skills Classification
P.P. - Provisional Permit
N.C. - Non Certified

HCIL HOUSTON CENTER FOR INDEPENDENT LIVING

(a service of the Coalition for Barrier Free Living)

PLEASE PRINT

BILLING INFORMATION:

Name of Agency _____

Address _____

City: _____ State: _____ Zip Code _____

Attention: _____

Phone: _____

Authorized Personnel to Request Interpreters:

Name	Title	Phone
------	-------	-------

Name	Title	Phone
------	-------	-------

Name	Title	Phone
------	-------	-------

Name	Title	Phone
------	-------	-------

Name	Title	Phone
------	-------	-------

Please complete this form and send back with one copy of the Interpreter Service Agreement. Keep the second copy of the Interpreter Service Agreement for your records.

Thank You.

HCIL HOUSTON CENTER FOR INDEPENDENT LIVING

(a service of the Coalition for Barrier Free Living)

INTERPRETER SERVICES AGREEMENT

The following is an agreement between _____
and Houston Center for Independent Living to provide interpreter services.

Houston Center for Independent Living agrees to:

- a) provide a suitably qualified interpreter, when available, upon request. Your agency will be contacted in a timely fashion if a suitably qualified interpreter is not available.
- b) coordinate, supervise and pay all interpreters requested through our agency.
- c) bill your agency monthly for services rendered the previous month based upon hours worked and interpreters rate schedule in effect at the time that this agreement is signed. Records of service will be sent to your agency with your monthly bill.
- d) provide orientation/in-service regarding proper use of interpreters and working with deaf clients upon request.

_____ agrees to:

- a) provide interpreter requests via telephone at least two (2) working days prior to the scheduled appointment.
- b) provide time of appointment, place of appointment, date of appointment, name of contact person, phone number of contact person, directions to assignment, parking fees and hearing impaired person's name. This information is needed before an interpreter is sought.
- c) provide notice of cancellation, if necessary, at least one (1) working day prior to the interpreting assignment, or pay the two (2) hour minimum interpreter fee plus the service charge.
- d) pay Houston Center for Independent Living for services rendered the previous month within thirty (30) calendar days upon receipt of billing (Billing will be based on attached rate schedule).

Expiration Date: _____

Signature

Signature

Position/Title

Position/Title

Date Signed

Date Signed

Agency Agreement Consumer List - Deaf Services

Alief General Hospital, Ms. Howe
Alley Theatre
American General Insurance
Attorney At Law, John W. O'Dowd
Attorney At Law, Topez et Karmberg, Viola Lopez
Attorney At Law, William A. Odom
Attorney At Law, Stanley F. Swenson
Automated Title Service
Baylor College of Medicine
BCM, Dr. Gerber
Baytown Municipal Court, Mr. McLemore
Ben Taub Hospital, Ms. Pritchett
Blue Cross & Blue Shield, Ms. Miller
Brown & Root, Ms. House
Center for Administration of Justice, Ms. Deborah S. Friesen
CBFL
City of Houston
City of Houston, Community Development
City of Houston, Community Development Division, Mr. Maze
City of Houston, Human Resources Dept., Mr. Johnson
City of Houston, Mayor's Citizen Assistance Office, Kenneth Bitz
City of Houston, Municipal Courts Bldg., Judge Stanley
City of Houston, Police Dept., Mr. Brown
Deaf Action Center, Grady Altom
Deaf Council of Greater Houston, Lucy Chimelak, Gred Clifton
Dept. Human Resources, (Contract)
Dept. Mental Health/Mental Retardation Assoc., Gary Treese
Dr. Ralph Guretin
Exxon Company, USA, Bernice Boysen
Exxon Co., Exploration, Bernic Boysen, 965-7405
Fore Dept., Captain D. R. Clark
Fort Bend County Court, Judge Clark
Fort Bend County Court, Rita DeVries
Galveston Criminal Court, 10th Judicial Court, E. D. McKinney
G.H.H.C.
Greater Houston Interpreters for the Deaf, Peggy Stewart
Greater Houston Services for Hearing Impaired, Jeanne Robinson
Gulf Coast Legal Foundation, Robert Byrd
G.C.L.F., Dwayne E. Bilton (713) 651-9080
Gulf Coast Medical Foundation, Charles Roaik/Gene Matthews
Houston Assoc. Parents of Hearing-Impaired, Jo Ann Fey, 774-0808 (voice)
or 774-5246 (TTY)
Houston Area Rehab.OAssoc.
Harris County Auditor, Gerald Flack
Harris County Committee on Employment of the Handicapped, William Williams
Harris County Health Cept., Linda Foryes
Harris County Housing Authority, Ronald Kipp
Harris County Juvenile Probation, Bob Husbands
Harris County Psychiatric Hospital
Hear Say, Linda Hall
Hear Say, Bea Greginsky
Hilderbrandt School (Spring, Tex), Jim Laminach

Houston Association for the Deaf, Mary Reeves
 Houston Child Guidance Center, Sandra Posada
 Houston Community College
 Houston Fire Dept.
 Houston Grand Opera, Jim Beecher, 777-0091
 Houston International Hosp.
 Houston Natural Gas Corp., Thomas Anderson
 Houston Post - Metro, James Woods
 Houston Public Library, Karen Mitchell
 Hermann Hospital
 Patient Relatives Dept., 797-4540
 Internatl. Deaf Art Center, Jeanette Norman
 Interpreter Mailing List
 Interpreter Services Agreement
 Interpreter Skills/General Interpreter Info.
 Jefferson Davis Hosp., Ms. Moore
 Lighthouse of Houston, Gibson DuTerroil
 M. D. Anderson Hospital, Ms. Ford
 Medical Arts Hospital, William Miller
 Medical Center Del Oro Hosp., Robin B. Holzman
 Medical Center Del Oro Hosp., Robin Holzman 790-8955
 Methodist Hospital, Ms. J. Kriegal
 Neighborhood Justice Center, Inc. , Sabra Battle
 Office of Hearing & Appeals, Betty Kubeska
 Pasadena Bayshore Hosp., Donald L. Francis, 944-6666
 Pasadena Bayshore Hosp., Jim Richardson
 Pre-Trial Services, Gerald R. Wheeler
 Prudential Insurance, Steve Cordoba
 Raleigh Hills General Hosp., Linda Jubinsky, 644-7047
 Rosewood General Hosp., Edwin H. Cooper, 780-5860
 Russell-Smith Ford, Gary Neal, 663-4216
 Sam Houston Memorial Hosp. Louise Rogers, 468-4311
 San Jacinto College, Dr. Jon Sewell
 Sharpstown General Hosp., Bob Schabacker, 774-7611
 Sharpstown Hosp.
 Shell Oil Co., Wwlls R. Rader
 Social Security
 Soc. Security Administration/Griggs, Larry Soto
 SSA/Homestead, Darrell Bolding
 SSA/Kirby, Terri Trevino
 SSA/Mangun, James Meyer
 SSA/Pasadena, Charles Engelken
 SSA/Rusk, Helen Garza
 Special Projects In Service Training/Interfirst Bank, Tom Hoffman
 Southwestern Bell, 850-5721
 S. B., Recruiting Office, Romelia Landrum
 St. Josephs Hosp., Bernice B. Joseph, 757-1000
 St. Lukes Episcopal Hosp., Tx. Childrens Heart Institute, Lacey Rosen, 791-2900
 St. Luke Hospital, Lacey Rosen
 Texas Employment Commission, Joan Brishehan
 Texas Commission for Deaf, Donald England
 Texas Children Hosp., Debra Gunther

Texas Dept. Human Resources, Roberta Darouse
Texas Dept. Public Safety
Texas Education Agency
Texas Rehab. Commission, Mary Valentini
Texas Research Institute of Mental Sci., Ms. Frey
Texas School for the Deaf
TTY News
UH Handicapped Student Services, Bob Kafka
UH/Student Life Bldg. Handicapped Student Services, Vergie McKinley
UT Systems Cancer Center, M. D. Anderson, Mr. Gorman Rasmussen, 792-7143
US Postal Service
West Oaks Hospital, Sonya Donaldson

APPENDIX C

HCIL HOUSTON CENTER FOR INDEPENDENT LIVING

a service of the Coalition for Barrier Free Living

INTERPRETER EVALUATION FORM

We are seeking your opinion in order to improve interpreter services provided in the Houston area. You have just had the opportunity to use an interpreter. Please fill out this simple evaluation form, so that we may better serve the community.

You are: (check one)

- ☐ hearing
☐ hearing impaired
☐ deaf

The interpreter used:

- ☐ sign language
☐ oral communication
☐ other (specify) _____

Are you familiar with the use of an interpreter? (check one)

- ☐ yes ☐ no

If yes, how did you learn? (check one) ☐ community education

- ☐ previous use of an interpreter
☐ other (specify) _____

If no, are you interested in learning more about using an interpreter? (check one)

- ☐ yes ☐ no

Did your interpreter arrive:

- ☐ early (how early) _____
☐ at the appointed time
☐ late (how late) _____

Did the interpreter:

- interject personal opinion (check one) ☐ yes ☐ no
facilitate communication smoothly ☐ yes ☐ no
other (specify) _____

Was the interpreter dressed appropriately for the situation? (check one)

- ☐ yes
☐ no (specify) _____

Given the opportunity, would you use this interpreter again? (check one)

- ☐ definitely yes
☐ maybe
☐ definitely no

How did you find the services at HCIL? (check any that apply)

- ☐ prompt ☐ average ☐ slow
☐ excellent ☐ fair ☐ poor

What was your impression of HCIL staff with whom you interacted?
(check any that apply)

- ☐ knowledgeable ☐ helpful ☐ cooperative
☐ uninformed ☐ indifferent ☐ uncooperative
☐ other (specify) _____

Suggestions/Comments: _____

(Please fold this evaluation form at the fold marks indicated, staple it, and return it to HCIL. No postage necessary. Thank you for your cooperation.)
IF YOU ARE INTERESTED IN LEARNING MORE ABOUT INTERPRETER SERVICES, PLEASE CONTACT HCIL, DEAF SERVICES, 795-4252.

Participant Evaluation

Name: _____ Date: _____

Module Title: _____

1. Do you feel that the participant was an active member
of the group? Yes _____ No _____
2. Did the participant raise questions? Yes _____ No _____
offer solutions? Yes _____ No _____
3. How would you rate his/her attendance?
very regular _____ fairly regular _____ irregular _____
4. Did the participant complete homework assignments?
Yes _____ No _____
5. Was hygiene and dress appropriate for the classroom?
Sometimes _____ Yes _____ No _____
6. Please rate the person on the following: Good Fair Poor
Punctuality _____
Prepared for class _____
Interested in subject _____
7. Do you feel that it was beneficial for the person to attend
this module? Yes _____ No _____

a. If so why? _____

b. If not why? _____

Additional comments: _____

INSTRUCTOR SIGNATURE

Date

PARTICIPANT COMMENT:

I have read the evaluation and comments if any are as follows

Participant Signature

Date

Module Evaluation

1. What module are you enrolled in? _____

2. Name of instructor? _____
3. What skills did you acquire that will be of help to you in the future? _____

4. Did you feel that this class covered the subject adequately?
Yes _____ No _____
5. Was there opportunity for:
individual participation _____ Yes _____ No _____
group participation _____
raising questions _____
individual attention _____
6. Was the class time allotted enough? Yes _____ No _____
too much? _____
7. Please rate your instructor on the following:

	good	fair	poor
a. punctuality	_____	_____	_____
b. preparation for class	_____	_____	_____
c. teaching techniques	_____	_____	_____
d. interest in students	_____	_____	_____
8. Was your instructor a "peer ?" Yes _____ No _____
9. How would you rate your attendance?
very regular _____ fairly regular _____ irregular _____

10. In what areas did you feel you needed more instruction? _____

Additional comments: _____

(no signature required)

APPENDIX D

AUSTIN
RESOURCE

CENTER

FOR
INDEPENDENT
LIVING

2818 SAN GABRIEL • AUSTIN, Texas 78705

473-2684 VOICE, 473-2688 TDD

February 23, 1984

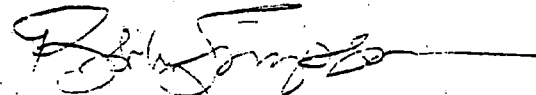
Mr. Ted Thayer, Program Specialist
Texas Rehabilitation Commission
118 E. Riverside Dr.
Austin, TX 78704

Dear Mr. Thayer:

Enclosed is the Title VII Quarter Narrative and Statistical Reports for the period ending January 31, 1984. If you have any questions or desire clarification, please contact me at your convenience.

Thank you for your time.

Sincerely,



Bobby C. Simpson
Executive Director
ARCIL

BCS/ggm
enc.

AUSTIN RESOURCE

CENTER

FOR
INDEPENDENT
LIVING

2818 SAN GABRIEL • AUSTIN, Texas 78705

473-2684 VOICE. 473-2688 TDD

Title VII Quarterly Report November, 1983 - January, 1984

Much of the activities of this quarter have centered around ARCIL's transitional living facility Herndon House. Three of the first residents completed their stays and moved on to more independent settings. Two of the three moved to semi-independent living settings while the third is finalizing plans to move into his own apartment. All of the persons had previously lived in institutions.

Community Development Block Grant funds were provided by the city to complete renovations to Herndon House. ARCIL engaged a contractor and work will soon be completed. This will result in a new room to be used as a dining/recreation room.

Staff at Herndon House have worked diligently to prepare for TRC facility certification. Certification was recently accomplished which will enable ARCIL to receive funding for Herndon House clients. This will assist greatly in the financial stability of the program.

ARCIL staff has remained fairly stable this quarter with the exception of the job development position. Unfortunately the person hired in mid-November was offered a better paying job and thus resigned at the end of January. We also still maintain two VISTA volunteers and two interns from University of Texas.

ARCIL staff have continued to work with the Department of Human Resources for the funding of a shared attendant program. We investigated licensure processes for home health agencies but found that this would not be a feasible approach to this program. This would fill a much needed gap in services to ARCIL clients. Currently funding for this project looks promising.

ARCIL has recently received the donation of two moto-stands that allows persons to wheel around in a standing position. We hope to allow clients to experiment with these in order that they might expand their vocational possibilities or understand how to use such equipment to live more independently.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF HUMAN DEVELOPMENT
REHABILITATION SERVICES ADMINISTRATION
WASHINGTON, D.C. 20201

Form Approved:
OMB No.

COMPREHENSIVE SERVICES FOR INDEPENDENT LIVING

QUARTERLY REPORT FOR THE PERIOD ENDING January 31 1984, TITLE VII, PART B FUNDS

Name Austin Resource Center for Independent Living	Phone No. 473-2684
Number and Street 2818 San Gabriel	State Zip Austin, Texas 78705

CHARACTERISTICS OF CLIENTS SERVED DURING THIS REPORT PERIOD

AGE	No. Served	RACE	No. Served
(1) Under 21	8	(1) White	32
(2) 21-29	13	(2) Black	6
(3) 30-39	9	(3) American Indian or Alaskan Native	1
(4) 40-49	6	(4) Asian or Pacific Islander	
(5) 50-59	2	(5) Not Available	7
(6) 60 and Over	7		
(7) Not Available	1		
SEX	No. Served	VR AGENCY REFERRALS	No. Served
(1) Male	26	(1) Referred to VR	
(2) Female	20	(2) Referred from VR	7

DISABILITY	LIVING SITUATION AT REFERRAL				
	ALONE	RELATIVES OR FRIENDS	FOSTER OR GROUP HOME	INSTITUTION	OTHER
(1) Blind	2	2			
(2) Deaf					
(3) Orthopedic Impairment	6	11			
(4) Absence of Limbs		1			
(5) Mental Illness	1	1		1	
(6) Mental Retardation		1			
(7) Other Impairments	7	12	1		

SERVICES PROVIDED CLIENTS DURING THIS REPORT PERIOD

SERVICES	SOURCE OF SERVICES	PROGRAM STAFF	PUBLIC AGENCIES	PRIVATE AGENCIES
		No. Served	No. Served	No. Served
(1) Information & Referral Only		89		
(2) Intake Counseling				
(3) Diagnosis and Evaluation				
(4) Attendant Care Counseling				
(5) Attendant Care Assistance		20		
(6) Rights & Benefits Counseling		4		
(7) Peer Counseling				
(8) IL Skills Counseling & Training		5		
(9) Housing Assistance-Independent		8		
(10) Housing Assistance-Group Living				
(11) Special Services-Blind				
(12) Special Services-Deaf				
(13) Vocational Services		17		
(14) Health Services				
(15) Physical Restoration				
(16) Transportation Assistance				
(17) Social & Recreational Services				
(18) Homemaker Services				
(19) Emergency Services				
(20) Other Services				

END PAGE



2818 SAN GABRIEL • AUSTIN, Texas 78705

473-2684 VOICE. 473-2688 TDD

November 22, 1983

Mr. Ted Thayer, Program Specialist
Texas Rehabilitation Commission
118 E. Riverside Dr.
Austin, TX 78704

Dear Mr. Thayer:

Enclosed is the Title VII Quarterly Narrative and Statistical Reports for the period ending October 31, 1983. If you have any questions or desire clarification, please contact me at your convenience.

Thank you for your time.

Sincerely,

Bobby C. Simpson
Executive Director
ARCIL



2818 SAN GABRIEL • AUSTIN, Texas 78705

473-2684 VOICE. 473-2688 TDD

Title VII Quarterly Report
July-October, 1983

Fund Raising:

The Friends of ARCIL held the Second Annual "Antelope Barbecue" on August 25th. This year's event was hosted by former University of Texas football coach Darrell Royal and was quite successful. The ARCIL Endowment Fund, the focus of the barbecue, now has pledges amounting to approximately \$60,000. Certainly, this effort is one that ARCIL will continue to develop and refine each year. Attendance at the barbecue was good which helps promote continued involvement with our program.

ARCIL continues to receive funding from the Texas Department of Human Resources to assist with the operation of our transitional living facility. We hope to expand this contract in the future to offset some of the costs which will no longer be covered by other grant funds.

Beginning October 1, 1983, ARCIL was awarded \$11,000 in Community Development Block Grant funds to further renovate our transitional living facility. The process for obtaining bids and selecting a contractor is underway.

ARCIL has also embarked on a cooperative effort to sell medical information cards called "Save Your Life" cards by telephone. The project is still so new that we don't have a clear picture of the results at this time.

Program Development:

During this quarter the ARCIL program has lost two staff members: the Job Development and Placement Coordinator and the VISTA volunteer who assisted in advocacy. We recruited, interviewed and hired a person to fill the job development position, but were unable to fill the VISTA position due to cutbacks in that program.

Two interns are assisting with client services at ARCIL. One is a graduate social work intern who will be with us for nine months and the other is a vocational rehabilitation graduate intern who will also be with us for at least nine months. The VR intern is a severely disabled lady with whom we are working to devise ways that she can demonstrate the skills she has learned in that program. She has written a hand-out on how to interact with communication impaired persons, done some research on tests of attitudes toward disabled persons and has begun some individual counseling with a speech impaired client. Our social work intern is teaching a budgeting class to the residents of Herndon House, and has assisted with several other clients.

Staff at Herndon House is working toward TRC certification as a residential facility which would allow for potential reimbursement for services. Three new residents have moved in during this quarter and one has completed the program successfully and is now living independently.

As indicated earlier funds have been obtained for further renovation and proposals have been written to foundations to fill other needs.

A program evaluation system has been developed and implemented to determine ARCIL's effectiveness as viewed by both clients and agency staff. See the attached forms and procedure.

Staff Development:

One staff member attended a seminar sponsored by Legal Aid regarding individual advocacy. Two staff members attended a conference sponsored by the Region VI staff in Dallas. They found the presentations useful and also enjoyed the opportunity to meet persons with other CIL's. Two other staff members attended "Toward Independence" in Denver. They were greatly impressed and also benefited from the contact with persons from centers around the country. Three staff members also attended the Delegate Assembly of the Coalition of Texans with Disabilities in El Paso. In addition to the workshops and meetings, there was a meeting of the Texas centers which allowed us to further communicate with our respective programs.

At this conference, one of our staff members, Judy Wingard-Westbrook, was elected Vice-President of CTD. We are proud of her dedicated efforts that resulted in this election.

ARCIL's Executive Director, Bobby Simpson, was appointed by the Governor as the chair of the Governor's Committee for Disabled Persons. This will allow him to have direct influence on the work of the committee and the involvement of people from across the state. The independent living movement will certainly benefit by such involvement of its leaders.

OFFICE OF HUMAN DEVELOPMENT
REHABILITATION SERVICES ADMINISTRATION
WASHINGTON, D.C. 20201

CMB No.

COMPREHENSIVE SERVICES FOR INDEPENDENT LIVING

ARTERLY REPORT FOR THE PERIOD ENDING Oct. 31 1982, TITLE VII, PART 3 FUNDS

Name Austin Resource Center for Independent Living	Phone No. 473-2684
Number and Street 2313 San Gabriel	State Zip Austin, Texas 78705

CHARACTERISTICS OF CLIENTS SERVED DURING THIS REPORT PERIOD

AGE	No. Served	RACE	No. Served
(1) Under 21	10	(1) White	63
(2) 21-29	25	(2) Black	2
(3) 30-39	15	(3) American Indian or Alaskan Native	2
(4) 40-49	3	(4) Asian or Pacific Islander	
(5) 50-59	10	(5) Not Available	2
(6) 60 and Over	20		
(7) Not Available	1		

SEX	No. Served	VR AGENCY REFERRALS	No. Served
(1) Male	42	(1) Referred to VR	
(2) Female	46	(2) Referred from VR	17

DISABILITY	LIVING SITUATION AT REFERRAL				
	ALONE	RELATIVES OR FRIENDS	FOSTER OR GROUP HOME	INSTITUTION	OTHER
(1) Blind	1	4	1	2	
(2) Deaf	1	4			
(3) Orthopedic Impairment	16	16	2	3	
(4) Absence of Limbs	1	1			
(5) Mental Illness	1				
(6) Mental Retardation	1				1
(7) Other Impairments	11	17	2		2

SERVICES PROVIDED CLIENTS DURING THIS REPORT PERIOD

SOURCE OF SERVICES	PROGRAM STAFF	PUBLIC AGENCIES	PRIVATE AGENCIES
SERVICES	No. Served	No. Served	No. Served
(1) Information & Referral Only	167		
(2) Intake Counseling			
(3) Diagnosis and Evaluation			
(4) Attendant Care Counseling			
(5) Attendant Care Assistance	31		
(6) Rights & Benefits Counseling	16		
(7) Peer Counseling	1		
(8) IL Skills Counseling & Training	5		
(9) Housing Assistance-Independent	32		
(10) Housing Assistance-Group Living			
(11) Special Services-Blind			
(12) Special Services-Deaf			
(13) Vocational Services	37		
(14) Health Services			
(15) Physical Restoration			
(16) Transportation Assistance			
(17) Social & Recreational Services			
(18) Homemaker Services			
(19) Emergency Services			
(20) Other Services			

TABLE A-1

APPENDIX E



2818 SAN GABRIEL • AUSTIN, Texas 78705

473-2684 VOICE. 473-2688 TDD

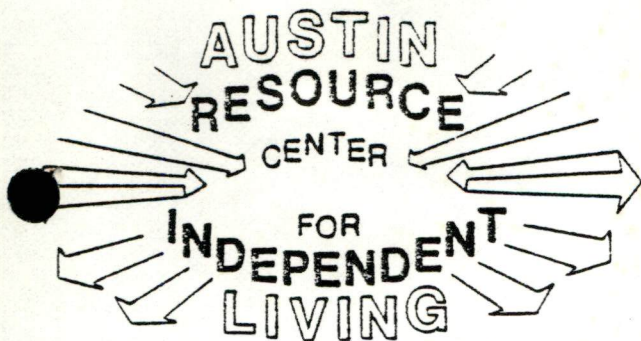
Procedure for Program Evaluation

Client Satisfaction:

1. The Client Satisfaction Form (attached) will be mailed to each client as their case is closed.
2. Returned forms will be compiled quarterly by the Program Coordinator with a summary report to the Director and other service delivery staff.

Agency Satisfaction:

1. The Program Evaluation Form will be sent annually to a mailing list compiled jointly by the Program Coordinator and the Community Outreach Coordinator.
2. Returned forms will be reviewed by the same staff persons with a summary report to the Director and other service delivery staff.



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Program Evaluation Form

In an attempt to improve our services to disabled persons in Austin and Travis County, we ask you to complete the following questions and return this form to us in the enclosed envelope.

1. Please rate the following services according to your experience with disabled persons who have received the service. Please place the number of your choice in the blanks. 1. Good 2. Fair 3. Poor

_____ Housing Counseling and Placement

_____ Financial/Legal Advocacy

_____ Information and Referral

_____ Peer Counseling

_____ Job Development and Placement

_____ Independent Living Skills

_____ Attendant Referral

_____ Residential Services at Herndon House

2. Describe the kind of contact you have had with ARCIL (refer clients, coordinating services with staff, etc.)

3. What effect do you feel ARCIL has had on the community?

4. What do you feel is the community's impression of ARCIL?

5. Comment on services needed by, but unavailable to disabled persons in Austin and Travis County.

6. Please comment on services that could or should be provided by ARCIL.

7. Please note any ways that ARCIL can improve outreach efforts to potential clients.

(If you have any comments please comment on back of this paper)

PROVIDING INDEPENDENT LIVING SERVICES TO DISABLED
PERSONS OF AUSTIN AND TRAVIS COUNTY.