

<b>ATTACHMENT A - PLAN</b>	Act 12 of 2011	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
<b>Program Goals, Objectives, Expected Outcomes/Results Activities and Related Performance Measures (Duplicate pages as needed for each goal identified). <u>What are the goals, objective(s), expected outcomes/results for this program:</u></b> 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.			
<p>1. Program Goal <i>(Goals are the intended broad, long-term results. Goals are clear statements of the general end purposes toward which efforts are directed.)</i></p> <p>To provide training and coordination of services in order for skills to be acquired by individuals who are visually impaired, blind, deaf 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.</p>			
<p>2. Program Objective(s) <i>(Objectives are intermediate outcomes--specific, measurable steps towards accomplishing the goal, that identify the expected outcomes and results. <b>The program objective must include a percentage, a specific dollar amount or a number</b>).</i></p> <p>1) To provide home and community based independent living skills training and special service training to 250 plus blind, deaf-blind, and visually impaired individuals;  2) To provide training to 15 plus blind, deaf-blind, and visually impaired individuals in a comprehensive, center-based independent living program; and  3) Coordination of Support Service Providers, Interpreting services, Hearing Aid Service, and Telecommunication Services for 30 plus hard-of-hearing, deaf, and/or deaf-blind individuals</p>			
<p>Relevant Activity (Activities) <i>(An activity is a distinct subset of functions or services within a program to meet the Program Objective.)</i></p> <p>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:</p> <ul style="list-style-type: none"> <li>a) Orientation and Mobility - To travel independently with the use of a cane both inside and outside to include stairwells and lighted intersections</li> <li>b) Communications - To read and write with the use of adaptive devices to produce Braille</li> <li>c) Home and Personal Management - To cook and clean and manage personal grooming and finances with the use of adaptive techniques and equipment</li> <li>d) Vocational Skills - To learn all appropriate skills to find and secure employment with use of adaptive aids and devices</li> <li>e) Technology - To learn the skills necessary to utilize computer software and hardware with the use adaptive software and hardware</li> </ul> <p>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.</p> <p>3. Provide scheduling and coordination of services for consumers who are deaf and deaf-blind with Support Service Providers (SSP), interpreters, hearing aids, and telecommunication devices.</p>			
<p>4. Performance Measure(s) <i>(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 <b>Performance Measure must be designated as a percentage, a specific dollar amount or a number</b>).</i></p> <p>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.</p>			

# ATTACHMENT B

Page 1

## Project Budget (2011-2012)

Act 12 of 2012

20-945

Affiliated Blind of Louisiana Training Center, Inc.

### Anticipated Income or Revenue

Sources (list all sources of revenue)

Amounts

1. Act 12	\$ 500,000.00
2. Older Blind Grant	179,398.00
3. Deaf – Blind Services (LCD Grant)	87,210.00
4. SSP Grant	160,000.00
5. LRS	560,000.00
6. Interpreters	60,000.00
7. LRS	341,638.27
Total all sources	<u>\$1,888,246.27</u>

### Anticipated Expenses

Expense Categories

Total Amount

Amount Line Item  
Appropriation

	(see Footnote 1 below)	(see Footnote 2 below)
Gross Salaries(See Attachment B, Page 2)	\$ 923,190.42	\$ 388,008.46
Related Benefits (Employer share)	\$ 216,639.69	\$ 88,696.54
Travel	\$	\$
Operating Services:		
Advertising	\$ 4,500.00	\$
Printing	\$ 1,000.00	\$
Insurance	\$ 119,937.47	\$
Maintenance of auto, movable property	\$ 13,800.00	\$
Maintenance of building and grounds	\$ 14,744.00	\$
Rentals	\$ 3,000.00	\$
Software licensing	\$	\$
Dues and Subscriptions	\$ 3,400.00	\$
Telephones and Internet Service	\$ 12,558.35	\$
Postage	\$ 1,850.00	\$
Utilities	\$ 72,893.45	\$
Other	\$ 276,262.14	\$ 7,195.00
Office Supplies	\$ 8,381.75	\$
Professional & Contract Services (See Attachment B, Page 3)	\$ 206,089.00	\$ 6,100.00
Other Charges (See Attachment B, Page 4)	\$	\$
Acquisitions & Major Repairs	\$ 10,000.00	\$ 10,000.00
Total Use of the Appropriation	<u>\$ 1,888,246.27</u>	<u>\$ 500,000.00</u>

(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

Act 12 of 2011

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

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

Name	Title	Total Annual Salary Amount	Total Salary Paid by Appropriation		Related Benefits	Full time or Part Time # of months
			Amount	Percentage		
April C Strother	Interpreter	26,000.00	6,500.00	100%	1,962.88	FT
Bruce Lye	Vocational Supervisor	40,497.60	10,124.40	25%	2,708.97	FT
Calvernia Reed	Residential	903.25	225.82	25%	27.44	FT
Candace Rivet	Residential Supervisor	2,564.84	641.21	25%	1,223.34	FT
Carrie G Gervis	Residential Counselor	2,322.15	580.54	25%	70.54	FT
Charmona Henry	Residential Supervisor	26,662.50	6,665.63	25%	809.87	FT
Connie D Domingues	Kitchen Cook	18,200.48	4,732.12	26%	1,778.03	FT
Diana M Hanks	Kitchen Cook	17,016.48	4,424.28	26%	548.61	FT
Divon Spears	Instructor	27,040.00	27,040.00	100%	2,842.47	FT
Eileen S Landry	Bookkeeper	33,280.00	8,320.00	25%	2,316.83	FT
Fallon C Frederick	Deaf/Deaf-Blind Prog Asst	14,807.00	14,807.00	25%	1,799.05	FT
Gertie D Bias	Peer Counselor	31,437.03	7,859.26	25%	1,265.62	FT
Jada R Delahoussaye	Instructor	28,279.20	28,279.20	25%	8,017.64	FT
James S Crawford	Instructor Supervisor	49,004.80	12,251.20	25%	3,019.78	FT
James Soloman	Instructor	35,006.40	8,751.60	25%	2,184.67	FT
Jared Nelson	Residential	17,418.60	4,354.65	25%	529.09	FT
Joseph M Veazey	Instructor	16,341.48	16,341.48	100%	6,068.32	FT
Katherine Smith	Deaf-Blind Secretary	23,770.50	23,770.50	100%	6,650.18	FT
Kathleen R Ceaser	Job Placement Specialist	25,500.80	6,375.20	25%	774.59	FT

Kathryn M Guillory	Residential	7,875.00	1,968.75	25%	239.20	PT
Kelly Huntsberry	Instructor	28,278.90	28,278.90	100%	7,546.35	FT
Kenwyn P Huntsberry	Vocational Evaluator	33,271.20	8,317.80	25%	2,488.75	FT
Ladysha Paddio	Residential Counselor	16,818.75	4,204.69	25%	510.87	PT
Laura Cmar	Instructor	38,001.60	9,500.40	25%	2,258.50	FT
Leeanardo Brumfield	Residential	18,263.70	4,565.93	25%	554.76	PT
Lyndol Williamson	Instructor	26,998.40	6,749.60	25%	1,090.06	FT
Lynn J Blanchard	Ex. Director	76,003.20	19,000.80	25%	3,955.27	FT
						FT
Melanie A. Foreman	Program Secretary	15,689.27	3,922.32	25%	1,547.47	FT
Natasha C Aymami	Interpreter-Outreach	36,400.00	36,400.00	100%	3,765.37	FT
Patrick J Thibodeaux	Instructor	43,745.40	10,935.60	25%	2,400.01	FT
						FT
Stacey Charles	Secretary	32,560.00	8,140.00	25%	2,295.30	FT
Terry J Dugas	Residential	8,188.69	2,047.18	25%	248.73	PT
Torri N Randolph	O & M Specialist	32,313.60	8,078.40	25%	972.86	FT
Tyrhonda Thomas	Program Coordinator	34,228.80	34,228.80	100%	8,133.01	FT
Yvette M Pourciau	Braille Instructor	38,500.80	9,625.20	25%	6,092.11	FT
		\$ 923,190.42	\$ 388,008.46		\$ 88,696.54	

# ATTACHMENT B

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## Schedule of Professional and Other Contract Services

Act 12 of 2011

20-945

Name of Contracting Party: Affiliated Blind of Louisiana 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
Elaine H Richard, CPA Rosalie Alley TBD	Accounting Services Low Vision Specialist TBD	\$36,000.00 2,500.00 167,589.00	\$3,600.00 2,500.00 0.00
	Totals	\$206,089.00	\$6,100.00

**ATTACHMENT B**  
**Page 4**  
**Schedule of Other Charges**  
**Act 12 of 2011**

20-945

Name of Contracting Party: Affiliated Blind of Louisiana 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. N/A	00.00
	Total – Should agree with Attachment B, Page 1 00.00