Identification and Development of Referral Systems for TANF Clients with Learning Disabilities

Prepared by:

Welfare Peer Technical Assistance Jeanette Hercik, Ph.D. 10530 Rosehaven Street Suite 400 Fairfax, VA 22030 (703) 385-3200



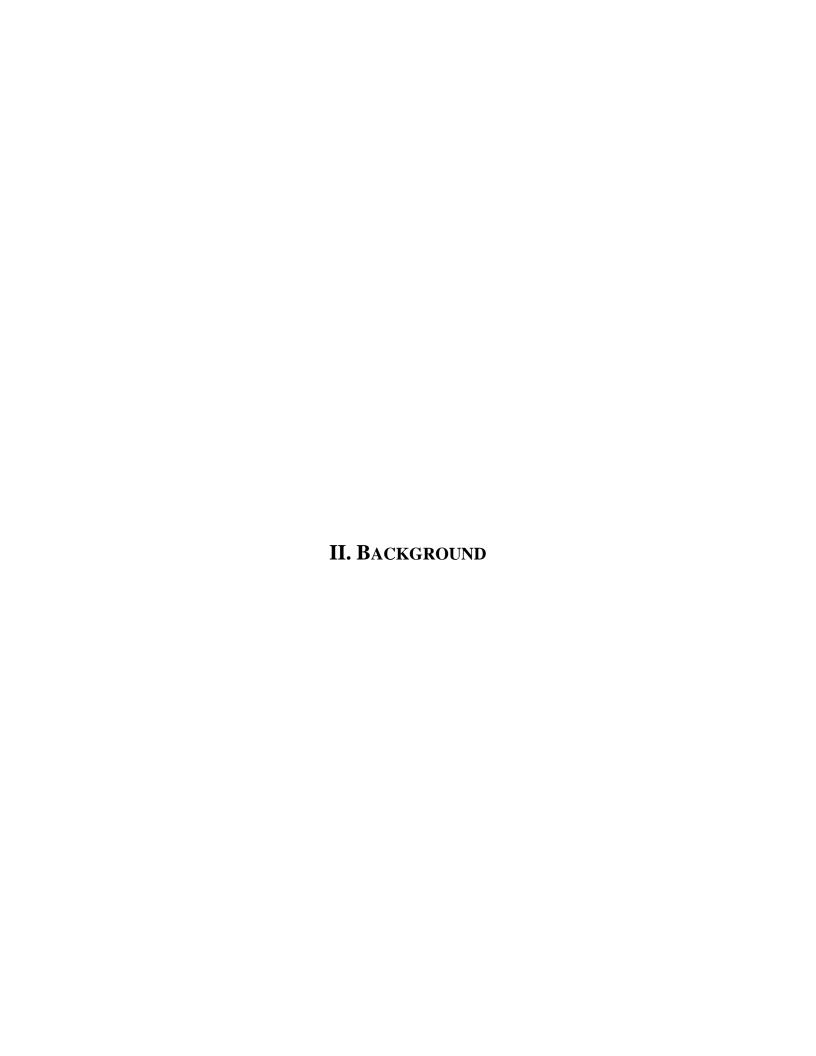
I. Introduction

The Welfare Peer Technical Assistance Network supported a one and one-half day technical assistance event in New Hampshire on April 4 and 5, 2000. The first day of the event centered on training for approximately 25 state professionals working with TANF clients with learning disabilities.¹ The second day involved an extensive discussion with the New Hampshire Learning Disabilities Coordinator, Ms. Linda Swenson, and provided an evaluation of the current process of identification and referral for TANF clients with learning disabilities in New Hampshire. Mr. Daniel Fey, Learning Disability Project and Educational Services Coordinator for the Seattle-King County One-stop Center, and a BRIDGES² trainer, facilitated the training day and provided his expertise in evaluating the current assessment and referral system. Dr. Jeanette Hercik, from the Welfare Peer Technical Assistance Network, was also present for the training day and the evaluation.

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See Appendix A for the agenda for the day and Appendix B for the list of participants.

² BRIDGES to Practice is a program developed by the National Adult Literacy and Learning Disabilities Center and funded through the National Institute for Literacy by the Department of Education Office for Vocational and Adult Education. Its goals are to bring about a broader awareness of learning disabilities and their impact on the provision of literacy services; to enhance the skills of practitioners working with persons with learning disabilities and to provide a set of practical tools to be used by these practitioners.



II. BACKGROUND

Learning disabilities (LD) is an umbrella term that describes a wide variety of disorders, including disorders in one or more of the basic psychological processes involved in understanding or using spoken or written language. Varying estimates of the number of American adults with learning disabilities range from 3 to 15 percent of the general population. The estimate of the prevalence of LD increases greatly among subsets of populations. For example, a study conducted by the Department of Labor estimated that 50 to 80 percent of the Adult Basic Education population had LD. In the States of Washington and Kansas, the Departments of Health and Human Services estimated 38 to 44 percent of their TANF population had LD. There are currently 13 accepted definitions of learning disabilities used throughout the country by professional and advocacy organizations. It is important to recognize that definitions of learning disabilities have been developed not only to clarify the nature of the disability, but to determine who is eligible for certain services. States should understand the various Federal laws³ that require certain services for individuals with disabilities. The definition of learning disability used by the National Adult Literacy and Learning Disabilities Center is that of the National Joint Committee on Learning Disabilities (NJCLD). This definition is:

"Learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviors, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability. Although learning disabilities may occur concomitantly with other handicapping conditions (for example, sensory impairment, mental retardation, serious emotional disturbance) or with extrinsic influences (such as cultural differences, insufficient or inappropriate instruction), they are not the result of those conditions or influences." (National Joint Committee on Learning Disabilities, 1994, p. 16).

³ Learning disabilities are recognized as a disability under a variety of Federal laws, and as such, individuals with learning disabilities are entitled to a number of support services and educational and workplace accommodations. These laws include:

Individuals with Disabilities Education Act (IDEA): Under this act, young people (before 22nd birthday) with disabilites must receive testing and transition services as a part of their educational program. The sections referring to "school age" students also pertain to young people under the age of 22 if they have not obtained a regular high school diploma.

Section 504 of the Rehabilitation Act of 1973: Students who do not qualify for special education under IDEA, may receive special education assistance or accommodations under this section of this act. Adults with learning disabilities also are covered under Section 504. They are entitled to assessment and accommodation to maximize their employment and economic well being.

Americans with Disabilities Act (ADA): This Act ensures that individuals with disabilities can access businesses and other public and private entities. This law also prohibits discrimination against people with disabilities with respect to employment.

Learning disabilities are often overlooked and unidentified. Many low-income individuals enter the welfare system without ever having had a formal diagnosis or assessment to detect a learning disability. Research shows that girls, in particular, are often not diagnosed as LD as frequently as boys because males act up in school more readily. Often adults with learning disabilities are unemployed or under-employed. Adults with learning disabilities can be and often are successful when their disability is recognized. Thus, given the current "Work First" culture of welfare reform, it is critical that TANF clients be identified and assessed as soon as possible, appropriate referrals to vocational and educational opportunities be completed and that necessary pre- and post-employment accommodations be made. Accommodations can help learning disabled individuals reach their full potential in the workplace.

1. THE NEW HAMPSHIRE TRAINING DAY

National studies indicate that individuals who are not able to support themselves through work may be at a higher risk of having a learning disability. This disability would make it very difficult for an individual to progress into a career path that would allow them to be independent of TANF financial assistance. Mr. Fey first provided the group with an appreciation of what was going on around the country. He shared information about both the Washington State and Kansas efforts to develop intake models for welfare clients that identify disabilities. In these two states, they are also training staff on how to work effectively with clients with disabilities and how to develop links to community-based organizations with expertise in disability issues. Their activities include developing focused LD screening tools; and testing different approaches—instruction, support services, job coaching—that may increase learning disabled recipients' likelihood of success in education, job training and employment.

Mr. Fey specifically shared with the group the lessons attained so far through the Seattle-King County Private Industry Council (PIC) Learning Disabilities Project. The PIC serves many different populations: out-of-school youth, the homeless, public housing residents, dislocated workers, and welfare recipients. One-stop caseworkers are trained to identify adults who show signs of learning disability and are given sensitivity training. There are four main components to the program:

- Screening one-stop participants suspected of having a learning disability;
- Formally testing for learning disabilities and any emotional problems that would impede employment or training;
- Identifying the appropriate accommodations to aid the individual's job or training situation; and
- Following up with the client to make sure accommodations are being implemented. Specialized LD caseworkers are utilized in working directly with clients who have screened positively for LD. These LD lead caseworkers participate in a six-day

training initiative targeted at appropriate identification, assessment and referral protocols, in order to help LD specialist to refer and manage cases.

Mr. Fey stressed the importance of "organizational culture" in appropriately identifying clients with LD. For the most part, many of these clients do not recognize their own learning disability and have never been assessed for a learning disability. Some of these clients may also fear the stigma associated with being identified as "learning disabled." Thus, Mr. Fey reiterated the absolute necessary to prepare and train adequately staff who are administering a screening tool. Caseworkers at the Seattle-King PIC participate in extensive sensitivity training that instructs them how to recognize signs that may indicate that a client has a learning disability prior to administration of the instrument.

If a caseworker notices signs of a learning disability, a short screening tool is administered to determine whether the client is at-risk of having a learning disability. This screening tool is a 13 question instrument adapted from a 50 question questionnaire developed by Nancie Payne, Senior Consultant, Payne and Associates, Olympia, Washington, under contract for the Washington State Division of Employment and Social Services Learning Disabilities Initiative (See Exhibit I.). It is at this point in the process that clients are asked to sign a confidentiality and release form (See Exhibit II). The revised screening tool, now in the public domain and available for program use, is attached as Exhibit V, and can be found at www.skepic.org under "Learning Disabilities Project," then "screening tools."

If the screening tool identifies a client to be at high risk of having a learning disability (score 12 and above), the caseworker recommends a comprehensive assessment to confirm the presence of a learning disability and to better gauge how this learning disability might impede employment. The assessment tests can include the following: the Weschsler Adult Intelligence Scale—third edition (WAIS III); the Woodcock Johnson Psychoeducational Battery-Revised (WJ-R); and additional tests of cognitive processing. Once this assessment is completed, the client, the diagnostician, the LD case manager, and the primary caseworker meet in a team staffing to discuss the results of the testing with the client and outline potential training options and potential accommodations for the workplace. Most often, the client needs time to digest this information, and thus there is a follow-up meeting between the LD case manger and the client to further discuss the diagnosis and workplace accommodations necessary. It is at this follow-up meeting that the LD case manager discusses the different strategies to disclose the client's disability to the employer or the instructor (if they are preparing to complete their GED or enter a training program). The Americans with Disabilities Act (ADA) requires employers to make "reasonable accommodations" for employees with learning disabilities. If these

⁴ This questionnaire was developed, tested and validated in welfare offices in the state of Washington. The 13-question survey was shown to accurately predict individuals with learning disabilities 73 percent of the time.

accommodations are too expensive, the clients might be eligible for vocational rehabilitation funding.

Exhibit I: Learning Needs Screening

LEARNING NEEDS SCREENING

	INTER	VIEWER NA	ME:		
		ERVIEW DA			
CLIENT NAME:			DATE	DE DEDUCE	
CLIENT NAME:					
SOCIAL SECURITY NUI	MBER:	GEI	NDER:	☐ Male (☐ Female
HOW MANY YEARS OF	SCHOOLING HAVE Y	OU HAD? _		_	
CHECK ALL EARNED:	☐ High School Diploma ☐ AA degree ☐ Othe	GED (specify):	☐ Technic	al/Vocational	Certificate
WHAT KIND OF JOB W	OULD YOU LIKE TO G	ET?			
DO YOU HAVE EXPERI	ENCE IN THIS AREA?	☐ Yes (□ No		
WHAT MAKES IT HARD	FOR YOU TO GET OF	R KEEP THIS	KIND OF	JOB?	
					-
		<u> </u>			
WHAT WOULD HELP? _					1
		ANN			******
		**********			**********
BEFORE PROCEEDING T TO THE CLIENT:	TO THE QUESTIONS, I	READ THIS S	TATEME	NT ALOUD	
The following questions are a	about your school and life	experiences.			
We're trying to find out how some of these issues might a resources and services you m	affect your life now. You	r responses to	these ques	were in scho tions will hel	ol or how p identify
See final page for directions and	scoring The Les	rning Needs Sc	reening is	not a diagnosti	c tool and
		ot be used to det			

Exhibit I: Learning Needs Screening (cont.)

the state of the s	
Section A	
1. Did you have any problems learning in middle school or junior high school?	☐ Yes ☐ No
2. Do any family members have learning problems?	☐ Yes ☐ No
3. Do you have difficulty working with numbers in columns?	☐ Yes ☐ No
4. Do you have trouble judging distances?	☐ Yes ☐ No
5. Do you have problems working from a test booklet to an answer sheet?	☐ Yes ☐ No
Count the number of "Yes's" for Section A	X 1 =
Section B	
6. Do you have difficulty or experience problems mixing arithmetic signs (+/x)?	☐ Yes ☐ No
7. Did you have any problems learning in elementary school?	☐ Yes ☐ No
Count the number of "Yes's" for Section B	X 2 =
Section C	u jan nyaya 1898 ta
8. Do you have difficulty remembering how to spell simple words you know?	□ Yes □ No
9. Do you have difficulty filling out forms?	☐ Yes ☐ No
10. Did you (do you) experience difficulty memorizing numbers?	☐ Yes ☐ No
Count the number of "Yes's" for Section C	X 3 =
Section D	
11. Do you have trouble adding and subtracting small numbers in your head?	☐ Yes ☐ No
12. Do you have difficulty or experience problems taking notes?	□ Yes □ No
13. Were you ever in a special program or given extra help in school?	☐ Yes ☐ No
Count the number of "Yes's" for Section D	X·4 =
Count the number of 1es 3 for section D	A -
TOTAL YES'S MULTIPLIED BY FACTOR INDICATED FOR SECTIONS A, B, C, D	

See final page for directions and scoring

The Learning Needs Screening is not a diagnostic tool and should not be used to determine the existence of a disability

Exhibit I: Learning Needs Screening (cont.)

	. Check to see if the client has ever been diagnosed or told he/she has a learning disability. If so,
	By whom?
	When?
NC	OTES:
	LEARNING NEEDS SCREENING DIRECTIONS
1.	Ask the client each question in each section (A, B, C, D) and question #14.
2.	Record the client's responses, checking "Yes" or "No."
3.	Count the number of "Yes" answers in each section.
4.	Multiply the number of "Yes" responses in each section by the number shown in the section subtotal. For example, multiply the number of "Yes's" obtained in Section C by 3.
5.,	Record the number obtained for each section after the " = " sign in the section subtotal.
6.	To obtain a Total, add the subtotals from sections A, B, C and D. If the Total from sections A, B, C and D is 12 or more, refer for further assessment.
Ass	s Learning Needs Screening was developed by Nancie Payne, Senior Consultant, Payne & sociates, Olympia, Washington, under contract for the Washington State Division of Employment and sial Services Learning Disabilities Initiative (November 1994 to June 1997).
Ass	sociates, Olympia, Washington, under contract for the Washington State Division of Employment and

Exhibit I: Learning Needs Screening (cont.)

ADDITIONAL QUESTIONS WHICH MAY BE ASKED:

GLASSES:		Does the client need or wear glasses?	Yes [] No []
		Last examination was within two years?	Yes [] No []
	HEARING:	Does the client need or wear a hearing aid?	Yes [] No []
	MEDICAL/	PHYSICAL:	
	Has th	e client experienced any of the following:	
		 multiple, chronic ear infections multiple, chronic sinus problems serious accidents resulting in head trauma prolonged, high fevers diabetes severe allergies frequent headaches concussion or head injury convulsions or seizures long-term substance abuse problems serious health problems 	Yes [] No []
		client taking any medications that affect the way he/she is functioning?	Yes [] No []
		If yes, what is the client taking?	
		How often?	
	Does th	he client need medical or follow-up services?	Yes [] No []
	Referra	als needed/made:	

Exhibit II: Confidentiality and the Release of Information

CONFIDENTIALITY AND THE RELEASE OF INFORMATION

Client Name:		·	
SS#:			
Date Completed:			
Referring Agency:			
Agency Address:		Phone #	
Referring Case Manager:			
The learning disabilities program red disability or other pertinent informat with you. The information you allow only to help you succeed in your emmecessary to share your information employer, but this will only be done. By signing your name below, you are Diagnostician, the LD Consulting Careferring case manager. By signing I read out loud to you and that you have means. This release shall remain in a below.	ion be shared among to be shared among to be shared among ployment and train with other profession with your permission agreeing to share ase Manager, the Loelow, you also achow been asked if yo	ng specific professional ing the professional ing goals. It may bonals such as an institution. your information was project Coordina knowledge that this understand what the second in	onals working s will be used ecome structor and/or with the LD tor, and your form has been this form
Client Signature	Date		
Referring Case Manager Signature	Date		
Signature	Date	Client Initials	Date
Signature	Date	Client Initials	Date
This form is in effect through:			

Mr. Fey reiterated the importance of appropriate screening tools and protocols to be in place to effectively assess TANF clients with learning disabilities. More importantly, he stressed that it was incumbent on the TANF program or the one-stop center to develop significant relationships with vocational rehabilitation programs and community initiatives so that, once disabilities are identified, appropriate referrals to programs can be made. Developing these systems—this support infrastructure—was critical to moving these individuals with learning disabilities onto a pathway to self-sufficiency. Mr. Fey also suggested that all programs build in an effective evaluation component into their system to determine if assessment and referral strategies and accommodations are getting the desired results. The flow chart of the Learning Disabilities Project in Washington State is shown in Exhibit III.

Mr. Fey structured the day of training as an interactive session, filled with dialogue, roleplaying and with many questions and answers. The training was well received. The evaluations from the session were positive, and the participants felt that the training day was an excellent start. They believed that Mr. Fey was a "great trainer who provided a foundation in helping the staff understand how to work with clients with LD." Although an excellent overview, most participants identified a need to continue with the training, particularly in the area of working with employers in developing accommodations for clients with LD.

2. ASSESSMENT OF NEW HAMPSHIRE DELIVERY SYSTEM

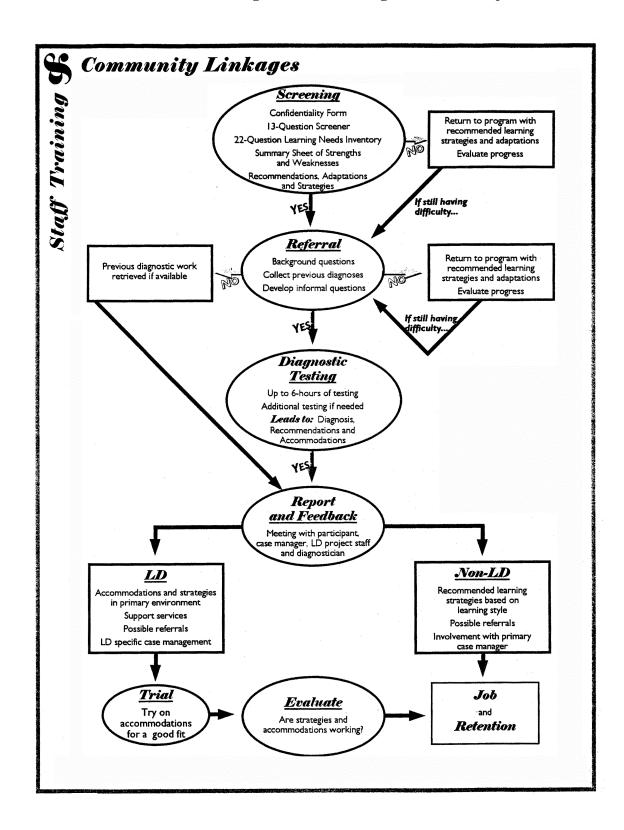
On day two of the site visit, Ms. Lyn Winterfield took the Peer TA team to Concord to meet with Ms. Linda Swenson, Learning Disabilities Coordinator for New Hampshire. The team reviewed the process underway in New Hampshire to identify and refer TANF clients with learning disabilities. The model service delivery strategy suggested by Mr. Fey included the following components:

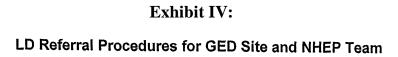
- Screening
- Diagnostic Testing
- Staff Training
- Linkages/Partnerships
- Employers
- Retention Services
- Consumer Empowerment Advocacy.

For the most part, the New Hampshire referral process included these elements. (See Exhibit IV.) In fact, the Washington State screening instrument used by Mr. Fey in Seattle was also used in New Hampshire. Mr. Fey pointed out the need for the New Hampshire referral process to include a more purposeful information feedback loop to the Learning Disabilities Coordinator for clients referred into the vocational rehabilitation system. Also, Mr. Fey suggested a more comprehensive confidentiality release form that would allow for both vocational rehabilitation system and the employment team to work with the TANF client. Also, it was suggested that more intensive training take place for the employment teams so they might become more familiar with the LD issue and better understand the New Hampshire referral process.

Mr. Fey also suggested implementing a more straightforward secondary informal screening tool, as formal diagnosticians will perform the more detailed tests upon referral. He noted that the initial screening process should take no more than an hour or so before referring the client to more formal testing. He points out that initial screeners should make no attempt to diagnose the client, and that reports should not be diagnostic in nature for liability reasons. The referral system (both "in house" and out) should be formally established using clear, uniform steps and guidelines. Other aspects of the program that Mr. Fey suggests paying close attention to are: the ability of diagnosticians to recognize client issues unrelated to LD (dual-diagnosed clients), and the creation/implementation of post-testing follow-up services.

Exhibit III: Washington State Learning Disabilities Project





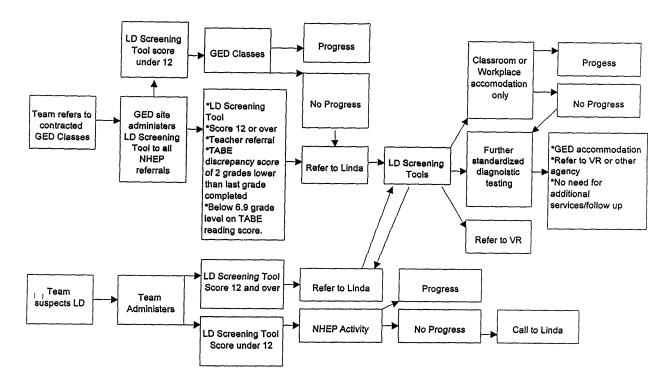


Exhibit V: Washington State Learning Disabilities Project Learning Needs Screening Tool

Learning Disabilities Project

Dept. of Social LEARNING NEEDS SCREENING TOOL Health Services			PVIEW DATE		
BACKGROUND REFORMATION					
NAME		BRIN DATE	N TEPVENER	NAME	
JAE HUMBER ☐ Male ☐ Fernale ☐ Single F	COMMUNITY DESIVER OFFICE [CDG]				
JAS MUNICER ETHNICT		□ Caucasian □ Hispanic£atro	□ Native	American	
ADES HUMBER	ADES HUMBER COMPLETED VEARS OF FORMAL EDITION				
		□ AA degree □ Other (specify)			
WHAT KIND OF JOR WOULD YOU LIKE T	0 6677				
DO YOU HAVE EXPENSIVES IN THIS FIRST	O OR A RELATED FIELD?				
WHAT MAKES IT HAND FOR YOU TO GE	OR HERF THEIR HID OF JO	67			
WHAT WOULD HELP?					
BEFORE ANSWERING THE FOLL	OWING QUESTIONS, REA	D THE STATEMENT ALOUD ON TH	EBACK TO	THE CLIENT.	
	SSE INSTRUCTIONS	ON BACK OF THIS PAGE.			
SECTION 1. Howe you had any problems learning in wiskfe caheal or junior high? 2. Do you have difficulty working from a sert booklet to an answer theed? 3. Do you have difficulty or experience problems working with numbers i in a column? 4. Do you have trouble judging distances? 5. Do any family members have learning problems?					
1×	1x = Count the numbe of "YES's." Multiply by 1.				
TES SECTION 8 8. Here you had any problems learning in elementary school? 7. Do you have difficulty or experi once problems mixing mathematical signs (+ /s)?					
2x=	2X = Count the numbe of "YES's." Multiply by 2.				
Section 3 9. Do you have difficulty or experience problems (lifing out forms?) 9. Do you experience difficulty memorioling numbers? 10. Do you have difficulty remembering how to spell simple words you know?					
3x	Count the num	abe of "YES's." Multiply	by 3.		
TES SECTION IV 11. Do you have difficulty or experience problems taking notes? 12. Do you have difficulty or exper lence problems adding and substancing small numbers in your lead? 13. White you ever in a special program or given evers has lip in school?					
4x=	Count the nun	nbe of "YES's." Multiply	by 4.		
TOTAL: If 12 or more, refer for further assessment.					

Go to "Side 2" instructions >>





Exhibit V: Washington State Learning Disabilities Project Learning Needs Screening Tool (cont.)

Learning Disabilities Project

BEFORE ASKING THE FOLLOWING QUESTIONS, READ THIS STATEMENT ALOUD TO THE CLIENT:

"The following questions are about your school and life experiences. This information will provide a better understanding of the services you will need to be successfully employed, We're trying to find out how it was for you (or your family members) back in school or how some of these issues might affect your life now. These questions will help us identify resources that will aid you in self-sufficiency planning with your caseworker."

Ask all questions:

- Ask the client each question in Sections I, II, III and IV.
- 2. Check YES if client answers the question with "yes."
- 3. In each section, count the number of "yes" answers.
- Multiply the number of "yes" responses in each section by the number shown in the "Count the number of "YES"s" area. For example, multiply the number of Section III "yes's" by 3.
- Record that product after the = sign in that area.
- Add up the numbers after the = sign and enter that total in the Total row.
- If the Total is 12 or more, the participant may need further assessment and/or referral for employment

 related accommodation.





APPENDIX A:

AGENDA AND PARTICIPANTS

AGENDA

LEARNING DISABILITIES TRAINING

Manchester, New Hampshire April 4, 2000

Welcome and Introductions

9:00 - 9:30 a.m.

- Introductions
- Myths about learning disabilities

Seattle PIC LD Project Overview

 $9:30 - 10:00 \ a.m.$

- Review of Project and Services
 - State of Washington LD Project Background
 - PIC Projects Design
 - PIC Project Statistics and Findings

Understanding LD

10:00 a.m. - Noon

- Adult Learners, learning styles, and learning disabilities
 - ELSIE
- Rehabilitation Services Administration Definition and Major Characteristics (pgs. 12-13)
- Activity: Manifestations of LD
- F.A.T. City Video
- Crossing the midline—revisited
- Co-existence of other disorders
- Attention Deficit Hyperactivity Disorder (ADHD)
- Consequences of the adult with LD (pgs. 27-30)
- Revisiting the myths

Lunch Noon – 1:00 p.m.

Screening for LD

1:00 p.m. - 2:30 p.m.

- Washington State 13-Question LD Screening Tool
- Training in use of the tool
 - Role play
 - Different formats available
- Screening is a Process

- Role of Screening
- Confidentiality and customer choice
- Vision and Hearing Screening
- Screening vs. Diagnostic Testing
- When to Screen
- Screening is not Diagnosis
- Review Results
- Discussion

"Big A" and "Small a" of Accommodations

2:30 p.m. - 3:00 p.m.

Conclusion and Final Thoughts

3:00 p.m. - 4:00 p.m.

PARTICIPANTS

Brenda Adair State Planner

Alabama Department of Economic &

Community Affairs 401 Adams Avenue Montgomery, AL 36130 Phone: (334) 242-5890 Fax: (334) 242-5855

Email: brendaa@adeca.state.al.us

Juanita Blount-Clark Division Director

Division of Family and Children Services

Department of Human Resources 2 Peachtree Street, North West

Suite 19-490

Atlanta, GA 30303 Phone: (404) 657-7660 Fax: (404) 657-5105

Email: jeblount@dhr.state.ga.us

Vera L. Butler

Director, TANF Policy Unit

Mississippi Department of Human Services

750 North State Street Jackson, MS 39202 Phone: (601) 359-4819 Fax: (601) 359-4435

Lisa Carlyle

Program Coordinator

Department of Social Services

Columbia, SC 29203 Phone: (803) 898-9464 Fax: (803) 898-9173 Email: lcarlyle@dss.state.us Virginia H. Carrington

Welfare-to-Work Policy Coordinator Cabinet for Families and Children

Department for Community Based Services

275 East Main Street

Suite 3W-B

Frankfort, KY 40621 Phone: (803) 898-9464 Fax: (502) 564-0328

Email: virginia.carrington@mail.state.ky.us

Elizabeth M. Caywood

Welfare-to-Work Policy Specialist Cabinet for Families and Children

Department for Community Based Services

Suite 3W-B

Frankfort, KY 40621 Phone: (502) 564-7536 Fax: (502) 564-0328

Email: elizabeth.caywood@mail.state.ky.us

Holly Cook

Director, Family Services Counseling

Families First

Department of Human Services Citizens Plaza Building-12th Floor

Nashville, TN 37248 Phone: (615) 313-5465 Fax: (615) 313-6639

Email: hcook2@mail.state.tn.us

Patricia A. (Trish) Cooper

Region Director

Department of Human Resources Division of Rehabilitation Services

533-B Highway 29 North Newnan, GA 30263 Phone: (770) 254-7352 Fax: (770) 254-7215

Email: pacooper@dhr.state.ga.us

Rozell Deere

Program Specialist

Alabama Department of Human Resources

50 Ripley Street

Montgomery, AL 36130 Phone: (334) 242-1968 Fax: (334) 242-0513

Valerie L. Doughty

Domestic Violence Coordinator South Carolina Department of Social

Services

P.O. Box 1520

Columbia, SC 29202 Phone: (803) 898-7504 Fax: (803) 898-7217

Email: vdoughty@dss.state.sc.us

Brenda H. Gillespie Program Consultant

Department of Human Resources

Division of Family & Children Services

Suite 18-454

Atlanta, GA 30303-3142 Phone: (404) 463-7280 Fax: (404) 657-3406

Email: bhgilles@dhr.state.ga.us

Donna T. Hornsby

Resource Development Consultant State of Alabama Department of Human

Resources

85 Bagby Drive, Suite 301 Birmingham, AL 35209 Phone: (205) 943-4117 Fax: (205) 942-3107 Email: dthtinz@aol.com J. Kent Hunt

Associate Commissioner

Alabama Department of Mental Health and

Mental Retardation
100 North Union Street

P.O. Box 301410

Montgomery, AL 36130-1410

Phone: (334) 242-3961 Fax: (334) 242-0759

Email: khunt@mh.state.al.us

Sherry S. Jackson

Program Administrator Senior

Mississippi Department of Human Services

750 North State Street Jackson, MS 39202 Phone: (601) 359-4819 Fax: (601) 359-4435

Frankie E. Long

Women's Services Coordinator

South Carolina Department of Alcohol and

Other Drug Abuse Services (DAODAS)

Suite 300

Columbia, SC 29204 Phone: (803) 734-9535 Fax: (803) 734-9663

Email: flong@daodas.state.sc.us

Taunya A. Lowe

Women's Substance Abuse Program Coord.

Department of Human Resources

Division of MH/MR/SA

2 Peachtree Street, NW, Suite 23-102

Atlanta, GA 30303 Phone: (404) 657-6412 Fax: (404) 657-2160

Email: talowe@dhr.state.ga.us

Nancy Meeden WtW Coordinator

Georgia Department of Labor

148 International Boulevard, Suite 650

Atlanta, GA 30303 Phone: (404) 656-7392 Fax: (404) 651-9377

Email: nancy.meeden@dol.state.ga.us

Junie A. Merkle

Planner

Department of Human Resources

2 Peachtree Street Suite 30-404 Atlanta, GA 30096

Phone: (404) 657-5277 Fax: (404) 657-3251

Email: jamerkle@dhr.state.ga.us

Wilbert R. Morris

Head, Local Support Services Economic Independence Section Division of Social Services

MSC 2420

Raleigh, NC 27699-2420 Phone: (919) 733-4570 Fax: (919) 715-5457

Email: wilbert.morris@ncmail.net

B.J. Preston

TANF Project Director

Drug, Alcohol and Other Drug Abuse

Services (DAODAS)

3700 Forest Drive, Suite 300

Columbia, SC 29204 Phone: (803) 734-9729 Fax: (803) 734-9663

Email: bpreston@daodas.state.sc.us

Starleen Scott Robbins

Branch Head

Women's & Children's Services

North Carolina Division of MH/DD/SAS 325 North Salisbury Street, Suite 1168

Raleigh, NC 27603 Phone: (919) 733-4671 Fax: (919) 733-9455

Email: starleen.scott-robbins@ncmail.net

Eleanor Surrency

Regional Director

Division of Rehabilitation Services

2032 Veterans Boulevard Dublin, GA 31021-3043 Phone: (912) 274-7676 Fax: (912) 274-7658

Email: elsurrency@dhr.state.ga.us

Doris Walker

Foster Care Unit Manager State of Georgia DHR/DFCS 2 Peachtree Street, 18th Floor

Atlanta, GA 30303 Phone: (404) 657-3458 Fax: (404) 657-3415

APPENDIX B:

LEARNING DISABILITY TRAINING SIGN-IN SHEET

LEARNING DISABILITY TRAINING PARTICIPANTS

Name: Heather Thalheimer Name: **Dorothy Leavitt** Sr. Mgt. Analyst Agency: Parent Information Center Title:

Address: PO Box 2405 Agency: DFA

Phone:

E-mail:

Concord, NH 03301 Address: 129 Pleasant Street

(603) 224-7005 Concord, NH 03301 (603) 224-4365 Phone: (603) 271-4249

Fax: E-mail: pienh@aol.com E-mail: dleavitt@dhhs.state.nh.us

Lynn Winterfield Debbie Luppold Name: Name: Agency: UNH Coop Extension **Program Specialist** Title: Agency: DHHSIDFA Address: 315 DW Highway

Boscawen, NH 03303 Address: 129 Pleasant Street (603) 225-5505 Concord, NH 03301

Phone: Fax: (603) 796-2271 Phone: (603) 271-4257

debbie.lupold@unh.edu lwinterfield@dhhs.state.nh.us E-mail: E-mail:

Name: **Heather Chiavaras** Name: Diane Glidden Agency: LINHCE - LEAP Case Manager Title: Address: 40 Terrill Park

Agency: Southern NH Services, CAP

Concord, NH 03301 Address: 19 Webb Place Phone: (603) 271-6210 Dover, NH 03820

Phone: (603) 742-3600

Fax: (603) 749-7515 dglidden@nhes.state.nh.us Name: Maureen Farmer E-mail:

Agency: N.H. Div. of Family Assistance

hchiavaras@dhhs.state.nh.us

Address: 129 Pleasant Street Name: Donna Knowlton

Concord, NH 03301 Title: Counselor/Case Manager

(603) 271-4248 Agency: N.H. Employment Program Phone:

E-mail: mfarmer@dhhs.state.nh.us **NHES**

Address: P.O. Box 180

Claremont, NH 03743 Valerie MacIntosh Name: Agency: GED – Claremont Adult Ed. Phone: (603) 543-3111

Address: 111 South Street Fax: (603) 543-3113

Claremont, NH 03743 dknowlton@nhes.state.nh.us E-mail: Phone:

(603) 543-4291 Fax: (603) 543-4296 Name: Sandra Jones macintosh45@juno.com E-mail: Title: Director

Agency: Step by Step, Second Start

Address: 17 Knight Street

Concord, NH 03301

Phone: (603) 228-1341 x212 Fax: (603) 228-3852

stepadmn@worldpath.net E-mail:

Name: Marsha Scott Name: Maxine Little Agency: Maternal and Child Health

DHHS

Address: 6 Hazen Drive

Concord, NH 03301

Phone: (603) 271-4527

E-mail: mscott@dhhs.state.nh.us

Name: Susan Katz Agency: NASHUA ALL Address: 40 Arlington Street

Nashua, NH 03080 Phone: (603) 598-8303 x208

E-mail: suekatz@aol.com

Gail Rueggeberg Name:

Agency: Vocational Rehabilitation

Address: 78 Regional Drive Concord, NH 03301

Phone: (603) 271-3471

grueggeberg@ed.state.nh.us E-mail:

Name: Dawn Britton Title: STW VR Counselor

Agency: Vocational Rehabilitation

Address: 547 Amherst Street Nashua, NH 03060

(603) 889-6844

Phone:

E-mail: dbritton@ed.state.nh.us

Name: Melissa Tappan Title: Project Manager

Agency: UNH Welfare Reform Evaluation

Address: 4 Library Way

Durham, NH 03804

Phone: (603) 862-1724 Fax: (603) 862-3461

E-mail: mstappan@cisunix.unh.edu Title: Coordinator

Agency: Disability Support Services

NH Community Technical

College

Address: 1066 Front Street

Manchester, NH 03102

Phone: (603) 668-6706 x221 (603) 668-5354 Fax:

E-mail: mlittle@tec.nh.us

Jeanette Hercik Name: Title: Project Manager Agency: Caliber Associates

Address: 10530 Rosehaven Street.

Suite 400

Fairfax, VA 22030

Phone: (703) 385-3200 (703) 385-3206 Fax: E-mail: hercikj@calib.com

Cheryl Ovellette Name:

Agency: N.H. Div. of Family Assistance

Address: 129 Pleasant Street

Concord, NH 03301

Phone: (603) 271-4243 (603) 271-4637 Fax:

E-mail: covellet@dhhs.state.nh.us

Name: Linda Pineau

Program Specialist Title:

Agency: DFA

Address: 129 Pleasant Street

Brown Building Concord, NH 03301

Phone: (603) 271-4245 (603) 271-4637 Fax:

E-mail: lpineau@dhhs.state.nh.us Name: Denise Roy-Iannarelli Title: Program Specialist

Agency: OFA

Address: 129 Pleasant Street

Brown Building

Concord, NH 03301

Phone: (603) 271-5618 Fax: (603) 271-4637

E-mail: droyinna@dhhs.state.nh.us

Name: Mary McGhee

Agency: So. New Hamp. Serv. Address: 177 Lake Avenue

Manchester, NH 03103

E-mail: marym@nhjtc.org

Name: Carol Varney Agency: SNHS/DFA

Address: 129 Pleasant Street

Brown Building Concord, NH 03301

Phone: (603) 271-4860 Fax: (603) 271-4639

E-mail: cvarney@dhhs.state.nh.us

Name: Rhonda Estabrook Title: Program Specialist

Agency: N.H. Employment Program

DFA

Address: 129 Pleasant Street

Concord, NH 03301

Phone: (603) 271-8189 Fax: (603) 271-4637

E-mail: restabro@dhhs.state.nh.us

Name: Michael Brien Title: Coordinator

Agency: WTW Employment Services

Belknap/Merrimack CAP

Address: P.O. Box 1016

Concord, NH 03302

Phone: (603) 225-3295 E-mail: mbrien@bmcap.org

Name: Diana Nackley Title: Coordinator

Agency: New England Partnership

Mass. Dept. of Ed.

Address: 350 Main Street

Malden, MA 02148

Phone: (781) 338-3834

E-mail: dnackley@doe.mass.edu