

ATTACHMENT A - PLAN

Act 11 of 2010 20-945

NAME OF CONTRACTING PARTY:
Affiliated Blind of Louisiana Training Center, Inc.NAME AND BRIEF NARRATIVE OF PROGRAM:
Center based adjustment to blindness skills and independent living services and Home and community based independent living skills training and special services

Program Goals, Objectives, Expected Outcomes/Results Activities and Related Performance Measures (Duplicate pages as needed for each goal identified). What are the goals, objective(s), expected outcomes/results for this program: Indicate the goals/objectives for this program. Indicate the expected outcomes/results for each goal. Explain how each goal, objective, outcome/result is measured. Identify activities that will be implemented to achieve expected outcomes, the person(s) responsible for implementing the activity, and the expected completion date.

1. Program Goal (*Goals are the intended broad, long-term results. Goals are clear statements of the general end purposes toward which efforts are directed.*)
To provide training in order for skills to be acquired by individuals who are visually impaired, blind and/or deaf-blind to maintain independence in their own home and to provide center based training for other individuals who are visually impaired, blind and/or deaf-blind to acquire skills needed for independent living and employment.

2. Program Objective(s) (*Objectives are intermediate outcomes--specific, measurable steps towards accomplishing the goal, that identify the expected outcomes and results. **The program objective must include a percentage, a specific dollar amount or a number.***)

1. To provide home and community based independent living skills and special service training to 250 plus blind, deaf-blind, and visually impaired individuals;
2. To provide training to 20 plus blind, deaf-blind, and visually impaired individuals a comprehensive, center-based independent living program and
3. Coordination of support service providers for 30 plus deaf-blind individuals.

3. Relevant Activity (Activities) (*An activity is a distinct subset of functions or services within a program to meet the Program Objective.*)

1. Evaluate and train clients in proper use of adaptive and low vision aids and techniques, as well as providing independent living skills in the following areas:
 - a) Orientation and Mobility - To travel independently with the use of a cane both inside and outside to include stairwells and lighted intersections
 - b) Communications - To read and write with the use of adaptive devices to produce Braille
 - c) Home and Personal Management - To cook and clean and manage personal grooming and finances with the use of adaptive techniques and equipment
 - d) Vocational Skills - To learn all appropriate skills to find and secure employment with use of adaptive aids and devices
 - e) Technology - To learn the skills necessary to utilize computer software and hardware with the use adaptive software and hardware
2. Provide potential clients with information packets, as well as performing a series of follow-up phone calls, email, TTY, and/or videophone to track the clients' continued success.
3. Provide scheduling for consumers who are deaf-blind with a Support Service Provider (SSP).

4. Performance Measure(s) (*Measure the amount of products or services provided or number of customers served. Specific quantifiable measures of progress, results actually achieved and assess program impact and effectiveness. **A Performance Measure must be designated as a percentage, a specific dollar amount or a number.***)

1. The number of blind, deaf-blind, and visually impaired individuals provided home and community based independent living skills training and special service training.
2. The number of blind, deaf-blind, and visually impaired individuals trained in a center-based independent living program.
3. The number of deaf-blind individuals coordinated with support service providers.

ATTACHMENT B
 Page 1
Project Budget (2010-2011)

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Affiliated Blind of Louisiana Training Center, Inc

Anticipated Income or Revenue

Sources *(list all sources of revenue)*

Amounts

1. Rehabilitation for the Blind & Visually impaired Fund+	\$ 500,000.00
2. LRS Older Blind Grant	\$ 242,980.00
3. Support Service Provider Grant	\$ 160,000.00
4. LRS Fee for Service	\$ 673,700.00
5. Other	\$ 380,900.00
Total all sources	\$1,957,580.00

Anticipated Expenses

Expense Categories

Total Amount

**Amount Line Item
Appropriation**

	<i>(see footnote 1 below)</i>	<i>(see footnote 2 below)</i>
Gross Salaries(See Attachment B, page 2)	\$ 941,106.40	\$ 404,056.59
Related Benefits (employer share)	122,344	48,960.40
Travel	20,424	\$
Operating Services:		
Advertising	604	\$
Printing	500	\$
Insurance	121,986	\$
Maintenance of auto, moveable Property	750	\$
Maintenance of building and grounds	36,353	\$
Rentals	2,599	\$
Dues and Subscriptions	500	\$
Telephones and Internet Service	20,325	\$
Postage	1,000	\$
Utilities	81,166	\$
Other	331,037	\$ 7,000.01
Office Supplies	9,842	\$
Professional & Contract Services	227,044	\$ 39,983.00
(See Attachment B, page 3)		
Other Charges (See Attachment B, Page 4)		\$
Acquisitions & Major Repairs	40,000	\$
Total Use of the Appropriation	\$1,957,580.00	\$ 500,000

(Budget categories listed above reflect a typical budget and may be adjusted by the agency and recipient to reflect actual categories necessary for each individual program. Salaries and Professional & Other Contract Services and Other Charges shall be detailed using pages 2, 3 and 4 of Attachment B).

All numbers must be rounded to the nearest dollar.

Footnote (1) This column represents expenditures by category and **MUST** equal total sources listed above.

Footnote (2) This column represents the portion of expenditures by category funded by the state appropriation provided by this Cooperative Endeavor Agreement.

ATTACHMENT B

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Staffing Chart

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Name of Contracting Party: Affiliated Blind of LA Training Center, Inc.

Name of Program: Rehabilitation for the Blind and Visually Impaired Fund

Name	Title	Total Annual Salary Amount	Total Salary Paid by		Related Benefits	Full time or Part Time # of months
			Appropriation Amount	Percentage		
Alejandro Bochm	Residential Counselor	\$18,720.00	\$ 4,680.00	25%	\$ 429.62	FT
April Strother	Interpreter	21,632.00	21,632.00	100	2,367.63	FT
Bruce H. Dunn	Deaf Blind Coordinator	38,480.00	38,480.00	100	4,319.25	FT
Bruce Lye	Vocational Supervisor	40,497.60	10,124.40	25	1,311.23	FT
Candace Rivet	Residential Supervisor	29,993.60	7,498.40	25	1,070.16	FT
Connie D. Domingues	Kitchen Cook	18,012.80	4,683.33	26	839.37	FT
Diana Hanks	Kitchen Cook	16,806.40	4,369.66	26	426.92	FT
Divon Spears	Instructor	27,040.00	27,040.00	100	2,482.27	FT
Eileen Landry	Bookkeeper	33,280.00	8,320.00	25	1,386.87	FT
Frank Murdock	Instructor	35,006.40	8,751.60	25	1,185.21	FT
Gertie D Bias	Peer Counselor	40,476.80	10,119.20	25	1,333.71	FT
Jada Delahoussaye	Instructor	25,001.60	15,866.40	100	1,456.54	FT
James S Crawford	Instruction Supv	49,004.80	12,251.20	25	1,996.52	FT
James Solomon	Instructor	35,006.40	8,751.60	25	1,185.21	FT
Joseph Veazey	Instructor	23,400.00	23,400.00	100	2,529.93	FT
Katherine Smith	Deaf Blind Secretary	18,720.00	18,720.00	100	1,512.58	FT
Kathleen R Ceaser	Job Placement Specialist	25,500.80	6,375.20	25	967.05	FT
Kelly Huntsberry	Instructor	25,001.60	25,001.60	100	2,676.96	FT

Ken Davidson	Instructor	6,250.40	6,250.40	100	955.60	FT
Kenwyn Huntsberry	Vocational Evaluator	29,993.60	7,498.40	25	1,370.10	FT
Ladaysha Paddio	Residential Counselor	18,720.00	4,680.00	25	429.62	FT
Laura Cmar	Instructor	38,001.60	9,500.40	25	1,253.95	FT
Lyndol Williamson	Instructor	26,998.40	6,749.60	25	1,271.41	FT
Lynn Blanchard	Executive Director	76,003.20	19,000.80	25	2,886.12	FT
Mary Lou Hebert	Post Assist Liaison	18,470.40	18,470.40	100	1,695.58	FT
Melanie Foreman	Program Secretary	19,094.40	4,773.60	25	958.46	FT
Patrick Thibodeaux	Instructor	43,742.40	10,935.60	25	1,385.70	FT
Robert M Whatley	Vocational Counselor	20,800.00	5,200.00	25	477.36	FT
Stacy Charles	Secretary	31,200.00	7,800.00	25	1,324.05	FT
Suzette Malone	Residential Counselor	18,990.40	4,747.60	25	435.83	FT
Tyrhonda Thomas	Program Coordinator	32,760.00	32,760.00	100	3,389.18	FT
Yvette Pourciau	Braille Instructor	38,500.80	9,625.20	25	1,650.41	FT

Totals

\$941,106.40

\$404,056.59

\$48,960.40

ATTACHMENT B

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Schedule of Professional and Other Contract Services

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Name of Contracting Party: Affiliated Blind of LA Training Center, Inc.

Name of Program: Rehabilitation for the Blind and Visually Impaired Fund

Name and Address of Individual and/or Firm	Nature of Work Performed and Justification for Services	Total Contract Amount	Total Paid by Appropriation
Rosalie Alley	Low Vision Specialist	\$ 2,500.00	\$ 2,500.00
D S Sullivan, LLC	Orientation & Mobility Instructor	2,500.00	2,500.00
Debbie Billings	Orientation & Mobility Instructor	2,500.00	2,500.00
Mary Murphy	Orientation & Mobility Instructor	2,500.00	2,500.00
Elaine Richard, CPA	CPA Services	25,000.00	25,000.00
Diabetes Self Management Center, Inc	Registered Dietician w/ Diabetes management	4,983.00	4,983.00
Totals		\$39,983.00	\$39,983.00

ATTACHMENT B
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Schedule of Other Charges
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Name of Contracting Party: Affiliated Blind of LA Training Center, Inc.

Name of Program: Rehabilitation for the Blind and Visually Impaired Fund

Provide a description of the intended use of the funds listed in Other Charges and the dollar amount. Each use should be listed separately. Do not budget funds in Other Charges that can be placed in another expenditure category.	List dollar Amount for each use
1.	
	Total – Should agree with Attachment B, page 1