The study was undertaken to develop guidelines for the establishment of living centers for mentally handicapped adults. Findings from a questionnaire sent to about 75 facilities across the country are presented (legal form of operation, location, bed capacity, waiting list, admission restrictions, coeducational or one sex only, financial support, and fees). Thirteen residential facilities for the mentally handicapped were visited, and four facilities located in Arizona are described in detail. Special attention is paid to setting, staff, program, attitude of residents, and methods of buying, preparing, and serving food. Questionnaires used and line graphs are included, as are guidelines for establishing programs and services for the mentally handicapped. (KW)
SMALL LIVING CENTERS FOR ADULT RETARDATES

ARIZONA STATE DEPARTMENT OF HEALTH
A STUDY OF RESIDENTIAL CENTERS
FOR MENTALLY RETARDED ADULTS

Final Report - July 1969

Director: T. K. "Ted" Taylor
Co-Director: Kenneth S. Sides
Consultants: Christina Wrather and Thomas R. Rossettie

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Arizona State Department of Health
Division of Mental Retardation
1624 W. Adams Street
Phoenix, Arizona 85007

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Problem</td>
<td>2</td>
</tr>
<tr>
<td>Procedures</td>
<td>2</td>
</tr>
<tr>
<td>Findings</td>
<td>3</td>
</tr>
<tr>
<td>Legal Form of Facility Operation</td>
<td>4</td>
</tr>
<tr>
<td>Facility Location</td>
<td>4</td>
</tr>
<tr>
<td>Bed Capacities</td>
<td>5</td>
</tr>
<tr>
<td>Waiting List</td>
<td>5</td>
</tr>
<tr>
<td>Admission Restrictions</td>
<td>5</td>
</tr>
<tr>
<td>Coeducational</td>
<td>6</td>
</tr>
<tr>
<td>Financial Support</td>
<td>6</td>
</tr>
<tr>
<td>Monthly Fees</td>
<td>6</td>
</tr>
<tr>
<td>Arizona Facilities Visited</td>
<td>6</td>
</tr>
<tr>
<td>A New Concept in Physical Plant Design</td>
<td>16</td>
</tr>
<tr>
<td>Guidelines for Establishing Programs and Services for the Mentally Retarded</td>
<td>17</td>
</tr>
<tr>
<td>Exhibits: 1. Questionnaire</td>
<td>18</td>
</tr>
<tr>
<td>2. Letter Requesting Information</td>
<td>21</td>
</tr>
<tr>
<td>3. Legal Form of Facility Operation</td>
<td>22</td>
</tr>
<tr>
<td>4. Location of Facility</td>
<td>23</td>
</tr>
<tr>
<td>5. Bed Capacity</td>
<td>24</td>
</tr>
<tr>
<td>6. Waiting List</td>
<td>25</td>
</tr>
<tr>
<td>7. Admission Restrictions</td>
<td>26</td>
</tr>
<tr>
<td>8. Coeducational</td>
<td>27</td>
</tr>
<tr>
<td>9. Financial Support</td>
<td>28</td>
</tr>
<tr>
<td>10. Monthly Fees</td>
<td>29</td>
</tr>
<tr>
<td>11. A New Concept in Physical Plant Design</td>
<td>30</td>
</tr>
<tr>
<td>Guidelines for Establishing Programs and Services for the Mentally Retarded</td>
<td>31</td>
</tr>
<tr>
<td>Acknowledgments</td>
<td>36</td>
</tr>
</tbody>
</table>
INTRODUCTION

The state of our present knowledge in the field of Mental Retardation leaves many questions of the most practical and basic nature which are as yet unexplored and therefore unresolved. Among the most pressing questions requiring our attention is that concerning what constitutes appropriate residential care for the adult retardate. This problem is particularly vexing as it relates to that large group of individuals whom we know can be productive and, at least, partially self-supporting. The question remains as to what type of programs and residential settings they require so as to maximize their potential for participation in our "open" society at the highest possible level. It is readily apparent to those who seriously address themselves to these questions that there is not, as many would like to believe, a single and simple answer. This study, if it has done nothing else, demonstrates that there are an almost infinite number of acceptable approaches to the resolution of the problems inherent in our questions. Total care facilities, such as state institutions for the retarded, are conceded not to be the most appropriate placement.

Developing a viable program for the retardates who might participate in our society is not just one of meeting their needs but it also must be one realistically attuned to society itself. In attempting to arrive at appropriate answers to the questions we raise, we should do it, among other considerations, in the context of the economic circumstances of the particular area with which we are dealing. In view of this, the authors of this report take the liberty of providing some data relating to the State of Arizona.

Arizona is a relatively young State, having been admitted to the Union in 1912. In addition to this - and far more significantly - only 15.68% of Arizona's land is in private ownership. The balance of Arizona's land is held as follows: Indian lands 27.03%, Federal 44.68% and 12.61% State owned. When one thoughtfully considers that only 15.68% of the land in Arizona is available as a tax base of real property for supporting all State services one must concede the need for most meticulous documented support of any proposed program. Even though this be true, and despite the fact that programs for the retarded are often long term and expensive it seems that, even in Arizona, well designed and well executed programs for retardates can be proven to be feasible when considered in the light of alternatives. It is against this background that this study was undertaken to develop guidelines for the establishment of living centers for retardates.

The possibility of these individuals being appropriately served by mini-versions of our present large traditional State institutions has not been viewed worthy of serious consideration.
Problem:

We have not undertaken this study with the question as to whether or not large numbers of retardates can be brought out, or kept out, of traditional institutions as it is our basic premise that it can be done. Our real concern is to determine so far as possible what steps can be taken which will maximize their chances for success.

In seeking solutions to the problems which are raised by our questions it should be borne in mind that the basic problem of the potentially independent or semi-independent retardate is not primarily a question of his ability to work and to hold a job. The real question is what kind of a place does he need in which to live. It must be a facility that provides for each individual that degree and kind of support which he must have to meet the social and cultural demands of his environment. Real success is apparent as the required support can be progressively diminished until the individual has reached his full inherent potential.

The thrust of this study is aimed toward the goal of enhancing the dignity of each individual retardate through the fullest development of his potential for independent or semi-independent living. As a result, we seek to make available to him, all his inherent privileges as a citizen and as a person in the fullest degree commensurate with his true potential. We further aspire to make the retardate as contributive a member of society as possible. These goals have both economic and ethical considerations of a positive nature to commend them.

Procedures:

In addition to a search of the existing literature on these matters, visits were made to a number of out-of-state and Arizona facilities which provide programs and/or residential facilities for the class of retardate with whom this study is primarily concerned. We reviewed the several facets of our study, as they related to these various facilities, with appropriate staff at each of the following which we visited during the course of this project:

Arizona State Hospital
Phoenix, Arizona

Arizona Children's Colony
Randolph, Arizona

Maricopa County Council for Retarded Children
Phoenix, Arizona

Alexander Home for Girls
Phoenix, Arizona

Bethany Home Ranch
Phoenix, Arizona

La Casa Para Aprendices
Phoenix, Arizona

Skull Valley Ranch
Skull Valley, Arizona

Austin Career and Guidance Center
Austin, Texas
Grateful appreciation is expressed to them all for their cooperation and assistance.

Since traveling and visitations to a large and full representative group of facilities was out of the question due to a limitation of time and funds, a questionnaire was prepared and sent to about 75 appropriate facilities across the country. Although efforts were made to keep the questionnaire as simple as possible there were some problems which were more easily dealt with and resolved on our visitations. The questionnaire, Exhibit 1, was sent with an accompanying letter, Exhibit 2, and we were most gratified to receive a 60% response. This report is based on an analysis of all the information and opinions which we were able to assemble from the aforementioned sources.

There was not a complete unanimity of opinion expressed on all points under consideration. It has been necessary, therefore, for the authors of this report to make judgments in many instances on points of dispute in arriving at conclusions. An attempt has been made to point out differing points of view whenever they have been found to be significant.

Findings:

In order to proceed with this report in a somewhat systematic fashion, we shall present first some of the data which we were able to extract from the returns on the questionnaire. It should be pointed out and borne in mind that all items on the questionnaire did not lend themselves to statistically significant results. It is for this reason that some items are not reported except in a general way.

These latter items were chiefly in the sections of the questionnaire related to the degree to which residents were judged to be self-supporting, details related to those who were employed, provisions for recreation, training programs provided and personnel employed. The number of respondents to the questionnaire were considered by the authors to be too few in number to provide statistically significant and accurate results in regard to these subjects.

It should be noted that it seemed clear that our respondents were meeting the implied needs of their clients in these particular areas of concern; however, the problems were being dealt with in accord with the objectives
set forth in the established goals of their individual organizational
establishment so when services were not provided by the particular
facility itself, needs were met, as needed, by appropriate complementary
service agencies.

Legal Form of Facility Operation:

As can be readily noted in Exhibit 3, the most common form of organiza-
tion for facilities serving the retarded, with whom we are primarily
concerned in this study, is the non-profit corporation. There are a
number of advantages in this, quite apart from the liability protection
it gives the individual. Among the most important of these are: The
tax advantages, the potential for achieving a much broader base of
public support through carefully planned recruitment of corporation
board members, the eligibility it assures for State and Federal grant
support to which it would otherwise not be entitled, provision for
continuity of the organization and preservation of assets which so
often are lost in privately and individually owned enterprises, par-
ticularly in this field of endeavor.

There was an indication of an increasing awareness of the advantages
of incorporation as non-profit enterprises in this field and a movement
in this direction.

Facility Location:

The statistical returns from respondents to our questionnaire show little
significance in terms of location of facilities according to the general
categories of "business district", "residential district" and "other",
Exhibit 4. It would appear, as a matter of fact, that these terms were
necessarily quite loosely interpreted. "Business district", in reality,
seemed to be often checked to indicate the facility was in a light
industrial area and "residential district" was checked when the facility
was located in one of the marginal areas of a particular community.
"Other" was apparently marked almost exclusively to indicate that the
facility was in a rural or semi-rural area. Failure of these items to
provide more precise data still leaves consideration of this matter
somewhat open.

Material developed in this study from all sources would seem to indicate
that choices of facility sites has been pretty much a matter of adjust-
ing to the realities of utilizing the best of that which has been avail-
able within the financial capabilities of the organizers rather than a
matter of constructing a facility around a well developed plan. It
would seem to be safe to assume that facilities which start out with
necessary compromises in relation to the physical plants in which they
operate must, as a result, have had to compromise programs. Those
facilities which have had the opportunity to plan their own structures
would appear to have a highly desirable advantage.
Bed Capacities:

The distribution of the facilities operated by our respondents in respect to bed capacities has no particular significance because of the selection factors in this study related to determination of those to whom our questionnaire was sent. Exhibit 5 giving this distribution is included for the general orientation of those reviewing this report. It should be noted that there is considerable feeling that the retardate with whom we are primarily concerned is felt to have a very special need to be in a relatively small unit with a warm and "homey" atmosphere.

The one facility reported as serving over 500 clients was included because it is Arizona's only State facility. It serves all classes of the retarded.

Waiting List:

One unanticipated finding in this study was the discovery that almost half the facilities reporting had no waiting list, Exhibit 6. There seems to be two most plausible explanations for this, one the absence of a waiting list indicates that the facility works so closely and cooperatively with the agencies it serves that the agencies maintain their own waiting lists and submit candidates for admission only as vacancies occur. This technique is often used by agencies, for the control of a waiting list has many advantages. The absence of a waiting list under these circumstances seemed to exist when the facility was operating at or near capacity and all other indicators pointed to an operation which was dynamic and of good quality.

The second explanation for no waiting list would seem to be that the facility is poorly located, failing to provide modern programming, in an inadequate physical plant, poorly managed or has a combination of these deficiencies. These facilities often operate at considerably less than capacity.

Despite the fact that some facilities seem to have difficulty attracting clients there seems to be a unanimity of opinion that more good facilities are needed.

Admission Restrictions:

Each facility reporting indicated one or more restrictions which would contraindicate admission of an otherwise acceptable client, Exhibit 7. Over half would not consider admission of a non-ambulatory person while about a third exclude those who are epileptic, spastic, emotionally disturbed or with other special disabilities such as blindness or deafness. This gives rise to an unanswered question, if not, what?
In addition to specific restrictions on admissions, over 90% had general restrictions. For example, a facility might not specifically exclude an epileptic child but might say that an epileptic child might be admitted only if convulsions were "controlled." Over 90% had restrictions which required a child to have attained a stipulated minimum age at time of admission. A little less than 50% of our respondents indicated that they stipulated a maximum age beyond which an applicant would be refused admission. Very few set a maximum age for residence once a client was admitted.

Coeducational:

Almost 60% of our respondents indicated that their programs were basically coeducational, Exhibit 8. This does not mean that there was a complete co-mingling of the sexes in all aspects of living for adolescents and adults. The returns showed, what appeared to be, a tendency on the part of those operating facilities restricted to one sex or the other to be defensive of their operation in this regard.

Financial Support:

Exhibit 9 indicates the basic sources of income upon which each reporting facility relies. It would appear unfortunate that "self-supporting" as intended for use in the questionnaire was not better defined. The authors of this study have had to conclude that the term was either not responded to because it was not clear as to what was meant or that it was interpreted to mean client fees.

Monthly Fees:

The monthly fees or charges for services rendered by the facilities vary considerably, Exhibit 10. It must be assumed from a study of the replies received that the variance is primarily a reflection of the wide differences in the services provided and not basically a reflection of variations in the price range for a single identical service. Some facilities were, as a matter of fact, simple boarding situations where the client paid only for meals actually eaten while other situations provided a full, sophisticated range of services twenty-four hours a day, seven days a week. There was a great range of different programs between these two extremes.

Arizona Facilities Visited:

Several private residential facilities for the mentally retarded exist in Arizona at the present time. Four of these were visited. On the following pages are descriptions of each of the homes visited, with
special attention paid to setting, staff, program, attitude of the residents, and methods of buying, preparing and serving of food. Although these four homes serve primarily the same purposes, there are important and interesting differences in their basic structures. No attempt will be made to say that one is better than another. Each had its strong points.

A person interested in visiting any one of these homes is welcome to call and arrange an appointment with the Director. Each Director is proud of his facility and knows that there is a need for more.

Skull Valley Ranch School
Skull Valley, Arizona

Skull Valley Ranch School is located on sixty lush, green acres just outside the small community of Skull Valley. Providing a home atmosphere and school training for twelve mentally retarded girls, Rock and Ramona Sterling own and operate this facility without any hired employees. It is their aim to be parents and teachers to these twelve, who range in age from ten to sixty-six. All programs are provided from within, as it has no residents who are capable of employment.

The home opened originally in 1947, but was purchased by the Sterlings ten years later. The Sterlings had four children of their own, the middle two of whom were retarded. This home provided a means of raising their own children and being able to help others. The latest addition was a beautiful dining room, kitchen and food storage area. This construction was carefully planned to provide a bright cheerful eating area requiring a minimum of care, and a food preparation and dish washing area precisely suited to the abilities of the girls, since they do the work.

Skull Valley Ranch is a privately owned school and therefore residents are sent there from all over the country by their families. Girls come from New Jersey, Ohio, New Mexico, Nevada, Arizona and India. Life long care is provided so the turnover is very small. Thirty girls are on the waiting list. The requirements for admission, besides a health checkup, are that the girls be able to dress and feed themselves and meet their own personal needs. They must be ambulatory, capable of some learning or training and if epileptic, the seizures must be controlled. The Sterlings are convinced that a home life and love is essential before a youngster can adapt to a foster home of any kind, and mature and develop to his own capacity.

Each girl has a job to do each day, which she is capable of doing. Breakfast is at 8:30, by which time beds are made and rooms in order. After kitchen cleanup, school is in session for the remainder of the morning. A separate building with regular school desks and a blackboard provide an atmosphere for learning. Mr. Sterling is the teacher and works with each individual child while Mrs. Sterling keeps the others...
occupied. Reading, writing and simple math are taught to those who are capable. Others are taught according to their capabilities. Lunch is followed by a physical education period, which helps to keep the girls in top physical condition.

For the girls with more potential, Sterling holds private tutoring classes in the afternoon while the others have crafts and stories. Time is allowed for doing chores, whether it be sweeping the sidewalk or washing the floor, and then free time is enjoyed. One of the older residents takes care of all the ironing and sorting of clothes, and after lunch, each girl comes and takes her clean clothes and puts them in her room. At 4:00 and not before, the television is turned on and whoever wishes can watch it. The evening meal is at six. Girls are in their rooms by eight and have lights out by nine.

Saturday is beauty shop day. Mrs. Sterling washes all heads to prepare for Sunday and church. All attend the Community Church in Skull Valley, which is a treat looked forward to by all. Many groups in Prescott have special parties for the girls on Friday or Saturday night.

Dinner time is a chance for informal learning which can be very valuable. Besides learning table manners and proper etiquette, table conversations are directed toward discussions of seasons of the year, special events and topics in the news. A large map of the world hangs on the wall and all know where each girl is from and where different news events are taking place.

Three cottages house the girls, each in her own private room. Two older women have their own cottage, the older girls are in another and the youngest are in a third. Girls are allowed to pick the color they want the walls painted in their own rooms.

One volunteer comes regularly to help with crafts, and a woman in the area will come in any time the Sterlings want to leave for a weekend.

Mrs. Sterling does all the cooking herself and plans the meals a month in advance. All the food is ordered through a wholesaler in Phoenix, and is delivered to Skull Valley. To make certain that Skull Valley Ranch School is up to the standards, the County Sanitation Department makes periodic visits. They check the cleanliness of the kitchen and see that the health cards are up-to-date. The fire inspector also makes the rounds.

This school is sponsored by a private individual for profit and directed by him. The monthly rate is somewhat higher than at most non-profit incorporated facilities. The fee is $225.00 per month minimum plus costs for medical and dental care and clothing. The home and setting are beautiful and the girls receive wonderful care.

Although, as mentioned before, this home is for the more handicapped girl, several features of it make it interesting for consideration because of its difference.
1. It is sponsored by a private individual for profit, and directed by him.

2. It is located away from a large city.

3. All activities and programs, except for an occasional party or church services, are provided for on the property.

4. There are no regular paid employees.

5. Each girl has her own bedroom.

These points do not sound too startling but they each have their advantages. Because it is owned by the Sterlings, they take great pride, not only in their business but in the house and grounds. The home appears to be an old southern estate which has been beautifully kept. It looks like a family residence, with no sign of institutionalization.

No regular paid employees assures that the atmosphere is very homelike. At present there is no need for outside personnel, but eventually, the Sterlings would like to have house parents come in for the evening to give them a little free time. Operating the home the way they do is rather confining. The final point, each girl having her own bedroom, is unique among facilities in Arizona. Although the rooms are small, each girl has a place that is all hers where she can keep her personal possessions the way she wants and have a little privacy. Many have their own record players and radios, and many have brought their desks and even their own beds.

Alexander Home for Girls, Inc.
8252 South 15th Avenue
Phoenix, Arizona

Alexander Home for Girls is a privately owned boarding home where twenty girls between the ages of 8 and 22 reside. Having the appearance of a large country home, it is located at the edge of the city where chickens, dogs, and a horse roam the property looking for attention from the girls.

Mrs. Alexander, the owner of the home, began her work with the retarded as a house mother at the Valley of the Sun School in Phoenix. After eight and one half years, she left the Valley of the Sun School to open a boarding home for girls who, because there was no other place for them, were placed in an institution although they could profit from community life. Her first home was located at 56 West Willetta, but after two and one half years, this was outgrown and the present facilities were found.

The requirements for admission are simply that a girl must be able to dress and feed herself and fit in with the group. Of the twenty girls at present, three attend a sheltered workshop, three are at an accommodation school, one works in a nursery, two are employed at a linen supply
company, five are at present being evaluated for placement, and the rest attend special classes in the public schools. Mrs. Alexander states that all but four could be employed with some supervision. Five of the girls are sponsored by their own families, but the remainder are sponsored by different State agencies, and come under the authority of the State Board of Juveniles.

Covered in the charge of $225.00 per month are board and room, bedding, laundry and most recreational fees. Many recreation areas such as theaters, swimming pools and the like do provide some free passes, which gives the girls many opportunities they would not have otherwise. At present the facility is self-supporting, but the monthly charge may have to be increased because more professional staff are included in future plans.

On the staff at present are Mrs. Alexander's sister who serves as assistant and supervises the girls in their chores, house parents and a social case worker. The house parents have a private room and must be available during the day to help out as well as in the evening. They are paid $150 per month and given room and board. They have one full day off during the week. The social worker is on hand one full day and one morning each week and may be called as needed. The social worker counsels the girls and helps them with their individual problems.

Working days get off to an early start with girls rising at 5:30 to get the necessary chores done before leaving the house. Each girl makes her own bed and helps a less able roommate, if necessary. There are three or four girls who require help with this task. Each girl is responsible for her own breakfast and for cleaning the kitchen afterwards. She must also do some assigned task which might be cleaning a bath, mopping a floor or emptying the dishwasher. Mrs. Alexander or one of the girls does two or three loads of clothes, and everyone helps in hanging them on the line. When the girls come home in the afternoon, they collect their own clothes and do their ironing. Mrs. Alexander feels it is important that these girls have leisure time after a hard, long day, so after the dinner is completed and the kitchen completely cleaned up, they are free, but except for a special event, they stay on the premises. They retire early to be ready for the next morning.

Although there is ordinarily no specific planned recreational or educational program for the girls, they manage to keep busy and enjoy themselves. Some activity is always planned for the weekend, be it a movie, roller skating or shopping. They all attend church on Sunday morning, and a very active church group plans hay rides, picnics and many other activities for the weekend or throughout the week.

Girls can attend school functions and other activities so long as there is an adult or responsible adult along. Because these girls are teenagers, it is felt that they need continuing guidance. Mrs. Alexander feels it is absolutely essential to have separate facilities for boys and girls during these teen years. A great many of these youngsters have
had previous experiences, which would make a normal, co-sexual family environment impossible.

Mrs. Alexander plans all meals in advance and prepares them herself. She does her own shopping, buying vegetables and eggs from a produce market, but goes to a wholesaler for canned goods and other staples. She feels that she can purchase meat more economically from a retail market but she watches the specials and buys in large quantities.

The Alexander Home is licensed by the Child Welfare Division of the State Welfare Department. To meet the requirements for licensing a fire alarm had to be installed on the second floor where the girls sleep. In the kitchen, it is necessary either to have three sinks, one for washing, and two for rinsing, or to have an automatic dishwasher.

This home is operated as a non-profit organization, and administered by a Board of Directors.

A healthy atmosphere exists in this home, with all the girls taking an active part in its upkeep and operation.

Bethany Ranch Home, Inc.
6130 North 16th Street
Phoenix, Arizona 85016

Bethany Ranch Home is a private, non-profit residential facility whose program is designed to provide personal care and training for the mentally retarded. Individuals 16 years and older are accepted, regardless of race, creed or color. It is governed by a corporation Board under the State laws of Arizona. No State residence is required. One year after taking its first resident, this home was already filled to capacity and making plans for expansion. Directed by George W. Compton and assisted by his wife, who serves as secretary, bookkeeper and house mother, this home is meeting a great need in the community.

The Comptons have two children both retarded. Originally from Kansas these children had the advantage of attending the Institute of Lodo Pedics in Wichita, where the parents attended classes also. Thus, a good background in the field of mental retardation was acquired and techniques were learned to help the retarded help themselves. Working in construction, Compton moved to Arizona in 1959. The children attended Gompers first, then were day students at the Valley of the Sun School and finally resided there from 1963 to 1966. Mrs. Compton was employed as a secretary at the school for six years.

As the children grew older, the Comptons wondered what would become of their children when they outgrew the Valley of the Sun School, and as parents they were no longer able to care for their children. They discovered that the children would become wards of the State and in all
likelihood would be sent to the Children's Colony to live out their lives. The Comptons looked for a suitable boarding type residential center in Arizona. They finally began thinking of this as a good project for themselves. Talking to many people, they found out what the requirements were, who they had to see, and who had to do what. Since Mr. Compton was involved in building dormitories at the Valley of the Sun School, he was quite familiar with building codes and zoning, but there was much more to know. The Maricopa County Council for Retarded Children provided assurance and guidelines. The Child Welfare Division of the State Health Department provided specifications to be met if the home were to be licensed and receive clients from the State.

The next step was to find a house. Mrs. Compton resigned her position to devote full time to the project. Narrowing their selection of houses down to two, one was very high priced, the other in great need of repair; they decided on the latter. It was an older home located in Phoenix, in the center of a five acre citrus grove, the basic construction was thick adobe walls and very solid. The house passed city inspection subject to some required improvements. Because of its rundown condition, the owner was willing to lease the house for eighteen months while Mr. Compton made repairs and got the business underway. This meant that the Comptons would have a chance to see if the property would meet their needs. The rental rate was very low which enabled them to put most of their money into repairs. The deal was closed in June, and the house was ready for clients in October.

The house had needed all new plumbing, electrical wiring, and a new roof. Also, the kitchen was inadequate for quantity food preparation and serving, so Mr. Compton put in a completely modern one. Altogether, more than $4,000 was spent in restoration, even with Mr. Compton doing much of the work himself. On the inside of the house alone were applied 55 gallons of paint, and 225 panes of window glass had to be replaced. At a time when needs were greatest and means most scarce, the community came through to help. When the Comptons were ready to move in and get started, they needed much in the way of furniture and appliances. They let the needs be known and several groups and clubs around town who were looking for projects, came to help. For example, one club bought the dishwasher, another group gave the washer and dryer and a women's professional club provided all the draperies in the living rooms. Furniture was always a welcome donation. Paint and the painters to apply it came from the professional painters' group and two paint companies.

Most retarded individuals who came to Bethany Ranch Home had been allowed to become very lazy. Previously they had slept late and had nothing to do when they did get up. In an effort to change this, everyone is up by 6:30 a.m., beds are quickly made, and all are dressed and down for breakfast. Most of these youngsters attend some sort of training program, a few are in special education classes in the high schools and some are in sheltered workshops. Thus the day is well filled.
A home like atmosphere is stressed. The Comptons are Mom and Dad, and all residents feel very much at home. Meals are eaten family style. Although expansion is being planned, a maximum of 25 residents is planned for fear of losing this homeliness. Eleven boys occupy the upstairs in a dormitory style arrangement, while the five girls are on the main floor. Plans for the near future are to add another bath, more sleeping quarters and an activity, arts and crafts building.

The admission requirements are that the youth be ambulatory, able to care for personal needs, and participate in a training or vocational program. Within this range are a wide variety of abilities and personalities. The age span of the present residents ranges from 16 to 31 years. They come not only from Phoenix, but two from California, two from Colorado, one from Utah, two from Tucson and two from Arizona Indian Reservations. Where possible, the parents are responsible financially, but otherwise a sponsoring agency provides.

Depending on the amount of special care the resident requires, $200 per month is charged. This covers room, board, laundry, transportation, and helps pay the bills for insurance, utilities and two employees for the home. All medicine and medical care is extra as are clothing and other special needs. Blanket permission is received from the parents or legal guardian pertaining to medical needs. All needs in this area, dentist, eye doctor, etc., are provided for, and the parents are billed.

Transportation for most occasions is provided at present by Mr. Compton, but this is a vital area of training and soon residents will be making use of the public forms of transportation.

Three-fourths of these residents could be employed and at least partially self supporting with the proper training, and this is the goal. One of the girls went from D.V.R. through training at the Towne House and is now employed there. Five of the boys are in special education classes in the high schools, two are in the accommodation school, four attend the Adult Activity Center, and one is in a sheltered workshop program, another is being evaluated at D.V.R.; and one boy stays on the grounds for as yet a suitable program has not been found for him.

Each resident is responsible for making his own bed and cleaning his own sleeping area. Also, everyone has his own special assigned tasks around the house. The girls do the ironing and general house cleaning, both boys and girls help in the kitchen, while the boys keep the grounds in order.

Organized recreation is somewhat limited, especially during the school year, because all have their own activities; football games, school plays and the like. However, a volunteer comes once each week to conduct a crafts session, and one night is reserved for bowling. They do keep busy. Concerning religious training, all are encouraged to attend the church of their choice on Sunday and a woman volunteers to teach a Bible study course each Thursday evening. This is not compulsory, but all look forward to these sessions.
Although there are only two paid employees at present, when the business is more firmly established and outstanding debts are paid, the Comptons plan to hire full-time house parents and relief couple. This will give them time to open another home. They also would like to be able to hire guidance counselors to help the youngsters.

The planning, purchasing, preparing and dispersing of food involves several interesting considerations. The Comptons only two employees are utilized in this area. One woman comes in early in the morning, prepares breakfast and sack lunches, and makes initial preparations for dinner. The afternoon woman comes in time to get dinner on the table, clean up, and help the girls with their personal needs before she leaves. Mrs. Compton plans the menu, which must be posted in advance for all to see. From this menu, the grocery list is made out for one month at a time. Food is purchased wholesale and is delivered.

Bethany Ranch Home is sponsored by a private non-profit organization and administered by a Board of Directors. This Board is a vital part of this efficient operation. The carefully recruited Board members represent many businesses and professions and have a sincere interest in the Home. Among them are a lawyer, banker, business man, doctor, retired school teacher and parents. They meet once a month to discuss procedures, applications for admissions, special problems and to provide help and moral support when needed by the Comptons.

A printed fact sheet is available to anyone interested in complete details of the home. It is a two page description of the home and its program, staff, admission requirements, tuition and referral sources. The application for admission consists of five pages of questions covering the family, abilities of the applicant in the areas of language, self care, behavior and education, and a complete medical record naming his doctor, previous illnesses and special health conditions.

In summary, Bethany Ranch Home is first a Home, and then a training center for the mildly or moderately retarded. For most it is a permanent home. The home is spotlessly clean and the residents are happy. Because the Comptons are parents, they understand the needs and problems of these children. The setting is beautiful and although there is still much work to be done on the grounds, the residents all take pride in the home, and enjoy doing their share in making it a great place to live.

La Casa Para Aprendices
821 North Fifth Street
387 East Monte Vista
Phoenix, Arizona

In 1965, while working at the Sheltered Workshop operated by the Maricopa County Council for Retarded Children, Phoenix, Arizona, Lura Turner saw the need for a residential center for these young adults. After asking many questions, she found that there was one small facility for girls,
but none for boys. With no money, but a strong desire to help, she began. With the financial assistance of a friend, she purchased an older home at 821 North Fifth Street.

It was November of 1965 that the transaction was completed and the home was ready for occupancy. Transforming a big old house into a boarding home took some hard work, but with many willing hands, the work moved quickly. The upstairs was turned into a dormitory with four boys in each of two rooms. Two smaller rooms downstairs were converted into living quarters and an office for the house parents. The coach house on the property has a large upstairs which became quarters for the girls. With the use of partitions, semi-private rooms appeared, and a separate area for the college girl who would be available through the night. The large garage downstairs became a recreation room, with a ping-pong table, television, game table, and workshop.

The home was soon filled to capacity, and the waiting list was growing. Because of repairs and construction needed on the house, the project had not as yet become financially successful. The need and desire to expand was frustrating. The use of an apartment complex availed itself, and the step was taken. Thus, one year after opening originally, half of the residents moved to a new home at 1643 East Polk. In 1967, a third home was rented at 387 East Monte Vista, Phoenix and the scope of the operation was complete. A division of the residents into living groups which would be to the advantage of each individual was now made.

The home at 387 East Monte Vista is utilized for residents who, although able to be employed, will always need supervision. This will be for permanent residents. Miss Turner resides at this home but is available when needed at any of the facilities. At the Fifth Street home reside many youngsters from the Arizona Children's Colony and others who will soon be employed. The Polk House has since closed because of the termination of the Manpower Development and Training Act, MDTA, which left the young people involved without funds. The location of this home had been unfavorable due to the lack of recreation facilities in the area, and the spread out apartment type arrangement was not suitable because of the difficulty of supervision. Plans for the future involve the opening of a third home for those who will eventually be capable of completely independent living.

Young people are referred to Miss Turner either by their parents, or from one of the various agencies in the State. Among these are Welfare, the State Hospital, the Bureau of Indian Affairs, the Children's Colony, churches, and schools. The sponsoring agency provides case workers who keep abreast of the progress of the client and give financial and other help when needed.

The daily routine at each of these homes is quite the same. Breakfast begins the day and is quite informal. Lunch is generally carried to the day's activity, while dinner is served family style. The house parents are responsible for planning and preparing the meals, but the residents have duties which include kitchen help and clean up.

- 15 -
Each tenant is expected to work one hour each day around the home as well as keeping his own sleeping quarters in order and caring for his own laundry. Penalties are imposed if the work is not done. The girls may charge the boys a dime a shirt for ironing. These young adults are like any others and have the same drives and energies. Recreation is a vital part of life at La Casa. Planned activities are mixed with leisure time for a well rounded life. Two nights a week, all who wish go either bowling or square dancing. Weekend activities are not prescheduled except for a Sunday afternoon softball game for those who wish to take part. Couples or small groups attend movies, but the universal problem of making the money stretch often limits plans. Horseback riding is a favorite activity. Special parties and picnics are always planned. Church attendance is not required but most do go, and many participate in various church activities during the week. Television, games, puzzles, and the like are available.

House parents are a most important part of this operation. It is found that young married couples in their twenties have the greatest rapport with these young people. Each home has permanent houseparents and one relief couple provides for necessary days off. Husbands are available in the evening and on weekends to lead recreational activities and maintain discipline. The men also are valuable counselors. The wives are considered full-time employees. Besides buying and preparing the food houseparents help the residents choose the proper dress for work. Regular inspection assure that all are clean and boys are shaven and girls are not too heavily laden with makeup or wearing too flashy a hair-do. Although the house parents each have their own private living quarters, the doors are open.

At La Casa, each young adult is considered as an individual and given very personal attention. Many who come to Miss Turner have physical handicaps which have never been treated. If a child limps, the reason for it is investigated and medical attention is sought. A set fee of $150 per month covers board, room, supervision, and some counseling. One of the requirements for residence is that a person either be employed or be in training for job placement.

The Turner Homes have several unique features. Two homes are utilized for different types of residents. Both are located close to the center of Phoenix. Ages range from sixteen to sixty and all the homes are co-educational.

A New Concept in Physical Plant Design:

It seemed apparent to the authors of this report that the accommodation of program facilities to the best available existing structures was more a matter of adjusting to realities than could be justified by program facility needs themselves. With this premise in mind, and being mindful of the availability of Federal "new construction funds", it was felt
appropriate to include for consideration a basic alternative. It is for this reason that a sketch of "Brotherhood House" is included as a point of departure for considering alternatives, Exhibit II. The authors emphasize their recognition of the need for adjusting concepts to particular clients in differing areas.

Guidelines for Establishing Programs and Services for the Mentally Retarded:

Incident to the development of the foregoing material, "Guidelines for Establishing Programs and Services for the Mentally Retarded", has been developed and is included in this report. It is significant to observe that these guidelines deal more with the general than in specific details. This approach is based on the fact that programs, services and needs vary greatly from area to area and should be met upon an objective set of special data pertinent to a given problem in a particular service area at a given point of time. This latter conclusion is well supported by the data acquired in this study. The Guidelines appear in the Exhibits.
QUESTIONNAIRE

I. Type of Operation
A 1. Sponsored and administered by a specific state agency_____
   2. Sponsored by a private and non-profit organization and admin-
      istered by the organizational Board of Directors_____
   3. Sponsored by a private individual for profit, and directed by him____
   4. Sponsored by a private business corporation for profit, and
      administered by a paid director_____
   5. Other______________________________

B 1. What is the capacity of your facility?_____
   2. What number of residents are presently enrolled?_____
   3. How long is your waiting list?_____

C 1. What is the size of your facility?_____
   2. Location near business district____, residential district____,
      other____

II. Admission
A 1. What are your admission requirements?_________________________

   2. What is your minimum age of admission?_____
   3. What is your maximum age of admission?_____

B Restrictions:
   1. Non-ambulatory____
   2. Epileptic____
   3. Spastic____
   4. Emotionally disturbed____
   5. Degree of involvement____
   6. Other____

III. Financial Set-up
A 1. Is your facility self-supporting?____
   2. Do you receive federal funds?____, united funds____, state funds____,
      contributions____, other____

B 1. How much do you charge?____
   2. What does this charge cover?
      Room and board____
      Clothing____
      Bedding____
      Medical treatment____
      Drugs____
      Toiletries____
      Radios____
      Phonographs____
      Recreation____
      Other____

C 1. What percent of your residents are self-supporting?____
   2. What percent of your residents are partially supporting?____
   3. What percent of your residents are non-supporting?____
   4. Who pays for these non- and partially supporting residents?____

   5. Is there a sponsor for each resident?____, if so, whom (family,
      agency).
IV. Employment
   A What percent of your residents are employed?_____
      1. Types of employment__________________________________________
      2. How employment is secured____________________________________

   B What percent of your residents are in training?_____
      1. Types of training_______________________________________________
      2. Who pays for the training?____________________________________

   C Are your residents expected to be completely on their own, eventually?_____

   D Does your facility have a sheltered workshop?_____

V. Recreation
   1. What is the scope of organized leisure time activities?_____
   2. Do you provide religious services? (Explain)______________________
   3. What recreational activities do you provide?_______________________
   4. Which are on the facility, and which are off the facility?_________

VI. Training Programs
   A Does your facility conduct a training program?______________________
      1. Socialization__________________________________________________
      2. Personal self-care_____________________________________________
      3. Vocational____________________________________________________

   B Where do residents go upon leaving your facility?__________________

VII. Personnel
   1. How many employees do you have?_____
      a. Professional____, voluntary____, part time____, attendants____,
         consultants____.
   2. From where do you get your volunteer help?_______________________
   3. What training do you require for employees?_______________________
   4. What volunteer training programs do you provide?_________________
   5. If house parents are hired, what salary do they receive?_____

Exhibit 1B
VIII. Other comments which would be beneficial to us in understanding your operation.

IX. Is your facility coed? _______ Boys? _______ Girls? _______ If coed, are all housed in one building? _______, separate buildings? _______ What advantages or disadvantages are seen with coed facility? ________________

What are the problems, and how are they handled? ________________
Dear Mr.

The Mental Retardation Section of the Arizona State Department of Health is soliciting your support in completing a study. Information is being gathered in an attempt to publish a handbook laying ground rules for individuals or groups planning to establish a residential center or halfway house for the moderately or mildly retarded. We are mainly concerned with a facility for fewer than twenty residents who are sixteen years of age or older, and are either employed in the community or are in job training programs.

Enclosed is a questionnaire which we ask you to fill out and return. Please answer any questions which pertain to your setup, and add any comments in Section VIII. You will certainly agree that a sharing of ideas is vital for progress in this area.

Thank you very much for your attention to this matter. Your help is greatly appreciated, and we will be glad to send you a completed copy of our study.

Sincerely,
LOCATION OF FACILITY

- Business District
- Residential District
- Other (Rural)

% respondents: 30%
WAITING LIST

INDIVIDUALS ON WAITING LIST

- Not Reported

Respondents %
ADMISSION RESTRICTIONS

% of Respondents

- 100
- 90
- 80
- 70
- 60
- 50
- 40
- 30
- 20
- 10
- 0

- Non-Ambulatory
- Epileptic
- Spastic
- Emotionally Disturbed
- Other

Exhibit 7
COEDUCATIONAL

<table>
<thead>
<tr>
<th>%</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
</tbody>
</table>

Exhibit 8
FINANCIAL SUPPORT

- Self Supporting
- Federal Funds
- United Funds
- State Funds
- Contributions
- Other

Exhibit 9
BROTHERHOOD HOUSE -
A Mental Retardation Center, proposed for consideration by the Association for Retarded Children

SERVICES TO BE CONSIDERED -
Residential Center Reprieve Care (Short term Res.)
Pre-School Day Care
Sheltered Workshop Activity Center
Training Program for Professional Staff

CAPACITY: 28 Bed, maximum (If beds reduced, whole structure should be scaled down)
Adjunctive Program Enrollments to be determined by space and needs.

SKETCHED and PROPOSED for CONSIDERATION BY:
THOMAS M. ROSSETTIE, A.B., M.S., CONSULTANT MENTAL RETARDATION SPECIALIST
11040 OAKMONT DRIVE
SUN CITY, ARIZONA 85351

HELEN B. ROSSETTIE, R.N., ASSOCIATE

MAY 1969
GUIDELINES FOR ESTABLISHING PROGRAMS AND SERVICES
FOR THE MENTALLY RETARDED

LEADERSHIP:

Mental retardation affects approximately 3% of our population and yet only in recent years have sophisticated programs for the retarded been attempted on a broad, general basis. Most programs for the retarded can be traced, as a matter of fact, to the efforts of one or two people, or at best to a relatively small group of people, often the parents of retarded children. This fact should encourage all interested individuals to proceed with efforts to start new programs for the retarded, wherever they see the need, provided they have the heart and dedication to overcome many moments of discouragement which are bound to come. These guidelines are provided to help innovators of new programs - and older ones too - avoid as many problems and failures as possible.

COUNSEL AND ADVICE:

Too often good ideas for programs to better the lot of the retarded and in frustration and failure because avoidable errors and resultant discouragement kill off the original enthusiasm. Persons thinking of taking steps to initiate programs should seek competent advice very early - really before they take any concrete steps toward implementation of their goals. This is especially true as the needed advice is available for the asking.

The Division of Mental Retardation, Arizona State Department of Health, has been established for the purpose of providing assistance to community groups and individuals who wish to provide or discuss services to the retarded. The Division can offer concrete help with any of the matters presented in this paper, and with a multitude of other problems and needs that may arise.

Perhaps the most important point is that a great many difficulties can be avoided if assistance is sought at the very earliest discussion stage, and the experiences of the Division Director and of other communities brought to bear on the entire planning process. All persons and groups interested in services to the retarded are urged to contact:

Mental Retardation Division
Arizona State Department of Health
1624 West Adams Street
Phoenix, Arizona 85007

The Division will also, as may be desirable, arrange contact with the State and Federal agencies that can render various specialized forms of assistance. The need for such additional contacts will only become evident as planning progresses and the program begins to take on a specific form. Interested persons and groups again are urged to seek advice and counsel from the Division well in advance of this stage.
GENERAL CONSIDERATIONS:

Experience has demonstrated the very great desirability of organizing services to the retarded so as to serve a specifically defined geographic area. One of the first considerations, therefore, is to determine as objectively as possible, the catchment or service area to be served by the planned program. There are many factors to be considered in establishing the service area, and the area chosen should reflect logical decision-making based upon all relevant factors.

Generally service areas follow the lines of established governmental units such as a town, city, county, school district, or the like. In some instances the area may be best defined according to social, cultural or economic boundaries. A service area should provide enough, but not too many, clients to be properly served by the contemplated program. It should avoid boundaries that will unnecessarily exclude some needy retarded individuals from receiving the services.

It is important on the other hand, to work cooperatively with sponsors of other programs for the retarded, in order to avoid overlapping or duplication of efforts; collaboration with any other programs in the area is necessary in defining the appropriate community to be served. It must be borne in mind, in establishing programs, that the catchment area for one program for the retarded may very well be different in size or shape from the catchment area for another program in the same general locality. The specific nature and requirements of the particular program being contemplated should determine the catchment area. For example, the catchment area for a residential facility might include all or parts of several catchment areas for pre-schools, day care centers or the like. The Arizona Children's Colony serving the entire State is the most outstanding illustration of this.

Any such overlapping of service areas for different program centers requires the best possible communicative and cooperative relationships between groups who are working together toward common goals. Probably the best technique is to have formal regional "Councils" through which required cooperative agreements can be established and implemented in practice. Again the size and scope of each "Council" would need to be established along practical lines.

COMMUNITY RELATIONS:

In attempting to initiate and maintain programs, it is necessary that all available resources be utilized. In order to achieve maximum support from the community, or area being served, it is of paramount importance that all facets of the existing power structure be involved. The best way to obtain this needed support is to include on the governing or supervising body, representatives of all the leading social, professional and other interested groups of the area to be served. Normally this means that representatives should be involved from service clubs, church organizations, public agencies, unions, business, medicine, law, accounting, leading private citizens and
parents of retarded children or adults. Generally speaking parents, even when they are leaders in other categories, should constitute not more than half the board membership. Great care should be taken to see to it that those selected to serve on the Board are willing to serve actively and in positive.

SPECIFIC STEPS IN SETTING UP NEW PROGRAMS:

The Board must determine initially what services are already available, and then what new services are needed by the retarded of the area in order to provide a Total Program. Care must be taken to gear new programs to those already existing; therefore, the advice of the appropriate "Council" should be sought early. There are too many unmet needs of the retarded to allow resources and efforts to be wasted for any reason. Having identified the real unmet needs of the retarded in the area, the Board should consider which of these needs have the greatest urgency and feasibility for being met. It may turn out that study and research on the actual problems within the proposed service area, or a determination of the feasibility of the original ideas may indicate quite a different need as having the highest priority. The practicalities of available staff or financial resources may alter what might otherwise have appeared to be the optimum program choice.

FORMALIZING THE PLAN:

The basic plan of action, based on the needs and priorities referred to above, should be reduced to writing, as soon as possible. Upon the adoption of a formal program plan by the Board, steps should be taken to inform the public as soon and as fully as possible. This can best be done by word of mouth to friends, neighbors and organized groups, and by radio, television and press. Too often good programs are worked through by Boards and by those dedicated to the welfare of the retarded, but then are allowed to die for lack of the needed broadly based community support. Programs must be nurtured by constant updating and exposure to the public if they are to succeed.

One should not underestimate the interest or intelligence of the public. When properly informed the public will respond in a supportive way. Those interested in the retarded must proceed with their plans and programs in a most intense and objective fashion if they aspire to success. Pertinent and interesting facts concerning the retarded should be regularly passed on to the public whose support is sought.

DETAILS AND FACTS UPON WHICH TO BUILD A PROGRAM:

1. **Clients**: Who they are, ability levels, age, sex, number, ability to pay
2. **Program**: Goals, structure and content, methods of evaluation
3. **Follow-up Program**: What, where
4. **Location**: Accessibility, parking, roads, neighborhood
5. **Physical Plant**: Building, heating and cooling, size, zoning, etc.
6. **Equipment**: Needs, availability
7. **Staff**: Needs, availability
8. **Insurance**: Hazards, available coverage
9. **Budget**:
   A. **Operating Expenses**:
      Rent, utilities, salaries, materials, supplies
   B. **Operating Income**:
      Charges to clients, donations, grants, fees for service from other than clients, such as from Health Department, Welfare Department, Department of Vocational Rehabilitation.

**ORGANIZATION**:

Basic to the operation of any program for the retarded is a need to determine the type of organization which is to operate it. The most common form is the non-profit corporation although some are operated by public agencies or as private businesses. The non-profit corporation has much to commend it when compared to operation as a private business.

**VOLUNTEERS**:

One point which should be touched on is the value of an active Volunteer Program. There is great advantage in a Volunteer Service, particularly as it keeps the program "open" and allows active community participation. Volunteers can serve in many ways other than in direct service to the retarded, although this is the most popular volunteer activity. Some other volunteer roles may include assistance with mending, clerical work, fund raising, speakers' bureau and the like.

**CONCLUSION**:

Community groups attempting to start programs for the retarded find all of this rather involved and even frightening, if they do not obtain adequate assistance with it. However, the problems are usually manageable with some
guidance and help. It is for this reason that we repeat - if you have an idea for helping the retarded and want assistance - don't hesitate to contact the Division of Mental Retardation. It is our business to see that your ideas develop into programs and services.
Sincere appreciation is expressed to the following facilities and State agencies who took the time to fill out and return questionnaires. A 60% response was most gratifying.

Not all facilities listed below are half-way houses, and some provide services for other than the mentally retarded; but they all were able to contribute helpful information.

Blake Hammond Manor  
Box 374  
Ben Lomond, California

Holly Acres Training School  
Box 278  
Applegate, California

Lieutenant Joseph P. Kennedy, Jr.  
School for Exceptional Children  
123 and Wolf Road  
Box 283  
Palos Park, Illinois

Hope School for Mentally Retarded Children  
666 S.W. Fourth Street  
Miami, Florida

Saint Vincent's School  
4200 Calle Real  
Santa Barbara, California

Laradon Hall School for Exceptional Children  
East 51 Avenue at Lincoln Street  
Denver, Colorado

Saint Mary's Special School  
5341 Emerson Avenue  
Saint Louis, Missouri

Martin Luther School and Sheltered Workshop  
Box 42  
Beatrice, Nebraska

Coleman Manor  
313 South Church Street  
Hudson, Michigan

Pine Rest Christian Hospital  
6850 South Division Avenue  
Grand Rapids, Michigan

Boys Farm Home and James School  
Route 1, Box 204  
Cave Junction, Oregon

Saint Coletta's School  
Hanover, Massachusetts

Adriel School  
Box G  
West Liberty, Ohio

White Caps - Stuyvesant House  
Route 9-J  
Stuyvesant, New York

Rhinebeck Country School  
Foxhollow Road  
Rhinebeck, New York

Jewish Child Care Association of New York  
Edenwald School  
Bronx, New York

The Partridge Schools and Rehabilitation Center  
Routes 29-211  
Gainesville, Virginia

Mission Road Foundation and School  
8706 Mission Road  
Box 14038  
San Antonio, Texas

Marbridge House  
5219 La Branch  
Houston, Texas
Bethesda Lutheran Home  
700 Hoffman Drive  
Watertown, Wisconsin

West Virginia Rehabilitation  
Center Institute  
Charleston, West Virginia

Los Angeles Part Way Home  
877 Crenshaw  
Los Angeles, California

Half Way House  
1352 South Topeka  
Wichita, Kansas

Half Way House  
645 Connecticut  
Lawrence, Kansas

Division of Mental Retardation  
Services  
Department of Mental Health  
401 South Spring Street  
Springfield, Illinois

Department of Mental Hygiene  
119 Washington Avenue  
Albany, New York  12225

Bilbie Hall  
Route 1, Box 444  
San Benito, Texas

Ettie Lee Homes, Inc.  
Box 339  
Baldwin Park, California  91706

Midway Center  
2012 Miramar Street  
Los Angeles, California  90057

Parkview Guest Home  
5344 Rex Street  
San Diego, California  92105

Parkway Center  
1212 South Alvarado  
Los Angeles, California  90006

Crittenden Center  
2229 Grove Street  
Oakland, California  94612

San Francisco Part Way Home  
3410 19th Street  
San Francisco, California  
(c/o Mission Neighborhood Centers, Inc.)

Mental Retardation Programs  
California Health and Welfare Agency  
1020 State Capitol  
Sacramento, California  95814

State Planning in Mental Retardation  
State Services Building  
Denver, Colorado  80203

Mental Retardation Planning and Implementation  
600-N State Office Building  
Topeka, Kansas

Mental Retardation Planning  
P. O. Box 867  
Department of Institutions  
Olympia, Washington

Vinewood Center  
1831 North Vine Street  
Los Angeles, California  90028