

GAPS AND COORDINATION OF SERVICES FOR OLDER TEXANS: SURVEY RESULTS

July 2002

This report is one in a series published by the Office of Aging Policy and Information (OAPI) at the Texas Department on Aging in an effort to provide timely, relevant, and customized information on aging issues to the legislature, state and local government, and other stakeholders.



**Texas Department on Aging
Office of Aging Policy and Information
P.O. Box 12786 Austin, TX 78711
(512) 424-6840
www.tdoa.state.tx.us**

ACKNOWLEDGEMENTS

The Texas Department on Aging (TDoA) thanks the state agencies that responded to the survey entitled "Services and Programs for Older Texans Interagency Inventory". The department appreciates the time devoted by each respondent and is grateful to the agencies for their willingness to help assess services available to older Texans, gaps in services, and coordination of services between state agencies.

AGING MATTERS IN TEXAS



The mission of Texas Department on Aging (TDoA) is to be the state's visible advocate and steward for a full range of services and opportunities that allow older Texans to live healthy, dignified, and independent lives. Federal and state law charges TDoA with conducting long-range planning activities on aging issues. The 76th Texas Legislature directed TDoA to serve as the state's primary resource on aging and to work with federal and state organizations in conducting studies and surveys on the special problems of older Texans (SB 374). The 75th Texas Legislature (SCR 36) endorsed TDoA's *Aging Texas Well* initiative to help Texans address individual and family preparedness for retirement and aging well, and to form partnerships between state government agencies and elected officials to address public policy issues related to older Texans.

To fulfill its mission and statutory mandates, TDoA established the Office of Aging Policy and Information (OAPI). OAPI's serves as a comprehensive resource for state government and the general public on issues, trends, services and programs for an aging Texas. It also conducts primary and secondary research, provides in-depth policy and planning analysis, and disseminates information about aging services through reports, public information, and partnerships with public and private sector organizations.

OAPI maintains a wide range of stakeholder relationships. An Aging Policy Resource Group -- consisting of experts from state government, consumer groups, service providers, and academic institutions -- helps identify and prioritize aging issues and policy solutions. OAPI also relies on community forums, policy roundtables and similar events to ensure consumers and experts inform the policy and planning analysis.

OAPI's future work will continue to focus on the readiness of state government and local communities for an aging population. TDoA is committed to ongoing analysis of aging issues and their policy implications for Texas. OAPI will serve as resource and partner to other state agencies and state leadership to ensure that allows older Texans live healthy, dignified, and independent lives.

TABLE OF CONTENTS

Executive Summary	i
Program Acronyms	v
Chapter I: Introduction and Overview	1
Methodology	2
Survey Instrument	2
Response Rate	3
Response Format	3
Chapter II: Services Available to Older Texans	7
Housing – Home Ownership and Renting	7
Housing – Home Repairs and Modification	10
Transportation	13
Education and Lifelong Learning	17
Employment Services	20
Retirement Services	25
Volunteer and Recreation Activities	27
Health Insurance	30
Wellness Promotion and Health Services	33
Medical Treatment and Acute Care	40
Mental Health and Substance Abuse Services	43
Long Term Care Services and Supports	48
Access, Assistance, and Support Services	55
Consumer Information and Protection	63
Chapter III: Coordination between Agencies	67
Chapter IV: Conclusions and Future Directions	73
Endnotes	77
References	81
Appendixes	87
Appendix A: Agencies Surveyed	89
Appendix B: Agencies Providing Licensing, Planning, Research, Regulatory, or Grant/Funding Services	95
Appendix C: Survey Instrument	99

LIST OF TABLES

Housing - Home Ownership and Renting

Table 1.1. Service/Program Acronyms	8
Table 1.2. Services Reported	8
Table 1.3. Service Descriptions	9

Housing - Home Repairs and Modification

Table 2.1. Service/Program Acronyms	11
Table 1.2. Services Reported	11
Table 2.3. Service Descriptions	12

Transportation

Table 3.2. Services Reported	15
Table 3.3. Service Descriptions	16

Education and Lifelong Learning

Table 4.2. Services Reported	18
Table 4.3. Service Descriptions	19

Employment Services

Table 5.1. Service/Program Acronyms	21
Table 5.2. Services Reported	21
Table 5.3. Service Descriptions	23

Retirement Services

Table 6.1. Service/Program Acronyms	26
Table 6.2. Services Reported	26
Table 6.3. Service Descriptions	26

Volunteer and Recreation Activities

Table 7.1. Service/Program Acronyms	27
Table 7.2. Services Reported	28
Table 7.3. Service Descriptions	29

Health Insurance

Table 8.1. Service/Program Acronyms	31
Table 8.2. Services Reported	31
Table 8.3. Service Descriptions	32

Wellness Promotion and Health Services

Table 9.1. Service/Program Acronyms	34
Table 9.2. Services Reported	34
Table 9.3. Service Descriptions	36

Medical Treatment and Acute Care

Table 10.2. Services Reported	41
Table 10.3. Service Descriptions	42

Mental Health and Substance Abuse Services

Table 11.1. Service/Program Acronyms	44
Table 11.2. Services Reported	44
Table 11.3. Service Descriptions	46

Long Term Care Services and Supports

Table 12.1. Service/Program Acronyms	49
Table 12.2. Services Reported	49
Table 12.3. Service Descriptions	52

Access, Assistance, and Support Services

Table 13.1. Service/Program Acronyms	56
Table 13.2. Services Reported	56
Table 13.3. Service Descriptions	59

Consumer Information and Protection

Table 14.2. Services Reported	64
Table 14.3. Service Descriptions	65

Coordination Between Agencies

Table 2.1. Coordination of Services	68
-------------------------------------	----

EXECUTIVE SUMMARY

State government provides a wide variety of programs and services for older Texans. Many target or have special outreach to older Texans. However, variability in the eligibility criteria to qualify for services can confuse those seeking services. Since older Texans are one of the fastest-growing population groups served by the state, it is important that services and programs for them are easily accessible and coordinated.

Chapter 101 of the Human Resource Code directs the Texas Department on Aging (TDoA) to study and make recommendations on opportunities to coordinate services and programs for older individuals across state government, thus reducing duplication or gaps in these programs. In response, the Office of Aging Policy and Information at TDoA has produced this report on the results of our survey of state agencies on gaps and coordination of services for older Texans.

This report should be used by:

- **State agencies** to identify potential ways to coordinate with other agencies to address service gaps;
- The **Texas Legislature** and other state **policy makers** as a resource document; and
- The **Office of Aging Policy and Information** to guide future research and policy analysis to improve the services provided to older Texans, including recommendations on service coordination and gaps in services.

During the month of April 2000, TDoA surveyed 193 state government agencies, commissions, and boards listed on the state of Texas website. A follow-up survey was conducted in February 2001. A total of 160 agencies returned the survey. Of the 160 agencies, two percent did not provide services to older persons, and 65 percent provided licensing, regulatory, research, planning, or grant/funding services that do not directly address quality of life or independence for older Texans.

The survey consisted of two parts: Part 1 asked agencies to identify programs that serve older Texans, target populations for these programs, and gaps in services. Part 2 asked agencies to identify current and potential coordination

activities. The survey focused only upon state government services and did not address services available from private or local sources. The information in this report, except where noted, is based on agency responses and, consequently, may not include all programs, service gaps or coordination efforts.

In identifying service gaps, agencies answered questions about regional availability and level or quantity of services. Survey results generally identified the following types of gaps in services:

- Services may not be available in all counties of the state;
- Some services lack the resources/funding to meet all eligible clients' needs; and
- Services are available for eligible recipients, but the quantity or level of service may not be sufficient or appropriate

Gaps in services were identified in several functions of state government. Health and human services agencies, some with long waiting or interest lists, identified many of the gaps. Gaps were particularly notable in the following areas:

- Housing services
- Transportation services
- Long-term care services
- Access, assistance and support services

Thirty-nine coordination activities were reported in Part 2 of the survey, with types of coordination activities often depending on the nature of the relationships between programs and agencies. In some cases, two or more agencies, provide similar programs or services but the target populations are different. For example, the Texas Commission for the Blind and Texas Rehabilitation Commission both provide vocational rehabilitation services, but target different population groups (persons with visual impairments versus persons with all other disabilities). Other examples include the In-Home and Family Support Programs operated by the Texas Department of Human Services and Texas Department of Mental Health and Mental Retardation. While the programs have the same name, have similar purposes and provide similar services, the populations served by each are different. These agencies have specific coordinating mechanisms in place to ensure consistency across the programs.

Other opportunities for coordination arise when programs provide the same services to similar or overlapping population groups. For example, state schools and state hospitals provide similar services to the same population groups in different service areas.

Key coordination strategies identified by the survey include:

- interagency contracts,
- streamlining contracting and rate-setting processes, and
- coordinating publications,
- working with non-state agencies that have similar missions.
- tape match of clients,
- coordinating contacts between local programs,
- developing consistent rules across similar programs,

The survey clearly indicated that state agencies recognize the need to coordinate and draw upon each other's resources and expertise. The Office of Aging Policy and Information will continue to work with other state agencies and the Legislature to develop recommendations for improving the services for older Texans.

Information in this report is organized in a tabular form by service category. Chapter I provides an introduction and overview of the report format. Chapter II provides data in a series of tables for each of the service categories. Each category contains a table reporting the service/program acronyms, services reported, and service descriptions. Chapter III provides information on service coordination. Finally, Chapter IV provides the conclusion and future directions with respect to services available to older Texans, coordination of services, and opportunities for coordination.

AGENCY ACRONYMS

ACRONYM	AGENCY NAME
CPA	Comptroller of Public Accounts
CSEC	Emergency Communications, Commission on State
CSOT	Sex Offender Treatment, Council on
CTF*	Children's Trust Fund of Texas Council
DPS	Public Safety, Department of
ERS	Employees Retirement System
FFPC	Fire Fighter's Pension Commission
GLO	General Land Office
HECB	Higher Education Coordinating Board
HHSC	Health and Human Services Commission
OAG	Attorney General, Office of the
OCCC	Consumer Credit Commissioner, Office of
OG	Governor, Office of the
OPIC	Public Insurance Counsel
ORCA	Rural Community Affairs, Office of (formerly Center for Rural Health Initiatives)
PUC	Public Utility Commission
PRS	Protective and Regulatory Services, Department of
SoS	Secretary of State
SSB	Securities Board
TCADA	Texas Commission on Alcohol and Drug Abuse
TCB	Blind, Commission for the
TCC	Cancer Council
TCDHH	Deaf and Hard of Hearing, Commission for the
TCE	Texas Cooperative Extension (formerly Texas Agricultural Extension Service)
TCID	Center for Infectious Disease
TCOMI	Offenders with Mental Impairments, Council on
TCVCS	Volunteerism and Community Services, Commission on
TDCJ	Criminal Justice, Department of
TDH	Health, Department of
TDHCA	Housing and Community Affairs, Department of
TDHS	Human Services, Department of
TDI	Insurance, Department of
TDMHMR**	Mental Health and Mental Retardation, Department of
TDoA	Aging, Department on
ECI	Early Childhood Intervention, Interagency Council on
TEA	Education Agency
TJPC	Juvenile Probation Commission
TRC	Rehabilitative Commission
TRS	Teacher Retirement System
TSLAC	Library and Archives Commission
TVC	Veterans Commission
TWC	Workforce Commission
TxDOT	Transportation, Department of
TxED	Economic Development, Department of
TYC	Youth Commission

*The Children's Trust Fund is now a division of the Texas Department of Protective and Regulatory Services.
 **TDMHMR is a system comprised of over 40 Community MHMR Centers, 8 State Hospitals, 11 State Schools, and State Centers and Community Hospitals. Services reported by individual centers, hospitals, and schools have been included in the general TDMHMR services.

CHAPTER I

INTRODUCTION AND OVERVIEW

State government provides a wide variety of programs and services for older Texans. Many target or have special outreach to older Texans. However, variability in the eligibility criteria to qualify for services can confuse those seeking services for older Texans. Since older Texans are one of the fastest-growing population groups served by the state, it is important that services and programs for them are easily accessible and coordinated.

The Texas Legislature charged the Texas Department on Aging (TDoA) with “mak[ing] recommendations to the Governor, legislature, and state agencies regarding: opportunities to coordinate programs for older individuals, unnecessary duplication in providing services to older individuals, and gaps in services to older individuals.”*

This report responds to the legislative charge by presenting the results of a survey of state agencies** on services available to older Texans. TDoA asked agencies to identify programs that provide services to the older adult population and to report information on services, coordination of programs, and gaps in services.

This report is based exclusively on the responses of state agencies. It is not a review of all agencies or all aging services and may not be exhaustive. It is intended to serve as a framework for analyzing services for older Texans and to be a resource to lawmakers, state leaders, and state agencies contemplating refinements, policies, and reforms needed to provide the best possible customer service throughout state government.

* Human Resources Code, Chapter 101.222 of the Government Code that further requires TDoA to “provide expertise and advice to state agencies and the legislature and other elected officials on aging issues, including recommendations to meet the needs of this state’s aging population.”

** The term *state agencies* refers to the 193 agencies, commissions, and boards listed in the state of Texas website.

This report can be used by state agencies to identify potential ways to coordinate with other agencies to address service gaps and by the Texas Legislature and other state policy makers as a resource document. The Texas Department on Aging's Office of Aging Policy and Information will also use it to guide future research and policy analysis to improve the services provided to older Texans, and to make recommendations on service coordination and gaps in services.

METHODOLOGY

In April 2000, TDoA conducted a comprehensive survey of government agencies providing services and programs for older Texans. A two-page questionnaire was sent by electronic mail, regular mail, or fax to a list of 193 state agencies, commissions, and boards compiled from the State of Texas website (see Appendix A). Individual agencies were reached by hyperlinking to their web pages. The questionnaire was distributed electronically to agencies with listed e-mail addresses and faxed or mailed to agencies whose email addresses were not identified. Agencies were requested to respond to the survey electronically, although several questionnaires were returned by fax and mail. Due to the low response rate of the initial survey, a follow-up survey was conducted in February 2001. Agencies that did not respond were resurveyed, and agencies that had responded to the initial survey were contacted for updated information.

SURVEY INSTRUMENT

The survey instrument contained two parts. Part 1: Services and Gaps focused on:

1. Services and/or programs provided;
2. The targeted population (e.g., general Texas population, older Texans, general Texas population with special outreach for older Texans); and
3. Gaps in services (e.g., county/region availability, quantity and level of service, and other gaps).

Part 2: Opportunities for Coordination focused on service coordination, with an emphasis on:

1. The type of coordination;
2. A description of coordination; and
3. A description of desired outcome

The survey instrument is located in Appendix C.

In March of 2002, TDoA asked agencies to review the survey information for accuracy and update information as necessary.

RESPONSE RATE

TDoA received survey responses from 161 of 193 agencies (83%). Of the 161 responding agencies, four (2%) indicated their agency did not provide services to older persons and 104 (65%) indicated their agency only provides licensing, regulatory, planning, research, or grant/funding services.

This report does not list licensing and regulatory, research, planning or grant services. Appendix B lists the agencies that provide licensing, regulatory, research, planning, or grant/funding services are listed.

REPORT FORMAT

Chapter 2 presents data on services available to older Texans. Services and programs are organized into 14 categories:

- | | |
|---|--|
| 1. Housing - home ownership and renting | 4. Education and lifelong learning |
| 2. Housing - home repairs and modifications | 5. Employment services |
| 3. Transportation | 6. Retirement services |
| | 7. Volunteer and recreation activities |

- 8. Health insurance
- 9. Wellness promotion and health services
- 10. Medical treatment and acute care
- 11. Mental health and substance abuse services
- 12. Long-term care services and supports
- 13. Access, assistance, and support services
- 14. Consumer information and protection

Services/programs are listed in two tables. The first table, "*Services Reported*", contains the following fields:

- **Service/Program** - the service or program name
- **Agency** - the name of the agency that provides the service
- **Target** – the targeted population for this program (e.g., persons with disabilities)
- **Outreach** - the means by which the service/program is available to older Texans, with categories including:
 - *General* - is available to the **general target population** of which older adults are a part
 - *Older* - specifically **targets older adults** in the target population,
 - *Outreach* - general target population with **special outreach** for older adults
- **Gap** - lists the identified gaps in service delivery

SAMPLE TABLE 1. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Home Delivered Meals	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans

The second table "*Service Descriptions*" describes the services or program listed in the "*Services*" table.

SAMPLE TABLE 2. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Home Delivered Meals	TDoA	Hot, cold, frozen, dried, canned or supplemental food that provides a minimum of 1/3 of the recommended dietary allowances (RDA). There are two types of meals: standard (regular meals from the standard menu that are served to the majority or all of the participants) and therapeutic meals/liquid supplements (special meals or liquid supplements that have been prescribed by a physician and are planned specifically for the participant by a dietician, such as diabetic diet, renal diet, pureed diet, and tube feeding).

Chapter 3 presents data on coordination between agencies. The table *Coordination of Services* contains the following fields:

- **Collaborating Agencies** - the name of the agencies working together, the agency reporting the coordination listed as number "1"
- **Program Name** – the name of the program or service
- **Type** – the type of coordination, with possible responses including:
 1. In the process of engaging in coordination activities
 2. Coordination activity is being planned
 3. Coordination activity is currently in place
 4. Coordination activity between agencies is not applicable
- **Coordinated Activity** – description of the coordination
- **Desired Outcome** – the desired outcome resulting from the coordination

SAMPLE TABLE 3. COORDINATION OF SERVICES

COLLABORATING AGENCIES	PROGRAM NAME	TYPE	COORDINATED ACTIVITY	DESIRED OUTCOME
1-TDoA 2-TDHS	Adult Day Care, ERS, & Personal Care	3	The Agency Coordination Task Force is working to streamline rate setting, contracting, auditing and payment mechanisms between the agencies.	Removal of duplication of services and processes.

Chapter 4 provides a discussion of conclusions and future directions.

CHAPTER II

SERVICES AVAILABLE TO OLDER TEXANS

Survey responses indicate that over 250 services or programs are available to older adults. Of these, about 55 services or programs are available specifically for Texans age 60 and older and about 50 provide special outreach efforts to older Texans. Gaps were reported in 87 services or programs. The following analysis groups the 250 services and programs into 14 categories. The information for each category includes a brief introduction to aging issues in the topic area, a list of service/program acronyms, a table reporting survey responses, and a table describing the programs.

HOUSING – HOME OWNERSHIP AND RENTING

Housing is a critical factor in determining quality of life and economic security for older adults (American Association of Retired Persons, 1999). Older Texans need housing that is safe, comfortable, and affordable. As people age, they may be faced with increasing disability in addition to having less income. In 1996, the median income for persons 65 years and older was \$20,535, compared to the \$16,000 annual income of persons aged 85 and older. Residents of federally assisted housing were well below these figures (The Elderly Housing Coalition Committee on the Continuum of Care, 2000). According to the US Department of Housing and Urban Development (2001), the number of affordable housing units available to extremely low-income renters dropped at an accelerated rate between 1997 and 1999. Furthermore, shortages of affordable and available rental housing have worsened.

The following tables compile the survey responses associated with housing services. Three state agencies reported operating nine programs and identified service gaps in every program, including both geographic and service-level gaps. Only one program specifically targeted older Texans.

TABLE 1.1. SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
CSBG	Community Service Block Grant Program
DPAP	Down Payment Assistance Program
HOME	Home Investment Partnership Program
HTF	Housing Trust Fund
LIHTC	Low Income Housing Tax Credit
Section 8	Section 8 Housing Assistance

TABLE 1.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Housing Placement	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
CSBG	TDHCA	Low Income	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
Section 8	TDHCA	Low Income	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
HOME	TDHCA	Low Income	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
HTF	TDHCA	Low Income	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
LIHTC	TDHCA	Low Income	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
Multifamily Mortgage Revenue Bond Program	TDHCA	Low Income	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
Single Family Bond Program (DPAP, First Time Homebuyer Program)	TDHCA	Low Income	General	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
Supported Housing	TDMHMR	Persons with Persistent Mental Illness	General	No gap reported

TABLE 1.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Housing Placement	TDoA	Helps older persons obtain suitable housing situation when homes are no longer safe.
CSBG	TDHCA	Provides administrative support to a network of local community action agencies that provide services to very low-income persons in all areas of the state. Services include as child care, health and human services for children, families, and the elderly, and other housing, poverty-related programs.
Section 8	TDHCA	Provides rental assistance subsidy vouchers to families earning less than 50% of area median family income, the elderly, and persons with disabilities.
HOME	TDHCA	Helps low-income Texans by providing grants and loans to help local governments, nonprofit agencies, for-profit entities, and public housing agencies provide safe, affordable housing to extremely low, very low, and low income families. HOME funds are allocated through four basic activities: 1) homebuyer assistance, 2) rental housing development, 3) owner-occupied housing assistance, and 4) tenant-based rental assistance. Ten percent of units are set-aside for special needs, which include homeless, elderly, persons with disabilities, and persons with AIDS.
HTF	TDHCA	It is the only state-authorized program dedicated to increasing the state's supply of affordable housing by awarding funds on a competitive basis to nonprofit and for-profit organizations, local governments, public housing authorities, community housing development organizations, and income eligible individuals and families for the acquisition, rehabilitation, and new construction of affordable housing.
LIHTC	TDHCA	Directs private capital towards the creation of affordable rental housing. Developers of low-income rental housing use the tax credit to offset a portion of their federal tax liability in exchange for the production of affordable rental housing.
Multifamily Mortgage Revenue Bond Program	TDHCA	Issues mortgage revenue bonds to finance loans for qualified nonprofit organizations and for-profit developers. Properties financed are subject to unit set-asides restrictions for low-income tenants, such as rent limitations and other requirements set by TDHCA and its governing board. Seventy-five percent of units created must be occupied by households at 80% or below AMFI, and five percent are reserved for special-needs tenants, which includes older adults.
Single Family Bond Program (DPAP, First Time Homebuyer Program)	TDHCA	DPAP helps very low and low –income families purchase a home by providing an interest-free loan (\$5,000 to \$10,000), depending on the county where the property is located. The assistance is intended to pay for the down payment as well as closing cost, and the borrower pays the loan when the home is either sold or refinanced, or at the maturity of the original mortgage. The First Time Homebuyer Program channels below-market interest rate mortgage money through participating Texas lending institutions to eligible families who are purchasing their first home, or to those who have not owned a home in the past three years. Although income limits may vary with each bond issue, the program is designed to serve very low- to moderate income Texas families.
Supported Housing	TDMHMR	Helps clients secure and keep regular integrated housing. Regular integrated housing is normal, living arrangements typical of the general population. Services consist of individualized assistance in finding and moving into regular, integrated housing (i.e., housing that is not agency owned or operated); temporary rental assistance; in home rehabilitation services; and coordinated activities that facilitate access to resources or services that support or assist clients with choosing getting or maintaining affordable housing.

HOUSING – HOME REPAIRS AND MODIFICATIONS

Older adults have the highest home ownership rates of any age group. About one quarter of all homeowners are seniors (Builder, 2000), however, about six percent of these homeowners live in homes that need repairs and/or rehabilitation. Many accidents, such as falls, can be avoided through simple home modifications and/or repairs (Administration on Aging, 1998).

Several types of home modifications may help older adults age-in-place: **accessible** features that are permanently fixed in place and noticeable (e.g., wide doors, lower countertop segments, grab bars in bathrooms); **adaptable** features that can be adjusted, do not involve structural or material changes, and can be done by unskilled labor (e.g., counter tops or closet rods supported by adjustable supports rather than built into the wall at a fixed level); **assistive technologies**, which include personal use devices intended to enhance the physical, sensory, and cognitive abilities of people with disabilities and help them function more independently (e.g., flashing doorbells, Telecommunications Devices for the Deaf (TDD)); and **rehabilitative engineering**, which addresses the mobility, communication, and transportation needs of persons with disabilities by applying scientific principles and engineering methodologies.

Developers and homebuilders are testing new housing alternatives as well as trying innovative housing models that will accommodate elders with disabilities (Builder, 2000). **Universal design** uses common products and building spaces that make mobility around the home easy and safe for persons with physical disabilities (e.g., levers handles on doors vs. doorknobs, which can be difficult for people with limited use of their hands to use). It is more cost-effective, however, to build new homes with universal design than to retrofit houses (Hickey M.C, 1999). **Visitability** is the modification of homes to meet accessibility needs of both the residents and anticipated guests with disabilities (Texas Council for Developmental Disabilities, 2000).

Modifications and/or repairs not only make homes safe, but may also help homeowners reduce utility costs. Modifications and/or repairs such as insulating the attic, sealing and or repairing ductwork, caulking areas where pipes penetrate walls, and weather-stripping doors can all increase energy efficiency.

The following tables compile the survey responses associated with housing repair and modification services. Four programs in three agencies were identified. All

but one program reported services were not available in all counties, and all programs reported a demand for higher/greater service levels. All programs listed had special outreach effort for older Texans.

TABLE 2.1. SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
CDBG	Community Development Block Grant Program
CEAP	Comprehensive Energy Assistance Program
WAP	Weatherization Assistance Program

TABLE 2.2. SERVICES REPORTED

SERVICE/ PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Residential Repair	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
CEAP	TDHCA	Low Income	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
WAP	TDHCA	Low Income	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³
CDBG	ORCA	Low Income Communities	Outreach	Not available in all counties ² In counties where available, the quantity/level of service is insufficient ³

TABLE 2.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Residential Repair	TDoA	Services consist of repairs or modification essential for the health and safety of client-occupied dwellings. Through Residential Repair services clients may be provided with limited housing counseling and moving expenses when repairs or modifications will not attain reasonable standards of health and safety.
CEAP	TDHCA	Combines case management, education, and financial assistance to very low and extremely low-income consumers to reduce their utility bills to an affordable level. Services include utility payment assistance, energy education, and budget counseling.
WAP	TDHCA	Helps low-income Texans, particularly the elderly and persons with special needs, control their energy costs to ensure a healthy and safe living environment. The program provides installation of Weatherization materials and provides energy conservation education.
CDBG	ORCA	Improves neighborhoods and communities by assisting small communities with housing infrastructure and economic development needs that primarily benefit persons of low and moderate incomes. Assists cities with populations at or below 50,000 and counties at or below 200,000.

TRANSPORTATION

Mobility is an essential part of American life, facilitating access to goods, services and social contacts. Low mobility can lead to isolation and cultural impoverishment (Burkhardt, J. E., Berger, A. M. Creedon, M., & McGavock, A. T., 1998). Safe and affordable transportation alternatives are essential to good quality of life. In 1995, 44 percent of older adults lived in suburban areas and 28 percent lived in rural areas (Straight, A., & Jackson, A. M., 1999). Many older adults in rural or suburban areas must rely on personal vehicles to get to shopping areas and services. As older persons become unable to drive, multiple transportation options are essential.

In 1997, there were 1,558,781 licensed drivers age 65+ in Texas (Texas Department of Health, 2000). While older citizens have fewer crashes because they drive less, data indicates that per mile driven, elders have the highest crash rates (Skinner & Stearns, 1999), posing a greater safety risk than younger drivers (Bittner, Long, & Szylow, 2000). The causes of most collisions involving senior drivers are failure to heed traffic signs (Alicandri, 1994) and left turns at intersections. This may be attributed to poor vision, reduced cognitive ability, increased difficulty with dividing attention among tasks and lack of familiarity with highway signs and painted markings (Bittner, Long, & Szylow, 2000). Public transportation options are necessary for older adults who choose not to or can no longer drive.

There are four categories of public transportation providers in Texas:

- Metropolitan transit authorities
- Urbanized transit systems
- Non-urbanized (rural) transit systems
- Transportation providers for the elderly and persons with disabilities (Texas Department of Transportation, 1999)

The Texas public transportation system includes 78% of the state's urban areas and 97 percent of the counties in rural districts (Gadbois, G. & Handy, S., 1998). The metropolitan transit authorities, urbanized transit systems, and the non-urbanized transit systems are fixed-route type transportation systems. Fixed-route transportation systems operate on a predetermined route with permanent transit stops that are clearly marked with route numbers and departure

schedules. Fixed-route transportation does not vary and the provider strives to reach each transit stop at the scheduled time. Passengers are not required to reserve a ride; they need only go to the designated location at the designated time.

The following tables present the survey responses associated with transportation services. Six agencies reported 10 different programs. Most of the programs identified either a geographical gap or insufficient service levels. In addition to the survey responses, it should be noted that stakeholders in the Health and Human Services strategic planning process indicated that gaps and lack of coordination of transportation services pose major barriers to improving the lives of older Texans. Consequently, transportation is a *Coordinated Strategic Plan* strategy for all HHS agencies and will be the focus of upcoming research policy analysis work by the OAPI at TDoA.*

* The Medical Transportation Program, funded by Medicaid, was not included in the survey response by TDH or HHSC.

TABLE 3.2. SERVICES REPORTED

SERVICE/ PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Safe Riders Program Educational Presentations*	TDH	Older Adults	Older	Not available in all counties ⁴ In counties where available, quantity/level of service is insufficient
Safe Riders Program Develop older adult traffic safety materials*	TDH	Older Adults	Older	No gap reported
Safe Riders Program Ride Safe/ Walk Safe Workshops*	TDH	Older Adults	Older	No gap reported
Safe Riders Program Traffic Safety Program*	TDH	General Population	Outreach	Not available in all counties ⁴ In counties where available, quantity/level of service is insufficient
Demand-Response	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Assisted Transportation	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Fixed-Route	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Elderly and Persons with Disabilities (Section 5310)	TxDOT	Elderly & Persons with Disabilities	Older	Not available in all counties ⁵
Urbanized Transit (Section 5307)	TxDOT	General Population	Outreach	Not available in all counties ⁶ Does not provide Sat. or Sun. service & generally operate on a 6 – 6 schedule
Non-urbanized Transit (Section 5311)	TxDOT	General Population	General	Not available in all counties ⁷ Does not provide Sat. or Sun. service & generally operates on an 8 – 5 schedule with advanced reservation required

* Due to limited funding options, the Safe Riders Programs will no longer be available through TDH as of September 2002.

TABLE 3.3. SERVICE DESCRIPTIONS

SERVICE/ PROGRAM	AGENCY	DESCRIPTION
Safe Riders Program Educational Presentations	TDH	Educational presentations are available to the general public, professionals, wellness coordinators, and health professionals on various safety issues such as "Aging and Driving", "Pedestrian Safety for Seniors", "Bicycling Safety for Seniors", and "Child Passenger Safety for Grandparents".
Safe Riders Program Develop older adult traffic safety materials	TDH	Educational material is developed and up-to-date traffic safety information is available to educate seniors as pedestrians, drivers, occupants, and bicyclists
Safe Riders Program Ride Safe/ Walk Safe Workshops	TDH	Provides continuing education credits and topics include occupant protection, pedestrian safety, and bicycle safety for older adults.
Safe Riders Program Traffic Safety Program	TDH	Topics discussed include: facts, Texas restraint laws, safety belts, air bags, vital signs, etc. that are important to older adult drivers.
Demand-Response	TDoA	Transportation designed to carry older persons from specific origin to specific destination upon request. Clients request the transportation service in advance of their need, usually twenty-four to forty-eight hours prior to the trip.
Assisted Transportation	TDoA	Provides assistance, including escort, to persons with special needs (physical or cognitive) when using regular vehicular transportation.
Fixed-Route	TDoA	Transportation service that operates in a predetermined route that has permanent transit stops. Clients are not required to reserve a ride; they must simply go to the designated location at the designated time to gain access to the transit system.
Elderly and Persons with Disabilities (Section 5310)	TxDOT	Program is to improve accessibility and mobility for the elderly and persons with disabilities. The Federal Transit Administration (FTA) makes capital grants to the state of Texas to help provide mass transportation service that is planned, designed, and carried out to meet the special needs of elderly individuals and individuals with disabilities throughout the state.
Urbanized Transit (Section 5307)	TxDOT	Program is to enhance the mobility of people in urbanized areas. Currently, there are 29 urban operators providing transportation in areas with populations between 50,000 to 200,000 people.
No-urbanized Transit (Section 5311)	TxDOT	Program is to enhance the access of people in non-urbanized areas to health care, shopping, education, employment, public services, and recreation. Currently, there are 41 operators providing transportation in rural areas and cities with populations less than 50,000 throughout the State of Texas. The Texas rural transportation program is the largest in the nation.

EDUCATION AND LIFELONG LEARNING

Learning is defined as the acquisition of knowledge, skills, or ability. Lifelong learning is a developmental and social process that plays a role in various aspects of life (Hiemstra & Burns, 1997). As we continue to learn, knowledge and skills are renewed and updated to meet the challenges of society (Brophy, Craven, & Fisher, 1998). Research suggests that education and learning extend both total life expectancy and active life expectancy (Hobbs, & Damon, 1996). It also demonstrates that continuing education is a leading factor in reducing the risk of intellectual decline in old age (Vermont College of Norwich University, 1999). Nevertheless, older people often fail to take advantage of continuing education opportunities (Dohmen, 1999).

Due to the natural replacement of older generations by younger people who have had better opportunities, educational attainment has increased over the years. In 1993, 60% of non-institutionalized elders had at least a high school diploma. In coming decades, the proportion of elders with at least a high school education will likely increase since about 80% of persons between the ages of 55 and 59 have at least a high school diploma. In 1995, 12 percent of older adults had a college degree, compared to 20 percent of people 55 - 59, and 27 percent of those between 45 and 49 (US Census Bureau, 1995).

Programs such as elderhostels and public libraries offer informal education while institutions of higher education provide both formal and informal education. Institutions of higher education provide opportunities through scholarships, financial aid, tuition discounts, or tuition waivers. An important service of Texas' institutions of higher education is training and retraining older adults for current and emerging businesses and technologies. Community and technical colleges play a lead role in this effort by offering 1,784 technical-vocational programs (Texas Higher Education Coordinating Board, 1998). In addition, Texas Institutes of Higher Education have the option of providing reduced tuition to older Texans under Section 54.210 of the Education code.

The following tables list the survey responses associated with education and lifelong learning services. The Texas Higher Education Coordinating Board is charged with overseeing degree programs at public universities and colleges in Texas. It reported no gaps in services in the service/programs it identified. Five other state agencies reported programs, all of which have gaps in service.

TABLE 4.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Education Code 54.210(b)	HECB	65+ Population	Older	No gap reported
Education Code 54.210(c)	HECB	65+ Population	Older	No gap reported
Education Code 54.067	HECB	55+ Population	Older	No gap reported
Degree Programs	HECB	General Population	General	No gap reported
Continuing Education Programs	HECB	General Population	General	No gap reported
Adult and Community Education	TEA	Adult Population	General	Not available in all counties
Academic Programs	TDCJ	Incarcerated Offenders	General	No gap reported
Offender Education Program	TCADA	General Population	General	No gap reported
Training and Education	TCDHH	Deaf and Hard of Hearing	Outreach	No gap reported
Talking Book Program	TSLAC	Unable to Read Standard Print Material	Outreach	In counties where available, quantity/level of service is insufficient

TABLE 4.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Education Code 54.210(b)	HECB	Allows the governing board of a state-supported institution of higher education to authorize persons aged 65+ to audit any college course offered by the institution at no charge if space is available.
Education Code 54.210(c)	HECB	Allows the governing board of an institution of higher education to authorize persons aged 65+ to enroll for credit in up to six hours of courses offered by the institution each semester or summer term with out payment, if space is available.
Education Code 54.067	HECB	Allows an institution of higher education to charge a student aged 55+ tuition and fees at a rate that are lower than the fees established by the Texas State University System under the condition that the student will not be precluded from enrolling in a course for credit toward a degree or certificate. The institution may set additional qualifications that a student must meet to qualify for the discounted tuition and may set different rates for different programs, campuses, or courses.
Degree Programs	HECB	Higher education degree programs are available through any public institution of higher education (e.g. colleges and universities). Community colleges offer vocational, technical, and academic courses for certification or associate degrees. Universities offer Bachelors, Masters, and Doctorate degree programs in multiple disciplines.
Continuing Education Program	HECB	Continuing education course or vocational adult education courses are geared toward professionals who need additional training as required by their field of work.
Adult and Community Education	TEA	Adult Education is the service and instruction provided below the college level for adults by public local education agencies, public nonprofit agencies, or community-based organization. Community education is the process by which citizens in a school district utilize resources and facilities of the district to organize and support each other, solve mutual educational problems, and meet their mutual lifelong needs. Community education may include educational programs (i.e., occupational and technological skills training), community involvement programs (i.e., programs for community economic development), or programs for youth enrolled in school.
Academic Programs	TDCJ	A variety of academic classes including career and technology education is available to offenders incarcerated within the TDCJ system, however, offenders must meet custody and Individual Treatment Plan (ITP) requirements. The academic literacy program offers adult basic education for offenders who achieve below the sixth grade level on the Test of Adult Basic Education, and secondary level adult education for those who are working toward attaining a high school equivalency certificate. Offenders who already hold a GED or high school diploma can access academic and vocational post-secondary educational opportunities available through local colleges and universities.
Offender Education Programs	TCADA	Certifies offender education programs, including DWI education program, DWI repeat offender program, drug offender education program, and alcohol education program for minors.
Training and Education	TCDHH	The training incorporates educating people and business about persons who are deaf or hard of hearing as well as providing workshops for the deaf community. Through the TCDHH, Texans can also obtain interpreter certification, training opportunities for interpreters, and Continuing Education Units (CEUs) for certification maintenance.
Talking Book Program	TSLAC	Provides books primarily on cassette tape, however, books are also available in braille, on flexible recorded disc, and in large print. This service is also available for students at home and in the classroom. Free subscriptions to magazines on audiocassette, in large print, or in braille are also available individuals registered for the Talking Book Program.

EMPLOYMENT SERVICES

By the year 2005, about 20 percent of the working population is projected to be age 55 and older, compared to 13 percent in 1990 (Imel, 1996). These demographic changes will likely make it necessary to encourage older workers to remain in the workplace past traditional retirement age. This is especially important given the expected strain on the Social Security system due to a larger and longer-living population of older adults that will be supported by fewer workers (Smallen, 1995).

As many companies cut pensions and retiree medical coverage (Walsh, 2001), older workers are choosing to continue working. However, many elders who must return to work after retirement are finding that their skills are outdated (Fielding, 2000). Therefore, training and retooling are necessary for older adults to remain in the workforce. Continuation of work not only provides some financial security, but also social status, social interaction, and a structure for everyday living (Smallen, 1995; Barrow, 1992).

The workforce system of the future should support and promote lifelong learning. According to Alan Greenspan, Chairman of the Federal Reserve, “we need to foster a flexible education system—one that integrates work and training and serves the needs both of experienced workers at different stages of their careers and of students embarking on their initial course of study” (Greenspan, 2000). As demand in the labor market changes, so must the approach to vocational rehabilitation.

Vocational rehabilitation helps people with disabilities improve their skills in order to acquire and maintain jobs. There now seems to be a discrepancy between the shifting demands in the labor market and the skills and abilities of many rehabilitation clients (Lougheed, 1999). There is also a need to combat the view that older disabled individuals are incapable of vocational rehabilitation and productivity.

The following tables present the survey responses associated with employment services. Overall, eight agencies reported no gaps in services. Although, TRC and TCB did not report gaps related to serving older individuals, agency performance measures indicate they do not serve the entire eligible population. Similarly, while TWC reports no gaps, TDoA’s policy analysis process of older worker issues found that job training and employment services for older workers

are limited. Despite the projected increase in demand for job training and employment services and the demonstrated need for special instruction and services for older adults, the availability of training designed specifically for older adults is limited. The Workforce Investment Act of 1998 (WIA) repealed the Job Training Partnership Act (JTPA) programs, including the JTPA Section 204(d) set-aside program for older workers. The Senior Community Service Employment Program (SCSEP) is the only remaining federally funded employment and training program designed specifically for individuals age 55 and older. However, SCSEP's current funding level is inadequate to meet the demand for individuals requesting participation in the program.

TABLE 5.1. SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
ERS	Extended Rehabilitation Services
FSE&T	Food Stamp, Employment and Training
RIO	Reintegration of Offenders
SCSEP (STEP)	Senior Community Services Employment Program (Senior Texans Employment Program)
TAA	Trade Adjustment Assistance
VR	Vocational Rehabilitation
WIA	Workforce Investment Act
WTW	Welfare to Work

TABLE 5.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Instruction Training	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
VR	TRC	Persons with Disabilities	General	No gap reported
ERS	TRC	Persons with Disabilities	General	No gap reported
VR	TCB	Persons with Visual Impairments	General	No gap reported
Vocational Training	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Vocational Programs	TDCJ	Incarcerated Offenders	General	No gap reported

TABLE 5.2. SERVICES REPORTED (CONTINUED)

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Workforce Training Programs	HECB	Students in institutions of higher ed.	General	No gap reported
WIA	TWC	Persons seeking employment	General	No gap reported
Skills Development Fund	TWC	Businesses, New and Incumbent Workers	General	No gap reported
Veterans Services	TWC	Veterans	General	No gap reported
Self-Sufficiency Fund	TWC	Businesses, Low-income individuals	General	No gap reported
Apprenticeship Instructional Support	TWC	General Population	General	No gap reported
FSE&T	TWC	Low Income Individuals	General	No gap reported
RIO	TWC	Ex-Offenders	General	No gap reported
Employment Placement	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
SCSEP (STEP)	TWC	55+ Population	Older	Not available in all counties
Employment Service	TWC	General Population	Outreach	No gap reported
Employment Assistance	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Individualized Competitive Employment	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Supported Employment	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Career Center Services	TWC	General Population	General	No gap reported
Texas Workforce Network	TWC	General Population	General	No gap reported
WtW	TWC	Welfare recipients	General	No gap reported
Dislocated Worker Services	TWC	Laid off workers	General	No gap reported
TAA	TWC	Persons adversely affected by foreign trade	General	No gap reported

TABLE 5.3. SERVICE DESCRIPTIONS

SERVICE/ PROGRAM	AGENCY	DESCRIPTION
Instruction Training	TDoA	Helps adults acquire employment skills in a formal or informal, individual or group setting. Area Agencies on Aging assesses the needs of the community and decide what types of skills are appropriate or necessary (e.g., computer skills or job training).
VR	TRC	Helps individuals prepare for, find, and keep employment. VR counselors and clients work together to decide on an employment goal and develop a program of VR services to achieve the goal. Services are based on the clients' need and may include services from colleges, doctors, hospitals, job coaches, and other resources.
ERS	TRC	Helps persons maintain employment through rehabilitative services. ERS is a state-funded program that helps Texans with significant disabilities that require extended ongoing support services in order to achieve and maintain employment. Helping clients work in their communities (community integrated employment) is the primary goal of the program, however, alternative sheltered employment is also an option for people who require further assistance.
VR	TCB	Helps persons prepare for, get, or retain gainful employment. A plan is developed for people in the program so that their individual needs are met. Services available include an evaluation; counseling, guidance, and referral; rehabilitation teaching; orientation and mobility services; physical and mental restoration; transportation; technological aids and devices; and reader services.
Vocational Training	TDMHMR	It is part of the Day Training Services that are available to individuals in an industrial enclave, (e.g., a work crew, a sheltered workshop, or an affirmative industry) enabling them to obtain employment, including job development and job placement assistance.
Vocational Programs	TDCJ	Prepares offenders for today's workforce. The Career and Technology Education (CTE) program offers training in approximately 40 occupational areas. Other vocational training opportunities are provided through apprenticeship programs and on-the-job training.
Workforce Training Programs	HECB	Two-year institutions provide a variety of services that aid in the development of traditional and non-traditional students seeking specific workplace skills through short-term workforce training or long-term workforce education for credit. Services include recruitment, registration, advising, job placement, orientation, financial aid, tutoring, retention, and personal development through an assortment of extracurricular activities. Each service provides activities designed to assist students as they negotiate their way through the two-year college toward a career or further education.
WIA	TWC	Services and assures that Texans are trained for jobs that meet employers' demands for a skilled workforce. Services may be accessed at Texas Workforce Centers.
Skills Development Fund	TWC	Grants assistance to business by providing customized job training for new and incumbent workers. Partnerships are formed with public community and technical colleges for new or existing jobs in businesses.
Veterans Services	TWC	Helps veterans find training and employment opportunities. Program serves all veterans.
Self-Sufficiency Fund	TWC	Teams the business community with local educational institutions and community based organizations to fund customized job training for persons who receive Temporary Assistance for Needy Families (TANF) or persons who are at risk of becoming TANF recipients.
Apprenticeship Instructional Support	TWC	Helps registered apprenticeship programs pay for job-related classroom instruction for apprentices – mainly instructor salaries, instructor materials and supplies, and instructional equipment. Independent school districts and community colleges serve as fiscal agents for these funds and subcontract with registered apprenticeship programs to provide classroom instruction.
FSE&T	TWC	Helps individuals not eligible for cash assistance to become self-supporting through participation in employment and training activities.

TABLE 5.3 SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/ PROGRAM	AGENCY	DESCRIPTION
RIO	TWC	Offers ex-offenders education, training, and employment opportunities.
Employment Placement	TDoA	Helps older persons obtain a suitable employment situation and increase their opportunities in the general labor market and/or through special employment programs.
SCSEP (STEP)	TWC	A non-profit program of services designed to provide part-time employment to eligible older Texans. Texans are eligible for the program if they fall within certain guidelines: (1) at or below the poverty level; (2) required number of individual individual(s) residing in the household; (3) and a minimum age of 55. STEP not only provides job training and supplementary income, it provides public agencies and nonprofit organizations the opportunity to operate programs and assist in social services. STEP participants work a maximum of 20 hours a week. The program provides an additional workforce resource for older Texans and is especially of value in the employment oppressed regions in the rural areas of Texas.
Employment Service	TWC	Helps Texans find employment through job search resources, career development information, and referrals to training programs. While targeted populations (i.e., veterans) receive intensive assistance to overcome barriers to employment, most services are available to the public.
Employment Assistance	TDMHMR	A temporary supported service for persons not receiving vocational training. Employment assistance targets clients securing employment at a community business as part of the competitive employed work force. Employment assistance consists of job development, employment planning, and assisting clients secure employment.
Individualized Competitive Employment	TDMHMR	Support service that enables individuals who are employed in regular community jobs to maintain employment. This means individuals are employed in situations where most of their coworkers are not persons with disabilities
Supported Employment	TDMHMR	Provide clients with individualized rehabilitative services in order to assist them in identifying job and career goals, obtaining a regular integrated community job, and maintaining employment (e.g., assist clients in keeping their regular integrated community job or find another regular integrated community job).
Career Center Services	TWC	Provide a variety of services to employers and job seekers.
Texas Workforce Network	TWC	Consists of TWC and 28 workforce development boards, which serve as the first points of contact for Texans when they begin searching for a new job or career. The network provides services through more than 250 Texas Workforce Centers and satellites.
WTW	TWC	Facilitates the placement of hard-to-employ welfare recipients into employment opportunities that will lead to lasting unsubsidized employment and self-sufficiency by providing a variety of activities grounded in Temporary Assistance for Needy Families' (TANF) work first philosophy; prepare individuals for, and places them in, lasting unsubsidized employment; provides a variety of post-employment and job retention services to help the hard-to-employ welfare recipient secure lasting unsubsidized employment; and provides targeted WTW funds to high poverty areas with large numbers of hard-to-employ welfare recipients.
Dislocated Worker Services	TWC	Offers employment and training programs for eligible workers who are unemployed due to no fault of their own or have received official notice of a layoff.
TAA	TWC	Provides Assistance to displaced workers from companies affected by imports from Mexico and Canada or by a shift in production to other countries. Income support and training benefits are available to help trade-affected workers prepare for and obtain suitable employment.

RETIREMENT SERVICES

In 1974, baby boomers between 15 and 32 comprised 45 percent of the labor market. The workforce, however, is aging. By the year 2008, about 40 percent of the workforce will be age 45 years or older (Dohm, 2000). The Bureau of Labor Statistics estimates that between 1998 and 2008, about 22 million persons age 45 and older will leave the workforce, mainly to retire. However, many companies want to retain retirement-age workers with experience and skills. The five occupations that will have the greatest replacement needs due to retirement include secretaries, truck drivers, elementary school teachers, janitors and cleaners, and secondary school teachers (Dohm, 2000). Businesses like fast food restaurants that rely on young workers are now looking to older workers, with an average of five "senior helpers" in every restaurant (Anonymous, 1998).

While older Texans may continue to work for pleasure, many will continue to work due to needed income and benefits. In recent years, the U.S. Government has encouraged Americans to save; however, it is estimated that more than 75 million Americans have little or no savings at all (Goldman, 2000). According to an AARP survey, the major sources of income for older persons include social security, pensions, and interest from personal savings (Wu, 1998); however, for many low-income elders, the only source of income may be Social Security. Beginning 2000, the age for collecting a full Social Security pension increased gradually in increments, from age 65 and 2 months to age 67 in 2002. Furthermore, there is a reduction in the amount of pension benefits available at age 62 (Dohm, 2000).

The following tables list the survey responses associated with retirement services. Retirement services are a state responsibility only in the administration of pension programs for state employees, firefighters and EMS personnel, and teachers. No gaps in services were reported.

TABLE 6.1 SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
TSESRA-411	Texas Statewide Emergency Services Retirement Act

TABLE 6.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
State Retirement	ERS	State Employees	General	No gap reported
TSESRA-411	FFPC	Fire Fighters & EMS Personnel	General	No gap reported
Teacher's Retirement	TRS	Teachers	General	No gap reported

TABLE 6.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
State Retirement	ERS	Invests employee and matching state employer retirement contributions in a special trust fund to support retirement benefits for employees and survivors, including periodic cost of living adjustments as allowed by legislative authorization and return on investment.
TSESRA-411	FFPC	Receive contributions from the governing entities; invest the surplus funds with the care and caution; service the database of active, retired, disabled and dependent members; and provide services and benefit payments to members and their dependents. Provide cost studies for prospective departments; semi-annual billings and collections for contributions; maintaining a database of over 6,000 active, retired, disabled and dependent members. TSESRA is the only program of its kind that offers retirement, death, and disability benefits to volunteer fire and EMS personnel.
Teacher's Retirement	TRS	Offers a wide array of benefits authorized by law that include retirement, disability, and death benefits, all funded by the retirement fund. Retiring services are available to all TRS members regardless of age, however, to be eligible to retire and receive a lifetime monthly service annuity, persons must meet specific criterion.

VOLUNTEER AND RECREATION ACTIVITIES

Volunteering provides an opportunity to contribute to society, remain socially and intellectually stimulated, and impact communities. Many volunteer opportunities have been established by the federal government, community level agencies and organizations that benefit from the diverse talents of older adults. Nationally, about 45 million people participate in volunteer activities, and about half are older adults (Administration on Aging, 2000). Older adults, especially retirees, not only have the time, but also the experience and expertise to help in a variety of activities. Research has shown that volunteering has a positive impact on volunteers. Volunteering in one organization or fewer than 40 hours a week lowers the risk of mortality (Musick, Herzog, & House, 1999). Furthermore, volunteering provides older adults with social activities and decreases social isolation. Volunteer opportunities for younger persons to assist elders are also available. These range from helping with group meals at senior centers to providing homemaking assistance to frail elders.

Participation in leisure recreational activities has also been regarded as a way to improve physical, psychological, and social aspects of elders (Chan Ying & Lam Kui, 1998). This has been proposed as a dialectical process, whereby individuals seek stability and change, structure and variety, familiarity and novelty. Some evidence suggests, however, that as people get older, participation in leisure activities declines (Iso-Ahola, Jackson, & Dunn, 1994).

The following tables report the survey responses associated with volunteer and recreation services. Eight agencies reported on 15 programs. More than half of the programs reported no gaps in services. Most of the reported programs either target or have specific outreach efforts to older Texans.

TABLE 7.1. SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
FGP	Foster Grandparent Program
SCP	Senior Companions Program

TABLE 7.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
FGP	TDMHMR	60+ Population	Older	Provided in some state schools (e.g., Denton State School, Austin State School)
FGP	TYC/TJPC	60+ Population	Older	Needed in other state schools ⁸ (TYC) There is no cross-agency coordination resulting in untapped resources (TJPC)
SCP	TDMHMR	60+ Population	Older	Provided in some state schools (e.g., Denton State School)
Volunteer Programs	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Volunteer Placement	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Mentor	TYC	General Population	Outreach	No gap reported
Tutor	TYC	General Population	Outreach	No gap reported
Religious Teacher	TYC	General Population	Outreach	No gap reported
Council Member	TYC	General Population	Outreach	No gap reported
Mentoring	TJPC	General Population	General	There is no cross-agency coordination resulting in untapped resources
AmeriCorps National Service Program	TCVCS	General Population	General	No gap reported
Governor's Volunteer Awards	TCVCS	Volunteers	Outreach	No gap reported
Texas Women's Hall of Fame	Governor's Commission for Women	Women	General	No gap reported
Training Materials	TCE	Volunteers	General	No gap reported
Senior Center	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans

TABLE 7.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
FGP	TDMHMR	Volunteers devote their time to children with special or exceptional needs and offer emotional support to children and/or juveniles (e.g., victims of abuse and neglect, troubled teenagers and young mothers, premature infants, and children with physical disabilities and severe illnesses). There are income eligibility requirements and volunteer must participate for 20hrs/wk. They receive training, modest tax free stipends to offset the cost of volunteering, are reimbursed for transportation and some meals during service, are provided an annual physical, and have accident and liability insurance while on duty.
FGP	TYC/TJPC	See FGP, TDMHMR
SCP	TDMHMR	Senior companions help other seniors live independently in their own homes.
Volunteer Programs	TDoA	The Corporation for National Service program, for which TDoA administers state funds, allows seniors to volunteer in the Retired and Senior Volunteer Program (RSVP) for persons aged 55+. Volunteer activities include aiding terminally-ill persons, supporting community policing efforts, or tutoring children in reading; in SCP seniors provide assistance to adults with physical, emotional, or mental health litations; and in FGP described above.
Mentor	TYC	Support and guide youth on a consistent basis over a specified period of time. Older, wiser, and more experienced individuals provide concrete, multi-faceted help to students as they develop their own visions for the future and reach their fullest potential.
Tutor	TYC	Provide youth the opportunity to learn educational skills during the time they are students in the TYC School. Volunteer tutors may be assigned to one student at a time or as teacher aides.
Religious Teacher	TYC	Assist young people through faith-based services.
Council Member	TYC	Advocate for youth in local communities and work to obtain resources to enhance their lives and rehabilitation.
Mentoring	TJPC	Provide juveniles an opportunity to bond with adult mentors in a one-on-one mentoring relationship that fosters the holistic development through consistent contact, support and guidance. Juveniles are matched with experience "wise" adults in order to provide juveniles with responsible adult role models.
AmeriCorps National Service Program	TCVCS	AmeriCorps, the domestic Peace Corps, selects volunteers to serve with local and national organizations (Habitat for Humanity, the American Red Cross, Big Brothers/Big Sisters, and Boys and Girls Clubs, AmeriCorps*VISTA [Volunteers in Service to America], AmeriCorps*NCCC [National Civilian Community Corps]). Upon completion of service term, they are eligible to receive education awards.
Governor's Volunteer Awards	TCVCS	Annual awards program honor exceptional volunteers from across the State whose commitment to community and service to others is exemplary. The awards ceremony is held at the Governor's Mansion every April during the National Volunteers Week.
Texas Women's Hall of Fame	Governor's Commission for Women	Recognizes the achievements of women for their professional and personal life accomplishments.
Training Materials	TCE	Provides training materials for volunteer programs in long-term care facilities.
Senior Center	TDoA	Provide nutrition, recreation, social and educational services, some senior centers are adding wellness and fitness activities as well as Internet training.

HEALTH INSURANCE

Based on a three-year average (1998-2000), about 178,500 out of an estimated 2,738,000 persons, or approximately 6.5% of the 60+ population, lacked health insurance (March 1999-2001 Current Population Survey [CPS]). This can be attributed to the fact that many older adults age 65+ are eligible for Medicare.

Nationally, however, an estimated 16 million Medicare beneficiaries are poor or low-income. Many of these low-income elderly and disabled beneficiaries have greater than average health care needs leading to higher health care costs. Some are spending an average of 35% of their income on out-of-pocket health expenses (Stockton, Bryant, & Santoyo, 2001; Nemore, 1999). This may be due to the fact that Medicare only pays for limited medically necessary health care services and even then, does not cover everything, including prescription drugs. Older adults and others with Medicare benefits must pay premiums, co-payments, and deductibles, which may serve as barriers to obtaining needed health care services. Older Texans, however, may qualify for programs that assist them with these out-of-pocket expenses through supplemental Medicaid coverage. Medicaid is a state-administered program that helps pay the cost of certain medical services for eligible individuals. It is funded through a combination of federal and state funds and provides an array of benefits based upon financial and medical needs.

The following tables present the survey responses associated with health insurance services. Other than the State Employee Health Insurance Program, the TDHS funds all reported health insurance programs. Since these are federally-funded entitlement or insurance programs, no gaps in services were reported and the programs target the general population.

TABLE 8.1. SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
MAO	Medical Assistance Only
QDWI	Qualified Disabled Working Individuals
QI-1	Qualifying Individuals -1
QI-2	Qualifying Individuals -2
QMB	Qualified Medicare Beneficiaries
SLMB	Specified Low-Income Medicare Beneficiaries

TABLE 8.2. SERVICES REPORTED

SERVICE/ PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Medicaid Nursing Facility Program	TDHS	Eligible LTC Facility Residents	Older	No gap reported
State Employee Health Insurance	ERS	State Employees	General	No gap reported
QMB	TDHS	Medicare Beneficiaries	General	No gap reported
SLMB	TDHS	Medicare Beneficiaries	General	No gap reported
QDWI	TDHS	Medicare Beneficiaries	General	No gap reported
QI-1	TDHS	Medicare Beneficiaries	General	No gap reported
QI-2	TDHS	Medicare Beneficiaries	General	No gap reported
Three Months Prior	TDHS	Low-Income	General	No gap reported
SSI Related MAO	TDHS	Persons in Approved LTC Facilities	General	No gap reported
Rider 51 MAO	TDHS	Medicaid Eligible Individuals	General	No gap reported
RSDI Increase MAO	TDHS	Persons Denied SSI Benefits	General	No gap reported
Emergency Medicaid Coverage for Aliens 1929(b)	TDHS	Legal Aliens	General	No gap reported
Sponsored Ineligible Aliens	TDHS	Legal Aliens	General	No gap reported

TABLE 8.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Medicaid Nursing Facility Program	TDHS	Helps eligible clients pay for all or part of the nursing facility costs through Medicaid. Clients may be required to contribute toward their care, based on income and other considerations.
State Employee Health Insurance	ERS	All of the health plans available offer comprehensive coverage including preventive care, prescription drugs, vision exams, maternity coverage, and many other benefits that are state paid.
QMB	TDHS	Medicaid pays for the Medicare Part A premiums (if any), Medicare part B premiums, Medicare deductibles and coinsurance, Medicare services provided by Medicare providers, and provides Medicaid benefits.
SLMB	TDHS	Medicaid pays for the Medicare Part B premiums and provides Medicaid benefits.
QDWI	TDHS	Intended for individuals who have lost their Medicare Part A benefits due to their return to work. Persons under the QDWI are eligible to purchase Medicare Part A benefits. Persons are eligible to purchase Medicare Part A benefits.
QI-1	TDHS	Has an annual cap on the amount of money available, which limits the number of individuals participating in this program. Medicaid pays for Part B premiums only.
QI-2	TDHS	Has an annual cap on the amount of money available. Medicaid pays for a portion of their Part B premiums (i.e., \$2.24/month in 1999).
Three Months Prior	TDHS	Extends Medicaid benefits backward in time to cover the three months time prior to application for assistance, if there are unpaid or reimbursable medical bills for this time period.
SSI Related MAO	TDHS	Eligible persons must live in one or more Title XIX long-term care facilities at least 30 consecutive days to be eligible under the institutional income limit.
Rider 51 MAO	TDHS	Medicaid-certified individuals whose income exceeds the institutional limit because of a cost-of-living adjustment in pension or retirement benefits continue to be eligible using pure state funds. All other eligibility requirements must be met.
RSDI Increase MAO	TDHS	Individuals who are denied SSI because of certain increases in Social Security (RSDI) benefits may continue to be eligible for Medicaid. There are six coverage groups covered under this plan.
Emergency Medicaid Coverage for Aliens	TDHS	Certain aliens with an emergency medical condition who meet all Supplemental Security Income criteria except citizenship and are not eligible for ongoing Medicaid coverage but may be eligible for coverage for medical emergencies.
Sponsored Ineligible Aliens	TDHS	This program requires states to provide Medicaid to aliens ineligible for SSI owing to deeming of income/resources from their sponsors. Deeming from sponsors does not apply in the Medicaid program and clients must meet all other SSI eligibility criteria.

WELLNESS PROMOTION AND HEALTH SERVICES

Factors that may cause health to deteriorate with age include lifetime accumulation of health behaviors, external factors, and physiological aging (Texas Department of Health, 1999). To age well and prepare for healthier and productive later years, people must understand the potential problems of aging. Health indicators are used to monitor health status and to help understand and evaluate the effects of current interventions and programs.

Preventive medicine is based on risk factors that predispose people to disease. It is usually categorized into three levels: primary, secondary, and tertiary. Primary prevention strategies (e.g., influenza shot) target risk reduction before the onset of disease or injury. Secondary prevention strategies focus on early detection and treatment of disease, on trying to improve the outcomes of persons with preclinical disease (i.e., mammogram to screen for breast cancer). Tertiary health prevention strategies seek to prevent the progression of symptomatic conditions through systematic identification and appropriate and supportive treatment and rehabilitative services.

Persons at any age can improve their quality of life by using appropriate and timely preventive strategies, thereby reducing morbidity. Health education and promotion are integral to programs that empower people to make sound decisions about their health and that of their society. For example, exercise and physical activities improve health and quality of life. Resistance exercise, such as weightlifting, increases muscle mass and is increasingly recognized as a way to preserve and enhance muscular strength and endurance, prevent falls, and improve mobility in the elderly. People who maintain a regular regimen of activity (i.e., longer duration or vigorous intensity) are likely to derive greater benefit. Regular physical activity helps reduce the risk of dying prematurely and of developing diabetes, high blood pressure, or colon cancer. It reduces hypertension, helps with weight control, and is crucial to building and maintaining healthy bones, muscles and joints. Older adults who become stronger due to regular physical exercise are better able to move without falling. Exercise can also reduce feelings of depression and anxiety, and promote psychological well being.

The following tables present the survey responses associated with wellness promotion and health services. The Texas Department of Health, including the South Texas Hospital, identified nine programs while the Texas Cancer Council

identified 16 grant programs. The Cooperative Extension Service has one Cancer Council grant and operates three other programs. None of the programs specifically targeted older Texans, while most of the Cooperative Extension and the Health Department programs have outreach efforts to the older population. Since the incidence of cancer increases with age, the Cancer Council programs impact an aging population. Only the Department on Aging programs specifically targeted older Texans and identified a gap in services.

TABLE 9.1. SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
BCCCP	Breast Cancer/Cervical Cancer Screenings
PHC	Primary Health Care

TABLE 9.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Preventive Health Services	TDoA/HICAP	Medicare Population	Outreach	No gap reported
Aging Education	TCE	General Population	Outreach	No gap reported
Eldercare Education	TCE	General Population	Outreach	No gap reported
Education materials	TCE	General Population	Outreach	No gap reported
Alzheimer's Disease Program	TDH	Patients, Families, & LTC Providers	Outreach	No gap reported
Osteoporosis Awareness & Education Program	TDH	General Population	Outreach	No gap reported
Diabetes: Public Awareness & Outreach	TDH	Persons with Diabetes	Outreach	No gap reported
Cancer Nutrition Network for Texans	TCC	Cancer Patients & Family	General	No gap reported
Action Plan on Skin Cancer	TCC	General Population	General	No gap reported
Action Plan on Colorectal Cancer	TCC	General Population	General	No gap reported
Community Based Cancer Prevention & Control Program	TCC	General Population	General	No gap reported
Empower Her	TCC	Hispanic & Asian Women	General	No gap reported

TABLE 9.2. SERVICES REPORTED (CONTINUED)

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Cancer Prevention Program	TCC	Grayson County Residents	General	No gap reported
Promesa Salud	TCC	Low Income Hispanics	General	No gap reported
Cancer Education & Prevention Project	TCC	South Plains Population	General	No gap reported
Prostate Cancer Outreach & Screening	TCC	Economically Disadvantaged Men	General	No gap reported
Colon Cancer Project	TCC	West Texas Population	General	No gap reported
Breast & Cervical Cancer Control	TCC	Nurses	General	No gap reported
Colorectal Cancer Screening	TCC	El Paso Hispanics	General	No gap reported
Dental Oncology Education Program	TCC	Dental Professionals	General	No gap reported
Nurse Oncology Education Program	TCC	Nurses	General	No gap reported
Physician Oncology Education Program	TCC	Physicians	General	No gap reported
Diabetic Screening	South TX Hospital	18+ Population in Valley Region	Outreach	No gap reported
BCCCP	South TX Hospital	50+ Population in Valley Region	Older	No gap reported
Enhancing Breast Cancer Screening Outreach and Case Management	TCC	African-American Women	General	No gap reported
Health Screening/ Monitoring	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Health Maintenance	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Women's Health Care	South TX Hospital	Women in Valley Region	Outreach	No gap reported
PHC	TDHS	Low Income – SSI/ Medicaid or Meet 1929(b) Limits	Outreach	In counties where available, quantity/level of service is insufficient ⁹
Physical Fitness	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Texercise	TDoA	60+ Population	Older	No gap reported

TABLE 9.2. SERVICES REPORTED (CONTINUED)

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Recreation	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Physical Activity Programs	TDH	General Population	General	No gap reported
Worksite Wellness	TDH	General Population	General	No gap reported

TABLE 9.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Preventive Health Services	TDoA/ HICAP	Education materials and promotion of preventive services covered by Medicare. Sometimes cosponsor flu clinics and health screening fairs.
Aging Education	TCE	Aging education materials such as pamphlets, brochures, and other literature regarding information on memory, physical changes, maintaining independence, fall prevention, depression, incontinence, grandparents, and specific chronic conditions or diseases that affect older adults including Alzheimer's disease, arthritis, high blood pressure, diabetes, and osteoporosis are available.
Eldercare Education	TCE	Education materials and training regarding eldercare for family and professional caregivers are available.
Education materials	TCE	Other educational materials such as pamphlets, brochures, and other literature are available on aging issues such as health, financial management, housing, nutrition, and parenting.
Alzheimer's Disease Program	TDH	Provides information and support to Alzheimer's patients, families, and long-term care providers. In cooperation with the Texas Council on Alzheimer's Disease and Related Disorder, the Alzheimer's Program recommends needed action that will benefit persons with Alzheimer's Disease and related disorders and their care givers; disseminate information on services and related activities for persons with Alzheimer's Disease and related disorders to the medical and academic communities, care givers, associations, and the general public; coordinates services and activities of state agencies, associations, and other service providers; and encourages statewide coordinated research.
Osteoporosis Awareness & Education Program	TDH	Educates the public on the causes and risk factors for developing osteoporosis; publicizes the value of early detection and prevention; and identifies cost-effective options available for treatment. The materials available are multicultural and sensitive issues of minorities in Texas.
Diabetes: Public Awareness & Outreach	TDH	Consists of multiple services and initiatives to help persons with diabetes. Goals include community needs assessment; building community support for diabetes education and treatment; building partnerships between the community and health care providers; recruiting and training community volunteers and leaders; reaching at risk individuals and families with diabetes education and health promotion programs; supporting behavior changes (e.g., reducing fat in the diet, increased physical activity), and improving access to health care and health education. Cites target areas where there is a high risk for diabetes.

TABLE 9.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
TAE: Role in Cancer Prevention & Education	TCC/TCE	This project is aimed at addressing the continuous needs for awareness building, education, and supportive environmental modifications to enable Texans to protect their skin from sun exposure, reduce the risk and seek early detection of cervical and breast cancer and seek early detection of prostate cancer.
Cancer Nutrition Network for Texans	TCC	A comprehensive nutritional guide for patients during cancer therapy that will educate patients, caregivers, and the medical community and positively influence the course of treatment and quality of life of cancer patients and survivors.
Action Plan on Skin Cancer	TCC	Acknowledges the urgency of making skin cancer awareness and prevention a part of daily life; it includes a background paper, and a series of goals and strategies that address prevention, early detection, and treatment for all segments of the state's diverse population.
Action Plan on Colorectal Cancer	TCC	The objective of this project was to convene a representative steering committee, including healthcare providers, behavioral scientists, public education and media specialists, and survivors, to discuss critical issues and make specific recommendations to reduce incidence and deaths from colorectal cancer in Texas.
Community Based Cancer Prevention & Control Program	TCC	Piney Woods AHEC and the Department of Preventive Medicine and Community Health at UTMB-Galveston were partners in developing a work-site based cancer prevention and early detection model program aimed at reducing the risk of cancer to rural residents.
Empower Her	TCC	Raising breast cancer awareness and providing screening and case management for medically underserved Hispanic and Asian women living in the Harris County area.
Cancer Prevention Program	TCC	Teaching cancer prevention and outreach education programs to low-income, minority, and underserved residents of Grayson and Fannin counties.
Promesa Salud	TCC	Providing culturally sensitive case management for low-income women who need breast cancer screening and diagnostic services in the Lower Rio Grande Valley. Also, reaching men over age 50 and motivating them to have prostate cancer screening.
Prostate Cancer Outreach & Screening	TCC	Providing prostate cancer outreach, education, and screening programs for medically underserved communities in eight North Texas counties
Cancer Education & Prevention Project	TCC	Establishing a comprehensive program in Lubbock and the surrounding 35 counties to decrease barriers to cancer education and screening by increasing community awareness. Providing a convenient place where residents may seek testing and treatment regardless of financial resources.
Colon Cancer Project	TCC	Promoting prevention and early detection of colon cancer for underserved rural Texans in Taylor, Comanche, Knox, Runels, and Shackelford counties and education for a 22-county region.
Breast & Cervical Cancer Control	TCC	Provided two-day workshop for nurses incorporating both classroom and clinical teaching on breast & other female cancer prevention and screening. Provided instruction on performing a comprehensive clinical breast examination. Workshops were conducted in the participants' communities.
Colorectal Cancer Screening	TCC	Developing a public-private partnership to provide colorectal screening for underserved individuals in El Paso County.
Dental Oncology Education Program	TCC	Enhancing the awareness and skills of dental professionals throughout Texas in preventing and detecting oral cancer.

TABLE 9.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Nurse Oncology Education Program	TCC	Increasing nurses' skills in cancer prevention and control by providing educational resources, continuing education, training programs, and technical assistance throughout Texas.
Physician Oncology Education Program	TCC	Developing innovative statewide education programs and materials to increase primary care physicians' knowledge, skills, and roles in cancer prevention, screening, and diagnosis.
Diabetic Screening	South TX Hospital	Provides screening services for diabetics.
Health Screening/Monitoring	TDoA	Services provide persons with an investigation or analysis by medical or health professionals in order to determine the need for a health service. Health services include routine testing for blood pressure, hearing, vision, diabetes, and anemia, or the periodic checking/monitoring of a known condition (e.g., checking blood pressure for hypertension, hematocrit test for anemia). Health screening/monitoring also includes appropriate referrals and follow-ups when warranted.
BCCCP	South TX Hospital	Cervical cancer screening is conducted with the Papanicolaou (Pap) test, which diagnoses pre-cancerous lesions of the cervix. Treatment of pre-cancerous lesions can prevent the onset of cervical cancer when it is diagnosed in the earliest stage and appropriately treated; the likelihood of survival is nearly 100%. The Pap test is an inexpensive test that is generally performed as a part of routine medical care for women age 18 and older.
Enhancing Breast Cancer Screening Outreach and Case Management	TCC	Developing, implementing, and evaluating a community-based program to enhance the participation of African-American women in early detection and follow-up services for breast cancer in Dallas, Houston, and Tyler.
Health Maintenance	TDoA	Provide drugs, and/or equipment to prevent, alleviate, and/or cure the onset of acute and/or chronic illnesses are available. Services are also intended to increase a client's awareness of their special health needs, and/or help improve their emotional well being through the provision of health professional services, other health screening/monitoring services, and mental health services. Services also include but are not limited to dental treatment, health education, home health services (i.e., nursing, physical, speech, or occupational therapy), and the provision of medications, glasses, dentures, or hearing aides. .
Women's Health Care	South TX Hospital	Program includes women's health care services such as pap tests, mammograms, pregnancy, and other health issues related to women.
PHC	TDHS	Provides primary and preventive health services by contracting with local health care providers and agencies throughout Texas. Services include diagnosis and treatment, emergency services, family planning services, and preventive health services. Preventive health services include immunizations, health education, laboratory, x-ray, nuclear medicine (or other appropriate diagnostic services), nutrition services, health screening, home health care, dental care, transportation, prescription drugs, devices and durable supplies, environmental health services, podiatry services, and social services.
Physical Fitness	TDoA	Activities may include exercises to increase endurance (cardiovascular and muscular), strength, flexibility, balance, and/or coordination and agility. Physical fitness activities are determined by need in the region and vary by area.
Texercise	TDoA	A statewide educational campaign that promotes general awareness of the powerful, lasting benefits of regular physical activity coupled with proper nutrition. It is a multigenerational program focused upon on bringing families and neighborhoods together to add fun and mutual support to the process of positive lifestyle change.

TABLE 9.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Recreation	TDoA	Activities are facilitated by a provider where elders can participate as spectators or performers. Activities include but are not limited to sports, performing arts, games, and crafts.
Physical Activity Programs	TDH	Promote healthy lifestyle choices with a primary focus on physical activity, nutrition, and healthy lifestyles.
Worksite Wellness	TDH	Provides technical assistance, training, and consultation on the development of policy and environmental change strategies to increase access and availability to participate in physical activity and good nutrition as a part of a healthy lifestyle. Targeted sites include worksites, schools, food establishments, communities and health care settings.

MEDICAL TREATMENT AND ACUTE CARE

Older adults are increasingly at risk for chronic conditions (National Academy on Aging Society, 2000). These health conditions and other diseases help shape health care demands (Texas Department of Health, 1999). Debilitating diseases such as diabetes, osteoporosis, or cancer affect many elders and require specialized treatment.

Osteoporosis is a disease in which the bones become brittle and prone to fracture due to a decreasing amount of calcium. Approximately 1.9 million Texans have osteoporosis or low bone mass and experience 80,000 associated fractures each year. These and other problems associated with osteoporosis cost Texans about 800 million dollars each year (Texas Department of Health, 2001).

Diabetes, the body's inability to properly use blood sugar, is considered one of the most serious public health problems in the United States (Li, W., Litman, A., Condon, K.W., Alo, C.J., & Huang, P.P, 2000). About 23 percent of persons age 65+ in Texas were diagnosed with diabetes (Bureau of Chronic Disease Prevention and Control, 1999). Based on Texas death certificate data, diabetes contributed to 13,553 deaths in 1998, and was the sixth leading cause of death.

The highest number of deaths in 1997 for older Texans were attributed to heart disease and cancer. Lung cancer was the primary cancer causing death for both men and woman living in Texas; prostate cancer was the second most common cancer, killing at a rate of 211/100,000 older men; and breast cancer was the second most specific cancer killing women at a rate of 111/100,000 (Texas Department of Health, 1999).

The following tables list the survey responses associated with medical treatment and acute care services. Except for TDoA's funding for hospice, and the South Texas Hospital's internal medicine program, all services were targeted to the general population with no gaps in services reported. Eight state agencies reported 15 programs.

TABLE 10.2. SERVICES REPORTED

SERVICE/ PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Telemedicine	ORCA	Texans	General	No gap reported
Internal Medicine	South TX Hospital	Valley Region Residents	Outreach	No gap reported
Surgical Clinic	South TX Hospital	Valley Region	General	No gap reported
Access to Care/ Quality of Life	TCC	Cancer Patients	General	No gap reported
Hospice	TDoA	Terminally Ill Patients	Older	Insufficient to meet the needs of all eligible Texans
Hospice	TDHS	Terminally Ill Patients	General	No gap reported
Comprehensive Rehabilitation Services	TRC	Traumatic injury to spinal cord or brain	General	No gap reported
Specialized Therapies	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Medication Administration	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Medication Monitoring	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Medication Training	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Pharmacological Management	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Residential Services	TDMHMR	Persons with Mental Retardation	General	No gap reported
Inpatient Treatment for Infectious diseases	TCID	General Population	General	No gap reported
Outpatient Treatment for Infectious Diseases	TCID	General Population	General	No gap reported

TABLE 10.3. SERVICE DESCRIPTIONS

SERVICE/ PROGRAM	AGENCY	DESCRIPTION
Telemedicine	ORCA	Encourages the use of advanced communications technology to ensure that rural areas receive the maximum benefits of telemedicine and distance learning by promoting a transmission rate structure that accommodates rural needs and by improving the telecommunications infrastructure in rural areas; and provide access to specialty expertise, clinical consultation, and continuing education.
Internal Medicine	South TX Hospital	The branch of medicine that deals with the diagnosis and treatment of non-surgical disease. It is the gateway to many specialties such as cardiology, endocrinology, or geriatrics and is the oldest and largest primary care specialty in the United States.
Surgical Clinic	South TX Hospital	Provides surgical consultations and surgical procedures.
Access to Care/ Quality of Life	TCC	Provides cancer patients and family with information on accessing care.
Hospice	TDoA	A comprehensive program of care to patients and families facing a life threatening illness. It emphasizes palliative rather than curative treatment and quality of life rather than quantity of life. Professional medical care is available and the patient and family are both included in the care plan as well as emotional, spiritual and practical support. Hospice care is provided to patients who have a limited life expectancy, and while most hospice patients are cancer patients, hospice accepts anyone regardless of age or type of illness. Hospice services are available in the home or in a residential setting and include services such as medical care under the supervision of a physician, counseling for the person and the family members, as well as other supportive services.
Hospice	TDHS	See Hospice Program, TDoA. Serves only Medicaid recipients.
Comprehensive Rehabilitation Services	TRC	Provides time-limited services for persons with traumatic brain injury and traumatic spinal cord injury. CRS clients may receive inpatient comprehensive medical rehabilitation, outpatient services, and post-acute brain injury services. This program does not provide long-term ongoing services.
Specialized Therapies	TDMHMR	Include physical therapy or occupational therapy.
Medication Administration	TDMHMR	Provided to individuals by licensed nurse (or qualified person) to ensure the direct application of a medication by any means including handling a single dose of medication to be taken orally.
Medication Monitoring	TDMHMR	Provided to individual or collateral by licensed nurse (or qualified person) to assess medication actions, target symptoms, side effects and adverse effects, potential toxicity, and the impact of medication of the individual and family in accordance with the plan of care.
Medication Training	TDMHMR	Provided to individual and/or family members, or other collateral by licensed nurse (or qualified person) to teach the knowledge and skills needed by the individual/family/collateral in the proper administration and monitoring of prescribed medication in accordance with the individual's plan.
Pharmacological Management	TDMHMR	Provided to an individual or collateral by a physician in order to determine symptom remission and the medication regimen needed to initiate and/or maintain and individual's plan of care.
Residential Services	TDMHMR	Residential care provided at State Schools. Services include but are not limited to 24-hr care by skilled staff, comprehensive health care, geriatrics, physical therapy, integrated foundation care and treatment for individuals with substantial underdevelopment in sensory-motor abilities, nursing, and education and training programs in campus classrooms and workshops.
Inpatient Treatment for Infectious diseases	TCID	Primarily services target persons with tuberculosis or tuberculosis with HIV. There are 109 beds available for patients admitted by court order or on referral for tuberculosis or other infectious, contagious diseases where hospitalization is appropriate.
Outpatient Treatment for Infectious Diseases	TCID	Treatment for infectious diseases is available as an outpatient services.

MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES

Diagnosis and treatment of mental disorders are the primary issue of mental illness among the aged (Texas Department on Aging, 2000). Although older adults experience the same mental disorders as other age groups the prevalence, nature, and course of each disorder vary (U.S. Department of Health and Human Services, 1999). Since many elders experience chronic disease and mental illness simultaneously it is often difficult for physicians or other medical professionals to determine specific diagnosis or treatments. Many symptoms are attributed to the aging process rather than to disease symptoms because of stereotypes associated with aging. Consequently, the older population is underserved in the public mental health care and substance abuse treatment systems.

Depression is the most common and treatable mental illness in the older adult population. About 37 percent of older adults experience symptoms of depression (U.S. Department of Health and Human Services, 1999). Unrecognized and untreated depression plays a significant role in suicide (U.S. Department of Health and Human Services, 1999; Caine et al, 1996). Older adults have the highest rates of suicide in the U.S. Studies have found that older adults who commit suicide often do so shortly after visiting their physicians (U.S. Department of Health and Human Services, 1999).

Alzheimer's Disease (AD) is a degenerative brain disease that gradually destroys memory and mental functioning. It is estimated that about 4 million Americans have AD (Texas Council on Alzheimer's Disease and Related Disorders, 2000) and AD is now the fourth-leading cause of death in adults (Simon et al., 1999). In Texas, 280,000 people have been diagnosed with AD or related disorders. Although no cure is available, treatments may slow the progression of AD making the issue of diagnosis even more critical.

Substance abuse and prescription drug misuse are also common problems for older adults. An estimated 17% of the aged population is affected by alcohol abuse and/or prescription drug misuse (Substance Abuse and Mental Health Services Administration, 1998). Older adults use prescription drugs at three times the rate of the general population, often taking multiple medications at a time. However, since many older adults either hide the problem or fail to seek appropriate care, these disorders go undetected.

The following tables describe the survey responses associated with mental health and substance abuse services. While very few gaps in services were identified by TDMHMR (11 programs) or TCADA (6 programs), stakeholder input in agency planning processes often indicate a large gap in the availability of services. TDMHMR and TDoA both fund programs target to older adults, while most of the other programs provide services to the general population.

TABLE 11.1. PROGRAM/SERVICE ACRONYMS

ACRONYM	PROGRAM NAME
ACT	Assertive Community Treatment
SNP	Special Needs Parole Program

TABLE 11.2. SERVICES REPORTED

SERVICE/ PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Outreach, screening, and referral	TCADA	Persons with Substance Abuse Problems	General	No gap reported
Screening	TDMHMR	Persons with MHMR	General	No gap reported
Assessment	TDMHMR	Persons with MHMR	General	No gap reported
Treatment Planning	TDMHMR	Persons with MHMR	General	No gap reported
Mental Health Services	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Geriatric Inpatient Psychiatric Services	TDMHMR	MHMR Patients	Older	Limited options for placing persons back in the community.
ACT	TDMHMR	Persons with Severe and Persistent Mental Illness	General	No gap reported
Inpatient Services	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Acute Day Treatment	TDMHMR	Adults with Serious Mental Illness	General	No gap reported
Substance Abuse	TDCJ	Incarcerated Offenders	General	No gap reported
Substance Abuse	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported

TABLE 11.2. SERVICES REPORTED (CONTINUED)

SERVICE/ PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Intervention Programs	TCADA	General	General	No gap reported
Prevention Programs	TCADA	General Population	General	No gap reported
Specialized Female Programs	TCADA	Women	General	No gap reported
Dual Diagnosis Services	TCADA	Persons with Co-occurring Psychiatric & Substance Use	General	No gap reported
Adult Treatment / Counseling	TCADA	Adult Population	General	No gap reported
Counseling	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Psychotherapy	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Psychology Services	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Civil Commitment	CSOT	Sex Offenders	General	Not available in all counties ¹⁰
Continuity of Care	TCOMI	Offenders with Special Needs	Outreach	No gap reported
SNP	TCOMI	Mentally Ill Offenders	Outreach	No gap reported

TABLE 11.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Outreach, screening, and referral	TCADA	Identify people with substance abuse problems, evaluate their needs and preferences, and link them with appropriate treatment and support services. Services are provided in conjunction with focused, short-term interventions to motivate and prepare individuals for treatment or self-directed change in behavior when more intensive treatment is not indicated.
Screening	TDMHMR	Gather patient triage information in order to determine a need for an in-depth assessment. The information is gathered through interviews via the telephone or in person.
Assessment	TDMHMR	Uses screening information and information provided by individuals and their family in order to determine the priority population eligibility, treatment needs, intensity of the needs, and current support system and personal strengths. Additional assessments for treatment planning purposes may follow.
Geriatric Inpatient Psychiatric Services	TDMHMR	Services available in state hospital facilities include assessment, evaluation and treatment, crisis intervention, and discharge coordination with the responsible mental health authority.
ACT	TDMHMR	Provides treatment, rehabilitation, and support services to identified clients with severe and persistent mental illnesses and clients with a history of multiple hospitalizations, involvement with the judicial system, homeless shelters, or community residential homes. Combines clinical and rehabilitation staff expertise.
Inpatient Services	TDMHMR	Provide 24-hr. professional monitoring, supervision, and assistance in an environment designed to provide safety and security during acute psychiatric crisis. Staff provide intensive interventions designed to relieve acute psychiatric symptomatology and restore a patient's ability to function in less restrictive settings.
Acute Day Treatment	TDMHMR	Focuses on the short-term acute treatment of adults with serious mental illness who require multi-disciplinary treatment in order to stabilize acute and severe psychiatric symptomatology. Activities are goal-oriented, focusing on improving peer interaction, appropriate social behavior and stress tolerance.
Treatment Planning	TDMHMR	Useful in determining the clinically necessary prioritized comprehensive, collaborative, and measurable treatment that reflects the needs and preferences of the individual and builds on their strengths.
Mental Health Services	TDoA	Services include an analysis to determine needs for a mental health service (diagnosis/screening), the provision of services and/or drugs to support and improve the emotional well being of an individual.
Substance Abuse	TDCJ	Provides a continuum of substance abuse services and accountability appropriate to the needs of individual offenders. There are numerous substance abuse treatment programs at all levels of the TDCJ system (i.e., State Jail Division, Institutional Division, Parole Division) available to offender with substance use problems.
Substance Abuse	TDMHMR	Provides substance abuse services to MHMR patients 18 years of age and older.
Intervention Programs	TCADA	Youth who are showing early warning signs of abuse and associated behaviors need access to indicated prevention programs, or intervention, where they can receive more intensive services designed to prevent onset of substance dependence.
Prevention Programs	TCADA	Universal messages and programs designed to prevent or delay the use and abuse of alcohol, tobacco, and other drugs. This could include wellness messages targeting individuals in a community or programs designed for all students in a school or all students in a particular grade. Targeted programs are provided for selective segments of the general population that is at higher risk for substance abuse (e.g., children of alcoholics, youth living in high drug use or low income neighborhood). Selective prevention targets entire group regardless of degree of risk for any individual within group.

TABLE 11.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Specialized Female Programs	TCADA	Treatment continuum services specifically for women. Provides priority admission and services for pregnant, parenting, or intravenous drug using females that have special needs, (e.g. children), since child care responsibilities are often an additional barrier to services.
Dual Diagnosis Services	TCADA	Projects treating individuals with co-occurring psychiatric and substance use disorder are managed collaboratively by TCADA and TDMHMR. These projects implement research-based methods for increasing services delivery and helping clients achieve remission or stabilization of their disorders.
Adult Treatment/ Counseling	TCADA	Services range from medical or social detoxification to general treatment programs. Patients examine the impact of substance abuse has on their lives and develop skills necessary to achieve and maintain recovery. Treatment may be residential or outpatient, and includes recovery maintenance.
Counseling	TDMHMR	Problem resolution services that include assessment and evaluation. Counseling is provided in a variety of setting and modes such as individual, group, or family counseling.
Psychotherapy	TDMHMR	Problem resolution services, including assessment and evaluation.
Psychology Services	TDMHMR	Psychological and neuropsychological assessment, behavioral therapy, psychotherapy, consultation, education, and research.
Civil Commitment	CSOT	A petition filed by the State to have an offender that committed a sex crime committed to a mental institution after serving the sentence and before being release from prison. The procedure includes an evaluation - a process in which psychologists, psychiatrists, prosecutors, judges, and juries decide whether to label the offender a sexual predator with a mental abnormality making him likely to commit a sex offense in the future.
Continuity of Care	TCOMI	Provides pre-release screening and referral to aftercare treatment services for special needs offenders referred from the institutional division, state jails, local jails or other referral sources.
SNP	TCOMI	Provides the early parole review of certain categories of offender who are mentally ill, mentally retarded, elderly, terminally ill, or physically handicapped and identifies the special needs offenders in the TDJC facilities or county jails who could be diverted from incarceration to more cost effective and appropriate treatment alternatives.

LONG-TERM CARE SERVICES

Chapter 22 of the Human Resources Code defines long-term care as “the provision of personal care and assistance related to health and social services given episodically or over a sustained period to assist individuals of all ages and their families to achieve the highest level of functioning possible, regardless of the setting in which the assistance is given.” These services may be provided in the community or in a nursing facility.

As people age, they become more likely to develop multiple chronic and disabling conditions, with the highest disability rates found among the “oldest old” population (age 85+). Therefore, many adults require assistance that will help them age-in-place and prevent premature or unnecessary institutionalization.

The following tables present the survey responses associated with long-term care services. Six different agencies were identified as providing or funding long-term care related services, although two agencies, TDHS and TDMHMR, provide most long-term care services. HHSC, PRS, TDoA and TCB also provide or fund small programs that meet long-term care needs. Only nine of the 42 programs are designed exclusively for older Texans; most serve the general population. Several TDHS programs are unavailable in certain counties and many have long “interest lists”^{*}.

^{*} Placement on an interest list means potential clients have declared an interest in a program for which funding is limited.

TABLE 12.1. SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
AFC	Adult Foster Care
CARE	Community Alzheimer's Resource and Education
CBA	Community Based Alternatives
CCAD	Community Care for the Aged and Disabled
CLASS	Community Living Assistance and Support Services
CMPAS	Consumer Managed Personal Attendant Services
DAHS	Day Activity and Health Services
DB-MD	Program for People who are Deaf-Blind with Multiple Disabilities
ERS	Emergency Response System
IHFS	In-Home and Family Support Program
LTC Ombudsman	Long-Term Care Ombudsman
PACE	Program of All-Inclusive Care for the Elderly
PHC	Primary Home Care
SSPD	Special Services to Persons with Disabilities
STAR + PLUS	LTC Managed Care

TABLE 12.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Guardianship	HHSC	18+ with disabilities	Outreach	No gap reported
Guardianship	PRS	18+ with disabilities	General	Insufficient to meet the needs of all incapacitated Texans.
Adult Day Care	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
DAHS	TDHS	CCAD & CBA Clients	General	Not available in all counties served by CCAD ¹¹
AFC	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
AFC	TDHS	CCAD & CBA clients	General	Not available in all counties served by CCAD ¹² and CBA ¹³
State Veteran's Homes	GLO	Veterans needing skilled nursing	Outreach	Not available in all counties ¹⁴
PACE	TDHS	55+ Population with Medicaid	Older	Not available in all counties ¹⁵

TABLE 12.2. SERVICES REPORTED (CONTINUED)

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
STAR+PLUS	TDHS	SSI Population Aged and Disabled	General	Only available in Harris County.
CARE	TDHS	Persons with Alzheimer's and Related Dementias	General	Not available in all counties ¹⁶
Personal Care Home	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Training Materials	TCB	LTC Facility Volunteers	Older	No gap reported
LTC Ombudsman	TDoA	LTC Facility Residents	Older	Insufficient to meet the needs of all eligible Texans
Adult Protective Services	PRS	Aged (65+) and Disabled (18-64)	Older	Inadequate resources to alleviate identified problems of clients (e.g., lack of LTC services for clients who are unqualified immigrants)
MHMR Investigations	PRS	Persons Receiving Mental Health/Mental Retardation Services	General	Services after the investigation are not provided by PRS
Supported Home Living	TDMHMR	Persons with Persistent Mental Illness	General	No gap reported
Specialized Housing	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Family Living	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Residential Living	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
CBA	TDHS	21+ Population	General	No gap reported
CLASS	TDHS	Persons with Disabilities	General	In counties where available, quantity/level of service is insufficient ¹⁷
Skills Training	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Skills Maintenance	TDMHMR	Severe and Persistent Mental Illness	General	No gap reported

TABLE 12.2. SERVICES REPORTED (CONTINUED)

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
In-Home Respite Care	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Institutional Respite Care	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
In-Home Respite Care	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Out-of Home Respite Care	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Respite Care	TDHS	CCAD Clients	General	There is limited funding
Site Based Habilitation	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
PHC	TDHS	Medicaid Clients	General	No gap reported
Family Care	TDHS	18+ Population	General	No gap reported
Residential Care	TDHS	CCAD & CBA Clients	General	Not available in all counties served by CCAD ¹⁸ and CBA ¹⁹
CMPAS	TDHS	CCAD Clients	General	Not available in all counties served by CCAD ²⁰
In-Home Services	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
IHFS	TDHS	Persons with Disabilities	General	There is a waiting list of persons needing services
IHFS	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Family Training	TDMHMR	Family of persons with Mental Health/Mental Retardation	General	No gap reported
ERS	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
ERS	TDHS	CCAD & CBA Clients	General	No gap reported
DB-MD	TDHS	18+ Population with Disabilities	General	No gap reported
SSPD	TDHS	Persons with Functional Needs	General	Not available in all counties
SSPD 24-hr. shared attendant care	TDHS	Persons with Functional Needs	General	Not available in all counties

TABLE 12.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Guardianship	HHSC	Develops and implements plan to ensure that incapacitated persons in Texas who need guardianship or less restrictive services receive such assistance and to foster the establishment and growth of local volunteer guardianship programs.
Guardianship Program	PRS	Provides a guardian to make decisions for an incapacitated person when no other alternative for a guardian is available. As a last resort, APS may seek guardianship of incapacitated children aging out of CPS care or adults who are in a state of abuse, neglect or exploitation.
Adult Day Care	TDaA	An alternative to institutional long-term care and rehabilitation where respite is provided to family caregivers as well as therapeutic care for cognitive and physically impaired older adults. General operations are during normal business hours five days a week, however, there are programs that offer services in the evenings and on weekends.
DAHS	TDHS	Provide daytime services, Mon. through Fri., to clients residing in the community as an alternative to placement in nursing homes or other institutions. Services address physical, mental, medical, and social needs of clients and include: nursing and personal care, physical rehabilitation, noon meals and snacks, transportation, social, educational, and recreational activities.
AFC	TDMHMR	A 24-hour living arrangement with supervision for persons who are unable to continue independent functioning in their own homes because of physical, mental, or emotional limitations. The facility is a 4-bed or fewer facility where AFC providers must live in the household and share a common living area with the residents. Services may include minimal help with personal care, help with activities of daily living, and provision of, or arrangement for, transportation.
AFC	TDHS	Service is provided in TDHS enrolled AFC homes. It is a 24-hour living arrangements and includes meal preparation, housekeeping, help with personal care, etc.
State Veteran's Homes	GLO	A nursing home program specifically for veterans who have been certified by a physician as needing skilled nursing care.
PACE	TDHS	Provides community-based services to frail elderly persons that qualify for Medicaid in a nursing facility. The program uses a comprehensive care approach, providing an array of services for a monthly fee that is below the cost of comparable institutional care. All necessary health-related services are provided, including in-and out-patient medical care; specialty services such as dentistry and podiatry; social services; in-home care; meals; transportation; day activity; and housing assistance
STAR+PLUS	TDHS	A Medicaid Managed Care pilot project serving 55,00 aged and disabled clients in Harris County. The goal of the pilot is to improve the delivery of health care services to most vulnerable population. The participating Managed Care Organizations (MCOs) receive a capitated payment for each member and are at risk for costly emergency room and hospital care. By integrating acute and long-term care Medicaid funding, the MCOs are incentivized to provide community based services to keep members from needing expensive acute care services. Three MCOs currently participate in STAR+Plus: ACCESS+PLUS, Americaid, and HMO Blue.
CARE	TDHS	Provides a complex case management program that provides a variety of support services including respite, Safe Return, education, legal support, companionship, and other services to delay institutionalization for persons with Alzheimer's.
Personal Care Home	TDMHMR	Provides personal care services to a minimum of 4 persons. Services include assistance with meals, dressing, movement, bathing, or other personal needs or maintenance.
Training Materials	TCB	Training materials are available for volunteer programs in long-term care facilities.

TABLE 12.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
LTC Ombudsman	TDoA	Ombudsmen advocate for quality care on behalf of nursing homes and assisted living facility residents, and their family members. They provide information to residents and families about residents' rights and help identify additional resources in or out of the facility. Ombudsmen also identify, investigate, and resolve complaints by or on behalf of nursing home and assisted living facility residents.
Adult Protective Services	PRS	Protect vulnerable adults who live at home and adults living in nursing homes who may be financially exploited by someone outside the facility.
MHMR Investigations	PRS	Investigate abuse, neglect, and exploitation in TDMHMR settings.
Supported Home Living	TDMHMR	Provided to persons not receiving residential services that participate in age-appropriate community activities. Services are available 24 hrs./day to individuals who do not live independently or with their natural family, and require TDMHMR employees or contractors to regularly stay overnight in the individual's home.
Specialized Housing	TDMHMR	A residential option that does not meet the definitions for personal care, adult foster care, or treatment training.
Family Living	TDMHMR	Residential service provided to 3 individuals or fewer living in a single residence that is not a Contracted Specialized Residence.
Residential Living	TDMHMR	Residential service provided to more than 3 individuals living in a single residence that is not a Contracted Specialized Residence.
CBA	TDHS	Provides an array of home and community-based services to aged and disabled adults as cost-effective alternatives to nursing facility care. Services include personal assistance, adaptive aids, medical supplies, adult foster care, assisted living/residential care, nursing, rehabilitative therapies, respite care, home-delivered meals, emergency response, and minor home modifications.
CLASS	TDHS	Provides home and community-based services to people with related conditions (e.g., disabilities, other than mental retardation, that originated before age 22 and affect the ability to function in daily life) as a cost-effective alternatives to institutional placement. Services include respite care, rehabilitative therapies, habilitation, adaptive aids, etc.
Skills Training	TDMHMR	Provide skills that focus on independent functioning and community skills. Promotes community integration, increases community tenure, and maintains the quality of life for the individuals. Services include activities and training designed to address the illness- symptom related problems and behaviors.
Skills Maintenance	TDMHMR	Program-based, long-term services provided to individuals with severe and persistent mental illness that are in need of day program services to ensure well being and reduce the risk or duration of institutionalization.
In-home Respite Care	TDoA	Help family members or caregivers take needed breaks from their caregiving responsibilities. Services are available on short-term basis for elderly people who require care and/or supervision.
Institutional Respite Care	TDoA	Provided in a congregate or residential setting (e.g., hospital nursing home, adult day care center) to dependent older persons. Services are short-term to provide temporary relief while primary care giver is unavailable or needs relief. Services may also include when appropriate, meals, social and recreational activities, personal care, monitoring of health status, medical procedures, and/or transportation.
In-home Respite Care	TDMHMR	Provided in a person's home to relieve family members or primary care providers of their responsibilities for providing care on a temporary basis for short periods of time. Primary care providers may or may not remain in the home during respite services. In-home respite services are also available during crises resulting from specific events or on a regularly scheduled basis.

TABLE 12.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Out-of-Home Respite Care	TDMHMR	Provide care to and supervision of individuals outside their usual residence. This service is intended to relieve family members or other primary care providers of their responsibilities on a temporary basis for short periods of time.
Respite Care	TDHS	Help family members or caregivers take needed breaks from their caregiving responsibilities. Services are available on a short-term basis for people who are elderly or have disabilities that require care and/or supervision.
Site Based Habilitation	TDMHMR	Day training services provided away from individuals' homes to help them develop and refine skills necessary to live and work in the community. Site-Based Habilitation services are provided on a regular basis and are typically in a group setting.
PHC	TDHS	A non-technical, medically related personal care service for eligible clients functionally limited in performing activities of daily living due to health problems. Services are prescribed by a physician as part of a client's plan of care, which includes personal care, home management, and escort services.
Family Care	TDHS	Provided to aged and disabled adults who are functionally limited in performing daily living activities. Services include assistance with personal care activities, housekeeping tasks, meal preparation, and escort services.
Residential Care	TDHS	Residential care services are provided through facilities licensed by TDH to eligible adults requiring 24 hr access to services. Residential care services include supervised living, residential health care, and emergency care.
CMPAS	TDHS	Targets adults with disabilities who are mentally and emotionally capable of self-directing their attendant care. Clients interview, hire, train, and supervise their own attendants.
In-Home Services	TDoA	Services include a homemaker and personal assistance. Homemakers assist older adults with housekeeping/home management, meal preparation, and/or escort tasks and shopping assistance. Personal assistance is assistance with tasks that an individual would typically do if they were able to including all activities of daily living.
IHFSP	TDHS	Source of assistance for eligible persons to purchase items, services, supports, adaptive devices, or supports necessary to maintain functioning in their own home.
IHFSP	TDMHMR	See IHFSP, TDHS
Family Training	TDMHMR	Training provided to family members regarding the effects and treatment of mental illness.
ERS	TDHS	24 hr electric monitoring system for functionally impaired elderly or adults with disabilities who live alone or are physically isolated from the community and need home monitoring.
ERS	TDoA	24 hr electric monitoring systems for functionally impaired elderly who live alone are physically isolated from the community.
DB-MD	TDHS	Provides persons who are deaf, blind, and have multiple disabilities an opportunity to increase independence and communication through services such as interpreters for deaf clients in the community, adult day care for persons with special needs, counseling, personal care, and help developing skills necessary for independent living in the community.
SSPD	TDHS	Services include interpreters for deaf clients in the community and adult day care for clients with special need, counseling, personal care, and help developing skills needed for independent living in the community. Services are provided to community care clients in a variety of settings.
SSPD 24hr shared attendant care	TDHS	Makes attendant care available to clients on a 24 hr basis. Clients live independently in clustered living arrangements and use this service to achieve habilitative or rehabilitative goals

ACCESS, ASSISTANCE, AND SUPPORT SERVICES

Information and assistance provides a crucial link between state agencies' community and support services and the Texans who need those services to maintain their independence. Information may be provided via the telephone, in-person, or through group meetings, seminars, and conferences. Case management and care coordination are intensive, individual services provided to persons who need assistance in identifying service needs and accessing available sources.

HB 2596, 75th Legislature, established the Texas Information and Referral Network as the single point of coordination for statewide information and referral for health and human services and a model consisting of 25 Area Information Centers (AIC), was developed. The AICs consist of regional coordinators who, in cooperation with local partners, gather, maintain, and disseminate health and human services information. To date, 19 of the 25 AICs have been identified. The Information and Referral Network is designed to offer comprehensive and cost-effective access to health and human services information (Texas Health and Human Services Commission, 1998).

Service access continues to be a priority for the Texas Health and Human Services Commission. Although much work remains, the I&R Network, through nationwide partnerships with organizations, is working to make information more readily available via telephone access. The "211" number has been designated as the single number to call for access to community resources (Texas Health and Human Services Commission, 1998).

The following tables present the survey responses associated with access, assistance, and support services. This table includes many programs that were difficult to classify. Almost 50 different services were reported and almost half of the programs target older adults. Many of the programs are provided by TDoA, reflecting the agency's role to provide an array of social services that complement programs such as Medicaid and Medicare. Other health and human service agencies, including TDMHMR, TCADA, and TCDHH have roles in helping specific populations access services. Both TRC and TCB reported Independent Living Service programs that complement their Vocational Rehabilitation programs. In general, the health and human services agencies reported gaps in services for the supportive services programs.

Programs reported by the Office of the Attorney General (OAG), Texas Department of Insurance (TDI), Texas Veterans Commission (TVC), among others, primarily target or provide outreach to the older adult population and reported some gaps in services.

TABLE 13.1. SERVICE/PROGRAM ACRONYMS

ACRONYM	PROGRAM NAME
CFNP	Community Food and Nutrition Program
ENTERP	Emergency Nutrition/Temporary Emergency Relief Program
ESG	Emergency Shelter Grants Program
HICAP	Health Information Counseling and Advocacy Program
IR&A	Information, Referral and Assistance
SCP	Deaf or Hard of Hearing Senior Citizens Program
STAP	Specialized Telecommunications Assistance Program

TABLE 13.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Caregiver Education / Training	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Work and Family Clearinghouse	TWC	General Population	General	No gap reported
Senior Fraud Conference & Expos	OAG	Seniors	Older	No gap reported
Triad Program	OAG	Seniors	Older	No gap reported
Medicare Seminars	TDI/HICAP	Older Adults & Persons with Disabilities	Older	Available on annual schedule
Insurance Outreach Seminars	TDI	Older Adults & Their Providers	Older	Limited by annual travel budget
HICAP – Texas national SHIP network	TDoA & state/local agencies	Persons Eligible for Medicare	General	No gap reported

TABLE 13.2. SERVICES REPORTED (CONTINUED)

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Education Material/ Insurance Outreach	TDI	Consumers	General	Limited to insurance-related assistance and information to consumers
Publications & Helpline insurance assistance	TDI	General Population	General	No gap reported
Publications & Literature	CTF	Parents	General	Agencies with funding for abuse and prevention should work together to increase monies for more programs
Public Education	CSEC	General Population	General	No gap reported
Economic Clearinghouse	TxED	General Population	General	No gap reported
CFNP	TDHCA	General Population	General	Not available in all counties ² In counties where available, the quantity/ level of service is insufficient ³
Poison Control Services	CSEC	General Population	General	No gap reported
Care Coordination	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Service Coordination	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Veteran's Counseling	TVC	Veterans	Outreach	No gap reported
Legal Assistance	TDoA	60+ & Medicare eligible	Older	Insufficient to meet the needs of all eligible Texans
Legal Awareness	TDoA	60+ & Medicare eligible	Older	No gap reported
IR&A	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Information & Referral Initiatives	TCC	General Population	General	No gap reported
Outreach	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
SCP	TCDHH	60+ Deaf or Hard of Hearing	Older	Not available in all counties and there are limited services in each HHSC region ¹⁹ In counties where available, quantity/level of service is insufficient
STAP	TCDHH	Deaf or Hard of Hearing	Outreach	No gap reported

TABLE 13.2. SERVICES REPORTED (CONTINUED)

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Hard of Hearing Services	TCDHH	Deaf or Hard of Hearing	Outreach	Not available in all counties and there are limited services in each HHSC region In counties where available, quantity/level of service is insufficient
Communication Access	TCDHH	Deaf or Hard of Hearing	General	Not available in all counties and there are limited services in each HHSC region In counties where available, quantity/level of service is insufficient
Independent Living Program	TCB	Persons with Visual Impairments	Outreach	In counties where available, the quantity/level of service is insufficient
Independent Living Services	TRC	Persons with Disabilities	General	No gap reported
Telephone Reassurance	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Visiting	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Shopping	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Escort Services	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Income Support	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Nutrition Education	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Nutrition Consultation	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Nutrition Counseling	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Home Delivered Meals	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
Home Delivered Meals	TDHS	CCAD & CBA clients	General	Not available in all counties for CCAD ²⁰ and CBA clients ²¹
Congregate Meals	TDoA	60+ Population	Older	Insufficient to meet the needs of all eligible Texans
ENTERP	TDHCA	Requiring Emergency Services	General	Not available in all counties ² In counties where available, the quantity/ level of service is insufficient ³
ESG	TDHCA	Homeless	General	Not available in all counties ² In counties where available, the quantity/ level of service is insufficient ³
Crisis Hotline	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Substance Abuse Hotline	TCADA	General Population	General	No gap reported

TABLE 13.2. SERVICES REPORTED (CONTINUED)

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Gambling Hotline	TCADA	General Population	General	No gap reported
In-Home Crisis	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Crisis Residential	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Parenting Program	CTF	Parents	General	Agencies with funding for abuse and prevention should work together to increase monies for more programs

TABLE 13.3. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Caregiver Education / Training	TDoA	A resource library, informational resources, facilitating support groups, seminars and focus groups, facilitating individual or group counseling and providing educational services to groups or individuals.
Work and Family Clearinghouse	TWC	Provides information and resources for caregivers of older Texans.
Senior Fraud Conference & Expos	OAG	Educate elders, law enforcement personnel, social service providers and other conference participants on current trends in consumer fraud against senior Texans and help our seniors avoid being targets of fraud.
Triad Program	OAG	A cooperative effort of the National Sheriffs' Association, the International Association of Chiefs of Police, and senior organizations. Seniors and Law Enforcement Together (SALT) is the volunteer council that oversees local TRIAD programs. The SALT Council decides what services or programs the TRIAD will offer, recruits volunteers and oversees the results.
Medicare Seminars	TDI	Seminars welcoming people to Medicare provide basic facts about Medicare benefits and supplemental insurance. Seminars are sponsored by federal and state presenters.
Insurance Outreach Seminars	TDI	Public education outreach to help reach more Texans and educated them on various insurance-related topics.
HICAP – Texas national SHIP network	TDoA & state/local agencies	HICAP is part of the national state health insurance assistance program known as SHIP that is funded by the Centers for Medicare and Medicaid Services. The Texas program subcontracts with state and local agencies to maintain a comprehensive network of state certified health counseling for older and disabled Texans (e.g., provides information in groups and to individuals about Medicare and Medicaid eligibility, program benefits and appeal rights, supplemental insurance, assistance completing forms, and information on long term care options). The network includes local area agencies on aging, TDI, and the Texas Legal Services Center.

TABLE 13.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Education Material Insurance Outreach	TDI	Consumer brochures and an online LTC rate guide to assist consumers considering buying a policy. The TDI brochure on LTC outlines options to pay for long-term care services. Companies selling LTC policies must be licensed by TDI. Promotional materials must be submitted for review by TDI prior to use.
Publications & Helpline Insurance Assistance	TDI	Toll-free telephone access, free consumer publications that discuss multiple insurance topics (e.g., auto, fraud, homeowners, long-term care). Also available online.
Publications & Literature	CTF	Distribute literature on parent checklist in both English and Spanish and information on Shaken Baby Syndrome. Literature for parents is also available to grandparents who are primary caregivers for children.
Public Education	CSEC	Educates the citizens of Texas on the proper use of the 9-1-1 emergency number. A large assortment of publications and educational items carrying these messages geared to adults, seniors and children.
Economic Clearinghouse	TxED	Website offers links to other agency programs by topics (e.g., aging or age) www.edinfo.state.tx.us
CFNP	TDHCA	Supports a statewide publication detailing hunger-related issues, programs to promote greater use of surplus crops for feeding the poor, and a marketing effort designed to increase the flow of federal funds to Texas for the Summer Food Service program benefiting school-aged children.
Poison Control Services	CSEC	Education on preventing poisonings to reduce morbidity, mortality and costs associated with poisonings.
Care Coordination	TDoA	An ongoing process that includes the needs of a client and effectively planning, arranging, coordinating and following-up on services which most appropriately meet the identified needs and mutually defined by access and assistance staff, the client and where appropriate, a family member(s) or other caregiver(s).
Service Coordination	TDMHMR	Services to assist eligible individuals gain access to medical, social, education, and other appropriate services to help them achieve good quality of life and community participation acceptable to each individual.
Veteran's Counseling	TVC	Available at VA hospitals around the state. Counselors provide veterans entitlement information on state and federal benefits (i.e., pensions, medical benefits) and non-service related conditions.
Legal Awareness	TDoA	Advice and representation by state certified counseling representation by a non-lawyer where permitted by law. Legal assistance includes advice/counseling, document preparation or representation.
Legal Assistance	TDoA	Legal advice through a contracted Legal Hotline for Texas via a toll free telephone number. Assistance and referral regard appeals, denial from public benefit program. Also supports HICAP counselors.
IR&A	TDoA	Is assessing the needs of clients by evaluating appropriate resources, assessing appropriate response modes, indicating organizations capable of meeting those needs, providing enough information about each organization to help clients make informed choices and helping clients for whom services are unavailable by locating alternative resources, when necessary, and actively participating in linking clients to need services and following up on referrals to ensure the service was received or provided.
Information & Referral Initiatives	TCC	Information on cancer resources and statistics and continually updated databases provide the framework for improving the accessibility and quality of services in Texas are available to all Texans.

TABLE 13.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Outreach	TDMHMR	Links and reaches people who often have difficulty getting appropriate care due to factors such as acute behavioral symptomatology, economic hardship, homelessness, unfamiliarity with or difficulty in accessing community behavioral health care services and other support services.
SCP	TCDHH	Geared toward bridging the communication barriers and reducing the isolation facing persons who are deaf or hard of hearing. Services vary from area to area and may include services such as coping skills training, independent living services, and recreational activities.
STAP	TCDHH	Vouchers are available to eligible persons through a \$35.00 application fee that can be exchanged for specified equipment. Vouchers are available to individuals every 7 years.
Hard of Hearing Services	TCDHH	Includes training, information, referral and adaptive equipment demonstrations.
Communication Access	TCDHH	Provides services essential for community participation (e.g., sign language interpreters)
Independent Living Program	TCB	In-home instruction program where trained professionals provide persons with adaptive skills information about adaptive aids, counseling and advocacy, and help consumers manage their daily lives. Services include eye examinations, orientation and mobility training, recreation and socialization, information and referral, counseling, and independent living skills training.
Independent Living Services	TRC	Provides services to eligible individuals with disabilities, helping them improve their level of ability to function independently in the family and community. ILS counselors and Centers for Independent Living provide multiple services to applicants/clients, such as counseling, equipment assistance, training, information and referral, and advocacy.
Telephone Reassurance	TDoA	Provides regular contact and companionship and initiates necessary actions when the older person cannot be reached by telephone.
Visiting	TDoA	Provides regular contact and companionship, or initiates necessary actions to determine if assistance is needed if the person does not respond.
Escort Services	TDoA	Accompanying and personally assisting an older person obtain a service.
Shopping	TDoA	Provides assistance in the purchase of food, clothing, medical supplies, household items and/or recreational materials for an older person.
Income Support	TDoA	Aid in the form of money or goods.
Nutrition Education	TDoA	Provides information to participants on nutrition in order to promote nutritional well-being.
Nutrition Consultation	TDoA	Provides information relating to nutrition by a licensed dietician or other qualified person.
Nutrition Counseling	TDoA	Provide individualized advice and guidance about options and methods for improving their nutritional status, performed by health professionals to individuals who are at nutritional risk due to health or nutritional history, dietary intake, medication use or chronic illness.
Home Delivered Meals	TDoA	Hot, cold, frozen, dried, canned or supplemental food that provides a minimum of one-third of the recommended dietary allowances (RDA). There are two types of meals: standard (meals are regular meals from the standard menu that are served to the majority or all of the participants) and therapeutic meals/liquid supplements (special meals or liquid supplements that have been prescribed by a physician and are planned specifically for the participant by a dietician (i.e., diabetic diet)). The objective of home-delivered meals is to help recipients sustain independent living in safe and healthful environment.

TABLE 13.3. SERVICE DESCRIPTIONS (CONTINUED)

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Congregate Meals	TDoA	A hot or other appropriate meal served to an eligible person that meets one-third of the recommended dietary allowances served in a congregate setting. There are two types of meals – standard (regular meal from the standard menu that is served to the majority of participants) and therapeutic meal or liquid supplement (a special meal or liquid supplement that has been prescribed by a physician and is planned specifically for the participant by a dietician i.e., diabetic diet, renal diet, pureed diet, tube feeding).
Home Delivered Meals	TDHS	See Meals, TDoA
ENTERP	TDHCA	Aid is provided to county governments or nonprofit organizations serving each Texas county. Funds are used to provide emergency services (e.g., utility assistance, housing, food, clothing, medical services and transportation).
ESG	TDHCA	Provides grants to eligible entities that provide shelter and related services for homeless persons as well as intervention services to persons threatened with homelessness. Activities eligible for funding include renovation of shelters, assistance in obtaining permanent housing, medical and psychological counseling and supervision, and developing and implementing homeless prevention activities.
Crisis Hotline	TDMHMR	Telephone service that provides information, support and referrals to callers 24 hrs./day, 7 days/week
Substance Abuse Hotline	TCADA	A 24-hr. crisis hotline that will also help callers find treatment (877) 9-NO DRUG OR (877) 966-3784
Gambling Hotline	TCADA	Administers information, referral, and hotline program for compulsive and problem gamblers. The program provides crisis intervention and information and referrals for those with gambling-related problem.
In-Home Crisis	TDMHMR	Face-to-face crisis intervention/support services to assist individuals and families in managing and identified crisis.
Crisis Residential	TDMHMR	24-hr. residential services, usually short-term and available to clients who are demonstrating psychiatric crisis that cannot be stabilized in a less restrictive setting.
Parenting Program	CTF	Helps parents or grandparents caring for children with communication and the social skills that are needed to deal with children of all ages and stages.

CONSUMER INFORMATION AND PROTECTION

Consumers are faced with daily issues such as determining what is the best buy, where to buy it, and how to resolve service problems and complaints. There are many brochures, pamphlets, reports, and books that provide advice on consumer issues such as car repairs, purchases and leasing, shopping from home, avoiding consumer and investment fraud, home improvement and financing, and choosing and using credit cards wisely. Some books for consumers provide consumer assistance directories with thousands of names, addresses, telephone numbers, websites and email addresses for national consumer organizations, Better Business Bureaus, corporations, trade associations, state and local consumer protection offices, state agencies, military consumer offices, and federal agencies. Texas state agencies also provide consumer information to help Texans avoid consumer fraud.

The following tables list the survey responses. Thirteen different agencies provide 16 different programs. Most programs target the general population, while five programs have specific outreach programs for older Texans. No gaps in services were reported.

TABLE 14.2. SERVICES REPORTED

SERVICE/PROGRAM	AGENCY	TARGET	OUTREACH	GAP
Consumer Credit Education	OCCC	General Population	Outreach	No gap reported
Investor Education	SSB	General Population	Outreach	No gap reported
Consumer Education & Protection	PUC	General Population	General	No gap reported
Pamphlet	SoS	General Population	General	It is only available on website or in limited quantities
Library services (information/education)	TCADA	General Population	General	No gap reported
Prevent Securities Fraud	SSB	General Population	Outreach	No gap reported
Tax Payer Information	CPA	General Population	Older	No gap reported
Texas Performance Review: e-Texas	CPA	General Population	General	No gap reported
Consumer Help Line	OCCC	General Population	Outreach	No gap reported
Consumer Help Line	TDI	General Population	General	No gap reported
Consumer Complaints Handling	TDH	General Population	General	No gap reported
Complaints Handling	TDI	Consumers	General	No gap reported
Complaint Resolution	OAG	General Population	Outreach	No gap reported
Consumer Peer Support	TDMHMR	Persons with Mental Health/Mental Retardation	General	No gap reported
Rate Hearings	OPIC	Consumers	General	No gap reported
Tourism	TxED	Older Adults	Older	No gap reported

TABLE 14.2. SERVICE DESCRIPTIONS

SERVICE/PROGRAM	AGENCY	DESCRIPTION
Consumer Credit Education	OCCC	Activities include public service announcements, press releases, and general information brochures made available through credit grantors and trade organizations. Consumer assistance specialists staff exhibit booths at community fairs and similar events and present formal programs to consumer groups and students.
Investor Education	SSB	Provides a series of investor education initiatives to assist all Texans in making informed investment decisions that affect their financial future. This effort includes the distribution of teaching guides to educators throughout the state, dissemination of financial planning guides, and publication of investor alerts and other investor education materials in English and Spanish.
Consumer Education & Protection	PUC	Provides education campaign regarding electric utility restructuring in Texas.
Pamphlet	SoS	Pamphlet entitled "When your home is a polling place" raises awareness about how some people may try to manipulate mail-in ballots.
Library Services	TCADA	Provides booklets, posters, and bookmarks to schools and non-profit groups. The library also shares written materials and videocassettes with the public.
Prevent Securities Fraud	SSB	Provides consumers with education materials on how to avoid being a victim of securities fraud.
Tax Payer Information	CPA	Provides tax-payer information to Texans.
Texas Performance Review: e-Texas	CPA	A division of the Comptroller's Office that reviews government agencies, programs, and operations and recommends improvements to increase efficiency and effectiveness. Compiles reports available to the general public that include but are not limited to school performance reviews, statewide performance reviews, and performance reviews of individual state agencies.
Consumer Help Line	OCCC	Protects consumers from abusive and deceptive practices, fraud, and misrepresentation by a pawnshop, regulated lender, or registered creditor. The consumer assistance staff promptly addresses complaints and inquiries, thereby ensuring prompt, fair, and effective enforcement of appropriate state and federal statutes and regulations.
Consumer Help Line	TDI	Provides insurance-related assistance and information to consumers
Consumer Complaints Handling	TDH	An 800 number that consumers can call to report problems or complaints.
Complaints Handling	TDI	Handles complaints against agents and insurance companies
Complaint Resolution	OAG	Receives consumer complaints from seniors and others on behalf of seniors to report problems and/or complaints about businesses. Complaints must include the company's name and address, a description of the problems, desired outcome, and provide supporting documentation.
Consumer Peer Support	TDMHMR	Activities provided between and among individuals who have common issues and needs that are consumer-motivated, initiated, and/or managed and that allow an individual to live as independently as possible.
Rate Hearings	OPIC	Representation of consumers as classes represented in rate hearings.
Tourism	TxED	Texas Department Economic Development implements marketing campaigns both in print and media geared toward Winter Texans

CHAPTER III

COORDINATION BETWEEN AGENCIES

The second component of this survey was entitled “Part 2: Duplication and Coordination.” It asked agencies to list any services and/or programs provided by other agencies that were similar to a service and/or program they listed in Part 1. Agencies were then instructed to select the statement that best fit the type of coordination between agencies. Agencies were also asked to describe the coordination activity and the desired outcome.

Thirty-nine coordinated activities were reported in Part 2 of the instrument. Agencies that responded to this section of the survey instrument reported that services or programs, while similar to services or programs of other agencies, were not duplicative services. Instead, they were services that were coordinated or in the process of being coordinated in order to better serve targeted clients. Responses to coordination questions are listed in the tables that follow.

The table contains the following fields:

- **Collaborating Agencies** - the name of the agencies working together
- **Service/Program** – the name of the program or service
- **Type** – the type of coordination
 1. Now engaging in coordination activities
 2. Coordination activity is being planned
 3. Coordination activity is in place
 4. Coordination activity between agencies is not applicable
- **Description** – the type of coordination
- **Desired Outcome** – the desired outcome of the coordination

The agency reporting the coordination is listed as number “1”.

Note that some agencies reported coordination with entities other than state agencies.

TABLE 2.1. COORDINATION OF SERVICES

COLLABORATING AGENCIES	PROGRAM NAME	TYPE	COORDINATED ACTIVITY	DESIRED OUTCOME
1-TDMHMR (Austin State School 2-Big Brothers/ Big Sisters	Foster Grandparent Program / Pals and Grand friends	3	Launching the Pals and Grand friends initiative.	Closer and positive relationships between older adults and youth. Mentoring positive life skills of older adults to young.
1-State hospital facilities in TDMHMR system	Geriatric Inpatient Psychiatric Services	4	Targeted services to assigned catchment areas for each state facility, however, coordination care does occur when a patient is transferred from one facility to another.	
1- State Schools in TDMHMR system	Residential Services	3	Client Placement is coordinated by the central TDMHMR office.	Successful placement of individuals.
1-TDMHMR 2-HHS Agencies (e.g. TDoA, PRS,TDHS)	Service Coordination / Case Management	4	Federal regulations prohibit duplication of services, and PRS policy and procedures reinforce this.	
1-CTF 2-PRS	Shaken Baby and SIDS literature	1	Conducting seminars statewide in prevention of child abuse and neglect	Educate all Texans about legal aspects of Shaken Baby and SIDS and increase awareness
1-CTF 2-Local Communities	Conferences focusing on Child Prevention	3	Conferences include "I am your child", Infant Brain Development, CASA, Prevent Child Abuse Texas, Family Relations, Texas Agricultural Family, International Border Conferences (targeting grandparents), Central Texas Celebration of Family Parenting Fair.	Provide information on preventing child abuse and neglect.
1-CTF 2-Local Communities	Community Initiative Specialist	3	Since CTF has no regions, agency uses specialist in community to identify community leaders in selected counties that will be funded to provide services.	Serve as Family Pride initiative to assist in community-based decision making.
1-TCDDH 2-TDoA	Senior Citizens Program	3	Encourages programs to seek funds to expand activities with a focus on the communication access portion of services in which AHS historically has been served by any of the AAAs. The individuals served have to interact with others who may otherwise remain isolated in all aspects of life. However, agencies strive not to duplicate but enhance available services to seniors who are deaf and want to expand that to those who are hard of hearing.	Provide appropriate and complete services to senior citizens who are deaf or hard of hearing.

TABLE 2.1. COORDINATION OF SERVICES (CONTINUED)

COLLABORATING AGENCIES	PROGRAM NAME	TYPE	COORDINATED ACTIVITY	DESIRED OUTCOME
1-CSOT 2-DPS, TDCJ, TJPC, OAG, PRS	Council on Sex Offender Treatment & Civil Commitment	2	Works with these agencies when working with sex offenders, both those that have registered and those who have been civilly committed.	Work together for the clients.
1-TDI 2-TDoA	Outreach	3	TDoA contracts with TDI to administer HICAP program.	Better informed seniors regarding insurance issues.
1-TCB 2-TRC	Vocational Rehabilitation	3	Provide similar services to people with disabilities interested in employment, but each serve a distinct population (physically and mentally disabled vs. visually impaired)	Provide employment.
1-TDH 2-TDoA	Physical Activity Program	1	Co-promotion of programs.	Expand effort to promote physical activity to the public.
1-TDH 2-Alzheimer's Association	Alzheimer's Disease Program	3	Alzheimer's Disease Program coordinates efforts with Alzheimer's Association of Texas in producing joint newsletter, however, services are NOT duplicated.	Reach more people with information about Alzheimer's.
1-TDH 2-AARP	Traffic Safety Presentations and Literature	3	AARP schedules presentations and orders traffic safety literature from the Safe Riders Program. Presentations are offered for older adults: aging and driving; pedestrian safety; bicycle safety; and child passenger safety for grandparents.	Partnerships developed and are currently being developed with AARP State Coordinators, Regional Coordinators, and local AARP Chapters throughout the state.
1-TDHS 2-TDMHMR	In-home and Family Support Program	3	Quarterly tape match of clients; coordination contacts between local programs when appropriate. Target distinct populations.	Avoid duplication of services provided to clients.
1-TDHS 2-TDoA	Meals & Primary Home Care/Family Care	3	Development of consistent rules and joint budget documentation, as well as monitoring instruments and procedures.	Improve efficiency of accessible services and reduce administrative costs.
1-TDoA 2-TDHS	Adult Day Care, ERS, & Personal Care	3	Agency Coordination Task Force is active and working to streamline rate setting, contracting, auditing and payment mechanisms between the agencies.	Removal of duplication of services and processes.

TABLE 2.1. COORDINATION OF SERVICES (CONTINUED)

COLLABORATING AGENCIES	PROGRAM NAME	TYPE	COORDINATED ACTIVITY	DESIRED OUTCOME
1-Committee of Examiners in the Fitting and Dispensing of Hearing Instruments 2-Audiology	Fitting and Hearing Dispensing	3	Both disciplines can fit and dispense hearing instruments.	Serve more customers.
1-TX State Board of Public Accountancy 2-TX Society of CPAs	Peer Assistance Program	3	Supplying/offering brochures concerning Alcoholism, Substance Abuse, Stress, and Depression in CPAs.	Help CPAs treat and cope with problems previously listed through a wide range of outside resources.
1-ERS 2-TRSTX County District Retirement, Texas Municipal Retirement System, City of Austin Retirement System	State Retirement	3	Combining service for retirement eligibility.	Uniform retirement eligibility.
1-TxDOT 2-TWC	Grant	3	Administering a TWC grant to 14 agencies to provide transportation to welfare recipients.	Provide transportation to welfare recipients.
1-TxDOT 2-HHSC	Memorandum of Understanding	4	Signed Memorandum of Understanding Nov. 2000 to pursue coordination issues and maximize the efficient use of transportation dollars.	None reported.
1- CSEC 2-Emergency Communications Districts and Home Rule Cities	Statewide 9-1-1 program and Poison Control program	3	Uniform service and equipment standards; public education and training, legislative/rule input, and technology workshops and meetings. Provide 24-hr. toll-free access for telephone poison exposure information and referral service through Poison Control Network. Toll-free numbers: 1-800-767-7661 and 1-800-222-1222 (National).	Provide uniform services in addition to consistent and cost effective quality service.
1-South TX Hospital 2-Planned Parenthood	BCCCP Screening	3	Referrals from agency for follow-up services, surgical biopsy, sterotadic, ultrasound services, and hysterectomy.	Decrease incidence of cervical/breast cancer for women through early detection mechanisms.
1-TCID 2-UT Tyler, South TX Hospital	TB Treatment	3	Treatment/hospitalization is coordinated between the three hospitals.	Improved Health for the patients involved.

TABLE 2.1. COORDINATION OF SERVICES (CONTINUED)

COLLABORATING AGENCIES	PROGRAM NAME	TYPE	COORDINATED ACTIVITY	DESIRED OUTCOME
1-TSLAC 2-Recording for the Blind and Dyslexic	Talking Book Program	3	Collections of books in alternative media, namely cassette tape, are very different in scope. Talking Book Program – fiction nonfiction and Recording for the Blind and Dyslexic textbooks).	Continue to make referrals to ensure a broad spectrum of materials to visually impaired or blind students. Very little coordination is necessary for aging population.
1-TXDOT 2-TDH	Pilot program	1	Pilot program that will allow existing public transit agencies to deliver Medicaid transportation directly or through brokers.	Provide transportation to Medicaid beneficiaries.
1-TDHCA 2-ORCAand Local & State Agencies/ Organizations	CDBG, HOME, ESG, Section 8, HTF, Single Family Bonds, Multifamily Bonds, CSBG, ENTERP, CFNP, CEAP, WAP	3	Since TDHCA is a funding agency, it uses local nonprofits to provide services. Therefore, there is always some sort of coordination in the delivery of services. In many instances, other state agencies are also involved in the development of the programs.	Avoid overlapping or duplication of services while serving low income Texans with housing services.
1-TDoA 2-RunTex, Governor's Advisory Council on Physical Fitness, OG, Cooper Aerobics Center, Blue Cross/Blue Shield	Texercise	2	Developing a variety of special events and promotional activities for eventual statewide implementation.	Inform Texans age 60+ about the benefits of exercise and motivate them to lead physically active lives.
1-Texas Funeral Services Commission 2-Other regulatory agencies	Continuing Education	4	Perhaps continuing education should be coordinated since funerals affect every Texas resident.	None reported.
1-CSOT 2-TDCJ, TJP, OAG, PRS	Civil Commitment	2	CSOT works with these agencies when dealing with sex offenders or registered sex offender treatment. It provides information about persons who are civilly committed.	Working together for the client.

TABLE 2.1. COORDINATION OF SERVICES (CONTINUED)

COLLABORATING AGENCIES	PROGRAM NAME	TYPE	COORDINATED ACTIVITY	DESIRED OUTCOME
1-HHSC 2-HHS Agencies	Community Resource Coordination Groups (Adult & Children)	3	Development of interagency service plans for children and adults with complex needs.	Needs are addressed from a variety of agencies and organizations in a coordinated manner.
1-HHSC 2-TDoA, TDHS, TDH, TDMHMR,, PRS,	Regional Access Planning	3	Support and assistance to communities to develop systems of access to long-term care at local level.	Improved access to long-term services and supports
1-HHSC 2-TDoA, PRS, TDMHMR, TDHS	Guardianship Alliance of Texas	3	Guidance to Guardianship Advisory Board in development of a Statewide plan to ensure that incapacitated persons receive guardianship or other protective measures.	Availability of guardianship or alternatives to persons who need them.
1-HHSC 2-HHS Agencies	Texas Promoting Independence Plan	3	Implementation of Plan	Certain persons in institutions are assisted in their transition into integrated community settings.
1-HHSC 2-HHS Agencies	Office of Community Transportation Services	3	Statewide plan for coordination of community transportation services; identification of client transportation needs, services and expenditures.	Access to transportation.
1-HHSC 2-TDMHMR,TEA, PRS, TYC, TJPC, TCADA	Texas Integrated Funding Initiative	3	Develop local mental health care systems in communities for minors.	Improved coordination of mental health services for minors.
1-HHSC 2-HHS Agencies	Texas Information and Referral Network	3	Implementation of statewide information and referral network; establishment of area information centers; coordinated online resource database, implementation of 211.	Improved access to information and referrals to appropriate agencies and organizations.
1-HHSC 2-TDH, TDMHMR, TDHS, PRS, TCB, ECI	Medicaid Program	3	Coordination of operations and initiatives within Medicaid.	Effectiveness and efficiency.
1-TDCJ 2-UTMB	Medical Care	3	Work cooperatively with UTMB so that older offenders receive medical care.	Ensure that aging offenders receive appropriate medical care.

CHAPTER IV

CONCLUSION AND FUTURE DIRECTIONS

This report identifies state services available to older Texans, gaps in services, and coordination of activities. State agencies identified more gaps in services than coordination activities. As the number of aging Texans continues to grow, the demand for aging related services, programs, and information is certain to increase. Coupled with a continuing strain on funding, state agencies are recognizing the need for innovative and effective coordination. State agencies also recognize the need to cooperate with each other in outreach efforts, in sharing expertise, and in serving various client bases and constituencies. Ideally, the information presented in this report will contribute to these coordination efforts.

This report reflects agency responses to the survey questionnaire. It is an important first step in identifying existing services, duplication of services, coordination of programs, and gaps in service availability for older Texans. The survey results reveal that the availability of services for older Texans varies widely across the state. In some cases, the need for services exceeds supply and funding is strained. In other cases, the availability of professionals and providers are limited.

Gaps in services were identified in several functions of state government. Health and human services agencies, some with long waiting or interest lists, identified many of the gaps in services. Gaps in services were particularly notable in the following areas:

- Housing services – all but one program indicated a gap in services.
- Transportation services – all direct service programs reported a gap in services.
- Long-term care services – many programs identified insufficient resources to meet the needs of all eligible Texans.
- Access, assistance and support services - many programs identified insufficient resources to meet the needs of all eligible Texans.

Thirty-nine coordination activities were reported in Part 2 of the survey. The type of coordination activity often depends on the nature of the relationship

between programs and agencies. In some cases, two or more agencies provide similar programs or services but the target populations differ. For example, the Texas Commission for the Blind and Texas Rehabilitation Commission both provide vocational rehabilitation services, but they target different population groups, (persons with visual impairments versus persons with all other disabilities). Other examples include the In-home and Family Support Programs operated by the Texas Department of Human Services and Texas Department of Mental Health and Mental Retardation. While the programs have the same name, have similar purposes and provide similar services, the populations served by each are different. These agencies use specific coordinating mechanisms to ensure consistency across the programs.

Another common area for coordination is when programs provide the same services to similar or overlapping population groups. For example, state schools and state hospitals provide similar services to the same population groups in different service areas.

Key coordination strategies include: interagency contracts, coordinating publications, tape match of clients, coordinating contacts between local programs, developing consistent rules across similar programs, streamlining contracting and rate-setting processes, and working with non-state agencies that have similar missions.

The survey responses clearly indicate that state agencies recognize the need to coordinate and draw upon each other's resources and expertise. It is also evident that Texas is making progress toward a smarter, more customer friendly state government for its older citizens.

As next steps we recommend the following actions:

- State agencies should review this report to identify potential ways of coordination with other agencies to address service gaps and opportunities for coordination;
- The Texas legislature should use this report as a resource; and
- The Office of Aging Policy and Information will incorporate findings from this report into future work on a variety of topics (e.g. housing, workforce) that affect services provided to older Texans.

The Office of Aging Policy and Information will continue to work with other state agencies and the Legislature to develop recommendations to improve services for older Texans, including issues of coordination and service duplication. Future studies could focus both on service gaps and methods to fill those gaps. Furthermore, studies must explore innovative methods to coordinate programs/services to better serve older Texans within limited funding streams . The data presented here may allow state agencies to explore innovative methods of serving the growing needs of older Texans.

ENDNOTES

1. The Texas Health and Human Services Agencies are as follows: Texas Department of Health and Human Services Commission (HHSC), Texas Department of Health, (TDH) Texas Department of Human Services (TDHS), Texas Department of Mental Health and Mental Retardation (TDMHMR), Texas Department of Protective and Regulatory Services (PRS), Texas Department on Aging (TDoA), Texas Commission for the Blind (TCB), Texas Commission for the Deaf and Hard of Hearing (TCDHH), Texas Commission on Alcohol and Drug Abuse (TCADA), Texas Rehabilitation Commission (TRC), Interagency Council on Early Childhood Intervention Services (ECI), and the Health Care Information Council (HCIC)
2. Services are not available in all counties due to lack of available resources or the capacity of the non-profits.
3. The quantity or level of service is insufficient due to lack of funding.
4. Service is needed in West Texas. Restraints on travel make it difficult to provide presentations/services to individuals and organizations in this region.
5. Service is needed in 64 counties throughout the state and all but three counties (Hudspeth, Jeff Davis and Brewster) have some form of public transportation system available.
6. Service is needed in Midland and Odessa.
7. Service is needed in 14 counties with the largest concentration in West Texas.
8. The Al Price State Juvenile Correctional Facility, formerly Jefferson County State School, is the only facility in the TYC to utilize this program.
9. PHC provides access to approximately 6% of the targeted population potentially eligible to receive PHC funded services. In addition, there are gaps in primary health services for older adults due to increase in health care cost for older adults with chronic illnesses and level funding available
10. Treatment providers for the Civil Commitment program are available in organizations in the following counties: Angelina, Aransas, Atascosa, Bandera, Bastrop, Bee, Bell, Bell, Bexar, Bosque, Bowie, Brazoria, Brazos, Brewster, Brown, Bryan, Burnet, Caldwell, Callahan, Cameron, Carson, Chambers, Coleman, Collin, Collingsworth, Colorado, Comal, Comanche, Cooke, Coryell, Dallam, Dallas, Denton, Eastland, Ector, Ellis, El Paso, Erath, Falls, Fannin, Fayette, Fort Bend, Fort Worth, Galveston, Gillespie, Guadalupe, Grayson, Gregg, Hale, Hardin, Harris, Hays, Henderson, Hidalgo, Hill, Hockley, Hood, Hopkins, Houston, Howard, Hunt, Jasper, Jefferson, Johnson, Jones, Karnes, Kaufman, Kendall, Kerr, Lamar, Lamb, Lampasas, Lee, Liberty, Limestone, Live Oak, Lubbock, Matagorda, McLennan, McKinney, Medina, Midland, Milam, Mills, Montague, Montgomery, Moore, Nacogdoches, Navarro, Nolan, Nueces, Orange, Panola, Parker, Pecos, Potter, Presidio, Randall, Real, Refugio, Rockwall, Runnels, San Patricio, Scurry, Shackelford, Shelby, Sherman, Smith, Somervell, Star, Tarrant,

Taylor, Terry, Titus, Tom Green, Travis, Upton, Van Zandt, Victoria, Waller, Webb, Wharton, Wichita, Willacy, Williamson, Wilson, Wilson, Wise, and Yong

11. Counties Served by the CCAD Day Activity Health Services: Anderson, Angelina, Austin, Bastrop, Bee, Bexar, Brazoria, Brazos, Brooks, Calhoun, Cameron, Camp, Dallas, Denton, Duval, El Paso, Fort Bend, Galveston, Gregg, Guadalupe, Hardin, Harris, Harrison, Hidalgo, Houston, Jasper, Jefferson, Jim Hogg, Jim Wells, Karnes, Kaufman, Kleberg, LaSalle, Liberty, Lubbock, Maverick, McLennan, Medina, Midland, Nacogdoches, Newton, Nolan, Nueces, Orange, Panola, Polk, Potter, Randall, Refugio, Rusk, Sabine, San Agustin, San Jacinto, San Patricio, Shelby, Smith, Starr, Tarrant, Taylor, Tom Green, Travis, Trinity, Tyler, Uvalde, Val Verde, Victoria, Webb, Wichita, Willacy, Williamson, Zapata, and Zavala
12. Counties Served by the CCAD Adult Foster Care Services: Bastrop, Bexar, Bowie, Caldwell, Callahan, Cameron, Cooke, Dallas, Denton, El Paso, Gregg, Harris, Hopkins, Howard, Lubbock, McLennan, Rusk, Tarrant, Taylor, Titus, Travis, Wilbarger
13. Counties Served by the CBA Adult Foster Care Services: Atascosa, Austin, Bandera, Bastrop, Baylor, Bell, Bexar, Bowie, Brooks, Brown, Cameron, Camp, Cherokee, Coleman, Colin, Comal, Dallas, Denton, Donley, Duval, Ector, Ellis, El Paso, Fayette, Frio, Gonzales, Gregg, Guadalupe, Hardeman, Harris, Harrison, Henderson, Haskell, Hidalgo, Houston, Howard, Hunt, Jefferson, Jim Hogg, Jim Wells, Jones, Karnes, Kaufman Kendall, Kenedy, Kerr, Kleberg, Knox, Lamar, Lubbock, Marion, Maverick, McCulloch, McLennan, Medina, Midland, Montgomery, Nolan, Nueces, Panola, Parker, Pecos, Polk, Potter, Randall, Real, Rusk, San Agustin, San Patricio, Shelby, Smith, Starr, Tarrant, Taylor, Titus, Travis, Trinity, Upshur, Van Zandt, Webb, Wilbarger, Willacy, Wilson, Wood, and Zapata .
14. There are four homes being constructed, which will serve all areas of Texas. These facilities are located in Temple, Floresville, Bonham, and Big Springs. However, more homes are needed in Deep East Texas, the Gulf Coast Region, Far West Texas, Rio Grande Valley, DFW Area, the Panhandle, and Central Texas. Texas State Veterans Homes will be certified with 160 beds, 32 of which will be for Alzheimer's care. While these homes meet the needs of each person within the home, more homes are still needed.
15. PACE was limited to El Paso residents in certain zip codes, but due to recent legislative changes, (SB 908 passed during the 77th Legislative session) the TDHS is required to implement and expand the PACE program to eleven sites throughout Texas by Fiscal Year 2002.
16. CARE is only available in limited counties, but will be expanding to other sites. The counties CARE is currently available in include: Bell, Bexar, Cameron, El Paso, Ft. Bend, Floyd, Gillespie, Hays, Henderson, Hidalgo, Hudspeth, Kerr, Kleberg, Lubbock, Nueces, Smith, Tarrant, Travis, Wharton, Willacy, and Williamson.
17. Due to funding restraints of programs, the quantity of service is insufficient to meet the needs of all persons requesting service. In many instances persons are put on a waiting lists (interest list) until services become available.

18. Counties Served by CCAD Residential Care Services: Anderson, Angelina, Armasas, Bee, Bexar, Bowie, Brazoria, Brooks, Brown, Cameron, Camp, Collin, Colorado, Dallas, Dewitt, Dimmit, Duval, El Paso, Fannin, Fisher, Fort Bend, Franklin, Gillespie, Grayson, Gregg, Guadalupe, Harris, Hidalgo, Hill, Hunt, Jackson, Jasper, Jefferson, Jim Hogg, Jim Wells, Kaufman, Kendall, Kenedy, Kerr, Kleberg, Lamar, Live Oak, Lubbock, Matagorda, McLennan, McMullen, Medina, Midland, Montague, Montgomery, Navarro, Nueces, Orange, Panola, Parker, Refugio, Runnels, Rusk, San Agustin, San Patricio, Shelby, Smith, Starr, Tarrant, Taylor, Titus, Trinity, Van Zandt, Webb, Wichita, Wilbarger, Willacy, Wood, Young, and Zapata
19. Counties Served by CBA Residential Care Services: Anderson, Andrews, Angelina, Armasas, Archer, Armstrong, Astascosa, Austin, Bailey, Bandera, Bastrop, Baylor, Bee, Bell, Bexar, Blanco, Borden, Bosque, Bowie, Brazoria, Brazos, Brewster, Briscoe, Brooks, Brown, Burlison, Burnet, Caldwell, Calhoun, Callahan, Cameron, Camp, Carson, Cass, Castro, Chambers, Cherokee, Childress, Clay, Cochran, Coke, Coleman, Collin, Collingsworth, Colorado, Comal, Comanche, Concho, Cooke, Coryell, Cottle, Crane, Crockett, Crosby, Culberson, Dallam, Dallas, Dawson, Deaf Smith, Delta, Denton, Dewitt, Dickens, Dimmit, Donley, Duval, Eastland, Ector, Edwards, Ellis, El Paso, Erath, Falls, Fannin, Fayette, Fisher, Floyd, Foard, Fort Bend, Franklin, Freestone, Frio, Gaines, Galveston, Garza, Gillespie, Glasscock, Goliad, Gonzales, Gray, Grayson, Gregg, Grimes, Guadalupe, Hale, Hall, Hamilton, Hansford, Hardeman, Hardin, Harris, Harrison, Hartley, Haskell, Hays, Hemphill, Henderson, Hidalgo, Hill, Hockley, Hood, Hopkins, Houston, Howard, Hudspeth, Hunt, Hutchison, Irion, Jack, Jackson, Jasper, Jeff Davis, Jefferson, Jim Hogg, Jim Wells, Johnson, Jones, Karnes, Kaufman, Kendall, Kenedy, Kent, Kerr, Kimble, King, Kinney, Kleberg, Knox, Lamar, Lamb, Lampasas, LaSalle, Lavaca, Lee, Leon, Liberty, Limestone, Lipscomb, Live Oak Llano, Loving Lubbock, Lynn, Madison, Marion, Martin, Mason, Matagorda, Maverick, McCulloch, McLennan, McMullen, Medina, Midland, Milam, Mills, Mitchell, Montague, Montgomery, Moore, Morris, Motley, Nacogdoches, Navarro, Newton, Nolan, Nueces, Ochilree, Oldham, Orange, Palo Pinto, Panola, Parker, Parmer, Pecos, Polk, Potter, Presidio, Rains, Randall, Reagan, Real, Red River, Reeves, Refugio, Roberts, Robertson, Rockwall, Runnels, Rusk, Sabine, San Agustin, San Jacinto, San Patricio, San Saba, Schleicher, Scurry, Shackelford, Shelby, Sherman, Smith, Somervell, Starr, Stephens, Sterling, Stonewall, Sutton, Swisher, Tarrant, Taylor, Terrell, Terry, Throckmorton, Titus, Tom Green, Travis, Trinity, Tyler, Upshur, Upton, Uvalde, Val Verde, Van Zandt, Victoria, Walker, Waller, Ward, Washington, Webb, Wharton, Wheeler, Wichita, Wilbarger, Willacy, Williamson, Wilson, Winkler, Wise Wood, Yoakum, Young, Zapata, and Zavala
20. Counties Served by the CCAD CMPAS: Angelina, Bee, Bexar, Cameron, Dallas, El Paso, Hardin, Harris, Hidalgo, Houston, Jasper, Jefferson, Jim Wells, Kleberg, Live Oak, Lubbock, Nacogdoches, Newton, Nueces, Orange, Polk, Potter, Randall, Refugio, Sabine, San Agustin, San Jacinto, San Patricio, Shelby, Tarrant, Travis, Trinity and Tyler
21. Currently there are no senior programs that focus on elders with hard of hearing problems and while there is interest for establishing these programs, however, there are no funds available.
22. Counties Served by the CCAD Home Delivered Meals Program: Anderson, Andrews, Angelina, Armasas, Astascosa, Bandera, Baylor, Bee, Bell, Bowie, Brazos, Brewster, Brooks, Brown, Burlison, Burnet, Calhoun, Callahan, Cameron, Camp, Cass, Cherokee, Childress, Clay, Comal, Cooke, Cottle, Crockett, Dallas, Dawson, Delta, Denton, Dewitt, Dickens, Dimmit, Duval, Ector, Edwards, El Paso, Erath, Fannin, Fisher, Fort Bend, Franklin, Frio, Galveston, Garza, Gillespie, Goliad, Gonzales, Grayson, Gregg, Guadalupe, Hale, Hall, Hardeman, Hardin, Harris, Harrison, Henderson, Hidalgo, Hockley, Hopkins, Houston, Jack Jackson, Jasper, Jefferson, Jim Hogg, Jim Wells, Johnson, Jones, Karnes, Kaufman, Kendall, Kenedy, Kerr, Kimble, Kleberg, Knox, Lamar, Lamb, LaSalle, Lavaca, Liberty, Live Oak Llano, Lubbock, Marion, Matagorda, Maverick, McMullen, Medina, Midland, Milam, Montague, Morris, Nacogdoches, Navarro, Newton, Nolan, Nueces, Orange, Panola,

Pecos, Polk, Presidio, Rains, Reagan, Real, Red River, Reeves, Refugio, Robertson, Runnels, Rusk, Sabine, San Agustin, San Jacinto, San Patricio, San Saba, Scurry, Shelby, Smith, Starr, Swisher, Tarrant, Taylor, Titus, Travis, Trinity, Tyler, Upshur, Uvalde, Val Verde, Van Zandt, Victoria, Waller, Ward

23. rd, Webb, Wharton, Wheeler, Wichita, Wilbarger, Willacy, Wilson, Winkler, Wood, Young, Zapata, and Zavala

24. Counties Served by the CBA Home Delivered Meals Program: Anderson, Angelina, Astascosa, Bandera, Bexar, Bowie, Calhoun, Camp, Cass, Cherokee, Comal, Cooke, Dallas, Delta, Dewitt, Dimmit, Edwards, Erath, Fannin, Franklin, Frio, Gillespie, Goliad, Gonzales, Grayson, Gregg, Guadalupe, Harrison, Henderson, Hood, Hopkins Houston, Jackson, Jasper, Johnson, Karnes, Kaufman, Kendall, Kerr, Kinney, Lamar, LaSalle, Lavaca, Marion, Maverick, Medina, Morris, Nacogdoches, Navarro, Newton, Palo Pinto, Panola, Parker, Polk, Rains, Real, Red River, Rusk, Sabine, San Agustin, San Jacinto, Shelby, Smith, Tarrant, Titus, Trinity, Tyler, Upshur, Uvalde, Val Verde, Van Zandt, Victoria, Wilson, Wood, and Zavala

REFERENCES

Administration on Aging. (1998). Housing Highlights: Home Modification and Repair. National Resource and Aging Policy Center on Housing and Long Term Care.

Administration on Aging. (2000). Elder Action: Action Ideas for Older Persons and their families. [Online]. Available: <http://www.aoa.dhhs.gov/aoa/eldractn/voluntr.html>. (24 Oct 2001).

Alicandri, E. (1994). Highways Older Drivers Can Use. Presented at the May 1994 American Society of Civil Engineers Conference, "Innovations in Highway Safety – A Broad Perspective."

American Association of Retired Persons. Public Policy Institute. (1999). Progress in the Housing of Older Persons: A Chartbook. [Online]. Available: http://research.aarp.org/consume/d16953_housing_1.html. (9 Feb 2001).

Bittner, J. J., Long, J. D., & Szylow, L. (2000). Mobility in an Aging America: Design, Licensing, and Alternative Transportation Options. The Robert M. LaFollette School of Public Affairs. University of Wisconsin: Madison. Prepared for the Wisconsin Department of Transportation.

Brophy, P., Craven, J., & Fisher, S. (1998). The Development of UK Academic Library Services in the Context of Lifelong Learning. Depart of Information and Communication Center for Research in Library Information Management (CERLIM). The Manchester Metropolitan University.

Bureau of Chronic Disease Prevention and Control. (1999). Texas Behavioral Risk Factor Surveillance System. Texas Department of Health: Austin, TX.

Burkhardt, J. E., Berger, A. M. Creedon, M., & McGavock, A. T. (1998). Mobility and Independence: Changes and Challenges for Older Drivers. Administration on Aging: Washington, DC.

Business: Can America's Workforce grow old gainfully? (1998). The economist. 348(8088), 59-60.

Chan Ying, S. & Lam Kui, C. (1998). Promotion of Elderly recreation and sport Activities organized by Urban Councilin Hon Kong. Thesis: Victoria University - Melbourne, Australia. [Online]. Available: http://www.staff.vu.edu.au/PeterKalmund/html/1998_hk.htm#Promotion (9 Feb 2001).

Dohm, A. (2000). Gauging the labor force effects of retiring baby-boomers. Monthly Labor Review, 123, 17-25.

Dohmen, G. (1999). Lifelong learning for all: What can be done to promote lifelong learning? German Institute for Adult Education. Germany. Presented at conference entitled "How Adults Learn" held at Georgetown University Conference Center, Washington DC; sponsored by Organization for Economic Cooperation and Development and U.S. Department of Education.

The Elderly Housing Coalition Committee on the Continuum of Care. (2000). Providing an Affordable Continuum of Care for Low-Income Residents of Senior Housing. Presented at the National Conference on Elderly Housing.

Fielding, T. S. (2000). Work becoming necessity for older adults. [Online]. Available: <http://www1.standard.net/stories/local/05-2000/FTP0254@local@24older@ogden.asp>. (9 Jan 01).

Gadbois, G., Handy, S. (1998). Community Transportation in Texas. The Office of Community Transportation Services. Health and Human Services Commission.

Greenspan, A. (2000). "Structural change n the new economy" remarks before the national governors' association. State college, PA: federal reserve board.

Hickey, M. C. (1999). A Design for Senior Living. Business Week. [Online]. Available. www.businessweek.com:/1999/99_29/b363836.htm?scriptFramed. (22 Jan 01).

Hiemstra, R. & Burns, R. (1997). Self-Directed Learning: Present and Future. Presented at the First World Conference on Self-Directed Learning, September 14-17, 1997. Montreal, Canada.

Hobbs, F. B., & Damon, B. L. (1996). 65+ In the United States. Current Population Report: Special Studies. U.S. Census Bureau.

Housing for Seniors. (2000). Builder. Washington, P.8-12.

Imel, S. (1996). Myths and Realities: Older Workers. (ERIC Document Reproduction Service No. ED 392 894).

Immel, S. (1998). Seniors in Cyberspace: Trends and Issue Alerts. (ERIC Document Reproduction Service No. ED 417 293).

Iso-Ahola, S.E., Jackson, E., & Dunn, E. (1994). Starting, ceasing, and replacing leisure activities over the life-span. Journal of Leisure Research; 26, 3, 227

Li, W., Litman, A., Condon, K.W., Alo, C.J., & Huang, P.P. (2000). Diabetes in Texas: A Risk Factor Report 1996-1999 Data. Texas Diabetes Council; Texas Department of Health, Austin, TX.

Lougheed, V. (1999). Employer-based rehabilitation. American Rehabilitation; 25(2), 25-28.

Maxwell J. C. (1997). Substance Abuse Trends in Texas: June 1997. Texas Commission on Drug and Alcohol Abuse. Austin, TX.

Musick, M. A., Herzog, A. R., & House, J. S. (1999). Volunteering and mortality among older adults: Findings from a national sample. The Journal of Gerontology: Psychological sciences and social sciences, 54B(3), S173-S180.

National Foundation for Infectious Disease. (2001). Facts about Adult Immunization. [Online]. Available: <http://www.nfid.org/factsheets/adultfact.html>. (23 August 2001).

National Academy on an Aging Society. (2000). At Risk: Developing chronic conditions later in life. Challenges for the 21st Century: Chronic and Disabling Conditions; Washington, DC.

Nemore, P.B. (1999). Variations in State Medicaid Buy-in Practices for Low-Income Medicare Beneficiaries: A 199 Update. Contract No. 98-1433. Henry J. Kaiser Family Foundation: Washington, D.C.

Simon, H., Etkin, M.J., Godine, J.E., Heller, D., Kuter, I., Shellito, P.C., Stern, T.A., Peckham, C., & Chevins, C. (Eds.). (1999). What Is Alzheimer's Disease? Nidus Information Services, Inc. [Online]. Available: http://content.health.msn.com/content/dmk/dmk_article_3961782. (29 Aug 2000).

Skinner, D. & Stearns, M. D. (1999). Safe Mobility in an Aging World. John A. Volpe National Transportation Systems Center Research and Special Programs Administration. U. S. Department of Transportation: Washington D.C. Presented at the Annual Meeting of the Transportation Research Board.

Smallen, J. M. (1995). Social Timing, Life, and life coherence: Implications for vocational change. *Social Work*, 40(4).

Stockton, J., Bryant, R., & Santoyo, L. (2001). Enrollment of Hispanic Dual Eligibles on the Texas-Mexico Border. Submitted to the Centers for Medicare and Medicaid Services.

Straight, A., & Jackson, A. M. (1999). Older Drivers. American Association of Retired Persons. Public Policy Institute. [Online]. Available: http://research.aarp.org/consume/fs51r_older_drivers.html. (29 Aug 00).

Substance Abuse and Mental Health Services Administration. (1998). Substance Abuse Among Older Adults: Treatment Improvement Protocol Series: 26. U.S. Department of Health and Human Services.

Substance Abuse and Mental Health Services Administration. (2001). Substance Abuse Among Older Adults: An Invisible Epidemic. [Online]. Available: <http://www.health.org/govpubs/BKD250/26d.htm> (29 Aug 2000).

Texas Council for Developmental Disabilities. (June 2000). Opening Doors: A Housing Publication for The Disability Community. Issue 10.

Texas Council on Alzheimer's Disease and Related Disorders. (2000). Biennial Report 2000. Texas Department of Health: Austin, TX.

Texas Department of Health. (2000). Older Adult Driver. [Online]. Available: <http://www.tdh.state.tx.us/injury/safe/adult.htm>. (17 July 2001).

Texas Department of Health . (1999). Aging Texas Well: A health perspective. Texas Department of Health: Austin, TX.

Texas Department of Health. (2001). Awareness and Education Program. [Online]. Available: <http://www.tdh.state.tx.us/osp/OSTEO/>. (17 July 2001).

Texas Department of Transportation. (1999). Texas Transit statistics released. [Online]. Available: <http://www.dot.state.tx.us/tdotnews/newsreel/1999/991018%2D1.htm>. (29 Aug 2000).

Texas Department on Aging. (2000). State of our State. Texas Department on Aging: Austin, TX.

Texas Health and Human Services Commission. (2001). Demographic a Profile of the Texas Population without Health Insurance Coverage. [Online]. Available: http://www.hhsc.state.tx.us/budget/cons_bud/dssi/BRT/BRT.htm. (9 Oct 2001).

Texas Health and Human Services Commission. (1998). An Overview of Texas Legislature that Impacts the Texas I&R Network. The Exchange. [Online]. Available: <http://www.hhsc.state.tx.us/tirn/sept98/plan.htm>. (24 June 2002).

Texas Higher Education Coordinating Board. (1998). Texas Higher Education Coordinating Board Strategic Plan 1999-2003. [Online]. Available: <http://www.thecb.state.tx.us/reports/html/0100/strplan98.htm>. (19 Sept 01).

Texas Mental Health and Mental retardation. (1999). Impact of Services for Aging Consumers and Caregivers. May-August.

U.S. Census Bureau. (1995). Sixty-Five Plus in the United States. Economics and Statistics Administration, U.S. Department of Commerce: Washington, DC.

U.S. Department of Health and Human Services. Mental Health: A Report of the Surgeon General. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health, 1999.

U.S. Department of Housing and Urban Development. Office of Policy Development and Research. (2001). A report on Worst Case Housing Needs in 1999: New Opportunity Amid Continuing Challenges.

Vermont College of Norwich University. (1999). Adult Education in the News: It's never too late. [Online]. Available: <http://www.edumarketing.com/Norwich.htm>. (13 Jan 00).

Williams, M.G. (1981). Independent living and older people. Journal of Rehabilitation, 47(4), 69-71.

Wu, K.B. (1998). Sources of Income for older persons in 1995. Public Policy Institute. American Association of Retired Persons. [Online]. Available: <http://research.aarp.org/econ/95income1.html>. (29 Aug 2000).

APPENDIXES

APPENDIX A: AGENCIES SURVEYED

Abilene State School (See TDMHMR)	Adjunct General p.95
Administrative Hearings, State Office of NR*	Aerospace Commission p. 95
Aging, Department on p. i, v, 1, 2, 3, 4, 5, 6, 8, 9, 11, 12, 14, 15, 16, 20, 21, 22, 23, 24, 28, 29, 34, 35, 36, 38, 39, 40, 41, 42, 44, 46, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 68, 69, 71, 72, 77	Agricultural Experiment Station p. 95
Agriculture, Department of p. 95	Aircraft Pooling Board p. 95
Alcohol and Drug Abuse, Commission on p. v, 18, 19, 44, 45, 46, 47, 55, 58, 59, 62, 64, 65, 72, 77	Alcohol Beverage Commission p. 95
Appeals, Court of – Eighth p. 95	Appeals, Court of –Eleventh NR*
Appeals, Court of –Fifth NR*	Appeals, Court of –First p. 95
Appeals, Court of –Fourteenth NR*	Appeals, Court of –Fourth NR*
Appeals, Court of –Ninth p. 95	Appeals, Court of –Second NR*
Appeals, Court of –Seventh NR*	Appeals, Court of –Sixth NR*
Appeals, Court of –Tenth p. 95	Appeals, Court of –Third p. 95
Appeals, Court of –Thirteenth NR*	Appeals, Court of –Twelfth NR*
Appraiser Licensing and Certification Board p. 95	Architectural Examiners, Board of p. 95
Arts, Commission on the p. 95	Athletic Trainers, Advisory Board of p. 95
Attorney General p. v, 56, 59, 64, 65, 69, 71	Auditor p. 95
Austin State Hospital (See TDMHMR)	Automobile Theft Prevention Authority p. 95
Banking, Department of p. 95	Barber Examiners, Board of p. 95
Blind and Visually Impaired, School for the NS*	Blind, Commission for the p. ii, v, 20, 21, 23, 48, 50, 52, 55, 58, 61, 69, 72, 74, 77
Bond Review Board p. 95	Brazos River Authority NR*
Cancer Council p. v, 34, 35, 37, 38, 41, 42, 57, 60	Children's Trust fund of Texas Council p. v, 50, 51, 52, 54, 60
Chiropractic Examiners, Board of p. 95	Comptroller of Public Accounts p. v, 64, 65
Consumer Credit Commissioner, Office of p. v, 64, 65	Cosmetology Commission p. 95
Court Administration, Office of NR*	Court Reporters Certification Board p. 95
Credit Union Department p. 95	Criminal Appeals, Court of p. 95

*NR – No Response

*NS – No Service

APPENDIX A (CONTINUED)

Criminal Justice Policy Council p. 95	Criminal Justice, Department of p. v, 18, 19, 21, 23, 44, 46, 69, 71, 72
Deaf and Hard of Hearing, Commission for the p. v, 18, 19, 55, 57, 58, 61, 68, 77	Deaf, School for the NR*
Dental Examiners, Board of p. 95	Denton State School (See TDMHMR), p.
Developmental Disabilities, Council for p. 95	Dietitians, Board of Examiners of NR*
Early Childhood Intervention, Interagency Council on NS*, p. v, 72, 77	Economic Development, Department of p. v, 57, 60, 64, 65
Education Agency p. v, 19, 19, 72	Educator Certification, State Board for p. 95
Emergency Communications, Commission on State p. v, 57, 60, 70	Employees Retirement System p. v, 23, 26, 31, 32, 70
Engineering Experimentation Station p. 95	Engineering Extension Service p. 95
Engineers, Board of Professional p. 95	Ethics Commission p. 95
Film Commission, Texas p. 95	Finance Commission p. 95
Fire Fighters Pension Commission p. v, 26	Fire Protection, Commission on p. 95
Fitting and Dispensing of Hearing Instruments, Committee of Examiners in the p. 70, 95	Food and Fibers Commission p. 95
Forest Services NR*	Funeral Service Commission p. 71, 95
General Land Office p. vi, 49, 52	General Services Commission p. 95
Governor, Office of the p. v, 71, 95	Governor, Office of the – Commission for Women p. 28, 29
Governor, Office of the – Commission on People with Disabilities p. 95	Governor, Office of the – Multimedia Program NR*
Guaranteed Student Loan Funding Corporation NR*	Health and Human Services Commission p. v, 14, 48, 49, 52, 57, 58, 70, 72, 77
Health Care Information Council p. 95	Health, Department of p. v, 14, 15, 16, 34, 36, 39, 54, 64, 65, 69, 71, 72, 77, 95
Higher Education Coordinating Board p. v, 18, 19, 22, 23	Historical Commission p. 95
House of Representatives NR*	Housing and Community Affairs, Department of p. v, 8, 9, 11, 12, 57, 58, 60, 62, 71
Human Rights, Commission on p. 95	Human Services, Department of p. ii, v, 6, 30, 31, 32, 35, 38, 41, 42, 48, 49, 50, 51, 52, 53, 54, 58, 62, 68, 69, 72, 74, 77, 78
Incentive and Productivity Commission p. 95	Information Resources, Department of p. 95
Insurance, Department of p. v, 56, 57, 59, 60, 64, 65, 69	Jail Standards, Commission on p. 95

*NR – No Response

*NS – No Service

APPENDIX A (CONTINUED)

Judicial Conduct, Commission on NR*	Juvenile Probation Commission p. v, 28, 29, 69, 72
Kerville State Hospital (See TDMHMR)	Land Surveying, Board of Professional p. 96
Law Enforcement Officer Standards and Education, Commission on p. 96	Law Library p. 96
Legislative Budget Board p. 96	Legislative Council p. 96
Legislative Reference Library p. 96	Library and Archives Commission p. v, 18, 19, 71
Licensing and Regulation, Department of p. 95	Lieutenant Governor, Office of the NR*
Lottery Commission p. 95	Lower Colorado River Authority NR*
Marriage and Family Therapist, Board of Examiners of p. 95	Medical Examiners, Board of p. 95
Medical Physicist, Board of Licensure for Professional p. 95	Mental Health and Mental Retardation, Department of p. ii, v, 8, 9, 21, 22, 23, 24, 28, 29, 41, 42, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 57, 58, 59, 60, 61, 62, 64, 65, 68, 69, 72, 74, 77, 89, 90, 91, 92
Mexia State School (See TDMHMR)	Military Facilities Commission p. 96
Natural Resource Conservation Commission p. 96	Nurse Examiners, Board of p. 96
Optometry Board p. 96	Orthotics and Prosthetics, Board of p. 96
Pardons and Paroles, Board of NR*	Pecos River Compact Commissioner for Texas NR*
Pension Review Board p. 96	Perfusionist, Board of Examiners of p. 96
Pharmacy, Board of p. 96	Physical Therapy and Occupational Therapy Examiners, Executive Council of p. 96
Plumbing Examiners, Board p. 96	Podiatric Medical Examiners, Board of p. 96
Polygraph Examiners, Board of p. 96	Private Security, Commission on p. 96
Professional Counselors, Board of Examiners of p. 96	Protective and Regulatory Services, Department of p. v, 48, 49, 50, 52, 53, 68, 69, 71, 72, 77
Psychologist, Board of Examiners of p. 96	Public Accountancy, Texas State Board of p. 70, 96
Public Finance Authority p. 96	Public Insurance Counsel p. v, 64, 65
Public Safety, Department of p. v, 69, 96	Public Utility Commission p. v, 64, 65
Public Utility Council, Office of p. 96	Racing Commission p. 96
Railroad Commission p. 96	Real Estate Commission p. 96
Red River Compact Commission for Texas p. 96	Rehabilitation Commission p. ii, v, 20, 21, 23, 41, 42, 55, 58, 61, 69, 71, 74, 77

*NR – No Response

*NS – No Service

APPENDIX A (CONTINUED)

Rio Grande Compact Commissioners for Texas p.96	Rio Grande State Center for Mental Health and Mental Retardation (See TDMHMR)
Risk Management, State Office of p. 96	Runaway Hotline NR*
Rural Community Affairs, Office of (formerly Rural Health Initiatives, Center for) p. v, 11, 12, 41, 42, 71	Sabine River Compact Commission for Texas p.96
San Antonio State School (See TDMHMR)	Savings and Loan Department p.96
Secretary of State p. v, 64, 65	Securities Board p. v, 64, 65
Sex Offender Treatment, Council on p. v, 45, 47, 69, 71	Social Worker Examiners, Board of p.96
Soil and Water Conservation Board NR*	South Texas Hospital p. 35, 38, 41, 42, 70
Speech-Language Pathology and Audiology, Board of Examiners for p. 96	Spindletop MHMR Services (formerly Beaumont State Center for Human Development) (See TDMHMR)
State Bar of Texas p. 96	State-Federal Relations, Office of p. 96
Structural Pest Control Board p. 96	Sunset Advisory Commission NR*
Supreme Court p.96	Tax Professional Examiners, Board of p. 96
Teacher Retirement System p. v, 26, 70	Telecommunications Infrastructure Fund Board p. 96
Terrell State Hospital (See TDMHMR)	Texas Cooperative Extension (formerly Agricultural Extension Service) p. v, 28, 29, 34, 36, 37
Transportation Institute p. 96	Transportation, Department of p. vi, 15, 16, 70, 71
Trinity River Authority NR*	Veterans Commission p. v, 56, 57, 60
Veterinary Medical Diagnostic Laboratory NS*	Veterinary Medical Examiners, State Board of p. 96
Vocational Nurse Examiners, Board of p. 96	Volunteerism and Community Service, Commission on p. v, 28, 29
Water Development Board NR*	Wildlife Damage Management Service NR*
Worker's Compensation, Research and Oversight Council on p. 96	Workers' Compensation Commission p. 96
Workforce and Economic Competitiveness, Texas Council on p. 97	Workforce Commission p. v, 20, 22, 23, 24, 56, 59, 70
Youth Commission p. v, 28, 29, 72, 77	

*NR – No Response

*NS – No Service

APPENDIX A (CONTINUED)

No longer listed on State Agency Website

Bureau of Economic Geology p. 97	District Courts Comptroller's Judiciary Section p. 97
State Prosecuting Attorney NS*	Texas Animal Health Commission NS*
Texas Center for Infectious Disease p. v, 41, 42, 70	Texas Council on Offenders with Mental Impairments p. ii, 45, 47
Texas Low-Level Radioactive Waste Disposal Authority NR*	Texas State Data Center p. 97
Texas State Occupational Information Coordinating Council NR*	

*NR – No Response

*NS – No Service

**APPENDIX B: AGENCIES PROVIDING LICENSING, REGULATORY,
PLANNING, RESEARCH, OR GRANT/FUNDING SERVICES**

Adjunct General	Aerospace Commission
Agricultural Experiment Station	Agriculture, Department of
Aircraft Pooling Board	Alcohol and Drug Abuse, Commission on
Alcohol Beverage Commission	Appeals, Court of – Eighth
Appeals, Court of – First	Appeals, Court of – Ninth
Appeals, Court of – Tenth	Appeals, Court of – Third
Appraiser Licensing and Certification Board	Architectural Examiners, Board of
Arts, Commission on the	Athletic Trainers, Advisory Board of
Auditor	Automobile Theft Prevention Authority
Banking, Department of	Barber Examiners, Board of
Bond Review Board	Chiropractic Examiners, Board of
Cosmetology Commission	Court Reporters Certification Board
Credit Union Department	Criminal Appeals
Criminal Justice Policy Council	Dental Examiners, Board of
Development Disabilities, Council for	Educator Certification, State Board for
Engineering Experimentation Station	Engineering Extension Service
Engineers, Board of Professional	Ethics Commission
Film Commission, Texas	Finance Commission
Fire Protection, Commission on	Fitting and Dispensing of Hearing Instruments, Committee of Examiners in the
Food and Fibers Commission	Funeral Service Commission
General Services Commission	Governor, Office of the
Governor, Office of the – Commission on People with Disabilities	Health Care Information Council
Health, Department of	Historical Commission
Human Rights, Commission on	Incentive and Productivity Commission
Information Resources, Department of	Jail Standards, Commission on

APPENDIX B (CONTINUED)

Land Surveying, Board of Professionals	Law Enforcement Officer Standards and Education, Commission on
Law Library	Legislative Budget Board
Legislative Council	Legislative Reference Library
Licensing and Regulation, Department of	Lottery Commission
Marriage and Family Therapist, Board of Examiners of	Medical Examiners, Board of
Medical Physicist, Board of Licensure for Professional	Military Facilities Commission
Natural Resource Conservation Commission	Nurse Examiners, Board of
Optometry Board	Orthotics and Prosthetics, Board of
Pension Review Board	Perfusionist, Board of Examiners of
Pharmacy, Board of	Physical Therapy and Occupational Therapy Examiners, Executive Council of
Plumbing Examiners, Board of	Podiatric Medical Examiners, Board of
Polygraph Examiners, Board of	Private Security, Commission on
Professional Counselors, Board of Examiners of	Psychologist, Board of Examiners of
Public Accountancy, Texas State Board of	Public Finance Authority
Public Safety, Department of	Public Utility Council, Office of
Racing Commission	Railroad Commission
Real Estate Commission	Red River Compact Commission for Texas
Rio Grande pact Commission for Texas	Risk Management, State Office of
Rural Community Affairs, Office of (formerly Rural Health Initiatives)	Sabine River Compact Commission for Texas
Savings and Loan Department	Social Worker Examiners, Board of
Speech-Language Pathology and Audiology, Board of Examiners for	State Bar of Texas
State-Federal Relations, Office of	Structural Pest Control Board
Supreme Court	Tax Professional Examiners, Board of
Telecommunications Infrastructure Fund Board	Transportation Institute
Veterinary Medical Examiners, State Board of	Vocational Nurse Examiners, Board of
Worker's Compensation, Research and Oversight Council on	Worker's Compensation Commission

APPENDIX B (CONTINUED)

Workforce Economic Competitiveness, Texas Council on	Bureau of Economic Geology
District Courts Comptroller's Judiciary Section	Texas State Data Center

APPENDIX C: SURVEY INSTRUMENT

SERVICES AND PROGRAMS FOR OLDER TEXANS INTERAGENCY INVENTORY

AGENCY _____ PERSON COMPLETING SURVEY _____ POSITION/TITLE _____ PHONE _____

PART 1: SERVICES AND GAPS

1A. Please list all the services or programs your agency provides that an older person may participate in or receive in the first column. Services or programs listed do not have to be specifically tailored to meet the needs of older persons, rather they may be programs or services for the general populations such as licensure, disseminating information, family services, etc. For each service or program, work across the row and place an **X** in all the boxes that apply. If more services/programs need to be listed, please copy this section, or use an additional sheet of paper. **(NOTE: If your agency does not provide any services or programs that an older person may access, please write "N/A" at the top of this page. Please include your agency name, the name of the person completing the survey, their position/title, and their phone number, and return only this page to TDOA.)**

1	2	3	4	5	6
Service or Program	Service or Program is designed for the general population (all age groups)	Service or Program is not aging-specific, but older persons receive special outreach.	Service or Program is designed for, or specifically targets older persons (age 60+ yrs.)	Service or Program is unavailable in certain regions or counties	In counties/regions where the service is available, the quantity or level of service or program is insufficient
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: "Services and Programs for Older Texans" means: any program, service, benefits or protection either targeted or available to people 60 years or older, and funded by the state of Texas, with state or federal dollars.

1B. If any services/programs listed above are unavailable in certain regions or counties, (checked in column 5), please list the service/program again below and indicate the specific regions or counties where the service/program is needed.

Service/Program:

Needed In (region/counties):

1C. Please describe any gaps in any *other* services or programs (not described in 1A or 1B above) that your agency has identified.

PART 2: OPPORTUNITIES FOR COORDINATION

2A. If your agency provides services/programs that are similar to those of any other agency or organization in Texas, please complete this entire section. Also include any agency(ies)/organization(s) you might have an opportunity to coordinate with for purposes of reducing duplication in services or increasing service availability. **(NOTE: If your agency is reporting more than one services/program in this section, please copy this section or use an additional sheet of paper.)**

Our service/program _____ or something very similar to it is also provided by (agency/organization) _____.

2B. Regarding this service/program and the other agency, please check the statement below that best applies.

- _____ We are in the process of engaging in coordination activities with the agency(ies)/organization(s) listed in 2A.
- _____ Coordination activity for this program/service is being planned with the agency(ies)/organization(s) listed in 2A.
- _____ Coordination activity for this service/program is currently in place between the agency(ies)/organization(s) listed in 2A.
- _____ Coordination activity between the agency(ies)/organization(s) listed is not applicable at this time.

(Please explain why): _____

2C. If you checked any of the first three statements listed in 2B, please:

Describe the coordination activity: _____

Describe the desired outcome of the coordination activity: _____