Purpose

The Employment Intervention Demonstration Program (EIDP) is a federally funded effort to discover new ways of enhancing employment opportunities and quality of life for mental health consumers. This involves a multi-site research study of innovative models combining vocational rehabilitation with clinical services and supports. The purpose of the EIDP Cross-Site Program Measure is to assess program characteristics across all study sites and conditions. This measure was developed by the EIDP Cross-Site Program Measure Committee (see list of members at the end of this document) including a representative from each site, the government project officer, coordinating center representatives, and a consumer representative.

The program measure was designed to be completed for all EIDP programs at all sites. In this way, uniform data across programs permits an examination of the features of widely differing programs. Since EIDP programs vary tremendously across sites and conditions, this measure is designed to capture common factors that may influence vocational outcomes, including vocational program dimensions and the larger non-vocational program context. You will notice that the scope of questions is quite narrow and specific. Keep in mind that this is not meant to be a total process measure of your program(s). This measure was designed to be a practical assessment of some important program characteristics that cannot be captured through existing EIDP data such as the Common Service Category data.

You will be answering questions about staff and program characteristics, so please feel free to use any records that are available to you. If you have questions or encounter any problems while completing this measure, please contact your study Principal Investigator (PI) or research staff at your site. You also may contact Jane Burke at the University of Illinois at Chicago (UIC) Coordinating Center (CC) at telephone 312-422-8180 extension 15, or email her at jburke@psych.uic.edu.

Section I: Program and Respondent Information

Before completing this form, please check with the EIDP PI or Research Director (RD) at your site to ascertain which study condition you are describing (control, experimental, or experimental #2).

One Program Measure should be completed for each EIDP program. On the first page (page 2), please circle your site, and circle the type of program you are describing (control, experimental or experimental #2). Then indicate the official name of the program (if any), and the type of program model used (i.e. ACT, IPS, ICCD Clubhouse), if any.

This Program Measure should be completed with reference to one month of one year. In consultation with your site PI or RD, use the following criteria to select a month, and answer all applicable questions in reference to this time point. Try to meet as many of these criteria as possible, with priority given to a and b:

a) A month when the program had the most clients
b) A month when the program was fully staffed
c) Not December, January, July or August unless necessary
d) Exclude the six months of program start-up and the six months of wind-down
e) Avoid major transition times (major changes in the program environment)

Indicate the month and year serving as your reference point on page 2 of the Measure.

Please indicate your name and your job title, and give a brief description of your relationship to the program being described. Since we may need to contact you later for clarification, please also
include your telephone number and email address.

**Section II: Vocational Program Staff**

**Question #1**

Please indicate the number of staff (including both administrators and direct service staff) employed in your vocational program. Remember that you are referring to the staffing pattern during the time period you indicated on the previous page. Please provide both total number of staff and full-time equivalents (FTEs). For example, four staff, each working half-time would constitute a total number of 4 individual staff members and 2 FTEs ($\frac{1}{2} \times 4 = 2$). Employees who provide vocational services for 50% or more of their time are considered vocational staff. Employees who provide vocational services less than 50% of their time are considered non-vocational staff. Vocational staff and non-vocational staff should include both administrators/supervisors and direct service staff, but not support staff. Support staff (item c) should only be counted if they provide support for vocational services. For example, if your program is one of several sharing a receptionist, you should estimate the amount of that person’s time that is spent on work related to the vocational services program clients, staff, and administration.

**Question #2 - (Key to completing the staff grid)**

This question involves completing a staff grid for each of the vocational program staff employed at the criterion time point identified earlier. In completing this grid, keep in mind that the total number of columns completed should equal the total number of vocational staff given in answer to question #1a. For each vocational staff person described on the grid, use the key below to circle the appropriate letter response for items A, B, C, D and E. In terms of activities performed by each staff person (item E), be sure to list what staff actually do rather than what is in their job description (if these differ).

**A. Race/ethnicity**

(select one)

(a) African American

(b) Latino/a, Hispanic

(c) White, non-Hispanic

(d) Asian, Pacific Islander

(e) Other

**B. Highest level of education**

(select one)

(a) Less than High School education

(b) High School or GED education

(c) Some college education

(d) A.A. or other 2 year degree or certificate

(e) BA/BS in Human Services

(f) BA/BS in other than Human Services (including B.S.N.)

(g) Some graduate course work

(h) MA/MS/MSW in Human Services

(i) MA/MS/M.Ed. in other than Human Services (including

(j) Advanced Graduate Degree (Ph.D., M.D., D.S.W., etc.)
C. Before the position being described here, did this staff person have prior work experience in vocational rehabilitation? (a) Yes   (b) No

D. Before the position being described here, did this staff person have prior work experience in mental health? (a) Yes   (b) No

E. Vocational activities performed by this staff person  (indicate all that apply)

(a) vocational planning
(b) work readiness assessments
(c) job skills assessments
(d) life skills training/hygiene
(e) help with job hunting/resume prep
(f) transportation to job interviews
(g) transportation to work
(h) job development for individual consumers
(i) on-site job support
(j) off-site job support
(k) on-site job skills training
(l) off-site job skills training
(m) advocacy with employer
(n) coverage of employee absences
(o) formal job performance assessments
(p) peer support meetings
(q) problem solving/monitoring/crisis avoidance
(r) case management
(s) day program
(t) crisis intervention
(u) help finding/keeping housing
(v) family/social network contact
Question #3

For this question, please consider the entire history of the program in question, from the beginning (if your knowledge is limited to certain time periods be sure to consult with other staff about the entire period of operation) through the end of the program or today (the day you are completing this form). The year can be whatever you decide to make it, whether it is calendar year (January-December), or fiscal year, or any 12 month period beginning when the vocational program was initiated. For each consecutive 12-month period (Years 1-4), indicate how many full-time staff and how many part-time staff were already employed at the beginning of the year, how many new staff were hired that year, and how many staff people left the program. Items A-D refer to vocational staff in the vocational program and E-F refer to non-vocational staff in the vocational program. Please note this question is an exception in that it does not refer to the single month time period used in other questions.

Question #4

For this question, please consider the entire history of the program in question, from the beginning (or as early on as you have knowledge about) through the end of the program or today (the day you are completing this form). Estimate the racial/ethnic breakdown of all vocational and non-vocational program staff. The total should sum to 100%. Please note this question is an exception in that it does not refer to the single month time period used in other questions.

Question #5

You will complete this question in reference to three groups of staff: vocational staff, non-vocational staff, and support staff. Keep in mind that vocational staff are defined as **EIDP staff** who provide vocational services more than 50% of their time. Both vocational and non-vocational can include administrative and direct service staff. Support staff should only be counted if they provide support for vocational services. For example, if you have one receptionist, try to estimate the amount of that person’s time that is spent in support of vocational services or staff. In defining caseload, use your vocational program’s definition of how many consumers constitute a caseload. For example, some programs do not count consumers as part of the caseload if they have not received services within a specified time period. By indicating the number of FTE staff to total caseload, we can determine a staff to consumer ratio. For this question only, please respond in terms of a month when this vocational program was operating at full capacity in terms of staff and clients. Please note this question is an exception in that it does not refer to the single month time period used in other questions.

Question #6

Please indicate in your own words how this vocational program defines caseload, active vs. inactive consumers, and whether inactive consumers are still considered to be part of the caseload.

Question #7

This question refers to interactions among vocational staff within the vocational program only, and does not include clinical or other staff. Please choose the item that comes closest to describing this vocational program. Please feel free to write in additional comments or send the UIC Coordinating Center additional information if you want to clarify your response.
Question #8

In completing this question, do not count time spent in informal information sharing, only scheduled meetings. In addition, the meetings should be intended for vocational staff to meet together, not meetings at which vocational staff interact only because they happen to attend a larger group meeting.

Section III: Vocational Program Characteristics

Please note that there are sometimes differences between a program’s philosophy and the reality of practice, and that on the whole we are interested in capturing your program’s reality rather than philosophy, except where otherwise stated.

Question #9

We are interested in knowing about any special skills, licensure or certificates that characterize staff involved in your vocational program (not just vocational staff as previously defined in Question #1). Anyone who provides any services to an EIDP client is considered to be part of the vocational program for the purposes of this question, and should be described here. Please report on vocational staff who actually have special training or education for each of these roles (not on those who perform these roles). An individual staff person can have more than one role in the program, and so can be counted more than once for this question. The category rehabilitation professional (3h) refers to someone who has special training in providing vocational services and who only does vocational work (spends 100% of his or her time on vocational services). If you have staff that are certified or trained in other roles not listed, please list those roles under (i) for direct service staff or (j) for other.

Question #10

This question about the vocational program's hours of operation defines the time that vocational services are available as the time that vocational staff (staff who provide vocational services for 50% or more of their time) are available to interact directly with clients or talk to them by telephone. This can include a vocational staff person on call with a beeper. However, it must be staff that provide some kind of vocational service; availability of clinical providers should not be counted for this question. This question also asks you to indicate the number of hours of operation per week. For example, if your program had coverage of this sort 24 hours a day, seven days a week (24 X 7), or 24 hours a day Monday-Friday (24 X 5), you would multiply the number of days by 24 hours, and indicate “168” or “120 hours” (respectively) as your answer to Question #10.

Question #11

Once again, in this question the time vocational services are "available" means the time that vocational staff are officially available to talk to people in person or by telephone. This can include a vocational staff person on call with a beeper as long as coverage is always provided. Again, however, it must be staff that provide some kind of vocational service; clinical services alone do not count. This question asks for hours per month. Therefore, if services are not available every weekend, (i.e., only once or twice a month), it will be reflected here. If your program offers services 24 hours a day every weekend, then take 8 days (2 weekend days multiplied by 4 weekends per month) and multiply that by 24 hours, indicating "192 hours" as your answer to Question #11. If services are available every other weekend, then take 4 days (2 weekend days multiplied by 2 weekends per month) and multiply them by 24 hours, and put "96 hours" as your answer. If services are available every weekend, but only for 8 hours on Saturdays, then your answer would be "32 hours," etc.
Question #12

This question asks whether any staff are available to address vocational issues, not just vocational staff defined the >50% time rule. If your program has vocational services available 24 hours a day, seven days a week, then your answers to Questions #10 and #11 will also reflect this. However, this question can serve as an easy double-check.

Question #13

In this question about regularly scheduled meetings, the focus of a meeting means that at least 50% of the time is spent discussing the vocational treatment of clients and related clinical issues.

Question #14

Once again, this item refers to meetings at which 50% or more of the time is spent discussing the vocational treatment of clients and related clinical issues.

Question #15

“Peer” is defined for questions #15-18 as being a consumer of mental health services. These peer-to-peer services must be within a program, not just available by referral. If you cannot say for certain that these services deal with vocational issues in some way, or if you know that these services are specifically designed by program intent and policy not to deal with vocational issues, then the correct answer is “no”.

Question #16

This is a “circle all that apply” question, since there may be more than one peer-to-peer service available from the program. If any of the choices (a – f) apply to any of these services, then circle that choice. You do not need to differentiate between services.

Question #17

“Peer” is defined for Questions #15-18 as being a consumer of mental health services. These peer-to-peer services must be within a program, not just available by referral. If you cannot say for certain that these services deal with general (or non-vocational) issues in some way, or if you know that these services are specifically designed by program intent and policy not to deal with non-vocational issues (e.g., clinical or case management issues only), then the correct response answer is “no”.

Question #18

This is a “circle all that apply” question, since there may have more than one peer-to-peer service in the program that matches the description in #17. If any of the choices (a – f) apply to any of these services, then circle that choice. Once again, you do not need to differentiate between services.

Question #19

In this item, standardized instruments or assessment packages can include any formal assessment, any battery of tools, or any formalized situational assessment. The assessment does not have to include psychometric measures, but it should not be based solely on observing the client at work and making notes about performance.

Question #20
In characterizing your vocational program's *usual vocational procedures*, keep in mind that, while all of these procedures are likely to have been used at some time for some client(s), certain procedures may constitute the “norm.” We are interested in knowing the typical procedure at your program, i.e., your general approach to delivering vocational services and supports, as reflected in reality more than philosophy. One way to define this is to think about what procedure is used for greater than 50% of program clients, or what procedure is used greater than 50% of the time, or what procedure is used as the starting point for most clients. If you are unsure about how to respond to this item please be sure to discuss it with your site PI or RD or call the UIC Coordinating Center.

**Question #21**

This question asks you to consider all the priorities of your program, and rate the relative emphasis or importance given to family involvement. The notion of “family” here can include anyone that the respondent considers to be family, and is not limited to biological relatives.

**Question #22**

Considering all the priorities of your program, rate the relative emphasis or importance given to enhancement of natural supports (other than family). Natural supports are naturally-occurring social networks in consumers' lives and can include friends, acquaintances, coworkers, and other social contacts, such as with members of religious congregations, cultural groupings, etc.

**Question #23**

In responding to this question, keep in mind that the level of EIDP program involvement of state vocational rehabilitation (VR) counselors varies considerably from site to site. This item is intended to get a sense of how involved state VR counselors are in the day to day services received by the client. Please pick the option that best describes how state VR Counselor(s) interact with the program you are describing, at least for the majority of clients in that program. For this question, we are only interested in learning about actual state vocational rehabilitation counselors, not other providers who are only funded by the state VR.

**Question #24**

Please estimate the percentage of clients who received services from the EIDP vocational program you are describing (as of the criterion date chosen earlier) and were open VR cases at the same time.

**Question #25**

This item asks whether state VR funds are used to pay for any services that are part of the EIDP vocational program you are describing.

**Question #26**

Here, "work absence coverage" refers to situations in which a replacement is supplied to the employer whenever the consumer holding the position is absent from the job. Coverage may be provided by other consumers, staff, or any other individuals. Indicate how often whether such coverage is provided by the vocational program (routinely, sometimes or rarely/never).
Question #27

If the answer to Question #26 is routinely or sometimes, indicate here whether this coverage is usually provided by other program consumers/clients, program staff, or someone else (circle as many as apply). If you choose “other,” please provide a detailed description of the type of individual(s) who provides coverage.

Question #28

This item asks a series of questions about program outreach activities to clients who are not attending the program. These outreach activities should be for the purpose of re-engaging clients in the program or vocational services, and can involve any kind of staff, both vocational and non-vocational (including clinical). Please think about each of these strategies and characterize whether it is used routinely, sometimes, or rarely/never with clients who have disengaged from the vocational program without positive outcomes. Please be sure to indicate the frequency with which this program uses no strategy with disengaged clients of this type. If your program uses another strategy, or strategies, please indicate it (or them) and the frequency of use. Use more space (in the margins or on the back of the page) if necessary, but be sure to indicate that there is information on the back of a page by putting the word "over" or "continued on back" on the front of the page.

Question #29

Some vocational programs specify a limit or span of time for which services will be provided to a consumer/client. This can be based on time (e.g. number of months/years), achievements (job placement or other outcome), or transitions into other programs. In this question, please note whether there is any kind of specification in this program as to how long it plans to serve each client. “Time unlimited” means that the client will always be welcome, regardless of their services needs or vocational status (they could be working or not). If the answer to this question is (a) “time unlimited,” skip to Question #31.

Question #30

If you answered (b) “time-limited” to Question #29, please describe the nature of the limitation here (e.g., a specified time period, job placement, transition to another program, etc.).

Question #31

For this question, the term “closed” refers to situations in which the vocational program has no intent at that time to offer any further services to a client. Obviously, there may be changes that occur that could mean that a client is served again, but these should not be expected by program staff at the time of case closure. The phrase “regardless of his/her wishes” refers to situations in which, if a client expressed a wish to reactivate their client status, it would be disregarded at that time under these circumstances. Please try to choose from the categories provided, and only use “Other” after you have checked with your site PI, RD, or UIC Coordinating Center staff.

Question #32

This item refers to program-initiated assessments of consumer satisfaction, and does not include the EIDP Common Protocol Consumer Satisfaction Measure administered as part of the study.

Question #33

In this item, Continuous Quality Improvement (CQI) refers to on-going activities that examine
processes within the vocational program and adjust and improve them accordingly. CQI does not include changes made based on efficiency information for management purposes only, but refers to improvements made based on such things as client outcomes, client satisfaction, and staff quality of work life. Program model fidelity checks should not be included.

**Questions #34-40**

These items refer to Chart A, shown below. This chart was developed by the Cross-Site Program Measure Committee to represent each vocational program’s auspice agency as identified for the purposes of these items. You will find the vocational program that you have been describing in the first column and its related auspice agency listed in the second column. Answer questions #34-40 with reference to that auspice agency. If there is nothing listed in column 2, you may skip to Question #41.

**Chart A**  
Categorization of the vocational program – auspice agency(s) relationship, as agreed to for the purposes of this measure by the Cross-Site Program Measure Committee.

<table>
<thead>
<tr>
<th>Site</th>
<th>Vocational Program</th>
<th>Auspice Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>AZ</td>
<td>Personalized Employment Resources (integrated case management and vocational services)</td>
<td>Case management agency: Alternative Behavioral Services, Inc.</td>
</tr>
<tr>
<td></td>
<td>Some clients get non-integrated vocational services</td>
<td>Community Rehabilitation Programs (independent vendors)</td>
</tr>
<tr>
<td>ME</td>
<td>FACT/Consortium</td>
<td>FACT</td>
</tr>
<tr>
<td></td>
<td>FACT</td>
<td></td>
</tr>
<tr>
<td>MD</td>
<td>IPS/PACT</td>
<td>Harbor City Unlimited</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CT</td>
<td>IPS</td>
<td>Capitol Region Mental Health Center (CMHC)</td>
</tr>
<tr>
<td></td>
<td>Vocational Program</td>
<td>Chrysalis Clubhouse</td>
</tr>
<tr>
<td></td>
<td>Rehabilitation Center/Constructive Workshops</td>
<td></td>
</tr>
<tr>
<td>MA</td>
<td>Clubhouse</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PACT Team</td>
<td>Mental Health Center</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PA</td>
<td>LETS Program</td>
<td>Matrix Research Institute (Services Division)</td>
</tr>
<tr>
<td></td>
<td>Some clients may get vocational services from OVR or independent contractors</td>
<td></td>
</tr>
<tr>
<td>SC</td>
<td>IPS/ACT Team</td>
<td>Mental Health Center</td>
</tr>
<tr>
<td></td>
<td>Sheltered Workshop (non-profit (501(c)(3)) independently incorporated)</td>
<td>Mental Health Center</td>
</tr>
<tr>
<td>TX</td>
<td>EARNs</td>
<td>Center for Health Care Services (Mental Health Center)</td>
</tr>
<tr>
<td></td>
<td>Standard Supported Employment</td>
<td>Center for Health Care Services (Mental Health Center)</td>
</tr>
</tbody>
</table>

**Question #34**

If you have identified an auspice agency from the second-hand column of the chart, next to the vocational program you have been describing, then indicate “yes” to this question. If not, skip to
Question #41.

Question #35

This item asks about the number of clients, staff, and the size of the annual budget of the auspice agency. You should be able to get these numbers by talking to the agency administrator or from their annual report. If you cannot get the exact numbers, however, please try to give a best estimation. **If the numbers you provide include your vocational program, please indicate that in writing, next to your response (i.e., by writing something like "includes vocational program").**

Question #36

This item asks you to characterize the auspice agency related to your vocational program along 5 dimensions. From each of the five descriptor pairs, select the one that best describes the auspice agency you identified in Question #34. “Free-Standing” means that the auspice agency is its own organization, and is not considered to be part of any larger organization. “University affiliated” and “hospital affiliated” do not require that the auspice agency be under the control of a university or hospital, only that there is an organizational affiliation. “>=50% government funded” means that at least 50% of the auspice agency’s funds come from federal, state, or local government sources.

Question #37

This item is designed to elicit information about the Board of Directors or governing body that oversees the auspice agency related to your vocational program. Please provide a detailed description of the group of individuals or kind of entity that guides the auspice agency (you will be asked similar questions about the governing body of the vocational program in Question #41). Your answer should reflect reality as closely as possible, and not just philosophy or intention. Please describe the entity that influences planning and direction-setting for the auspice agency, and that is responsible for making important decisions that guide the agency. In this case, “influence” should mean having actual power to determine (whether it is used or not) and not strictly advisory. An agency may have more than one entity with the power for decision-making. (Since governance or participation can take many forms, this question is open-ended so that you can describe any form that exists at this auspice agency.)

Question #38

This item asks you to choose one description of the governing body you described in item #37. Try to pick the category that best applies. If none of these descriptions apply, please indicate “other” and give the entity’s actual name or a brief description in your own words.

Question #39

This question asks whether the governing body (described in item #37) has influence over a series of five administrative areas: financial, service delivery program design, staff hiring, program evaluation, and organizational structure. For each area listed, please circle "yes" if the entity has any decision-making influence over that area. In this case, “influence” should mean having actual power to determine (whether it is used or not) and not strictly advisory. An agency may have more than one entity with the power for decision-making.
**Question #40**

This question asks about the composition of the auspice agency governing body in terms of the total number of people who serve on it, the number of consumer/survivors who serve on it, the number of family members of consumers served by the auspice agency, and the number of family members of consumer(s) who are not served by the auspice agency. Consumer/survivor can refer to consumer(s) of any kind of mental health or mental retardation services. To the best of your knowledge, please indicate the number of individuals who fall into each category. These categories are not exclusive, and people can fit into more than one. (Consumers often do disclose their status when involved in this kind of entity, however there is no need to transgress against anyone’s privacy for the purposes of this instrument.) If, after checking with your site PI and RD, you cannot give the answer in actual numbers, you may estimate a percentage, but try to reflect reality as closely as possible.

**Question #41**

This question asks whether the vocational program you have been describing has a decision-making entity separate from that of the auspice agency (this could be a committee set up specifically for the EIDP). The vocational program and auspice agency entities may share some resources or members, but the vocational entity should operate independently of the auspice agency entity. If the vocational program has no decision-making or influencing entity that operates at least somewhat independently of the auspice agency’s entity, then the answer is “no,” and you can skip to Question #46 on page 18 of the questionnaire.

If your vocational program has no auspice agency, ask yourself whether it has a decision-making entity that influences planning, direction-setting, or decision-making for the vocational program. If so, then this is the entity you should describe in your answer to question #42. If not, skip to Question #46 on page 18 of the questionnaire.

**Question #42**

This item asks for information about the entity that guides the vocational program you have been describing (similar to the entity you described in regard to the auspice agency in Question #37). Please describe the entity that influences planning and direction-setting for the vocational program, and that is responsible for making important decisions or guiding the program. Since governance or participation can take many forms, this question is open-ended so that you can describe any form that exists at this vocational program.

**Question #43**

This item asks you to chose one description of the governing body you described in item #42. Try to pick the category that best applies. If none of these descriptions applies, please indicate “other” and give the entity’s actual name or a brief description in your own words.

**Question #44**

This question asks whether the governing body for the vocational program (described in item #42) has influence over a series of five administrative areas: financial, service delivery program design, staff hiring, program evaluation, and organizational structure. For each area listed, please circle “yes” if the entity has any decision-making influence over that area. In this case, “influence” should mean having actual power to determine (whether it is used or not) and not strictly advisory. An agency may have more than one entity with the power for decision-making.
Question #45

This question asks about the composition of the vocational program governing body in terms of the total number of people who serve on it, the number of consumer/survivors who serve on it, the number of family members of consumers served by the vocational program, and the number of family members of consumer(s) who are not served by the vocational program. Consumer/survivor can refer to consumer(s) of any kind of mental health or mental retardation services. To the best of your knowledge, please indicate the number of individuals who fall into each category. These categories are not exclusive, and people can fit into more than one. (Consumers often do disclose their status when involved in this kind of entity, however there is no need to transgress against anyone’s privacy for the purposes of this instrument.) If, after checking with your site PI and RD, you cannot give the answer in actual numbers, you may estimate a percentage, but try to reflect reality as closely as possible.

Question #46

This question asks you about vocational program staff's understanding as of the reference month that you’ve been answering most questions about. Specifically, you are asked to indicate the vocational program staff’s understanding of how long the program would last beyond the period of CMHS funding. Please indicate here whether the staff understood that the program would continue, would continue with possible modifications, would not continue, or whether staff were not told what would happen or had no clear understanding of what would happen. If you are unsure about how to respond to this item, check with your PI or RD and only select “don’t know” with their permission. If there was an understanding that the vocational program would continue beyond the period of CMHS funding with possible modifications, please describe these modifications in detail in response to Question #46a.

Question #47

From your knowledge today (at the time you are completing the questionnaire), please indicate whether you currently think that the vocational program will continue to serve clients beyond the period of CMHS funding. If the program has been or will be modified in any way after CMHS funding ends, please describe how in Question #47a. Since your funding has to change, please describe programmatic modifications in services or client.

Signature: Please sign here as an indication that you have completed the questionnaire.

Today’s Date: Please indicate the date you finish completing this measure.

When you are done, please keep a copy for yourself and send your responses by mail, fax, or email to the EIDP Coordinating Center.

Please return the measure to Jane Burke at:
EIDP Coordinating Center
UIC MHSRP
104 S. Michigan Ave., Suite 900
Chicago, IL 60603
Phone: 312-422-8180 x15
Fax: 312-422-0740
Email: jburke@psych.uic.edu

THANK YOU!
EIDP Cross-Site Program Measure Committee:

Laura Blankertz
Crystal Blyler
Jane Burke
Judith A. Cook
William Cook
Pamela Daggett
Paul Gold
Richard Goldberg
Laura Greene
Caroline Kaufmann
Steven Leff
Anthony Lehman
Cathaleene Macias
William McFarlane
Neil Meisler
Kim Mueser
Charles Rodican
Michael Shafer
Michelle Stewart
Marcia Toprac
Rosemarie Wolfe