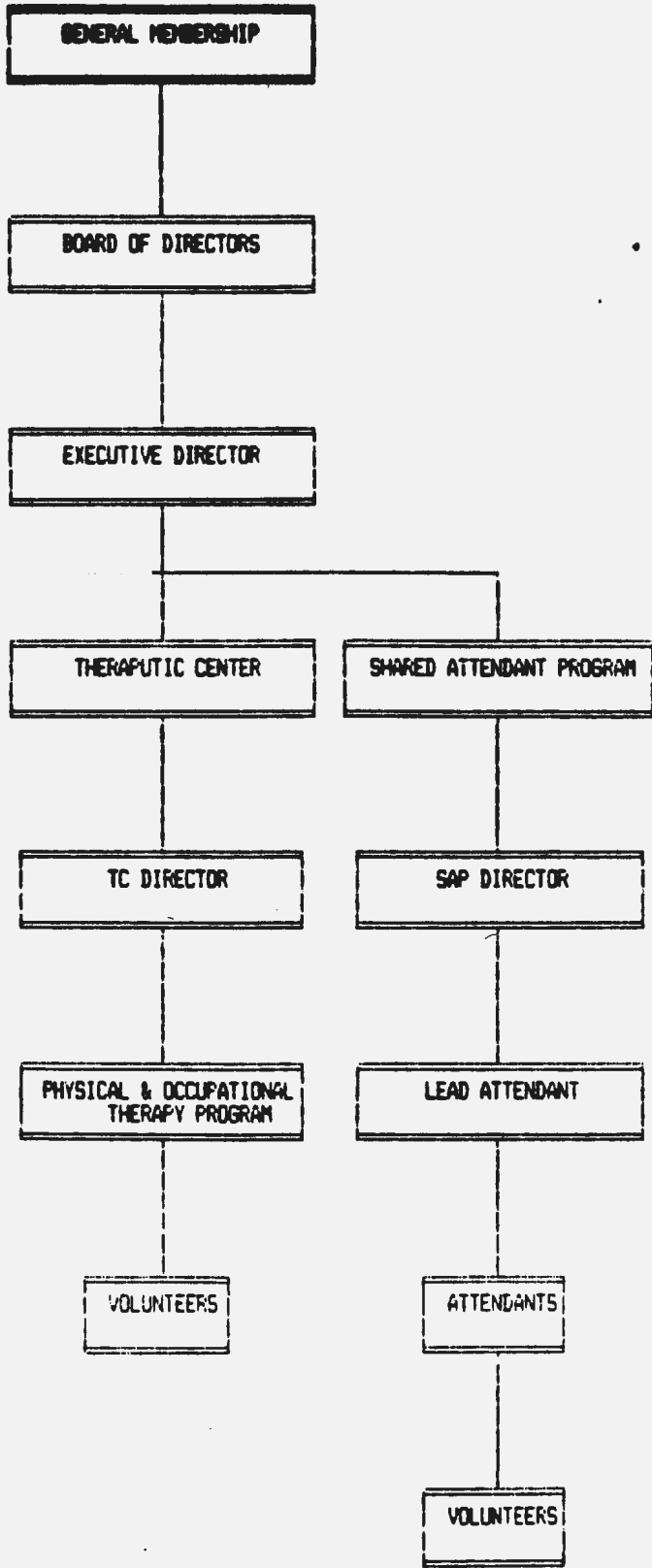


HISTORY

Arlington Handicapped Association was founded by a group of physically disabled individuals and continues to be consumer oriented. The agency as a whole and the Therapeutic center for Mobility Impaired Adults (TCMIA) are beginning their eleventh year of operation. The Independent Living Program (Provence Center for Independent Living) has just begun it's eighth year of operation. The PT-OT Program is into it's third year of full service PT-OT.

The history of this Agency shows a need for growth and expansion. Since its inception, the agency has served the following clients in the following ways:

- 34 Clients have had 24 hour attendant care provided through the Shared Attendant Program.
- 74 Clients have received "hands on" services through the TCMIA.
- 28 Clients have received PT-OT in the last year.
- 45 Disabled individuals have been assisted with accessible housing and or attendant care. (Does not include clients who are on or who have been assisted after leaving AHA's SAP)
- 120 Disabled individuals are served on a monthly basis in the areas of information, referral, employment, and advocacy. This is either by phone or "walk-ins" and does not include regular agency clients who may be assisted in this area.
- 30 On waiting list for the SAP who cannot be served due to current limitations.
- 12 Clients per year not accepted for the TCMIA due to limitations, such as staffing, funding, and space.



The Arlington Handicapped Association is a non-profit organization whose major purpose is to define, develop, and implement needs of the handicapped of Arlington and surrounding areas.

Two major programs that are sponsored by A.H.A. are the Therapeutic Center for Mobility Impaired Adults and the Shared Attendant Program. Both of these services provide a welcome alternative to the isolation often experienced by those with a handicap. The agency also offers information and referral and advocacy assistance to all disabled citizens.

LOCATION

Arlington Handicapped Association
600 New York Avenue (City Multi-purpose Bldg.)
Arlington, Texas 76010
460-6691

Hours of Operation
9 a.m. to 4 p.m.
Monday thru Friday

Profile - Shared Attendant Program (SAP)

A.H.A.'s SAP program serves as an intermediate care facility which assists disabled individuals in making the transition from family or institutional care to independence.

This program receives part of it's funding from the Texas Department of Human Services. A.H.A. provides attendant care on a "shared basis" in accordance with scheduled times. There is an attendant on duty or on call 24 hours a day.

This program is available for clients meeting a certain criteria. The person must be a TDHS client and enrolled in vocational training, college or working. They must be motivated towards independence. Admission is determined by joint agreement between A.H.A. and TDHS, and on availability of accessible apartments. There is no charge for attendant care.

Clients live in their own apartments and are responsible for all their material needs and financial debts.

The Agency is contracted with Texas Department of Human Services to provide service to 12 clients.

Profile - Therapeutic Center For Mobility Impaired Adults (TCMIA)

A.H.A.'s Therapeutic Center offers a multi-faceted area of specialized service delivery. This Center offers it's services to clients on a sliding scale fee basis.

This program is available on Monday, Tuesday, Thursday, and Friday from 9 a.m. to 3 p.m.

The Center offers individual Physical Therapy with a licensed Physical Therapist Assistant on staff, and Physical Therapy Evaluation from Easter Seals. Easter Seals also provides the Center with an Occupational Therapist, on a weekly basis. The Center provides a variety of expressive therapies, such as: art, music, and cooking activities and instruction. It also offers: health maintenance and self care instruction, sign language and communication skills, recreation and socialization opportunities, field trips, and self advocacy skills.

The Center stresses independent living skills so that our clients can regain their lost self-confidence and esteem and function positively within our mobile society. Through regular client meeting, the clients have an active voice in planning activities and identifying needs. We also give clients much needed redevelopment in social skills and peer support. Each Center activity has a sound basis and purpose to build on.

The Therapeutic Center currently has 20 clients with some coming to the Center regularly and others sporadically.

Profile - Information and Referral and Advocacy

A.H.A. provides individual and systems advocacy to the entire disabled community, on a regular basis. The Agency averages approximately 120 calls for assistance per month.

The staff is dedicated, in spite of limited time available, to research individual areas of need as calls for assistance are received. This is a priority area that must be expanded through staffing and funds to more adequately meet the needs.

A.H.A. maintains an active role in advocating for the handicapped and their needs on a local, state, and national level.

Client Profile

The vast majority of our clients were once capable, productive, and self sufficient citizens, who were struck down by illness or accidents. Presently our clients disabilities range from car wrecks, diving or sports related accidents, work related accidents, stroke victims, Cerebral Palsy, and forms of Muscular Dystrophy.

Our clients are very growth oriented citizens who, inspite of their major setbacks, want to return to society to be, once again productive citizens. They strive to learn new ways to accomplish, once simple, feats. Their goal is to become as self sufficient and independent as their individual disability allows.

Our clients come from a variety of socio-economic and ethnic groups. Despite their many differences in background and disabilities, their loyalty and peer support for one another is strong. Current age ranges are 18 to 76 years.

Staff Profile -

A.H.A. currently employs six (6) staff persons in office: Executive Director; Secretary; Therapeutic Center Director; Registered Physical Therapist Assistant; and a Director of the Shared Attendant Program and Lead Attendant-SAP.

A.H.A. employs nine (9) attendants for the Shared Attendant Program, giving clients 24 hour care.

The Agency also has a volunteer coordinator who donates his time in the office, 4 days a week.

Volunteer Profile -

A.H.A.'s Therapeutic Center has twenty (20) active volunteers and a volunteer coordinator. At least eight (8) of these volunteers offer their services and talents on an average of one (1) day a week. They are wonderful at helping with daily activities, such as, arts and crafts, independent living skills, therapeutic games, and special events. Their ability to interact, personally, with the clients is heart warming. The staff, clients, and volunteers maintain a positive relationship portraying the image of a large, happy family.

Other volunteers assist on an irregular basis. These volunteers assist with special events, transportation, sewing for the clients, giving free haircuts, and many times assist with personal client advocacy issues. One volunteer is an area artist and comes weekly to teach oil painting. A Mary Kay Cosmetic representative donates her time monthly to teach and assist clients on skin and beauty care. Many area professionals donate their time on occasion to give programs of special interest. A.H.A. also has many volunteers on call, for help with emergency transportation needs for clients.

A.H.A. receives the majority of it's volunteers from the Volunteer Center. Teen Court also furnishes volunteers, on occasion, when area teens need to assist with a community service. All volunteer hours are logged and reported to the Volunteer Center monthly.

Our Volunteer Program is strong, our volunteers find their time spent at A.H.A. enjoyable and beneficial. This fact is reflected in the length of individual volunteer service. Many of our volunteers have been assisting A.H.A. for as long as 10 years.

AHA Philosophy

We believe that people have the right to fully participate in society as free and equal members, and to live independent and active lives to the best of their ability.

To this end:

We believe that the purpose of this agency is to address the needs to the best of our ability and resources.

We believe that a positive environment is important to encourage the development of human potential and to ensure the dignity of all.

We believe that rehabilitation through appropriate therapies is necessary for the well being of handicapped individuals regardless of ability to pay.

We believe that the well being of an individual is dependent on their optimum physical health, their environment, their social milieu, and their family unit as a whole.

We believe that advocacy is necessary to ensure the rights of all individuals including access to support services, transportation, and basic necessities of life.

1987

ARLINGTON HANDICAPPED ASSOCIATION



P.O. BOX 3753
600 New York Ave.

ARLINGTON, TX 76010

(817) 460-6691

PRESIDENT

Jim Doyle

VICE-PRESIDENT

Lavella Moore

TREASURER

Richard Gumtau

SECRETARY

Shirley McCracken

BOARD OF DIRECTORS

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Dr. Parker

Karen Leever

Bill Little

Jean Smaistria

Christean Whitaker

The reason that Arlington Handicapped Association is not a United Way Agency.

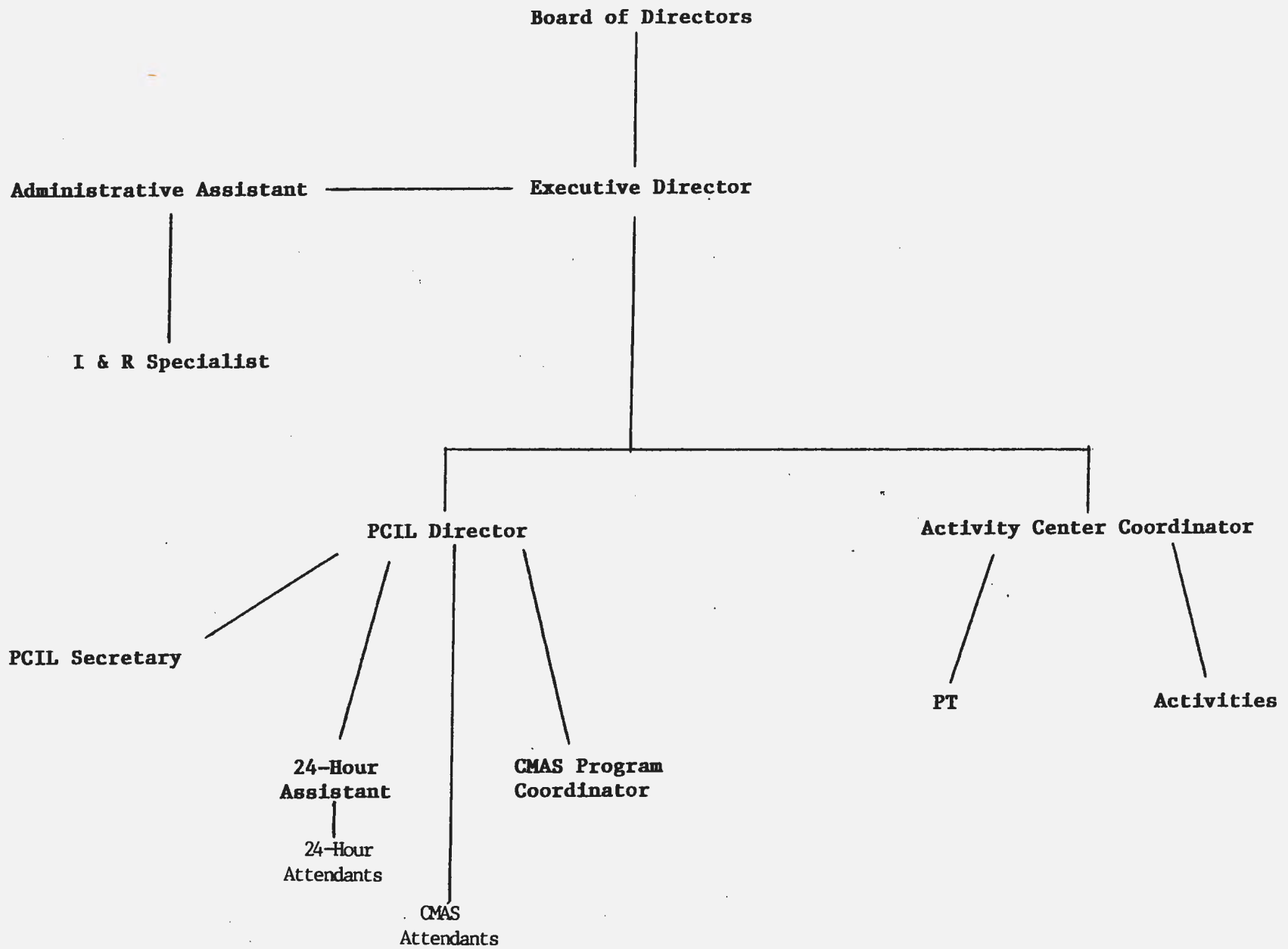
In 1980 the A.H.A. Board of Directors felt that if A.H.A. were to become a United Way Agency it might lose some control over its service delivery process.

Since its conception A.H.A. has provided services based upon input from the disabled community.

Arlington Handicapped Association feels that the recipients of services are the best group to determine if the services provided are adequate, need to be refocused or expanded.

This system of service provision does not fit into the United Way approach to allocation of services or funding.

If at some future date the United Way allows for our type of approach A.H.A. would be open to the possibility of integrating into the United Way.





Handicapped Resource Association

HISTORY OF HANDICAPPED RESOURCE ASSOCIATION

Handicapped Resource Association, Inc. was incorporated in 1977 as Arlington Handicapped Association, Inc. Sam Provence and a group of friends were the founders. The name changed when services were offered in the broader metroplex area.

HRA is unique in Texas. It is the only free standing non-profit Personal Care organization that gives all its emphasis to Personal Care and other non-medical services to adults with disabilities.

Over the years HRA has provided:

----attendants on a shared basis, allowing individuals to complete programs of rehabilitation, training and college education.

----an Independent Living Center, which provided recreation, physical therapy, occupational therapy, speech therapy, referral services and counseling to adults who were mobile.

----since 1980, Personal Care has been provided to almost 1000 adults with disabilities.

----guidance to the development of the Arlington Mayor's Committee on Disability.

----operated a transportation service for disabled Community College students.

----consultation about implementation of the Americans with Disabilities Act at the local, state and national levels.

----a centralized resource for information about services for the disabled.

----consultation to many state and local organizations about the needs of adults with disabilities and Personal Attendant programming.

----collaborated on the development of transportation for the handicapped in Arlington and participated in program development in Dallas and Tarrant Counties.



Handicapped Resource Association

Profile - Handicapped Resource Association - HRA

The Handicapped Resource Association (HRA), formerly the Arlington Handicapped Association, is a private non-profit organization founded with the intent to promote independence and self-reliance for the members of the handicapped community.

HRA was formed in 1976 by a small group of handicapped individuals. They met once a week in their homes and began working with the city government, University of Texas at Arlington (UTA) and local, state and national organization to ascertain and address the needs of the handicapped.

In the first nine years, HRA was instrumental in forming Arlington's trend-setting policies on accessibility. The city started a para-transit service even though no public transportation exists, built a barrier-free multi-purpose facility which now houses HRA, built a multi-million dollar barrier-free park and enacted numerous city ordinances aimed at reducing physical barriers. UTA has become one of the most accessible campuses in the United States and the most accessible in the tri-state area.

HRA was able to begin and expand service delivery as funding was made available. The programs incorporated were the Day Enrichment Center (DEC), Physical Therapy and Occupational Therapy (PT/OT) and the Shared Attendant Program (SAP), as well as information and referral, advocacy, peer counseling, public education, independent living skills training and wheelchair sports.

Funding for SAP was through the Texas Department of Human Services (TDHS). HRA and DEC received funding for three years from the Ken Davis Foundation, a matching fund grant from the Community Trust, two small grants from Texas Rehabilitation Commission (TRC), private donations, dues and fund raisers.

HRA has expanded and enhanced services since 1986. Funds for a full-time PT/OT project were received through Community Development Block Grant (CDBG) allowing clients access to daily PT/OT. DEC's name was changed to the Therapeutic Center for Mobility Impaired Adults (TCMIA). This new name better reflects the actual programming. SAP's name was changed to the Provence Center for Independent Living (PCIL) in honor of the founder of HRA. The Agency recently changed it's name from Arlington Handicapped Association to the Handicapped Resource Association to clarify the associations expansion of service area and programming.

HRA has organized and sponsored workshops regarding various handicapped issues. The Agency has worked with professional groups, such as Volunteers for Medical Engineers in Texas (VMET) and Uplift, for developing advanced individualized adaptive equipment, and JBK Development Corporation to develop an accessible apartment complex. The staff and clients have testified and participated in human rights rallies, DHS and congressional committee hearings.

HRA was selected by Arlington Cares in early 1988 to be the recipient of their annual fund raising monies. The PT/OT program and PCIL continue to be partially funded by government awards.

Small donations of money and items are made by various organizations such as: Delta Airlines; Fox Electric; Kiwanis; United Federal Campaign; Knights of Columbus; local churches. A small portion of the yearly budget continues to come from private donations, fund raisers and dues.

HRA has always been an equal opportunity employer. 100% of the Agency's executive and office staff is comprised of ethnic minorities, females and handicapped individuals. The combined accrued experience of the present agency staff is: eight years in governmental contract management; thirty years working with the disabled population; forty years of community education; ten years supervisory experience.

Since it's inception, HRA has been a consumer organization. The general membership is comprised of handicapped individuals and their families, community advocates, representatives of organizations and interested individuals. The membership directs the Board of Directors through voting privileges and regularly scheduled meetings. The board is comprised of individuals from the community, civic organizations, business leaders and advocates for the handicapped population. The board directs the policy and management of the association.

HRA is a multi-faceted organization that provides a welcome alternative to the isolation often experienced by those with a handicap.

Information and referral is provided to anyone requesting the service on a local state, and national level through phone calls, written correspondence, walk-ins and publications. This includes but is not limited to: social services and organizations; education; housing; transportation; personal care attendants; medical facilities and care; travel and lodging; equipment; employment; adaption and modification; governmental and regulatory issues; counseling; accessibility of facilities and events; sitters for handicapped children; parenting for the handicapped; publications; workshops; emergency services; sports and recreation; immigration services; insurance; volunteers; handicapped parking. HRA receives approximately 120 information and referral calls a month requesting various types of assistance.

Peer counseling is provided by matching a person with someone who has the same disability to discuss areas of concerns and find solutions to individual problems.

TCMIA, PCIL and PT/OT combine to facilitate independent living skills on an ongoing basis. This includes but is not limited to: attendant training and management; cooking and housekeeping skills; self-care information; health maintenance; money management; home safety; rape crisis and prevention; crime and fire prevention; adaptive equipment.

HRA plays an important role in advocacy by encouraging handicapped individuals to become self-advocates. Individuals and groups are informed of changes in government regulations, proper procedures in advocacy, organizational skills and names of groups or individuals to contact for specific issues. We also assist in voter registration.

On a limited basis, HRA provides ongoing training for personal care attendants that exceeds the state minimum standards and is more extensive than certified nurse's aide training.

The three in-house, hands-on programs currently made available through HRA are:

PHYSICAL THERAPY/OCCUPATIONAL THERAPY (PT/OT)

PT/OT assists disabled individuals in achieving their optimum level of independence. These PT/OT services are provided by HRA after completion of formal rehabilitation. This program includes ILS, provides adaptive equipment, wheelchair maintenance and assessing home structural modifications.

PROVENCE CENTER FOR INDEPENDENT LIVING (PCIL)

PCIL is an intermediate care facility which assists disabled individuals in making the transition from family or institutional care to independence. PCIL provides personal attendant care to clients seven days a week. Clients live in their own apartments and are responsible for their own material needs and financial debts.

Limitations in funding set the criteria that clients on the PCIL program must be in college, vocational training or employed and be self-motivated towards independence.

THERAPEUTIC CENTER FOR MOBILITY IMPAIRED ADULTS (TCMIA)

TCMIA provides multi-faceted areas of specialized services including but not limited to: arts and crafts; music; independent living skills; health-maintenance and self-care; communication skills; self-advocacy skills; socialization opportunities; community interaction, and recreational activities.

TCMIA specializes in services for mobility impaired adults as this is an area of great need. A wide range of conditions restrict mobility from visual impairment to spinal cord injuries. While other agencies in Tarrant County, state and nationwide may offer similar services, most are restricted by age, disabilities, finances, accessibility or locale. TCMIA provides services to individuals who would otherwise fall outside of these guidelines. Through TCMIA, these individuals are reintroduced into the mainstream of productive society with a more positive self-image and a strong bond between themselves and other consumers with the common problem of mobility impairment.

TCMIA is a uniquely designed component of HRA that serves a multiplicity of disabilities. TCMIA is reluctant to pursue funding through government agencies or service organizations which might possibly restrict the type of people served and the quality, variety or length of services provided.

A recent Executive Director and past President of Coalition of Texans with Disabilities stated that HRA is unique and that it is the only agency in Texas that provides these services and that the Independent Living Program is the only true independent living program in the state.

A sound financial base will enable HRA to continue to be a productive, stable and expanding organization promoting independence and self-reliance in the handicapped community.

MISSION AND PROGRAMS OF HANDICAPPED RESOURCE ASSOCIATION

The mission of HRA is to educate, advocate, enrich and empower adults with disabilities.

HRA programs all are generated by this mission.

Programs priorities of HRA for 1995-1996 are:

Increase the number of Personal Care consumers.

Provide services to support upward mobility for adults with disability.

Professionalize the role of the Personal Care Assistant.

Provide a clearinghouse for disability resources, issues and activities.

Support qualified individuals or groups for short term projects that benefit the disabled.

Partner with the Community through informational programs and volunteer involvement.

Handicapped Resource Association focuses its efforts on providing cost-effective Personal Care at the highest attainable quality.

The primary priority of increasing the number of consumers of Personal Care is being carried by developing programs that are responsive to identified need. Through collaborative ventures with organizations like the Area Agency on Aging and the Texas Rehabilitation Commission, we are finding ways to expand our offerings.

The most daring, and yet appropriate venture, is to develop programs that respond to individuals and their families who do not meet existing program constraints. They are in need of Personal Care but do not qualify for subsidy and cannot afford Private Duty Care. We are piloting a service with a minimum set of 24 hours per week at \$10.50 per hour to evaluate the criteria for service, costs associated with the service and effectiveness of the approach.

Who are the clients of HRA?

In any month, HRA average 75 to 80 clients receiving subsidized services. As of July 1995, there are 215 on the waiting list with an average wait of twelve months.

Obviously, there is no typical client. Services must be tailored to each person. However, statistically, clients can be grouped:

46% are between 18 and 55.

54% are over 56.

40% have multiple disabilities.

The client receiving subsidized services has an average monthly income of \$749.00.

30% are victims of spinal cord injuries.

14% have had a cardiovascular accident.

12% are disabled by diabetes.

10 percent suffer from multiple sclerosis. Others have conditions such as disabling amputations, muscular dystrophy, chronic fracture syndrome, cancers, tumors and emphysema.

Handicapped Resource Association Needs, prioritized.

Automation. HRA is negotiating based on three bids for the best arrangement of equipment, training and maintenance for an interactive system for the agency.

Automation is key to cost-effective functioning that underpins the growth of services. With automation, personnel costs can be cut by about one-third; turn-around time on contracted fee collection can be cut by one-fourth.

The provision of a Clearinghouse for disability resources is totally dependent on automation. Fugitive materials, literature housed in libraries, research findings and other hard and soft bound materials are unusable without codification. Similarly, current status on services available in the metroplex cannot be maintained without automation.

The Executive Service Corps of Tarrant County made a thorough analysis and recommendation earlier this year. Based on their projections, a Lantastic network system linking eight work stations loaded with Word Perfect Office and accompanied by two printers should handle our needs up to double our current size.

The components can be gathered through individual gifts or through a major donation of \$20,000.

A workstation equates to a gift of \$2300.

A printer, 24-pin is \$260.

A printer, Laser, is \$450.

A 486 Computer system with needed memory and modem is 1300.

Seven used 486 Computer systems with needed memory and modem can be obtained for \$6300.

Installation is \$1500.

ARLINGTON HANDICAPPED ASSOCIATION

600 NEW YORK AVE.

ARLINGTON, TX 76010

(817) 460-6691



September 19, 1988

Dear Associates,

The general membership and Board of Directors have voted to change the name of this agency. The Arlington Handicapped Association will now be known as the HANDICAPPED RESOURCE ASSOCIATION. This change has been approved and placed on record with the Secretary of State's office.

The current executive staff includes:

Pamela T. Moorman, Executive Director (817) 460-6691

Glenda N. Mims, Director, Provence Center for Independent Living
(PCIL) (817) 275-3369

Melinda Miller, Director, Therapeutic Center for Mobility Impaired
Adults (TCMIA) (817) 274-0210

Sherry Willard, Licensed Physical Therapist Assistant (817) 460-6691

We look forward to our continued association with your organization.

Sincerely,

Pamela T. Moorman

Pamela T. Moorman
Executive Director
Handicapped Resource Association

This is how Personal Care arrangements are made:

The client is referred or contacts HRA directly. Screening is done to determine if medical care is needed and to assess the method of payment. HRA does not file for insurance. Services are provided under contract, with monthly billing and payment. If subsidization of the service is needed, the client may have to go on a waiting list for as long as twelve months.

HRA does not provide medical services. With physicians orders, we can carry out the same tasks that a loving relative could do (for example, help with toileting programs and limited oral and topical medicating) . If medical services are needed we look to professionals whom the client procures separately.

HRA visits the potential client at home and assess the person's needs. Specific tasks are spelled out with associated time needed to carry them out. Some tasks require a physician's orders.

After clients have selected their Personal Care Assistant (PCA) the new employee goes on HRA payroll. The client begins coaching about how tasks are to be done and sets up a work schedule. The Personal Care Assistant records his work tasks daily. Daily supervision and direction comes from the client.

Once the Personal Assistant is in place, HRA visits again after thirty days to help evaluate how the service is going. Every six months thereafter, we visit to re-assess the needs and evaluate the service with the client. If there is a change in needs or a new Personal Assistant, we stay in contact until we are sure proper care is being given, maintaining a six-month re-assessment schedule as well.

HRA recruits Assistants, provides orientation and training to them, manages their payroll and payment of Federal taxes, Social Security, Medicare and unemployment insurance. We monitor regularly for quality of our services and changes in the disabled persons needs.

HRA provides 24 hour Beeper accessability and back-up attendants.

hraserv.
6/95

What is the unmet need for Personal Care Assistance?

I. The statistics:

At this point, no definitive work has been done to estimate the need for Personal Care Assistance.

We know that on average more than half (54%) of HRA's services go to adults over 56 years of age.

We know that the Arlington population over 56 is expected to increase by 38% by the year 2000.

II. The funding:

We know that supports for human services from the Federal level are eroding. Relatedly, the need and cost for long-term residential care rises with every shift in public and private support. We also know that private insurance to cover home care is out of the reach of most Texans.

We know that the financing of care favors non-institutional services:

---- on average in 1994, the least expensive shared-room in a nursing home exceeded \$1,450 in monthly costs. (\$17,400 yearly)

----- HRA can provide 24 hours per week of Personal Care for \$1040 per month (\$12,480 yearly).

-----for every ten adults we can care for in their homes, families (or the taxpayer) are saving over \$49,000 per year in comparison to institutional residential care.

III. The HRA approach:

We know that most adults can manage their own Personal Care, directing their activities and determining schedules, living a full and independent life at home in familiar surroundings.

We know (but cannot quantify) that the economic impact of Personal Care is broader than keeping people out of institutional care.

----- Family caregivers can continue employment, knowing that their loved one is in good hands. We believe that families want to care for their loved ones and would, if they had help they could afford.

-----Savings which could improve quality of life for a disabled adult are "spent down" paying for home care with only an institution waiting when the funds are gone.

-----By bringing in a part-time realistically priced helper, many families can work out care schedules and cost sharing that respect the dignity and budgets for all involved.

-----After a major illness or accident which results in insurance coverage for help at home for a time, there are few options when days of coverage run out. The therapists stop coming and most families earn too much to qualify for subsidized care and can't afford Private Duty care.

Many people who are disabled recover from a major illness to find that they are faced with difficulty in getting the basics of life: a clean house and body, regular meals, recreation and proper physical activity..and the right to plan and manage their own lives. These are the basics HRA addresses.

By combining a belief in autonomy and independence with eighteen years of cost-effective non-profit experience, HRA can provide Personal Services for less cost than for-profit or institutional care.

-----compared to Personal Care provided by agencies operating for-profit or to institutional care, the services are almost \$5000 per year cheaper.

After eighteen years of service, HRA knows how to provide care to adults with disabilities. Licensed by the Texas State Department of Health to provide Personal Attendant Services, HRA is piloting a new program:

Personal Assistant Continuing Training (PACT). Historically, Personal Care has been given by a person earning a wage barely above the minimum required by law. Training and career opportunities were minimal. Benefits like health and life insurance did not exist.

Quality care is often provided, but cannot be assured under such circumstances. So, HRA is stepping forward to professionalize the role of the Personal Care Assistant (PCA) at HRA. This means that we are working to develop:

- an organized body of knowledge which can be shared
- a code of ethics to which the PCA subscribes
- a commitment to on-going devevelopment of knowledge and growth of the individual in his/her field.

This translates to a curriculum of required training. If a PCA is to be certified at expertise related levels, participation in quarterly training is necessary. Along with the Personal Caretraining is required CPR and First Aid Training.

At each level of certification by HRA, there are planned increases in wage and benefits.

An advisory group comprised of clients, PCA's staff and professionals in related fields are guiding the development of the curriculum.

The program is to be announced and go into effect in early September, 1995.

Fact sheet about services of Handicapped Resource Association.

HRA has provided services to adults with disabilities for eighteen years, maintaining a home base in Arlington. Currently, services are provided under one large State of Texas contract in both Tarrant and Dallas Counties. Other services are concentrated in Arlington.

The service provided is Personal Care.

The person providing the service is a PCA (Personal Care Assistant).

There are several different programs and the name of the service may vary with each program:

Client Managed Personal Attendant Service

Personal Assistant Service

Personal Care Assistant

Nonetheless, Personal Care is the generic term. Costs for care may be subsidized through State and Federal funds. In some cases the service can be paid for in full or part by the client.

The people who receive services are called clients or consumers.

The office staff is called Support Staff.

Personal care includes:

help with bathing, dressing, grooming, routine hair/skin care, exercise, feeding, toileting, transfer, ambulation, cleaning laundry, meal preparation, escort, shopping, assistance with medications and limited special tasks upon doctor's orders.

hraserv.