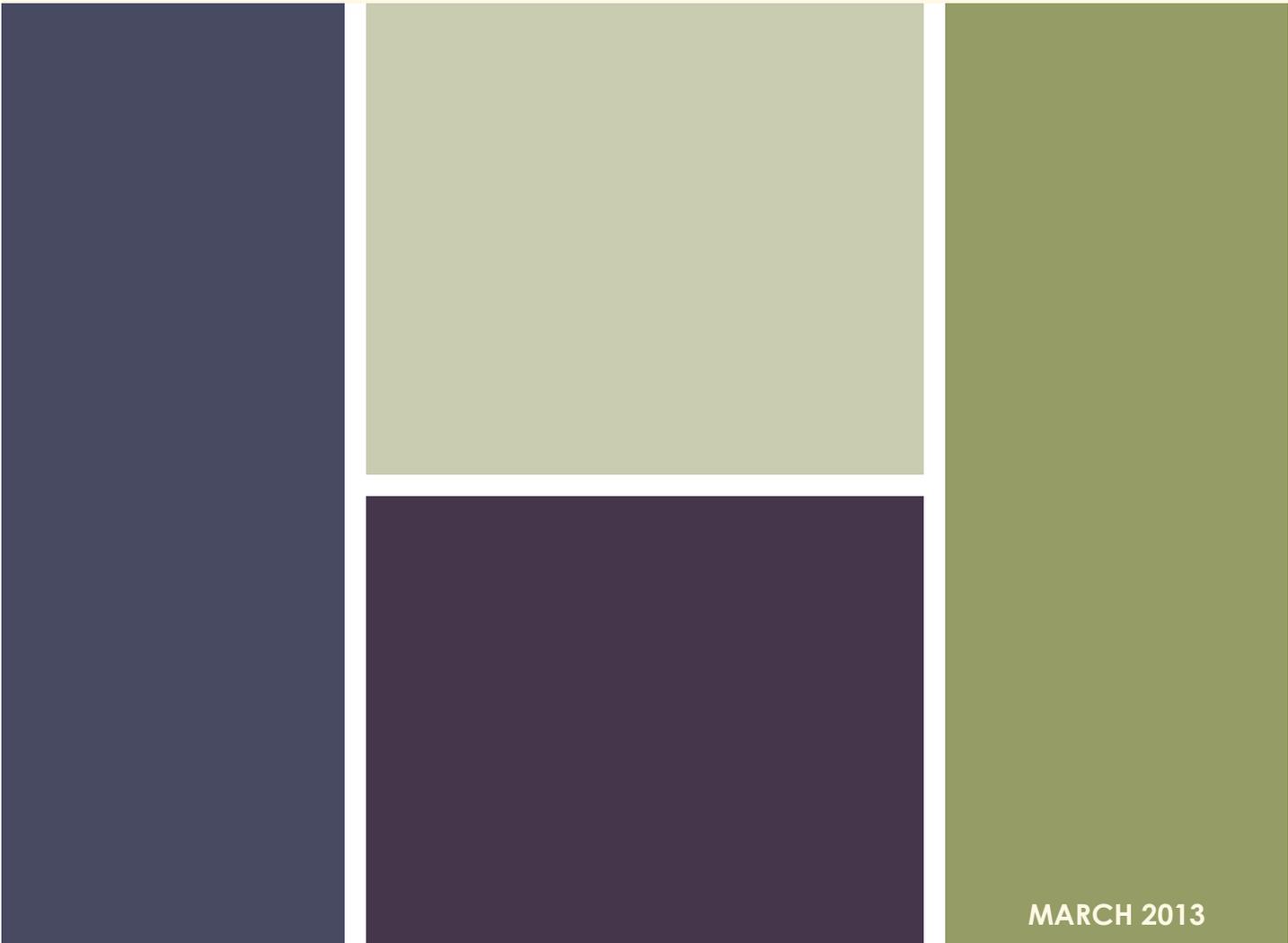




SUPPORTIVE SERVICES FOR INDEPENDENT LIVING

2012 Community Impact Report

Travis County Health and Human Services & Veterans Service
Research & Planning Division



MARCH 2013

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Travis County Health and Human Services & Veterans Service
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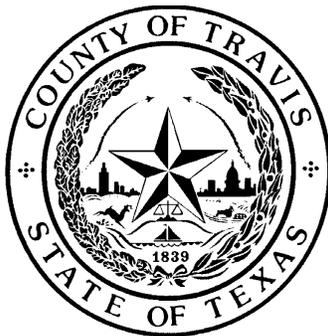


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Introduction

The Travis County Commissioners Court, through Travis County Health and Human Services & Veterans Service Department (TCHHS/VS), annually invests over \$11 million in community-based social service programs. These Department investments align with and supplement our direct services to meet the critical needs of local residents. Community-based organizations are frequently geographically and culturally embedded in the communities they serve and are often best positioned to provide needed services.

Purpose of Report

The annual Community Impact Report provides an overview of TCHHS/VS investments in health and human services. The *2012 Community Impact Report* offers highlights of community conditions most pertinent to the services purchased within each issue area in 2012. The report also details investment, programmatic, and performance information on the Department's social service contracts. This information provides a foundation for policy makers, program managers, and others to better understand these investments, recognize and celebrate accomplishments, identify areas for improvement, disseminate lessons learned, and highlight areas warranting further research.

Readers should also consider this report in conjunction with other local analyses and reports^a in order to obtain a more complete picture of the community. The *Travis County Snapshot from the American Community Survey 2011*, in particular, provides complementary contextual information around current demographics and local conditions.^b

Organization of Report

This report addresses nine issue areas plus a summary of Planning and Evaluation investments. (A tenth issue area, Restorative Justice and Reentry, had no investments in 2012.) Each issue area section begins with community conditions information about the issue area and then provides performance highlights about the programs included within that issue area.

Community conditions impact social service providers and the individuals they serve. Economics, demographics, as well as social structures and systems, all influence the level of need within a community

a Data products from the 2010 Census, including a *Travis County Trend Profile* and *Travis County Map Books*, are available at: http://www.co.travis.tx.us/health_human_services/research_planning/documents_CensusData.asp.

b The *Travis County Snapshot from the American Community Survey 2011* is available at: http://www.co.travis.tx.us/health_human_services/pdfs/ACS2011.pdf.

and the resources available to successfully address community needs. Community conditions help determine service delivery approaches that are most effective in addressing community needs and issues. These conditions also inform public stakeholders of progress toward community goals and can help correlate particular program contributions and value in advancing those goals.

Although this report highlights community conditions for individual issue areas separately, each issue area must be considered in a broader context. Community conditions related to a single issue area may have similar or related root causes and broad-level consequences. Current economic conditions also have a global impact on community conditions.

Performance highlights contribute to local knowledge about some of the Department's contracted community-based programs. This report provides detailed information about each program covered by an issue area, including an overview of program goals, services provided, eligibility criteria, and funding. Client demographics and ZIP codes are summarized for each program. Also captured are each program's performance results, compared to its contractual performance goals, and explanations of notable variance (+/- 10%) between the performance results and goals.

An issue area encompasses those programs with goals most aligned with the goals of that issue area. While each program is included in only one issue area, a program may promote the goals of several issue areas. For example, a workforce development program may primarily include work readiness services but also include a small educational component. The principal goals of the program promote the workforce development issue area goals, so the program is categorized in the workforce development issue area rather than the education issue area.

Report Summary

Most social service programs described in this report serve Travis County residents who are in or near poverty. Some programs assist vulnerable populations, such as those experiencing abuse and neglect, irrespective of their income. Current conditions elevate the need for social services for Travis County residents:

- The Travis County population continues to grow rapidly. According to the most recent U.S. Census Bureau population estimates available, 1,063,130 people lived in Travis County in 2011. The county's growth rate of 30% since 2000 (reflecting the addition of 242,203 residents) is faster than the state overall (Texas grew 23% between 2000 and 2011). The county population in areas outside the city of Austin has grown even more rapidly, up 66% since 2000. In 2011, more than one-quarter of county residents (26% or 279,935 people) lived in a city or village other than Austin or in an incorporated area, compared with 21% of residents (168,627 people) in 2000.¹

- The most recent poverty data were collected in 2011. These data estimate that about 18% of Travis County residents (192,436 people) lived in poverty. The 2011 rate is not statistically different from the 2010 poverty rate of 19%. These two most recent poverty rates reflect an increase in poverty in Travis County over what had been a fairly stable rate of 15% during 2006-2008 and 16% in 2009.²
- The poverty rate among children is higher than the overall poverty rate for Travis County. 2011 data indicates that 25% of Travis County children under 18 (63,680 children) lived in poverty.³
- In December 2012, there were 50,458 SNAP (Supplemental Nutrition Assistance Program) cases in Travis County with 113,664 people (about 11% of all Travis County residents) receiving benefits. The number of SNAP cases appears to be leveling off, following a steady increase between 2008 (29,448 average monthly cases) and 2011 (50,970 average monthly cases).⁴
- Close to 159,000 households in Travis County experience a housing cost burden, which is defined as spending 30% or more of household income on housing costs; approximately 77,000 of those households experience a severe housing cost burden (i.e. spending 50% or more on housing costs).⁵ Renters are more likely to be cost burdened than owners.⁶
- A point-in-time snapshot of the Austin area homeless population reported a total of 2,244 homeless individuals, 61% of whom were sheltered (either emergency, transitional, or Safe Haven), and 39% of whom were unsheltered. Almost one-third (30%) of the homeless population is comprised of individuals in households with dependent children.⁷
- National, state and local unemployment rates all follow an improving trend line, with the Austin-Round Rock MSA and Travis County consistently outperforming the state and nation. The unemployment rate for the Austin-Round Rock MSA began the year at 6.5% in January 2012, but dropped to 5.0% in December.⁸ The unemployment rate for Travis County is slightly lower than the MSA, starting at 6.4% in January 2012 and ultimately falling to 4.9% in December. These are the lowest unemployment rates for Travis County and the Austin-Round Rock MSA since November 2008 and remain lower than the state (6.0%) and national (7.6%) rates.⁹
- In 2011, an estimated 19.8% of the Travis County population (209,348 people) lacked health insurance. Travis County's proportion of uninsured residents is higher than that of the U.S. (15.1%) but lower than that of Texas (23.0%).¹⁰
- Between 2000 and 2010, the Austin-Round Rock metropolitan area had the fastest growing "pre-senior" population (age 55 to 64) in the nation, with a 110% change from 2000 to 2010. The Austin-Round Rock metropolitan area was ranked second in senior (age 65 and older) population growth over the same time period, with a 53% change.¹¹ In 2011, there were 79,573 adults aged 65 and older living in Travis County, comprising 7.5% of the population¹² by 2020, a projected 124,750 older adults will make up 10.4% of the county population.¹³

Client Demographics

Service providers collected client demographic data, when possible.^c Overall, demographic data were provided for 67% to 86% of clients, depending on the demographic category. Of clients with known demographics, 55% were female and 45% were male. In terms of race, 64% of these clients were White, 24% were Black or African American, and the remainder were of another race. In terms of ethnicity,^d 41% of clients were Hispanic or Latino. Nearly one-quarter (23%) of clients were ages 25 to 39, and 22% were between 40 and 59 years of age. Children and youth ages 17 and younger accounted for 32% of clients. Close to one-half (43%) of clients had incomes below 50% of the Federal Poverty Income Guideline (FPIG) level, and 25% of clients had incomes between 50% and 100% of FPIG. (See Appendix A for specific guideline income levels.)

Client Location by ZIP Code

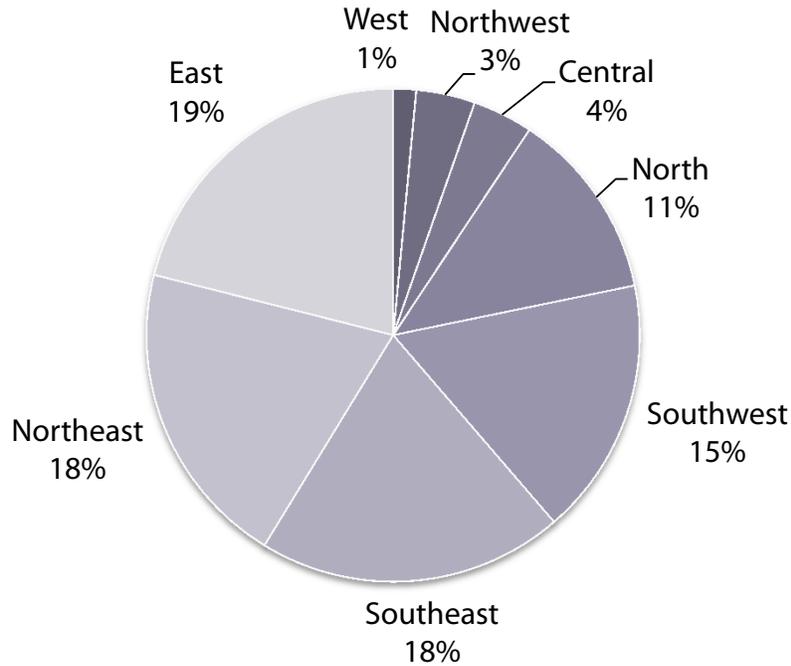
When possible, the contracted service providers also documented the ZIP code where clients resided when they entered the program.^e Service providers collected residential information for 84% of all clients, including clients with ZIP codes within Travis County (75%), clients with ZIP codes outside of Travis County (3%), and clients who were homeless at entry into the program (7%); the remainder (16%) represent clients with unknown ZIP codes. Of clients with known ZIP codes within Travis County, 19% of clients resided in the East area. The Northeast and Southeast areas also had sizeable shares of clients in residence, each with 18% of clients. (See Appendix B for ZIP code classification map.)

c Client demographic data may be unreported for reasons such as protection of client privacy and difficulty obtaining data (e.g., due to services delivered via outreach or at large-scale events). Further, two contracted service providers used different age and/or income categories that did not allow for aggregation with the larger set of demographic data. Clients enrolled in programs that do not collect income information were classified as “unknown” in the income level category.

d For the purposes of tracking reported client data, TCHHS/VS has adopted demographic categories used by the U.S. Census Bureau. The U.S. Census Bureau considers race and Hispanic origin to be two separate and distinct concepts. Hispanics and Latinos may be of any race. Therefore, clients reporting their race, such as White or Black or African American, may also be Hispanic or Latino.

e Client ZIP code data may be unreported for reasons such as protection of client privacy and difficulty obtaining data (e.g., due to services delivered via outreach or at large-scale events).

Areas of Client Residence, 2012

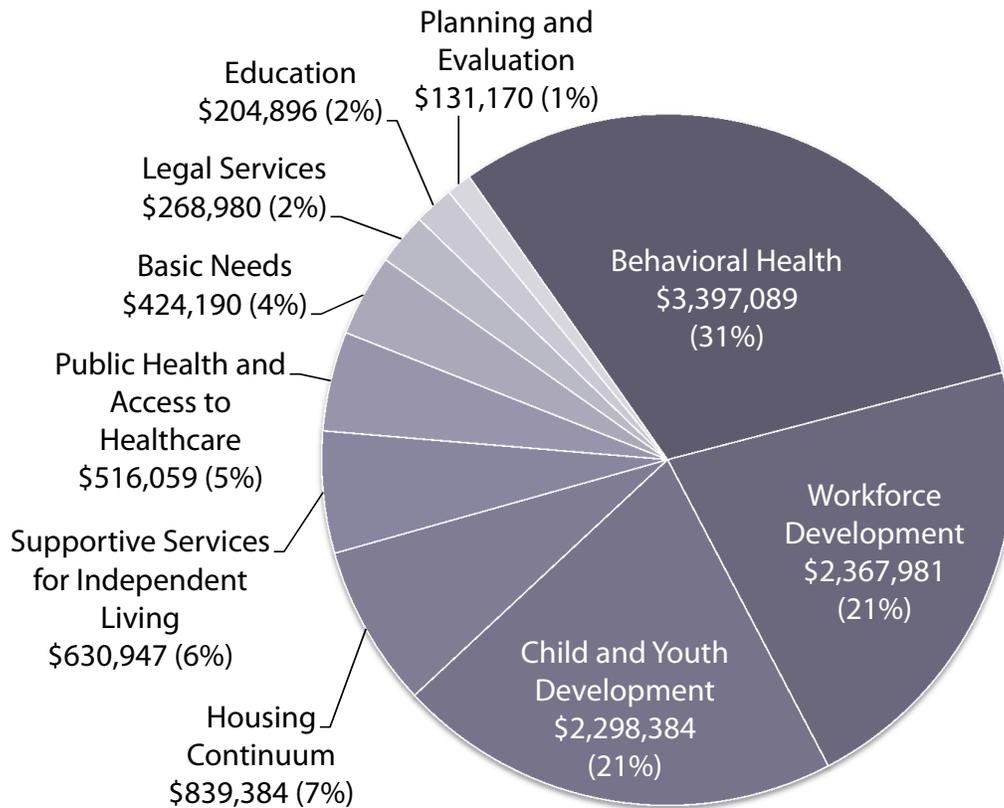


Investment by Issue Area

The following chart does not represent total TCHHS/VS investments and services. It only shows the percent of funding devoted to each issue area for the social service contracts included in this report. These contracts are a subset of the Department’s broader investments of general funds in both purchased and direct services. The Department also makes grant-funded program investments.

Behavioral Health contracts accounted for the greatest share (nearly one-third) of the TCHHS/VS investment reflected in this report, followed by Workforce Development and Child and Youth Development contracts (each comprising 21% of the total investment). The Department’s investments represented varying percentages of each contracted program’s total budget. Investment percentages ranged from 0.6% to 100%, constituting an average of 23.5% of a program’s total budget. Actual investment percentages for each social service contract are provided on each program’s page.

Investment in Issue Areas for Social Service Contracts, 2012



Performance

The social service contracts included in this report have a wide range of goals, objectives, services, and performance measures. In 2012, most programs met the targeted range of performance across both output and outcome measures. Meeting the targeted range of performance means that the performance measure meets or exceeds at least 90% of the contractual performance goal.

Programs falling short of performance goals were often the result of basic operational issues, such as staffing shortages and turnover or funding cuts. Changes in client populations also impacted performance, including clients requiring additional time in a program, thus reducing new client enrollments. Also, for programs serving smaller numbers of clients, even minor changes can lead to highly volatile performance results. Economic conditions have, in many cases, increased demand but may also create challenges in achieving goals. Significant programmatic or performance measure and methodology changes that occurred in 2012 also contributed to unexpected performance variance. Please note that performance measures reflect the entire program's performance, and not the share of the program funded by TCHHS/VS.

Goals and Services

DEPARTMENT PURPOSE

Travis County Health and Human Services & Veterans Service strives to maximize quality of life for all people in Travis County by:

- Protecting vulnerable populations
- Investing in social and economic well-being
- Promoting healthy living: physical, behavioral, and environmental
- Building a shared understanding of our community

SUPPORTIVE SERVICES FOR INDEPENDENT LIVING GOALS AND SERVICES

Programs and services within this issue area work to promote independence and well-being of persons in need of and able to benefit from assistance with daily living activities. Toward this end, they work to empower these individuals to: make their own decisions and life choices; live in the home while ensuring the safety of the person and environment; and continue to have regular social interactions. Some examples of services provided by programs within this issue area: information and referral; independent living skills training; home management (homemaker) and personal care services; counseling; individual and systems advocacy; health, medical and social services (including nutrition); adult day care; and assisted living care.

Community Conditions

Current Conditions and Trends

Older adults who have experienced a decrease in mobility or cognitive functioning and persons with disabilities often need support to assist them with life's daily activities. This type of assistance is typically referred to as long-term care or long-term services and supports. Services may be provided in a home or community-based setting or in an institution such as a nursing home or residential care facility for persons with intellectual or developmental disabilities. In either setting, cost can be a significant issue in obtaining long-term care,^{14,f} however home and community-based services are the more affordable option and individual preference of the majority of those needing care.¹⁵

The law also supports an individual's right to and the provision of community-based services. The 1999 Supreme Court case *Olmstead vs. L.C.* held that the medically unjustifiable institutionalization of persons with disabilities is a violation of the American of Disabilities Act,¹⁶ and required states to provide community-based services for persons with disabilities who would otherwise be entitled to institutional services, within certain conditions.^{17,9} In response to the ruling, the Texas Health and Human Services Commission established the Texas Promoting Independence Plan, last revised in 2010.¹⁸

Beyond long-term care services to meet basic care and safety needs, persons with a disability or age-related decrease in functioning often need support to maximize their quality of life and engagement within the community. Limitations or poor enforcement of laws and regulations intended to assure access or accommodation, limited funding of programs, and societal prejudices often keep individuals with disabilities from being fully included in society despite the many advances that have been made to address historical discrimination and exclusion.¹⁹ Older adults—particularly those who live alone, have a physical impairment, have recently lost a partner, close friend or important role (such as employment), or have limited access to transportation or meaningful activities, among other risk factors—are more susceptible to isolation.²⁰

f For example, in the Austin-Round Rock-San Marcos area, the private pay annual cost of nursing home care is \$68,620 (single occupancy) and the cost of in-home care is estimated at \$29,640 (30 hours of care per week).

g Conditions include: the state's treatment professionals determine that such placement is appropriate; the affected persons do not oppose such treatment; and the placement can be reasonably accommodated, taking into account the resources available to the state and the needs of others who are receiving state supported disability services.

System Overview: Long-Term Services and Supports

An estimated 10.9 million Americans utilize long-term services and supports to assist them in life's daily activities. About half of these are older adults 65 years or older and about half are people under age 65 with a disability.²¹ While some are able to pay for care out-of-pocket (19% of long-term care expenditures nationally) or through long-term care insurance (7% of expenditures), a significant portion of expenditures (43%) are paid through Medicaid, the public health coverage program that (among other purposes) provides assistance paying for long-term care for low-income individuals and those who have exhausted personal income and savings.²²

In Texas, the Texas Health and Human Services Commission (HHSC) administers Medicaid, and the Department of Aging and Disability Services (DADS) oversees the public system for long-term care services for people with physical, intellectual or developmental disabilities. Many DADS services are funded through Medicaid.²³ DADS services include home and community-based services as well as institutional care. Some DADS programs are entitlement programs, meaning that federal law does not and the state cannot limit the number of eligible individuals who can enroll, while other programs have limited capacity and maintain a waiting list.^{24,h} Community providers, including the Area Agencies on Aging and local mental health authorities, implement some DADS administered programs²⁵ and also supplement these state administered programs with local resources. In most urban areas of the state, including Travis and surrounding counties, people with physical disabilities or aged 65 or older now receive their Medicaid home and community-based long-term care services through STAR+PLUS. STAR+PLUS is administered by the HHSC and services are delivered through a managed care provider in the recipient's area.²⁶

Demand for Long-Term Services and Supports

Data on the national and state levels indicate a continuing shift toward home and community-based services and a demand for such services that outpaces the availability of funds. On a national level, the majority of Medicaid long-term care dollars still go to institutional care, however the percentage of Medicaid spending on home and community-based services has more than doubled, up from 20% in 1995 to 45% in 2009.²⁷ In Texas, 50.8% of 2009 Medicaid and state-funded long-term support services for older adults and people with physical disabilities went to home and community-based services. Texas is ranked 7th highest nationally for the percent of funding supporting home and community-based services as opposed to institutional care for older adults and people with physical disabilities; New Mexico has the highest state rate with 63.9% in 2009.²⁸

h A description of each of the wide range of DADS programs and services is beyond the scope of this report. For a comprehensive overview see the Reference Guide available at <http://cfoweb.dads.state.tx.us/ReferenceGuide/default.asp>.

Texas does not rank highly around indicators of community-based inclusion for people with intellectual and developmental disabilities (ID/DD). The United Cerebral Palsy's Case for Inclusion ranks Texas 50th out of 51 states and the District of Columbia in terms of how well state Medicaid programs serve those with ID/DD.²⁹ Still, enrollment data from the state supportive living centers, which provide campus-based direct services and supports for individuals with ID/DD indicate a shift away from institutional care. Over the past five years, enrollment in state supported living centers has decreased by 20% from an average monthly enrollment of 4,833 in FY 2008³⁰ to an average monthly enrollment of 3,875 FY 2012.³¹ The Texas Department of Aging and Disability Services expects the average enrollment in these centers to continue its downward trend.³²

Because the demand for DADS community-based services and supports often outweighs available resources, applicants' names may be placed on an interest list until services are available. As of the end of FY 2012, 108,825 unduplicated individuals were on a DADS or STAR+PLUS interest list for one or more Medicaid community services waiver programs that provide comprehensive, individualized, community-based services and supports to those who qualify for admission to a nursing facility or an intermediate care facility.³³ Time on an interest list varies by service. The following table provides additional detail on the number of individuals on the interest list and the duration of the wait by program.

**Service and Interest List Information for Community-Based Waiver Programs
FY 2012**

<i>Waiver Program</i>	<i>Population Served</i>	<i>Average Monthly Recipients FY 2012</i>	<i>Individuals on Interest List August 2012</i>	<i>Time on Interest List as of August 2012</i>
CBA				
Community Based Alternatives	Persons age 21 and older as an alternative to nursing facility care.	14,441	11,912	0-1 years: 91.5% 1-2 years: 8.5%
HCBS SPW				
Home and Community-Based Services STAR+PLUS Waiver	Persons age 21 and older as an alternative to nursing facility care. Services and supports are similar to those available under CBA except they are provided through a managed care organization. In most urban areas, including Travis and surrounding counties, services are provided under SPW rather than CBA.	29,132*	12,490	0-1 years: 53.8% 1-2 years: 26.7% 2-3 years: 15.0% > 3 years: 4.5%
CLASS				
Community Living Assistance and Support Services	Individuals of any age with a related condition as an alternative to living in an intermediate care facility for individuals with an intellectual disability or related conditions (ICF/IID).	4,676	43,607	0-1 years: 13.1% 1-2 years: 16.2% 2-3 years: 16.1% > 3 years: 54.6% <i>Longest time:</i> <i>8-9 years</i>
DBMD				
Deaf-Blind Multiple Disabilities	Individuals with deaf-blindness that occurred before age 22 and one or more other disabilities as an alternative to living in an ICF/IID.	158	527	0-1 years: 27.3% 1-2 years: 22.2% 2-3 years: 46.3% > 3 years: 4.2%
MDCP				
Medically Dependent Child Program	Services to support families caring for children who are medically dependent to encourage de-institutionalization of children who receive services in nursing facilities.	2,355	25,668	0-1 years: 19.9% 1-2 years: 22.4% 2-3 years: 19.9% > 3 years: 37.8% <i>Longest time:</i> <i>5-6 years</i>
HCS				
Home and Community Based Services	Services and supports for individuals of any age with intellectual disabilities as an alternative to living in an ICF/IID.	19,893	60,196	0-1 years: 14.2% 1-2 years: 14.9% 2-3 years: 15.2% > 3 years: 55.7% <i>Longest time:</i> <i>9+ years</i>

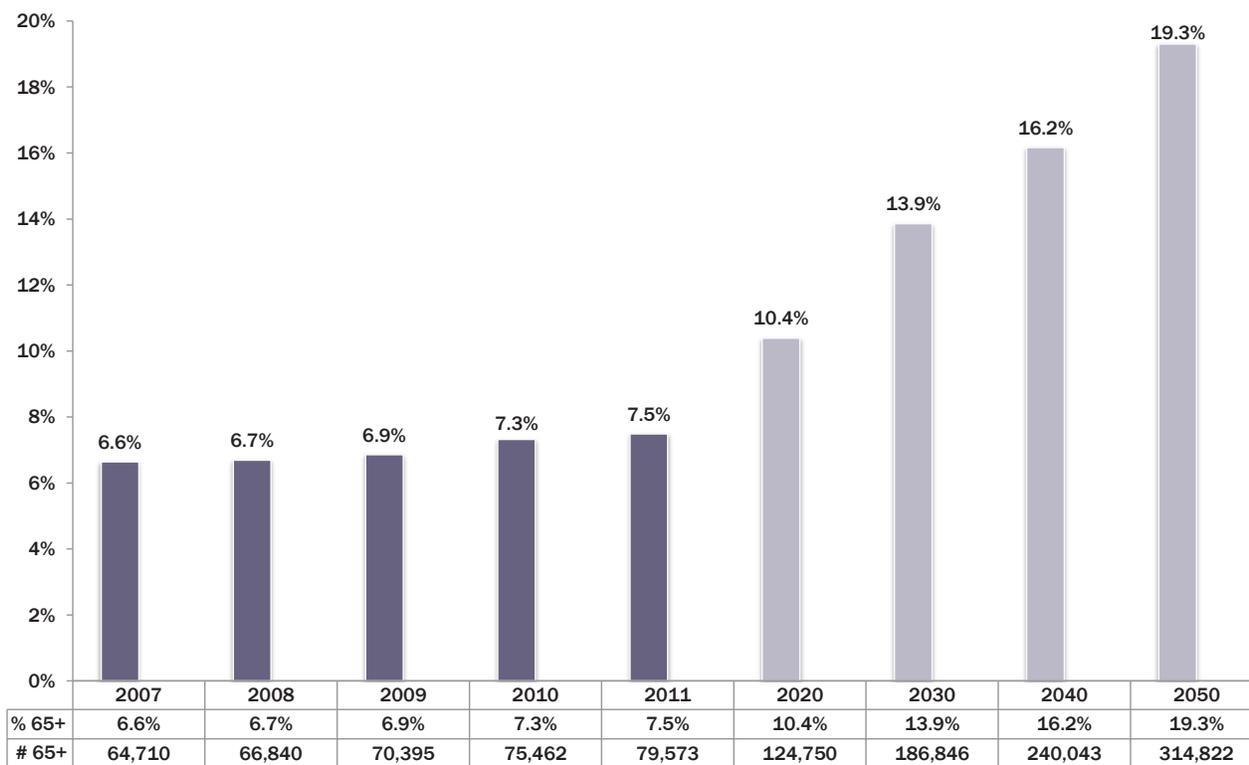
*This figure was the only one obtained from an alternate source (HHSC rather DADS) and thus might not be directly comparable to other figures in this chart. The figure reflects the 2012 estimate for the "average number of members receiving waiver services through STAR+PLUS."

Created by: Travis County HHS/VS Research & Planning Division, 2013. Source data: Texas Department of Aging and Disability Services (DADS) Reference Guide 2013, p. 37, 38, 40, 42, 44; DADS Interest Lists Fiscal Year Summaries August 2012; Texas Health and Human Services Commission (HHSC) Legislative Appropriations Request Fiscal Years 2014-2015 2.D.

Demographic Trends

Demographic trends related to the aging of the population suggest that community support service needs will continue to grow. Between 2000 and 2010, the 65 and over population in Travis County grew by 36% and the 45 to 64 age group increased by 53%.³⁴ During the same time period, the Austin-Round Rock metropolitan area had the fastest growing “pre-senior” population (age 55 to 64) in the nation, with a 110% change from 2000 to 2010, and was ranked second in senior (age 65+) population growth, with a 53% change.³⁵ As shown in the following chart, the older adult population in Travis County has increased in number and share during recent years and is projected to comprise a larger percentage of the total population in the coming decades.

**65 and Over Age Group as a Percent of the Population
Travis County, 2007-2011 and Future Projections**



Created by: Travis County HHS/VS Research & Planning Division, 2013

Source data: U.S. Census Bureau, 2007-2011 American Community Survey 1-Year Estimates, Table B01001; 2012 Texas State Data Center Projections (Scenario 0.5)

Because the rate of disability increases with age, as the population grows older, the number of people living with a disability who may need services and supports will also likely increase. In 2011, 8% of the total Travis County population had one or more disabilities.³⁶ However among the older adult population, nearly one in five (18.1%) individuals age 65 to 74 and more than half (51.8%) of individuals 75 and older

had a disability.³⁷ The following table provides additional detail regarding the number and selected type of disability for the overall population and the population 65 years and older.ⁱ

Disability Status by Age Civilian Non-institutionalized Population, Travis County 2011		
	Total Population	65 Years and Over
With an independent living disability	2.5%	16.0%
With a self-care disability	1.3%	9.0%
With one disability	4.7%	14.1%
With two or more disabilities	3.2%	17.9%

Created by: Travis County HHS/VS Research & Planning Division, 2013. Source data: U.S. Census Bureau, 2011 American Community Survey 1-Year Estimates, Tables S1810 and B18108.

Caregiving

Family caregivers provide a significant amount of assistance to individuals with disabilities or chronic care needs. The AARP Public Policy Institute estimated that in 2009, about 42.1 million family caregivers in the U.S. provided care to an adult with limitations in daily activities, representing an estimated economic value of \$450 billion.^{38,j} Nearly two-thirds (65%) of caregivers are female and more than eight in ten are caring for a relative or friend age 50 or older.³⁹ Two-thirds of older adults with disabilities who receive assistance with activities of daily living (such as bathing or dressing) or instrumental activities of daily living (such as managing medications or finances) at home receive all of their care from a family caregiver, while 26% receive some combination of family care and paid help.⁴⁰

Family caregivers cannot continue to provide the majority of long-term care. Changes in family structure, such as smaller family sizes, increasing numbers of childless women, families being more geographically dispersed, and family members wanting to remain in the labor force for longer periods of time, could all potentially contribute to smaller numbers of available family caregivers.⁴¹ These factors could lead to a greater need for formal in-home care services in the coming years.

i Disability status is defined as having one or more of the following difficulties: hearing, vision, cognitive, ambulatory, self-care, and independent living. Please see the 2011 American Community Survey Subject Definitions for further information: http://www.census.gov/acs/www/Downloads/data_documentation/SubjectDefinitions/2011_ACSSubjectDefinitions.pdf.

j The economic value of family caregiving is based on 42.1 million caregivers providing an average of 18.4 hours of care per week to recipients age 18 or older at an average value of \$11.16 per hour. For a more detailed description of the methodology see <http://assets.aarp.org/rgcenter/ppi/ltc/i51-caregiving.pdf>.

Emerging Issues

The Affordable Care Act of 2010 established a national, voluntary insurance program for purchasing community living services and supports known as the CLASS Act.⁴² During 2011, the Department of Health and Human Services analyzed options for implementing CLASS, and was unable to identify a viable design for carrying out the program.⁴³ Congress repealed the CLASS Act in late 2012, as part of the American Tax Payer Relief Act (ARTA), and in its place established a Commission on Long-Term Care.⁴⁴ During 2013, the Commission is charged with developing a plan for the design, financing, and implementation of a system ensuring access to long-term care services for all Americans.⁴⁵ This is the first time in more than two decades that Congress has significantly focused on the issue of long-term care.⁴⁶

Further Resources

Supportive Services for Independent Living has ties with the Public Health and Access to Healthcare, Basic Needs, and Housing Continuum issue areas. Access to healthcare may determine the availability of services and the quality of care received. Many low-income individuals living with a disability (20% of those living with a disability have incomes below the poverty level) who require assistance securing supportive services also need help meeting nutrition and housing needs.

In Travis County, there are several organizations that work collaboratively to help meet the needs of older adults and people with disabilities:

The Aging Services Council of Central Texas

www.agingservicescouncil.org

The Aging Services Council of Central Texas is a network of individuals and organizations who work together to ensure that older adults and caregivers have the information and services they need to support themselves and family members as they age. The Council endeavors to maximize resources for aging services and to promote community awareness and investment around aging issues.

The Mayor's Task Force on Aging

Convened in September of 2012, the Mayor's Task Force on Aging is comprised of nonprofit executives, funders, policy makers, and academics. The Task Force, supported by graduate students from the Lyndon B. Johnson School of Public Affairs at the University of Texas at Austin, will develop a plan of action to create new partnerships, policy directions, and funding priorities to address Central Texas's acute need to accommodate the fast growing aging population.

The Intellectual and Developmental Disabilities Coalition

www.iddc-ctx.org

The Intellectual and Developmental Disabilities Coalition is made up of agencies, service providers, and interested citizens who want to educate the community about the needs of people with intellectual and developmental disabilities and promote a seamless continuum of services and supports.

Below are some selected resources that provide more information about long-term care and issues effecting older adults and persons with disabilities.

The Kaiser Family Foundation

www.kff.org

The Kaiser Family Foundation (KFF) is a major producer of policy analysis and research and a clearinghouse of news and information for the health policy community. Among a range of other topics, KFF provides extensive information about Medicaid (including long-term services and supports) and Medicare policy.

The AARP Public Policy Institute

<http://www.aarp.org/research/ppi/>

The AARP Public Policy Institute conducts and compiles research to inform the public debate on the issues we face as we age and supports policy development to address our common need for economic security, health care, and quality of life.

The Arc

<http://www.thearc.org/>

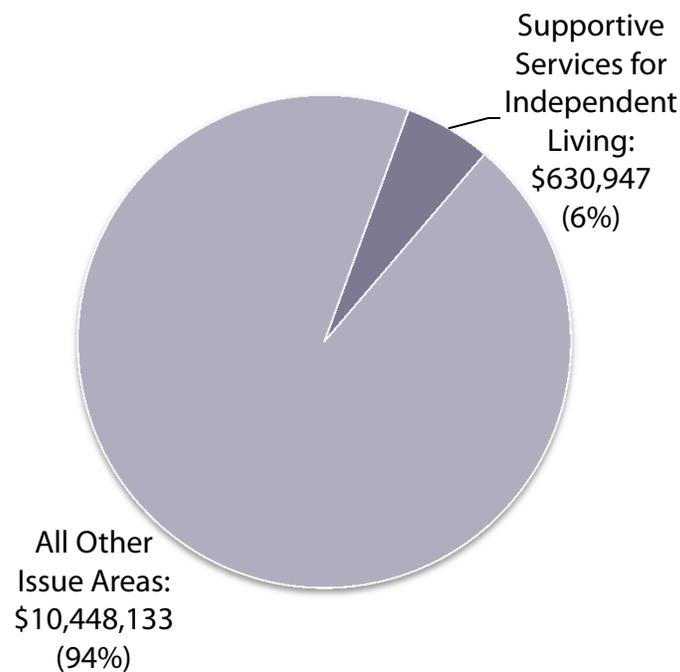
The Arc is a national organization with community-based chapters that advocates for and serves people with intellectual and developmental disabilities and their families. The Arc's website includes a variety of information about legislative and policy issues that affect people with disabilities.

Performance Highlights

OUR INVESTMENT

TCHHS/VS has departmental and contracted programs that offer supportive services for independent living. Contracted services in this issue area help elderly and individuals with disabilities to remain in their homes and communities. Services are provided in the home and primarily focus on assistance with daily living activities. The Department's Services for the Deaf and Hard of Hearing provides direct services to residents of Travis County. The Department's Family Support Services division also provides emergency assistance targeted to older adults and individuals with disabilities.

INVESTMENT IN SUPPORTIVE SERVICES FOR INDEPENDENT LIVING AND OTHER ISSUE AREAS, 2012



The Department's Supportive Services for Independent Living investment includes the following agencies: The Arc of the Capital Area; Easter Seals Central Texas; Family Eldercare; Helping the Aging, Needy, and Disabled, Inc.; Meals on Wheels and More; and Vaughn House, Inc.

THE ARC OF THE CAPITAL AREA

Case Management and Advocacy Services

Program Description

The Case Management and Advocacy Services program has two components: case management and advocacy for at-risk juveniles and case management for adults. The first component of the program works to prevent juvenile involvement in the criminal justice system; the program provides positive alternatives to criminal behavior among youth with developmental disabilities to prevent criminal involvement or re-offending, to remain in school, reach graduation, and successfully transition into the community. The second program component strives to prevent the institutional care of adults with intellectual and developmental disabilities by providing assistance to these adults to live independently in the community. Services provided include: resource development, person-centered planning, legal advocacy, special education advocacy, and social/recreational opportunities.

Funding

The total TCHHS/VS investment in the Case Management and Advocacy Services program for 2012 was \$97,656. This investment comprised 47.4% of the total program budget.

Eligibility Criteria

In the case management and advocacy for at-risk juveniles component of the program, clients must: be between the ages of 11 and 17; reside in Travis County; be diagnosed as intellectually or developmentally disabled; have been involved in the juvenile justice system and/or be at risk of involvement; and be enrolled in special education.

In the case management for adults component of the program, clients must: be 18 years of age or older; reside in Travis County; and be diagnosed as intellectually or developmentally disabled.

THE ARC OF THE CAPITAL AREA: CASE MANAGEMENT AND ADVOCACY SERVICES

Client Demographics

This program served more male (59%) than female (41%) clients. Over one-quarter (29%) of clients were in the 40 to 59 age range, and 26% of clients were between the ages of 25 and 39. More than one-third (35%) of clients were Hispanic or Latino, and 78% of clients were White. Nearly one-third (32%) of clients had incomes between 50% and 100% of the Federal Poverty Income Guideline level. (See Appendix A for specific guideline income levels.)

Gender	Num.	Pct.
Female	54	41%
Male	79	59%
<i>Total</i>	<i>133</i>	<i>100%</i>

Ethnicity	Num.	Pct.
Hispanic or Latino	47	35%
Not Hispanic or Latino	83	62%
Unknown	3	2%
<i>Total</i>	<i>133</i>	<i>100%</i>

Race	Num.	Pct.
<i>Population of one race:</i>		
Asian	1	1%
Black or African American	21	16%
White	104	78%
Some other race	7	5%
<i>Total</i>	<i>133</i>	<i>100%</i>

Age	Num.	Pct.
10 to 14	22	17%
15 to 17	19	14%
18 to 24	11	8%
25 to 39	34	26%
40 to 59	38	29%
60 to 74	8	6%
75 and over	1	1%
<i>Total</i>	<i>133</i>	<i>100%</i>

Income	Num.	Pct.
<50% of FPIG	21	16%
50% to 100%	42	32%
101% to 150%	19	14%
151% to 200%	11	8%
>200%	32	24%
Unknown	8	6%
<i>Total</i>	<i>133</i>	<i>100%</i>

Note: Percentages may not total to 100% due to rounding.

THE ARC OF THE CAPITAL AREA: CASE MANAGEMENT AND ADVOCACY SERVICES

Client ZIP Codes

Almost one-quarter (22%) of clients lived in the Southwest area of Travis County. A substantial portion (18%) of clients were also found in the Northeast area. (See Appendix B for ZIP code classification map.)

Northeast	Num.	Pct.
78653	1	0.8%
78660	5	3.8%
78752	8	6.0%
78753	8	6.0%
78754	2	1.5%
<i>Total Northeast</i>	<i>24</i>	<i>18.0%</i>

Northwest	Num.	Pct.
78613	1	0.8%
78669	2	1.5%
78726	1	0.8%
78731	6	4.5%
<i>Total Northwest</i>	<i>10</i>	<i>7.5%</i>

North	Num.	Pct.
78728	2	1.5%
78729	1	0.8%
78757	2	1.5%
78758	10	7.5%
78759	2	1.5%
<i>Total North</i>	<i>17</i>	<i>12.8%</i>

Southeast	Num.	Pct.
78610	1	0.8%
78719	1	0.8%
78741	5	3.8%
78744	11	8.3%
<i>Total Southeast</i>	<i>18</i>	<i>13.5%</i>

Southwest	Num.	Pct.
78704	6	4.5%
78735	2	1.5%
78736	1	0.8%
78737	1	0.8%
78739	2	1.5%
78745	9	6.8%
78748	4	3.0%
78749	4	3.0%
<i>Total Southwest</i>	<i>29</i>	<i>21.8%</i>

East	Num.	Pct.
78702	2	1.5%
78721	2	1.5%
78722	1	0.8%
78723	3	2.3%
78724	5	3.8%
78725	1	0.8%
<i>Total East</i>	<i>14</i>	<i>10.5%</i>

West	Num.	Pct.
78703	4	3.0%
78738	1	0.8%
78746	6	4.5%
<i>Total West</i>	<i>11</i>	<i>8.3%</i>

Central	Num.	Pct.
78701	3	2.3%
78705	1	0.8%
78756	6	4.5%
<i>Total Central</i>	<i>10</i>	<i>7.5%</i>

Note: Percentages may not total to 100% due to rounding.

THE ARC OF THE CAPITAL AREA: CASE MANAGEMENT AND ADVOCACY SERVICES

Performance Goals and Results

The Arc of the Capital Area met or exceeded goals for all but one performance measure. The number of special education; Admission, Review, Dismissal meetings; and/or juvenile court appearances attended by staff (see the third output) fell short of expectations. Staff attribute this result to fewer court hearings and in-school meetings because of fewer offenses by clients and clients satisfactorily meeting goals. The program provided higher numbers of direct juvenile client visits (see the fifth output) because of increased intervention efforts through direct client visits to address potential problems before offenses occur. The number of direct adult client visits (see the sixth output) was also over target due to increased client contacts during socialization events and more client visits addressing basic needs and housing stability. Finally, staff believe increased interventions and monitoring visits contributed to juvenile clients meeting goals (see the first and second outcomes), while participation in client-centered events helped improve social skills for adult clients (see the third and fourth outcomes).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated juvenile clients served	41	45	91%
Number of unduplicated adult clients served	92	87	106%
Number of special education; Admission, Review, Dismissal meetings; and/or juvenile court appearances attended by staff	182	250	73%
Number of case management service hours completed for adult clients	1,867	1,932	97%
Number of direct juvenile client visits	156	140	111%
Number of direct adult client visits	961	763	126%
Outcomes			
Percentage of juvenile clients that remained in school or worked while receiving services	95% (39/41)	80% (36/45)	119%
Percentage of juvenile clients who did not offend / re-offend while receiving services	93% (38/41)	80% (36/45)	116%
Percentage of adult clients achieving / maintaining self-sufficiency due to services, individual goals and service plans	95% (87/92)	89% (77/87)	107%
Percentage of adult clients with improved development and quality of life due to services, individual goals and service plans	95% (87/92)	89% (77/87)	107%

Developmental and Clinical Solutions

Program Description

The Developmental and Clinical Solutions program seeks to provide a continuum of care within which services are unduplicated for individuals with disabilities in the areas of health, independent functioning, and clinical rehabilitation. The program provides comprehensive service coordination, wraparound services, training, and support services to individuals with significant disabilities to live within the community, and promoting improved functioning. Services provided include:

- Early Childhood Intervention: provides pediatric family-centered services, including assistive technology, screening and assessment, family counseling, family education, medical (diagnostic or evaluation services used to determine eligibility), nursing, nutrition, psychological, social work, respite care, deaf education, and vision services; special instruction and service coordination; and speech-language, physical, occupational, audiology, aquatic therapy, and follow along which follows inactive clients for a change in their status
- Comprehensive Outpatient Rehabilitation Program: pediatric and adult rehabilitation program that includes physical, occupational, speech-language and aquatic therapies, service coordination, audiology, and transportation services
- Family/Caregiver Support Services: support services and resources for families and caregivers of children and adults who are disabled, including recreational therapeutic respite camping for children and adults

All programs include intake/authorization, individualized treatment plans, progress monitoring, and transition planning.

Funding

The total TCHHS/VS investment in the Developmental and Clinical Solutions program for 2012 was \$123,241. This investment comprised 2.3% of the total program budget. TCHHS/VS also funds the Employment Solutions program, which is described later in this report.

EASTER SEALS CENTRAL TEXAS

Developmental and Clinical Solutions

Eligibility Criteria

This program serves individuals, ages birth through adulthood, with a documented physical, neurological or developmental disability or delay and who have a goal to maintain or increase level of functioning or independence, a desire to improve quality of life, and a commitment to participate in a client-centered plan of care. The population served is predominantly low-income (i.e., less than 200% of the Federal Poverty Income Guideline level).

EASTER SEALS CENTRAL TEXAS: DEVELOPMENTAL AND CLINICAL SOLUTIONS

Client Demographics

Close to two-thirds (62%) of clients served were male. Most (86%) clients served were children under the age of 5. Over one-half (54%) of clients were Hispanic or Latino, and 81% of clients were White. More than one-quarter (29%) of clients had incomes below 50% of the Federal Poverty Income Guideline level. (See Appendix A for specific guideline income levels.) Staff note that they encourage all clients to provide income status; however, there are clients who do not know this information or decline to provide it.

Gender	Num.	Pct.
Female	657	38%
Male	1,059	62%
<i>Total</i>	<i>1,716</i>	<i>100%</i>

Ethnicity	Num.	Pct.
Hispanic or Latino	934	54%
Not Hispanic or Latino	782	46%
<i>Total</i>	<i>1,716</i>	<i>100%</i>

Race	Num.	Pct.
<i>Population of one race:</i>		
American Indian or Alaska Native	2	0.1%
Asian	32	2%
Black or African American	219	13%
Native Hawaiian or Other Pacific Islander	13	1%
White	1,395	81%
Some other race	27	2%
<i>Other and Unknown:</i>		
Other	28	2%
<i>Total</i>	<i>1,716</i>	<i>100%</i>

Age	Num.	Pct.
Under 5	1,483	86%
5 to 9	93	5%
10 to 14	47	3%
15 to 17	13	1%
18 to 24	9	1%
25 to 39	12	1%
40 to 59	12	1%
60 to 74	19	1%
75 and over	28	2%
<i>Total</i>	<i>1,716</i>	<i>100%</i>

Income	Num.	Pct.
<50% of FPIG	500	29%
50% to 100%	120	7%
101% to 150%	117	7%
151% to 200%	426	25%
>200%	199	12%
Unknown	354	21%
<i>Total</i>	<i>1,716</i>	<i>100%</i>

Note: Percentages may not total to 100% due to rounding.

EASTER SEALS CENTRAL TEXAS: DEVELOPMENTAL AND CLINICAL SOLUTIONS

Client ZIP Codes

Nearly one-half (49%) of clients in this program resided in the Northeast area of Travis County. The North and East areas each had 18% of the total client population in residence. (See Appendix B for ZIP code classification map.)

Northeast			Northwest			North		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78615	3	0.2%	78613	4	0.2%	78727	16	0.9%
78621	31	1.8%	78641	3	0.2%	78728	12	0.7%
78653	86	5.0%	78669	2	0.1%	78729	4	0.2%
78660	230	13.4%	78730	1	0.1%	78757	46	2.7%
78664	35	2.0%	78731	37	2.2%	78758	228	13.3%
78752	102	5.9%	78732	3	0.2%	78759	6	0.3%
78753	280	16.3%	78734	2	0.1%	<i>Total North</i>	<i>312</i>	<i>18.2%</i>
78754	72	4.2%	78750	4	0.2%			
<i>Total Northeast</i>	<i>839</i>	<i>48.9%</i>	<i>Total Northwest</i>	<i>56</i>	<i>3.3%</i>			
Southeast			Southwest			East		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78612	1	0.1%	78704	8	0.5%	78702	10	0.6%
78617	11	0.6%	78736	1	0.1%	78721	10	0.6%
78640	3	0.2%	78739	3	0.2%	78722	7	0.4%
78719	2	0.1%	78745	10	0.6%	78723	139	8.1%
78741	10	0.6%	78748	7	0.4%	78724	134	7.8%
78742	2	0.1%	78749	3	0.2%	78725	6	0.3%
78744	14	0.8%	<i>Total Southwest</i>	<i>32</i>	<i>1.9%</i>	<i>Total East</i>	<i>306</i>	<i>17.8%</i>
78747	3	0.2%						
<i>Total Southeast</i>	<i>46</i>	<i>2.7%</i>	Others					
			Outside of Travis Co.	76	4.4%	78701	5	0.3%
			<i>Total Others</i>	<i>76</i>	<i>4.4%</i>	78705	8	0.5%
						78751	23	1.3%
						78756	12	0.7%
						<i>Total Central</i>	<i>48</i>	<i>2.8%</i>
West								
	Num.	Pct.						
78746	1	0.1%						
<i>Total West</i>	<i>1</i>	<i>0.1%</i>						

Note: Percentages may not total to 100% due to rounding.

EASTER SEALS CENTRAL TEXAS: DEVELOPMENTAL AND CLINICAL SOLUTIONS

The Developmental and Clinical Solutions program surpassed goals for both outcome measures but did not meet targeted performance on both output measures. Program staff explain that their Early Childhood Intervention (ECI) program eligibility was narrowed, thereby reducing the number of children who qualify for these services. This impacted the total number of clients served (see the first output). Staff are beginning to see a small increase in the number of ECI clients and feel that in subsequent months their census will be much higher. With less children being served, the number of hours of service was commensurately reduced (see the second output). Staff note that they continue to have more clients who complete and return surveys than in the past (see the first outcome). However, with the decline in the number of clients enrolled in the ECI program, they had fewer clients to measure for the second outcome.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	1,716	2,155	80%
Number of hours of service delivered	32,184	39,377	82%
Outcomes			
Percentage of clients reporting satisfaction with services received	88% (515/587)	80% (304/380)	110%
Percentage of clients showing improved development, functioning, and/or quality of life and/or achieving/maintaining goals on individualized plan of care	87% (347/399)	80% (380/475)	109%

Employment Solutions

Program Description

The Employment Solutions program strives to reduce barriers and provide supports for clients to increase independence through the development of employment opportunities and awareness of their community. The program does this by: identifying behavioral barriers to successful employment; increasing knowledge and skill levels to identify and access community resources that can provide assistance with basic needs, education, housing, and counseling; increasing individual choices to develop employment and community living skills; and increasing participation in the decision process to allow clients to make choices that affect their lives. Employment Solutions is comprised of four programs:

- Transitions Program: provides choice-based service coordination, wraparound support services, referrals to other support organizations, and case management during paid job training participation
- Follow-Along Program: advocates for consumers to ensure job satisfaction for the employee and employer; assists in the identification/set-up of accommodation needs; assists with conflict resolution, resolving issues related to equipment, behavior, transportation; and assists in the identification of supports needed for a consumer to maintain employment
- Independent Living Program: provides community-based services to avoid isolation and promote independence in an individual's chosen living situation while striving to prevent and eliminate exploitation, neglect, and abuse
- Liberation Station Program: an assistive technology-equipped computer lab that is available for clients served by Easter Seals Central Texas (ESCT)

Funding

The total TCHHS/VS investment in the Employment Solutions program for 2012 was \$64,500. This investment comprised 26.9% of the total program budget. TCHHS/VS also funds the Developmental and Clinical Solutions program, which is described earlier in this report.

Employment Solutions

Eligibility Criteria

This program serves men and women currently residing in Travis County. Participants are of working age, frequently homeless, with cognitive and/or physical disabilities, chemical dependency, and/or have mental health or background issues. Referrals are received from homeless shelters, school systems, substance abuse facilities, the criminal justice system, other agencies and internal programs within ESCT, Austin Travis County Integral Care, or the Department of Assistive and Rehabilitative Services (DARS). Clients served are primarily low-income (i.e., have incomes at or below 200% of the Federal Poverty Income Guideline level).

EASTER SEALS CENTRAL TEXAS: EMPLOYMENT SOLUTIONS

Client Demographics

Close to two-thirds (64%) of clients were male, and 34% of clients were female. Well over one-third (41%) of clients were between 25 and 39 years of age. Hispanic or Latino clients accounted for 40% of the client population. Over one-third (35%) of clients were Some other race, and 30% of clients were Black or African American. More than one-third (39%) of clients had incomes below 50% of the Federal Poverty Income Guideline level. (See Appendix A for specific guideline income levels.)

Gender	Num.	Pct.
Female	57	34%
Male	107	64%
Unknown	2	1%
<i>Total</i>	<i>166</i>	<i>100%</i>

Ethnicity	Num.	Pct.
Hispanic or Latino	67	40%
Not Hispanic or Latino	97	58%
Unknown	2	1%
<i>Total</i>	<i>166</i>	<i>100%</i>

Race	Num.	Pct.
<i>Population of one race:</i>		
American Indian or Alaska Native	2	1%
Asian	6	4%
Black or African American	49	30%
White	45	27%
Some other race	58	35%
<i>Other and Unknown:</i>		
Unknown	6	4%
<i>Total</i>	<i>166</i>	<i>100%</i>

Age	Num.	Pct.
18 to 24	35	21%
25 to 39	68	41%
40 to 59	48	29%
60 to 74	11	7%
Unknown	4	2%
<i>Total</i>	<i>166</i>	<i>100%</i>

Income	Num.	Pct.
<50% of FPIG	65	39%
50% to 100%	43	26%
101% to 150%	25	15%
151% to 200%	16	10%
>200%	8	5%
Unknown	9	5%
<i>Total</i>	<i>166</i>	<i>100%</i>

Note: Percentages may not total to 100% due to rounding.

EASTER SEALS CENTRAL TEXAS: EMPLOYMENT SOLUTIONS

Client ZIP Codes

One-fifth (20%) of clients in Employment Solutions resided in the Southwest area of Travis County. The East (17%) and North (16%) areas also had sizeable percentages of clients. (See Appendix B for ZIP code classification map.)

Northeast			Northwest			North		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78621	1	0.6%	78669	2	1.2%	78727	10	6.0%
78660	7	4.2%	78731	2	1.2%	78757	7	4.2%
78664	4	2.4%	<i>Total Northwest</i>	4	2.4%	78758	3	1.8%
78752	4	2.4%				78759	7	4.2%
78753	6	3.6%	Southwest			<i>Total North</i>	27	16.3%
78754	3	1.8%	78704	5	3.0%			
<i>Total Northeast</i>	25	15.1%	78735	3	1.8%	East		
			78736	3	1.8%	78702	5	3.0%
			78737	3	1.8%	78721	3	1.8%
			78739	5	3.0%	78722	1	0.6%
			78745	9	5.4%	78723	9	5.4%
			78748	2	1.2%	78724	9	5.4%
			78749	3	1.8%	78725	1	0.6%
			<i>Total Southwest</i>	33	19.9%	<i>Total East</i>	28	16.9%
Southeast			Others			Central		
78617	4	2.4%	Homeless	2	1.2%	78701	1	0.6%
78640	4	2.4%	Outside of Travis Co.	4	2.4%	78705	1	0.6%
78741	4	2.4%	Unknown	11	6.6%	78756	1	0.6%
78742	1	0.6%	<i>Total Others</i>	17	10.2%	<i>Total Central</i>	3	1.8%
78744	3	1.8%						
78747	3	1.8%						
<i>Total Southeast</i>	19	11.4%						
West								
78703	6	3.6%						
78746	4	2.4%						
<i>Total West</i>	10	6.0%						

Note: Percentages may not total to 100% due to rounding.

EASTER SEALS CENTRAL TEXAS: EMPLOYMENT SOLUTIONS

The Employment Solutions program exceeded all outcome goals but fell short of expectations on two output measures. Program staff note that the Transitions program served more clients than expected (see the second output) due to increased work available in the Paid Job Training program. However, referrals to the Follow-Along program were down, due to a decreased number of eligible community placements, which impacted the number of clients enrolled (see the third output). More of the program’s training is taking place in classrooms in Austin and Round Rock ISDs, leading to slightly fewer visits to Liberation Station (see the fifth output).

While new placements in the community were low, job retention rates were high (see the first and second outcomes). Staff attribute this result to several factors: a licensed professional counselor available to clients to assist with any life issues that might arise, dedicated Follow-Along support available for clients and employers, and the realization that jobs are difficult to find. Finally, the popularity of the activities offered to the Independent Living clients led to increased participation among clients (see the third outcome).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	166	189	88%
Number of unduplicated clients in Transitions Program	90	80	113%
Number of unduplicated clients in Follow-Along program	70	100	70%
Number of unduplicated clients in Independent Living program	9	9	100%
Number of client visits to Liberation Station	373	400	93%
Outcomes			
Percent of clients in Transitions Program who retained employment for 90 days	75% (63/84)	40% (29/72)	186%
Percent of clients in Follow-Along Program who retained employment for 180 days	90% (63/70)	75% (54/72)	120%
Percent of clients in Independent Living Program who participated in an average of 2 activities per month enrolled (duplicated count of clients)	79% (19/24)	78% (7/9)	102%

FAMILY ELDERCARE

In-Home Care and Money Management

Program Description

The In-Home Care program provides in-home care and caregiver support on a sliding fee scale. The program supports and sustains caregivers in their efforts to care for elderly and disabled loved ones and supports older adults living alone with minimal caregiver support. The program allows frail elders and adults with disabilities to remain living in the community for as long as possible.

The Money Management program provides case management, bill payer and representative payee services to adults who are unable to manage their own finances. Services provide a safety net to those most at risk for premature institutionalization. This least restrictive form of assistance prolongs independent living by ensuring basic needs are met and prevents financial exploitation among frail and disabled adults.

Funding

The total TCHHS/VS investment in the In-Home Care and Money Management program for 2012 was \$78,465. This investment included on-going funding (\$32,415), one-time funding for the Money Management component of the program (\$22,295), and new additional funding for Money Management (\$23,755). The original on-going investment comprised 1.5% of the total program budget, while the additional funding for the Money Management component comprised 19.8% and 21.7%, respectively, of the total Money Management budget.

Eligibility Criteria

The In-Home Care program targets frail, low and moderate-income elders (age 55+), adults with disabilities (age 18+) and their family members or other caregivers in Travis County. Clients served using TCHHS/VS funds must have incomes at or below 200% of the Federal Poverty Income Guideline level.

The Money Management program targets adults (age 18+) in Travis County who are unable to manage their own finances and are at risk for financial exploitation, self-neglect, homelessness, and premature institutionalization. All clients are low-income (at or below 200% of the Federal Poverty Income Guideline level) and have no available or appropriate family or friends to assist in meeting this need.

FAMILY ELDERCARE: IN-HOME CARE AND MONEY MANAGEMENT

Client Demographics

Over one-half (53%) of clients served were female. More than one-third (35%) of clients were age 75 or older. Hispanic and Latino clients comprised 12% of clients, and 62% of clients were White. Over one-quarter (28%) of clients had incomes between 50% and 100% of the Federal Poverty Income Guideline level. (See Appendix A for specific guideline income levels.) For all demographic categories, there are large numbers of clients with unknown information. These clients receive information, referral, linkage to services and care coordination. Staff do not collect income, race, ethnicity or age information on these clients because they are relatively short-term cases that require one or two interactions, and staff do not need the information in order to provide this level of assistance.

Gender	Num.	Pct.
Female	687	53%
Male	490	38%
Unknown	113	9%
<i>Total</i>	<i>1,290</i>	<i>100%</i>

Ethnicity	Num.	Pct.
Hispanic or Latino	149	12%
Not Hispanic or Latino	854	66%
Unknown	287	22%
<i>Total</i>	<i>1,290</i>	<i>100%</i>

Race	Num.	Pct.
<i>Population of one race:</i>		
American Indian or Alaska Native	2	0.2%
Asian	9	1%
Black or African American	179	14%
White	800	62%
Some other race	4	0.3%
<i>Population of two races:</i>		
Black or African American and White	1	0.1%
All other two race combinations	1	0.1%
<i>Other and Unknown:</i>		
Unknown	294	23%
<i>Total</i>	<i>1,290</i>	<i>100%</i>

Age	Num.	Pct.
18 to 24	12	1%
25 to 39	43	3%
40 to 59	292	23%
60 to 74	339	26%
75 and over	454	35%
Unknown	150	12%
<i>Total</i>	<i>1,290</i>	<i>100%</i>

Income	Num.	Pct.
<50% of FPIG	33	3%
50% to 100%	361	28%
101% to 150%	175	14%
151% to 200%	152	12%
>200%	264	20%
Unknown	305	24%
<i>Total</i>	<i>1,290</i>	<i>100%</i>

Note: Percentages may not total to 100% due to rounding.

FAMILY ELDERCARE: IN-HOME CARE AND MONEY MANAGEMENT

Client ZIP Codes

Clients in this program resided throughout Travis County. The Southwest (17%) and Northeast (16%) areas had the largest shares of clients. (See Appendix B for ZIP code classification map.) A sizeable percentage (15%) of clients had unknown ZIP codes. These clients receive information, referral, linkage to services and care coordination. Staff do not collect ZIP code information on these clients because they are relatively short-term cases that require one or two interactions, and staff do not need the information in order to provide this level of assistance.

Northeast			Northwest			North		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78653	7	0.5%	78613	16	1.2%	78727	12	0.9%
78660	41	3.2%	78641	3	0.2%	78728	14	1.1%
78664	14	1.1%	78669	3	0.2%	78729	6	0.5%
78752	82	6.4%	78726	3	0.2%	78757	36	2.8%
78753	51	4.0%	78730	6	0.5%	78758	38	2.9%
78754	6	0.5%	78731	21	1.6%	78759	24	1.9%
<i>Total Northeast</i>	<i>201</i>	<i>15.6%</i>	78732	2	0.2%	<i>Total North</i>	<i>130</i>	<i>10.1%</i>
			78734	2	0.2%			
			78750	14	1.1%			
			<i>Total Northwest</i>	<i>70</i>	<i>5.4%</i>			
Southeast			Southwest			East		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78610	3	0.2%	78652	1	0.1%	78702	57	4.4%
78617	8	0.6%	78704	76	5.9%	78721	24	1.9%
78640	1	0.1%	78735	5	0.4%	78722	7	0.5%
78741	44	3.4%	78736	3	0.2%	78723	87	6.7%
78742	7	0.5%	78737	4	0.3%	78724	19	1.5%
78744	11	0.9%	78739	2	0.2%	78725	3	0.2%
78747	6	0.5%	78745	89	6.9%	<i>Total East</i>	<i>197</i>	<i>15.3%</i>
<i>Total Southeast</i>	<i>80</i>	<i>6.2%</i>	78748	17	1.3%			
			78749	17	1.3%			
			<i>Total Southwest</i>	<i>214</i>	<i>16.6%</i>			
						Central		
							Num.	Pct.
						78701	34	2.6%
						78705	4	0.3%
						78751	13	1.0%
						78756	44	3.4%
						<i>Total Central</i>	<i>95</i>	<i>7.4%</i>
West			Others					
	Num.	Pct.		Num.	Pct.			
78620	2	0.2%	Homeless	6	0.5%			
78703	9	0.7%	Outside of Travis Co.	79	6.1%			
78733	2	0.2%	Unknown	198	15.3%			
78738	3	0.2%	<i>Total Others</i>	<i>283</i>	<i>21.9%</i>			
78746	4	0.3%						
<i>Total West</i>	<i>20</i>	<i>1.6%</i>						

Note: Percentages may not total to 100% due to rounding.

FAMILY ELDERCARE: IN-HOME CARE AND MONEY MANAGEMENT

Performance Goals and Results

Family Eldercare surpassed performance expectations across all measures. Staff note that this result was due to an increase in care coordination and an increase in Money Management case managers. The number of clients responding to satisfaction surveys (see the second outcome) was smaller than expected due to a lower than anticipated response rate.

Performance Measure	Total Program Performance Results	Total Program Performance Goals*	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served (total number provided screening, assessment and/or In-Home Care or Money Management services)	1,290	1,117	115%
Number of unduplicated clients provided care coordination and case management	1,163	940	124%
Outcomes			
Percentage of clients who are maintained in a safe environment where all basic needs are met	99.8% (896/898)	95% (445/468)	105%
Percentage of clients who are satisfied with services	94% (221/235)	85% (355/418)	111%
Percentage of Money Management clients served who have no new incidents of abuse, neglect or financial exploitation	100% (330/330)	95% (257/270)	105%

* Total Program Performance Goals only include the original 2012 contract year goals and do not reflect the additional performance attributable to the additional funds received for the Money Management component of the program.

HELPING THE AGING, NEEDY, AND DISABLED, INC.

Homemaker/Personal Assistance

Program Description

The Homemaker/Personal Assistance program provides in-home attendant services to elderly or disabled adults who are in immediate need. Many of these individuals qualify for in-home services funded by Medicaid but continue to live in unhealthy or dangerous conditions without assistance while they wait for eligibility procedures to be completed. The program can usually place an attendant in the home of a client within 10 days and provides a sliding scale fee for clients to receive services at little or no cost during this process. In general, clients are scheduled for no more than 12 hours of service per week. Attendant services provided in home include personal care tasks, such as bathing, feeding, and hygiene, as well as housekeeping tasks, such as cleaning and laundry.

Funding

The total TCHHS/VS investment in the Homemaker/Personal Assistance program for 2012 was \$22,849. This investment comprised 17.0% of the total program budget.

Eligibility Criteria

This program serves disabled individuals over the age of 18 and individuals over the age of 60 with medical conditions that limit their ability to perform necessary activities of daily living. In addition, participants may have an income no greater than 250% of the Federal Poverty Income Guideline level.

HELPING THE AGING, NEEDY, AND DISABLED, INC.: HOMEMAKER/PERSONAL ASSISTANCE

Client Demographics

Three-quarters of clients were female and 25% of clients were male. Over one-third (39%) of clients were in the 75 and over age group. More than one-quarter (28%) of clients were Hispanic or Latino. A majority (80%) of clients were White and 20% of clients were Black or African American. Over one-third (36%) of clients had incomes between 101% and 150% of the Federal Poverty Income Guideline (FPIG) level, and another 36% of clients had incomes between 50% and 100% of FPIG. (See Appendix A for specific guideline income levels.)

Please note that client demographics include only those individuals provided essential services (in-home attendant care).

Gender	Num.	Pct.
Female	148	75%
Male	49	25%
<i>Total</i>	<i>197</i>	<i>100%</i>

Ethnicity	Num.	Pct.
Hispanic or Latino	56	28%
Not Hispanic or Latino	141	72%
<i>Total</i>	<i>197</i>	<i>100%</i>

Race	Num.	Pct.
<i>Population of one race:</i>		
Black or African American	39	20%
White	158	80%
<i>Total</i>	<i>197</i>	<i>100%</i>

Age	Num.	Pct.
25 to 39	3	2%
40 to 59	59	30%
60 to 74	58	29%
75 and over	77	39%
<i>Total</i>	<i>197</i>	<i>100%</i>

Income	Num.	Pct.
<50% of FPIG	16	8%
50% to 100%	70	36%
101% to 150%	71	36%
151% to 200%	26	13%
>200%	14	7%
<i>Total</i>	<i>197</i>	<i>100%</i>

Note: Percentages may not total to 100% due to rounding.

HELPING THE AGING, NEEDY, AND DISABLED, INC.: HOMEMAKER/PERSONAL ASSISTANCE

Performance Goals and Results

The Homemaker/Personal Assistance program exceeded goals on both output measures but fell short of targeted performance on one outcome measure. The number of clients served with intake, assessment and referral services (see the first output) and the number of individuals provided essential services (see the second output) were both higher than expected due to the number of individuals carried over in the first quarter that continued to need assistance. The number of referrals received also increased. Many individuals no longer qualify for Medicaid services, with incomes slightly over the eligibility limit, but still need some assistance in the home. Program staff are seeing the referral increase coming from physicians offices and clinics, Meals On Wheels, skilled home health care agencies and other sources.

The percentage of clients achieving/maintaining self-sufficiency (see the first outcome) was low because of individuals that declined to receive services, some due to co-pay requirements for the program. Several individuals had Primary Health Care services prior to service initiation and others declined because they were unable to hire the attendant of their choice.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served with intake, assessment and referral services	251	168	149%
Number of individuals provided essential services (in-home attendant care)	197	151	130%
Outcomes			
Percentage of clients able to achieve/maintain self-sufficiency due to receiving essential services	78% (197/251)	90% (151/168)	87%
Percentage of clients/households satisfied with services provided	97% (132/136)	90% (136/151)	108%

MEALS ON WHEELS AND MORE

Congregate Meal Program

Program Description

The Congregate Meal Program provides high-quality, nutritious meals to adults, age 60 or older, that meet one-third of the Recommended Dietary Reference Intakes and the USDA's Dietary guidelines for Americans meeting federal meal pattern requirements. The program works to promote and assist the congregate site participants in maintaining their highest level of cognitive and physical functioning by promoting good nutritional choices, while attending an inviting active social setting. Program staff solicit direct client feedback so that meals not only meet the nutritional needs of the participants but also incorporate client choice in the selection of menu items. Finally, the program provides periodic supplemental nutrition, health education and other community resource information to participants about the programs offered through Meals on Wheels and More and other service providers in Travis County.

Funding

The total TCHHS/VS investment in the Congregate Meal Program for 2012 was \$81,981. This investment comprised 12.2% of the total program budget. TCHHS/VS also funds the Meals on Wheels program, which is described later in this report.

Eligibility Criteria

The Congregate Meal Program is targeted to reach adults who are 60 or older. The meal sites are located in diverse communities and each site reflects the culture and ethnicity of the neighborhood.

MEALS ON WHEELS AND MORE: CONGREGATE MEAL PROGRAM

Client Demographics

Nearly two-thirds (65%) of clients were female. Over one-half (53%) of clients were between the ages of 60 and 74, while 42% of clients were age 75 or older. More than one-quarter (27%) of clients were Hispanic or Latino, and 55% of clients were White. Staff report that income data is now collected differently than in previous years based on the requirements of another funder. For all clients, income status is designated as at or below the Federal Poverty Income Guideline, low income, moderate income or high income. These categories were set by the Area Agency on Aging of the Capital Area. Unknown demographics may be captured over the course of the reporting year when existing participants complete required yearly intake paperwork. Incomplete intake paperwork was shared as an Excel document with Meals on Wheels and More when the agency took over the original contract and the Congregate Team has been updating this information. If the participants are no longer attending the congregare sites, though, this information cannot be updated.

Gender			Age		
	Num.	Pct.		Num.	Pct.
Female	1,000	65%	25 to 39	10	1%
Male	523	34%	40 to 59	59	4%
Unknown	11	1%	60 to 74	812	53%
<i>Total</i>	<i>1,534</i>	<i>100%</i>	75 and over	638	42%
			Unknown	15	1%
			<i>Total</i>	<i>1,534</i>	<i>100%</i>

Ethnicity			Income		
	Num.	Pct.		Num.	Pct.
Hispanic or Latino	421	27%	Not Applicable	1,534	100%
Not Hispanic or Latino	575	37%	<i>Total</i>	<i>1,534</i>	<i>100%</i>
Unknown	538	35%			
<i>Total</i>	<i>1,534</i>	<i>100%</i>			

Race		
<i>Population of one race:</i>		
American Indian or Alaska Native	7	0.5%
Asian	37	2%
Black or African American	218	14%
Native Hawaiian or Other Pacific Islander	7	0.5%
White	837	55%
Some other race	13	1%
<i>Other and Unknown:</i>		
Unknown	415	27%
<i>Total</i>	<i>1,534</i>	<i>100%</i>

Note: Percentages may not total to 100% due to rounding.

MEALS ON WHEELS AND MORE: CONGREGATE MEAL PROGRAM

Client ZIP Codes

Over one-quarter (28%) of clients in the Congregate Meal Program lived in the Southwest area of Travis County. The East (22%) area also had a sizeable share of clients in residence. (See Appendix B for ZIP code classification map.)

Northeast			Northwest			North		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78621	9	0.6%	78613	6	0.4%	78727	10	0.7%
78653	69	4.5%	78641	13	0.8%	78728	13	0.8%
78660	69	4.5%	78645	63	4.1%	78757	18	1.2%
78664	2	0.1%	78654	1	0.1%	78758	53	3.5%
78752	27	1.8%	78669	3	0.2%	78759	4	0.3%
78753	70	4.6%	78731	6	0.4%	<i>Total North</i>	98	6.4%
78754	14	0.9%	78732	1	0.1%			
<i>Total Northeast</i>	260	16.9%	78734	4	0.3%			
			78750	4	0.3%			
			<i>Total Northwest</i>	101	6.6%			
Southeast			Southwest			East		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78610	4	0.3%	78652	2	0.1%	78702	156	10.2%
78612	5	0.3%	78704	119	7.8%	78721	63	4.1%
78617	29	1.9%	78735	10	0.7%	78722	14	0.9%
78640	3	0.2%	78736	11	0.7%	78723	65	4.2%
78719	3	0.2%	78737	6	0.4%	78724	32	2.1%
78741	61	4.0%	78739	10	0.7%	78725	7	0.5%
78742	7	0.5%	78745	178	11.6%	<i>Total East</i>	337	22.0%
78744	69	4.5%	78748	65	4.2%			
78747	23	1.5%	78749	31	2.0%			
<i>Total Southeast</i>	204	13.3%	<i>Total Southwest</i>	432	28.2%			
West			Others			Central		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78620	3	0.2%	Outside of Travis Co.	21	1.4%	78701	9	0.6%
78703	11	0.7%	Unknown	21	1.4%	78705	1	0.1%
78733	6	0.4%	<i>Total Others</i>	42	2.7%	78751	3	0.2%
78738	6	0.4%				78756	6	0.4%
78746	15	1.0%				<i>Total Central</i>	19	1.2%
<i>Total West</i>	41	2.7%						

Note: Percentages may not total to 100% due to rounding.

MEALS ON WHEELS AND MORE: CONGREGATE MEAL PROGRAM

The Congregate Meal Program exceeded goals for all output and outcome measures. Program staff explain that the overall unduplicated client count (see the first output) continued to increase and show growth. It was anticipated that the overall number of participants would plateau by the end of the reporting period but that did not happen, largely because of the opportunity to socialize, meet with friends and attend a variety of interesting activities and events offered by each site.

With the change in the format of the Healthy Aging Fairs, there were five sessions offered instead of one, and at each session, there were on average 79 people in attendance (see the third output). Each individual session was surveyed, which resulted in a larger survey response than projected (see the outcome).

Finally, each site has its own unique set of activities from computer classes to Hat Day. The holidays featured activities like making gingerbread houses, a jingle bell gift exchange or holiday parties. Tabulating and adding new activities at the City of Austin Durwood site also increased the overall number of events and activities (see the fourth output).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	1,534	1,275	120%
Number of meals provided	86,593	82,000	106%
Number of nutrition presentations including the Healthy Aging Fairs for the congregate sites	41	24	171%
Number of activities and special events	148	100	148%
Outcomes			
Percentage of returned surveys from participants who reported they would attend another Healthy Aging Fair	94% (400/425)	93% (74/80)	102%

MEALS ON WHEELS AND MORE

Meals on Wheels

Program Description

The Meals on Wheels program provides high-quality, nutritious meals to older and disabled adults that meet one-third of the Recommended Dietary Reference Intakes and the USDA's Dietary guidelines for Americans. The program promotes and helps clients maintain the highest level of cognitive and physical functioning through good nutritional status and nutrition education. Meals are delivered by volunteers Monday through Friday. Meals on Wheels offers a general diet that is nutritionally balanced and meets one-third of the Recommended Dietary Reference Intake for older adults. Special diets are available to those clients on a low potassium diet, for those who have kidney disease and/or are on dialysis, a bland diet for clients with gastrointestinal conditions, a soft diet for clients with denture or arthritic difficulties, or pureed diet for people with dysphasia or swallowing problems.

Funding

The total TCHHS/VS investment in the Meals on Wheels program for 2012 was \$115,026. This investment comprised 2.6% of the total program budget. TCHHS/VS also funds the Congregate Meal Program, which is described earlier in this report.

Eligibility Criteria

The Meals on Wheels program serves people who have physical and/or cognitive deficits and are unable to prepare a nutritious meal for themselves because of acute or chronic medical conditions. Many of the older and disabled people served are at nutritional risk and live on limited, fixed incomes. Clients must meet basic eligibility guidelines: 1) have difficulty preparing nutritious meals, 2) have no consistent day time meal assistance during the delivery hours of 11:00 and 1:00, 3) are primarily homebound, 4) live in the service area, and 5) score 20 or more on their most recent functional assessment tool. The final decision for services is based on the discretion and judgment of the social worker/care manager in conjunction with these guidelines, as there may be extenuating circumstances why a potential client needs meal services even if a functional score is less than 20.

MEALS ON WHEELS AND MORE: MEALS ON WHEELS

Client Demographics

Two-thirds of Meals on Wheels clients were female and one-third were male. Close to one-half (46%) of clients were age 75 or older, and 31% of clients were in the 60 to 74 age range. One-quarter of clients were Hispanic or Latino. Two-thirds of clients were White, and 32% of clients were Black or African American. Clients with incomes between 50% and 100% of the Federal Poverty Income Guideline level comprised 45% of all clients served. (See Appendix A for specific guideline income levels.)

Gender	Num.	Pct.
Female	1,880	67%
Male	920	33%
<i>Total</i>	<i>2,800</i>	<i>100%</i>

Ethnicity	Num.	Pct.
Hispanic or Latino	708	25%
Not Hispanic or Latino	2,092	75%
<i>Total</i>	<i>2,800</i>	<i>100%</i>

Race	Num.	Pct.
<i>Population of one race:</i>		
American Indian or Alaska Native	4	0.1%
Asian	11	0.4%
Black or African American	882	32%
Native Hawaiian or Other Pacific Islander	6	0.2%
White	1,875	67%
Some other race	2	0.1%
<i>Other and Unknown:</i>		
Other	17	1%
Unknown	3	0.1%
<i>Total</i>	<i>2,800</i>	<i>100%</i>

Age	Num.	Pct.
18 to 24	3	0.1%
25 to 39	41	1%
40 to 59	614	22%
60 to 74	868	31%
75 and over	1,274	46%
<i>Total</i>	<i>2,800</i>	<i>100%</i>

Income	Num.	Pct.
<50% of FPIG	265	9%
50% to 100%	1,248	45%
101% to 150%	680	24%
151% to 200%	299	11%
>200%	279	10%
Unknown	29	1%
<i>Total</i>	<i>2,800</i>	<i>100%</i>

Note: Percentages may not total to 100% due to rounding.

MEALS ON WHEELS AND MORE: MEALS ON WHEELS

Client ZIP Codes

One-third of clients in this program were located in the East area of Travis County. The Southwest area of the county had 19% of clients in residence. (See Appendix B for ZIP code classification map.)

Northeast			Northwest			North		
	Num.	Pct.		Num.	Pct.		Num.	Pct.
78621	1	0.04%	78645	17	0.6%	78727	29	1.0%
78653	24	0.9%	78726	3	0.1%	78728	41	1.5%
78660	120	4.3%	78731	24	0.9%	78757	82	2.9%
78664	3	0.1%	78750	30	1.1%	78758	96	3.4%
78752	70	2.5%	<i>Total Northwest</i>	<i>74</i>	<i>2.6%</i>	78759	37	1.3%
78753	179	6.4%			<i>Total North</i>	<i>285</i>	<i>10.2%</i>	
78754	25	0.9%	Southwest					
<i>Total Northeast</i>	<i>422</i>	<i>15.1%</i>	78652	6	0.2%	East		
			78704	148	5.3%	78702	346	12.4%
			78735	15	0.5%	78721	194	6.9%
			78736	6	0.2%	78722	37	1.3%
			78737	1	0.04%	78723	234	8.4%
			78739	4	0.1%	78724	97	3.5%
			78745	255	9.1%	78725	15	0.5%
			78748	49	1.8%	<i>Total East</i>	<i>923</i>	<i>33.0%</i>
			78749	41	1.5%			
			<i>Total Southwest</i>	<i>525</i>	<i>18.8%</i>	Central		
						78701	34	1.2%
			Others			78705	8	0.3%
			Outside of Travis Co.	53	1.9%	78751	33	1.2%
			<i>Total Others</i>	<i>53</i>	<i>1.9%</i>	78756	63	2.3%
						<i>Total Central</i>	<i>138</i>	<i>4.9%</i>
West								
78703	9	0.3%						
78746	4	0.1%						
<i>Total West</i>	<i>13</i>	<i>0.5%</i>						

Note: Percentages may not total to 100% due to rounding.

MEALS ON WHEELS AND MORE: MEALS ON WHEELS

All but one performance measure fell within the targeted range of performance expectations. Program staff note that during the third quarter of 2011, a strategic decision was made to reduce the number of non-funded clients and consequently the number of meals for 2011-2012. The program continues to provide meal services to approximately 2,000 people each day. Their initial projections for the number of meals and clients were based on a more vibrant economic recovery and have fallen slightly short (see the first and second outputs). A second internal program change for 2011-2012 was for social workers on staff to target specific timeframes for services based on needs, as opposed to clients being re-evaluated for services on a yearly basis. This program change could have negatively impacted the overall number of meals provided per client by curtailing meal delivery earlier as opposed to waiting for the yearly review.

With the intervention of a consultation from a registered dietician, more nutritionally at risk older adults discussed their dietary needs and benefitted from suggestions made by the program's registered dietician (see the second outcome). More assessments were completed than originally projected, because with an established waiting list, fewer new clients were assessed for initial services. However, the Client Services Department devoted increased time to evaluating and recertifying current clients by their yearly anniversary date and filled two vacant social worker positions in the last quarter of 2012, which increased the number of clients seen.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	2,800	2,975	94%
Number of 1st meals prepared by clients	502,660	596,625	84%
Outcomes			
Percentage of returned client surveys which indicate that daily meals satisfy an essential part of their daily nutritional needs	91% (581/637)	90% (586/649)	101%
Percentage of nutritionally at risk meal clients who have improved or maintained their nutritional status while on meals for six months or longer	78% (1,075/1,374)	72% (880/1,225)	109%

Community Rehabilitation Provider

Program Description

The Community Rehabilitation Provider program provides a support system for helping adults who are deaf/hard of hearing with a dual diagnosis (i.e., have co-occurring disabilities, such as intellectual or developmental disabilities) to become as independent and self-supporting as their personal level of potential allows. Program elements include day habilitation, supported home living and financial management assistance, plus helping train and/or coach individuals to qualify for, find and maintain employment. The goal of the program is to improve individual self-worth, financial stability and less dependence on public assistance where possible.

Funding

The total TCHHS/VS investment in the Community Rehabilitation Provider program for 2012 was \$47,229. This investment comprised 7.7% of the total program budget.

Eligibility Criteria

This program serves individuals living in the City of Austin and Travis County who are deaf or hard of hearing and have a dual diagnosis. Many receive public assistance, such as Supplemental Security Income and/or Social Security Disability Insurance, and case management from local social service agencies. Clients are also typically at risk of becoming homeless or institutionalized.

VAUGHN HOUSE, INC.: COMMUNITY REHABILITATION PROVIDER

Client Demographics

Over one-half (54%) of clients served were male, and 46% of clients were female. Slightly more than one-half (52%) of clients were between the ages of 25 and 39, and 46% of clients were in the 40 to 59 age range. More than one-third (34%) of clients were Hispanic or Latino. A majority (80%) of clients were White, and the remaining 20% were Black or African American. All clients had incomes between 50% and 100% of the Federal Poverty Income Guideline level. (See Appendix A for specific guideline income levels.)

Gender	Num.	Pct.
Female	23	46%
Male	27	54%
<i>Total</i>	<i>50</i>	<i>100%</i>

Ethnicity	Num.	Pct.
Hispanic or Latino	17	34%
Not Hispanic or Latino	33	66%
<i>Total</i>	<i>50</i>	<i>100%</i>

Race	Num.	Pct.
<i>Population of one race:</i>		
Black or African American	10	20%
White	40	80%
<i>Total</i>	<i>50</i>	<i>100%</i>

Age	Num.	Pct.
18 to 24	1	2%
25 to 39	26	52%
40 to 59	23	46%
<i>Total</i>	<i>50</i>	<i>100%</i>

Income	Num.	Pct.
50% to 100%	50	100%
<i>Total</i>	<i>50</i>	<i>100%</i>

Note: Percentages may not total to 100% due to rounding.

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Client ZIP Codes

Close to one-half (46%) of clients were located in the Southwest area of Travis County. The Southeast (20%) area also saw a large number of clients in residence. (See Appendix B for ZIP code classification map.)

Northeast	Num.	Pct.
78752	2	4.0%
78753	1	2.0%
<i>Total Northeast</i>	3	6.0%

Southeast		
78610	1	2.0%
78612	1	2.0%
78741	4	8.0%
78744	1	2.0%
78747	3	6.0%
<i>Total Southeast</i>	10	20.0%

West		
78733	3	6.0%
<i>Total West</i>	3	6.0%

Southwest	Num.	Pct.
78704	10	20.0%
78745	11	22.0%
78748	2	4.0%
<i>Total Southwest</i>	23	46.0%

North	Num.	Pct.
78729	1	2.0%
78757	1	2.0%
78758	1	2.0%
<i>Total North</i>	3	6.0%

East		
78702	1	2.0%
78723	3	6.0%
<i>Total East</i>	4	8.0%

Central		
78701	3	6.0%
78756	1	2.0%
<i>Total Central</i>	4	8.0%

Note: Percentages may not total to 100% due to rounding.

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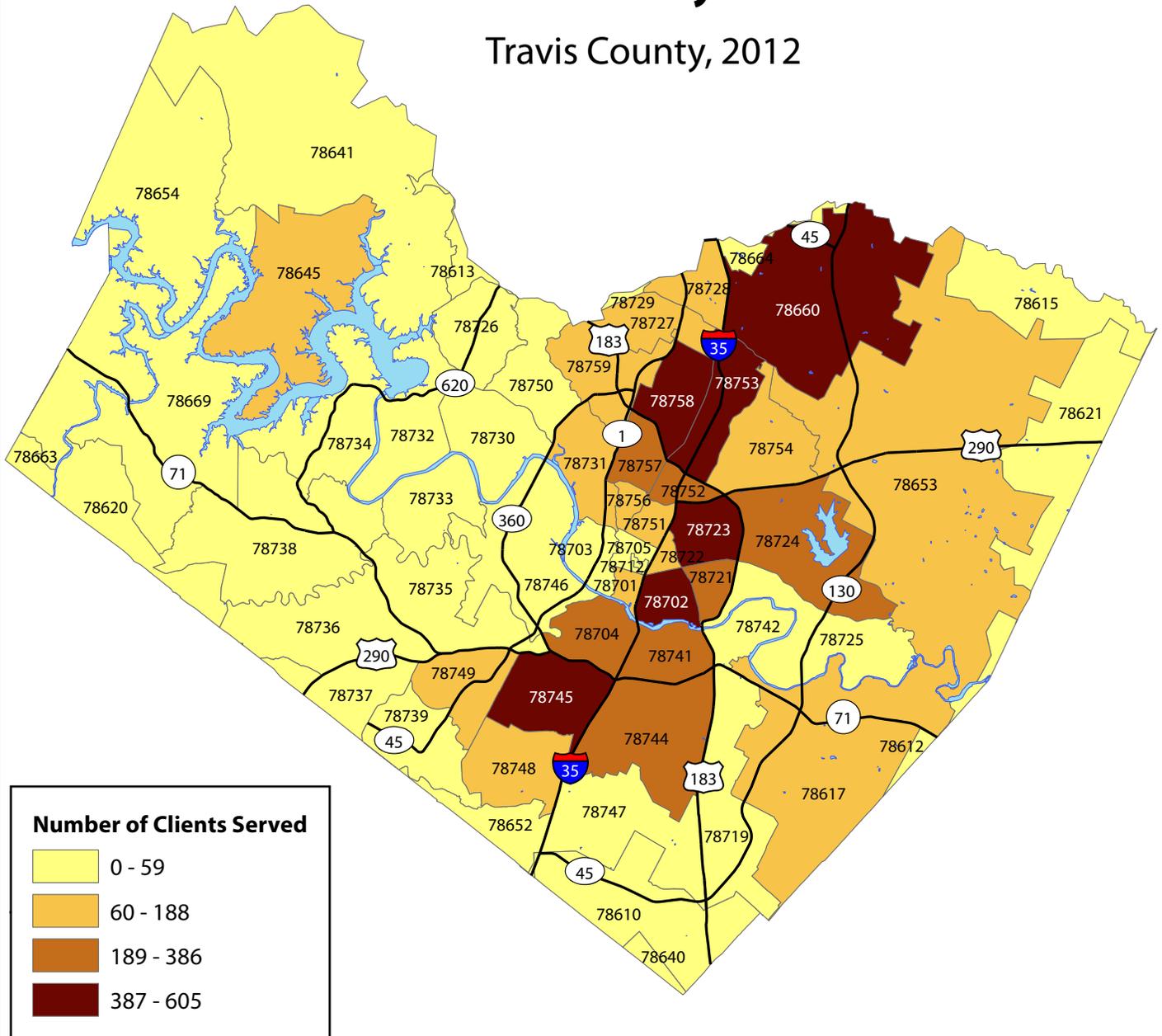
The Community Rehabilitation Provider program exceeded all outcome goals but fell short of expectations on two output measures. Program staff explain that work reduction in some State custodial contracts decreased the number of clients receiving job readiness training (see the second output), and thus the total number of clients served (see the first output). Further, the program experienced less attrition than expected, and fewer problems that could lead to job suspension. This lack of turnover positively impacted employment retention (see the second outcome).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	50	58	86%
Number of clients receiving job readiness training	6	13	46%
Number of clients in supported employment	30	26	115%
Number of clients in Supported Home Living, Representative Payee and Day Habilitation	20	21	95%
Outcomes			
Percentage of clients who completed job readiness training	100% (3/3)	69% (9/13)	144%
Percentage of clients retaining employment for a minimum of 6 months	100% (27/27)	73% (19/26)	137%
Percentage of clients remaining enrolled in Supported Home Living, Representative Payee and Day Habilitation for at least 90 days	100% (20/20)	90% (19/21)	111%

Client ZIP Code Map

Supportive Services for Independent Living Clients Served by ZIP Code

Travis County, 2012



Notes: This map shows 7,407 clients by ZIP code. 479 (6% of the total) from all service providers were not included because their ZIP codes were unknown or outside of Travis County boundaries or they were homeless.



Source data: Contracted service providers, 2013.
 This map was created using City of Austin shapefiles.
 Created by: Travis County HHS/VS Research & Planning Division, 2013.

Appendix A

2012 Federal Poverty Income Guidelines

Most TCHHS/VS contracts require programs to serve participants with household incomes at or below 200% of the Federal Poverty Income Guideline (FPIG) level. Some programs have chosen to follow a more stringent threshold. The following table presents the federal poverty thresholds by household size and income.

Household Size	Income Limits for Threshold Levels					
	50%	100%	125%	150%	200%	250%
1	\$5,585	\$11,170	\$13,963	\$16,755	\$22,340	\$27,925
2	\$7,565	\$15,130	\$18,913	\$22,695	\$30,260	\$37,825
3	\$9,545	\$19,090	\$23,863	\$28,635	\$38,180	\$47,725
4	\$11,525	\$23,050	\$28,813	\$34,575	\$46,100	\$57,625
5	\$13,505	\$27,010	\$33,763	\$40,515	\$54,020	\$67,525
6	\$15,485	\$30,970	\$38,713	\$46,455	\$61,940	\$77,425
7	\$17,465	\$34,930	\$43,663	\$52,395	\$69,860	\$87,325
8	\$19,445	\$38,890	\$48,613	\$58,335	\$77,780	\$97,225

For families/households with more than 8 persons, add \$3,960 for each additional person.

Data source: "2012 HHS Poverty Guidelines," U.S. Department of Health & Human Services, *Federal Register*, Vol. 77, No. 17, January 26, 2012, pp. 4034-4035, <http://aspe.hhs.gov/poverty/12poverty.shtml>.

2012 Austin Median Family Income Guidelines

The Blackland Community Development Corporation and Foundation for the Homeless contracts require participants in their programs to have a household income at or below 50% of the Austin Median Family Income (MFI) level. Other programs may also use the Austin MFI level when measuring client incomes. The following table presents the median family income limits established by the U.S. Department of Housing and Urban Development (HUD) for the Austin-Round Rock Metropolitan Statistical Area.

Household Size	Income Limits for Threshold Levels				
	30%	40%	50%	60%	120%
1	\$15,950	\$21,280	\$26,600	\$31,920	\$42,500
2	\$18,200	\$24,320	\$30,400	\$36,480	\$48,600
3	\$20,500	\$27,360	\$34,200	\$41,040	\$54,650
4	\$22,750	\$30,360	\$37,950	\$45,540	\$60,700
5	\$24,600	\$32,800	\$41,000	\$49,200	\$65,600
6	\$26,400	\$35,240	\$44,050	\$52,860	\$70,450
7	\$28,250	\$37,680	\$47,100	\$56,520	\$75,300
8	\$30,050	\$40,080	\$50,100	\$60,120	\$80,150

Data source: "Rent and Income Limits (Austin, TX)," City of Austin Neighborhood Housing and Community Development, April 17, 2012, http://www.austintexas.gov/sites/default/files/files/Housing/2012_projectIncomeandrenttool.pdf.

Appendix B

ZIP Code Classification Map

ZIP codes located within Travis County are classified into one of the following eight descriptive categories: Central, East, North, Northeast, Northwest, Southeast, Southwest, and West. These categories were designed to provide a frame of reference when locating ZIP codes on the map and are used to highlight client concentrations across geographic areas.

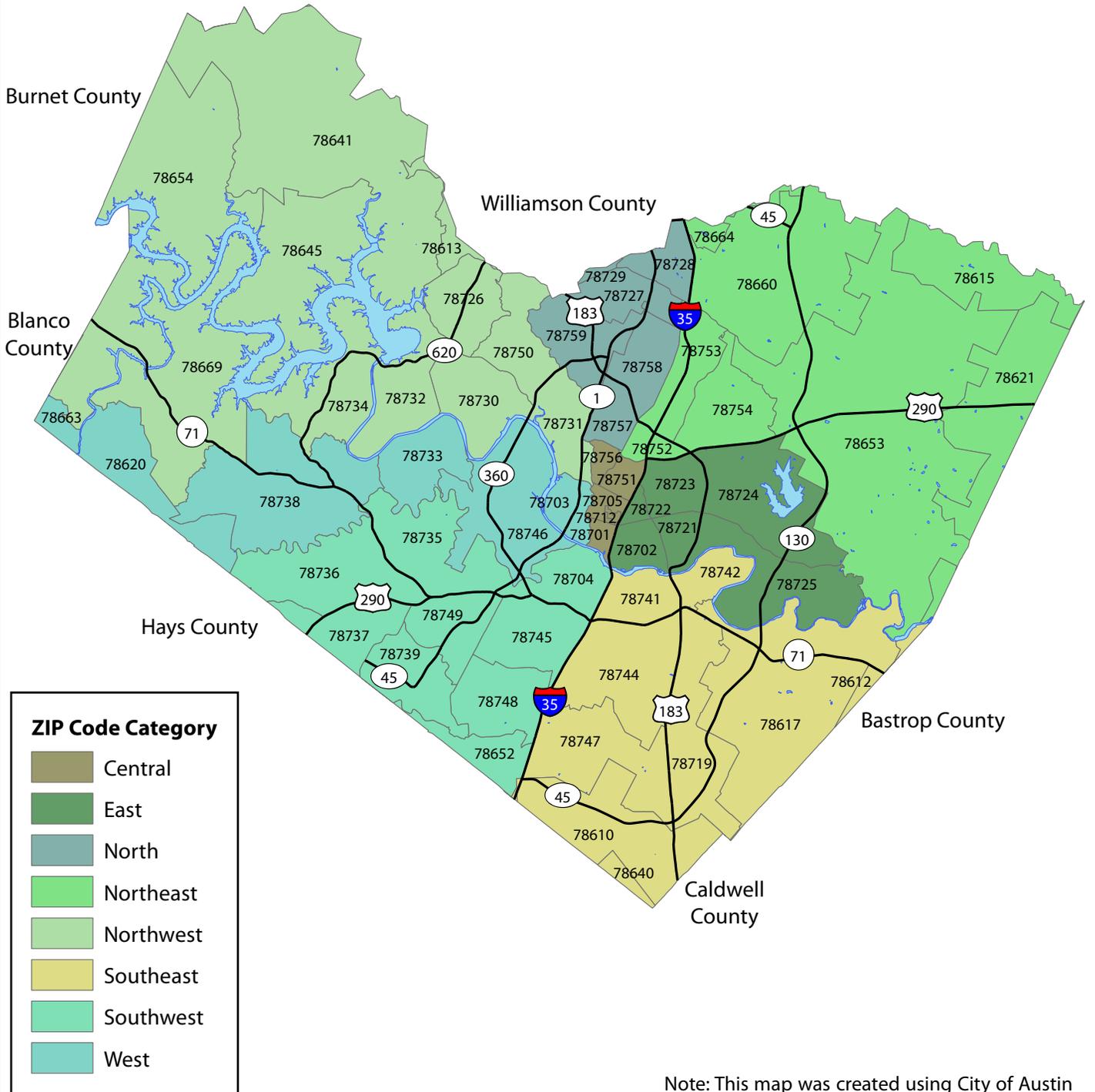
Descriptive categories are loosely based on Multiple Listing Service (MLS) categories. Occasionally, a ZIP code spans multiple MLS areas. For such ZIP codes, categorization was based on where the bulk of the ZIP code area was located. For example, if a ZIP code spanned the West, South, and Southwest areas, but the majority of the ZIP code area was located in the West area, it was classified as “West.”

A number of ZIP codes are located in Travis County and an adjoining county. These ZIP codes were classified by where the area found inside Travis County lines was mostly located. For example, a ZIP code area may be located in the West area of Travis County, but the majority of the ZIP code area outside of Travis County may be in the Southwest area. In this example, the ZIP code would be classified as “West.”

Please note that the 78616 ZIP code has a miniscule portion of its area within Travis County boundaries and thus is not included on the ZIP code classification map.

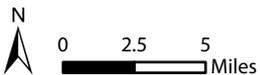
ZIP Code Categories

Travis County, 2012



Note: This map was created using City of Austin shapefiles. ZIP code categories are loosely based on Multiple Listing Service (MLS) categories.

Created by: Travis County HHS/VS Research & Planning Division, 2013.



Appendix C

Methodology

Community conditions discussed in this report reflect the most recent information available at the time of writing (November 2012 through February 2013). Terminology used in the report is based upon the terms used by the original data source. Therefore, terminology may differ within or across issue areas. For example, one data source may use the term “African American” while another may use “Black.” Finally, estimates from the American Community Survey have been tested at a 90% confidence level for reliability. In some cases, all noted, estimates were unreliable due to small sample sizes.

Most data included in the *2012 Community Impact Report* cover calendar year 2012^k and are drawn from contracts and reports provided by contracted service providers. Each contract is classified into the issue area most closely aligned to its central goals and objectives.

Considerations When Reading This Report

Performance results provide only a starting point for understanding the impact of these programs. These summary statistics are not necessarily an indication of the programs’ overall performance, but rather a snapshot and general gauge of their performance over a one-year period. Readers are encouraged to locate the particular programs of interest in each issue area report and review the detailed programmatic and performance information. Within these reports, service providers offer explanations for variance in performance. This information, in particular, is critical to providing context and meaning to these summary results.

These performance results do not reflect the programs’ full value to and impact on the community, which would require formal program evaluations, qualitative studies, and a review of other research. Therefore, it is also important to keep the following considerations in mind when reviewing program performance.

Participant characteristics can significantly influence a program’s performance results. For example, performance results may be lower for programs with clients who face considerable challenges (e.g., serious mental illness or addiction issues) and have little social support. Readers should therefore use caution when comparing output and outcome results across programs.

^k The report covers calendar year 2012 because the majority of the social service contracts included in the report follow a calendar year schedule.

Many additional factors beyond the program's control may also impact the program's performance. For example, if jobs become scarce, an effective workforce development program may experience lower client employment rates, regardless of the quality of training and support provided to their clients. Similarly, if jobs become abundant, a workforce development program may experience higher client employment rates, even if the program provided training that was not marketable. Without controlling for these factors, the true impact or efficacy of the program on outcomes cannot be discerned.

Readers should also use caution when examining outcome results for programs with less than 30 clients. For such small programs, the outcome of just a few clients can greatly affect the program's total outcome result. In these instances, examining percentages may be less helpful than examining raw numbers.

Finally, this report captures a narrow set of performance measures, which may not reflect the program's full impact on participants and their families, peers, and neighborhood. For example, though an individual was unable to obtain employment within the time period analyzed, a program may have increased the readiness and capacity of the individual to succeed on the job once eventually employed. Additionally, performance measures may not all be equal in importance or value to the community. Also, some agencies may have negotiated performance measure goals that were more difficult to achieve than others.

Endnotes

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