The Development and Evaluation of a Recreation Referral Service Protocol for Persons with Disabilities at the Inclusive Recreation Resource Center

by

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A Master’s Project

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Individuals with disabilities continue to have limited opportunities and experiences in community recreation. Review of the research literature and best practices, and a needs assessment demonstrated the need for intervention in the area of individuals’ with disabilities participation in recreation. The purpose of this project was to increase access to recreation in New York State for individuals with disabilities and to develop, pilot, and evaluate the Recreation Referral Service (RRS). The conceptual framework for development of the RRS was an integration of the theory of ecological perspective, principles of normalization and social role valorization, and the construct of self-determination. Along with the literature review and needs assessment, an RRS protocol was developed and the *Inclusive Recreation Resource Center Recreation Referral Service Manual for Staff and Students* was a product of the protocol. Implementation of the program occurred through graduate and undergraduate students working with individuals with disabilities participating from local disability organizations. Evaluation of services took place through documentation and participant, student, and agency feedback. The New York State Developmental Disabilities Planning Council provided funding for the project.
Acknowledgements

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Chapter 1

INTRODUCTION

Individuals with disabilities have often faced adversity through exclusion from the community. Deinstitutionalization in the 1970s changed the “face” of housing for many people with disabilities. Many individuals who lived in institutions moved to their own homes or into smaller group homes. After moving out of the institutions, many individuals with disabilities accessed the community more frequently. The Americans with Disabilities Act of 1990 (ADA) (P.L. 101-336) was an important step toward ridding society of inherent discrimination against individuals with disabilities. The law states that public agencies make “reasonable accommodations” for individuals with disabilities in the public and in the workplace, mandating that certain buildings and public transportation be physically accessible. Other accommodations, such as modified schedules or equipment, modified training materials or techniques, and support through interpreters or other sources, were included in ADA (Segal & Brzuzy, 1998). The Individuals with Disabilities Education Act of 1990 (IDEA) (P.L. 105-17) is the result of a number of additions to the original IDEA of 1974. IDEA mandates that all children have access to education and related services and the school is responsible for accommodations and other necessary resources; one of those identified resources is access to recreation (Ashton-Schaeffer, Johnson, & Bullock, 2000).
The creation of legislation to reduce and eliminate discrimination for individuals with disabilities has allowed strides toward inclusion. However, there is more work to do. True inclusion is more than physical access, but is also the social inclusion of individuals with disabilities in non-segregated programs and places (Anderson & Kress, 2003). Multiple researchers have focused on inclusion practices in recreation and leisure. The researchers have discovered strategies to include individuals with disabilities in programs that traditionally only served individuals without disabilities (Anderson & Kress, 2003; Anderson, Schleien, McAvoy, Lais, & Seligmann, 1997; Conatser & Block, 2001; Green & DeCoux, 1994; Sable, Craig, & Lee, 2000; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002). Individuals with and without disabilities can benefit from inclusion. Both groups can experience change in attitude toward having a disability and toward people with a disability, an increase in friendships, increased skills and abilities, and personal growth (Anderson, Schleien, McAvoy, Lais, & Seligmann, 1997; Miller, Schleien, Rider, Hall, Roche, & Worsley, 2002; Schleien, Ray, & Green, 1997).

A Therapeutic Recreation Specialist (TRS) can facilitate the inclusion process. The TRS assists an individual in establishing an independent leisure lifestyle, where the person feels competent, capable, and in control of his or her life, particularly regarding recreation and leisure. This occurs through carefully chosen interventions, leisure education, and recreation participation (Shank & Coyle, 2002). Using an ecological perspective, a TRS addresses inclusion by looking at the individual as well as his or her family or supports, community, and environment (Raymore, 2002; Scholl, Dieser, & Davison, 2005). Raymore (2002) discusses facilitators to recreation and leisure as those
factors that promote participation in recreation and leisure, complementing the ubiquitous study of barriers by researchers (Jackson, Crawford, & Godbey, 1993). A TRS considers facilitators, barriers, and the whole person when implementing inclusion or educating other professionals on inclusive practices.

Understanding the availability of inclusive recreation opportunities for people with disabilities is key to understanding their patterns of leisure participation. While programs for school aged children and youth with disabilities are somewhat available due to the requirements of ADA, they continue to be insufficient. As children with disabilities age, their levels of participation in diverse activities decrease (King, Law, King, Hurley, Hanna, Kertoy, & Rosenbaum, 2007). After leaving school, individuals with disabilities often hit a “wall” of limited recreation and leisure resources or programs (Klitzing & Wachter, 2005; Wachter & McGowan, 2002). While there is a lack of inclusive services available for all individuals with disabilities, the largest gap occurs for individuals between high school graduation and older adulthood. As individuals age into older adults, there is an increase in available programming, this group being the largest population served by therapeutic recreation (Carter & Foret, 1991).

The research literature identifies a number of common practices that encourage the participation of all individuals. The initial approach of an agency in evaluating its inclusivity is whether the individual can physically access the site for a program (Anderson & Kress, 2003). The agency then considers the usability and convenience of programs and services themselves (Anderson & Kress, 2003). “All inclusive” advertising should reach the whole community, including people with disabilities and their families, schools, agencies serving and/or advocating for individuals with disabilities, and other
human or social service agencies (Anderson & Kress, 2003). Age appropriate programs (Wachter & McGowan, 2002) and least restrictive environments are important considerations when including individuals with disabilities in programs.

It is important that information about services and accommodations for individuals with disabilities are available through a simple contact to an organization. Depending on the needs of the individual, accommodations may include modifications to equipment, activities, and rules (Anderson & Kress, 2003; Green & DeCoux, 1994; Klitzing & Wachter, 2005; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002). Agencies can provide extra staff, identify possible partners in the community or from the group, or other natural supports to assist an individual with a disability in program, as needed (Anderson & Kress, 2003; Klitzing & Wachter, 2005; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005).

Education or awareness training for staff and/or the group from the program can smooth the transition for an individual with a disability into an inclusive program. The individual can provide input regarding his or her disability, deciding if he or she will take part in some of the training (Anderson & Kress, 2003; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002). Program and individual assessment and evaluation are essential to understanding the individual’s experience, other participants’ experiences, and the overall success of inclusion in a recreation program (Anderson & Kress, 2003; Klitzing & Wachter, 2005; Wachter & McGowan, 2002).

The rationale of inclusive recreation and leisure programs is to provide opportunities to meet each individual’s needs, thereby improving his or her quality of
life. Inclusive approaches allow programs to accomplish goals for a greater number of individuals. In a majority of situations, only simple steps or modifications are required to facilitate inclusion (Anderson & Kress, 2003).

In 2007, SUNY Cortland’s Department of Recreation, Parks and Leisure Studies received a grant from the New York State Developmental Disabilities Planning Council for the creation of a center that educates and trains students and agencies on inclusion practices. The project involves development of curricula, networking with individuals and organizations in New York State, the development of groups advocating for inclusion, and the development of a recreation referral service for individuals with disabilities (Anderson, 2006). The purpose of the project is to increase access to recreation in New York State for individuals with disabilities and to develop, pilot, and evaluate the RRS.

The Inclusive Recreation Resource Center (IRRC) Recreation Referral Service (RRS) will implement inclusion strategies using best practices, as discussed in the research literature on an individualized basis. The RRS serves individuals with developmental and other disabilities of all ages, as well as organizations, in the state of New York. The degree of participation by the RRS depends on the needs of the individual seeking assistance. IRRC staff, SUNY Cortland students, or trained volunteers provide the individual with a disability with information about recreation or leisure resources available. Some situations require the IRRC staff to go into the community and train recreation agency staff on inclusion practices in order that the person with a disability can participate successfully.
Students and staff from the SUNY Cortland’s Department of Recreation and Leisure Studies have implemented the RRS. A manual for the implementation of the RRS assists IRRC staff and students when working with an individual using the service.

**Statement of the Problem**

Individuals with disabilities are more included in the community than they have been in the past, yet full inclusion or “belonging” (Mitsubishi Electric America Foundation, 2007) has not occurred completely in communities throughout the United States. The purpose of the Recreation Referral Service is to connect individuals with disabilities with inclusive recreation and leisure resources. Individuals with disabilities decide the recreation they access through participation in the RRS process. When community agencies need assistance in inclusion, IRRC staff provide support or training as needed to create an inclusive program. The purpose of this project was to develop, pilot, and evaluate the RRS.

**Project Objectives**

The overall objective of this project was to develop and evaluate a protocol that connects individuals with disabilities with recreation and leisure resources, leading to improved quality of life.
Objectives for the Overall Project

Objective 1: To identify best practices for inclusion in the research literature.

Objective 2: To identify the needs of individuals with disabilities and their families for inclusive recreation services through a needs assessment. The goals of the survey were to understand the resources used in the local area, individual and family experiences with inclusive programs, and whether individuals and families would use the RRS.

Objective 3: To create and evaluate a protocol for the RRS that provides a description and guide for implementation of the service.

Objectives for the Recreation Referral Service

Objective 1: To increase inclusion of persons of all abilities in recreation and leisure programs and resources in the community.

Objective 1a: To assess recreation and leisure resources’ levels of accessibility, both physical and social, using the Inclusivity Assessment Tool (Anderson, Wilson, & Penney McGee, 2007).

Objective 1b: To educate and train individuals and agencies to increase the knowledge and awareness of best practices for inclusion.
Objective 2: To increase the quality of experience in recreation and leisure for individuals with developmental and other disabilities using the inclusion process outlined in the RRS protocol.

Objective 3: To increase the individual’s quality of life after using the RRS.

Assumptions

A major assumption for this project was that all individuals, despite ability, desire to be accepted and included in their communities. Another assumption was that the benefits of recreation and leisure are such that if a person can develop an individual leisure lifestyle, he or she will experience an increased quality of life. As well, an assumption for this project was, when individuals develop natural supports within their recreation, they will experience sustained participation in the chosen recreation.

Delimitations

Piloting of the RRS was delimited to working with individuals with developmental and other disabilities from the Finger Lakes Region of New York. SUNY Cortland students within the courses Recreation 393, 529, and 475/606 worked directly with individuals drawn from agencies within the Cortland community. Individuals who participated in the RRS lived within the Finger Lakes Region and received services from the agencies selected to work with the IRRC.
Delimitations for the RRS overall, were that the main population was individuals with developmental disabilities, but the IRRC serves any individual with a disability seeking service. Development, piloting, and evaluation of the RRS occurred during 2007.

**Limitations**

The project served individuals with disabilities seeking services from IRRC and who were already involved with agencies selected to work with the IRRC. The RRS implementation occurred using undergraduate students with limited or no experience working with individuals with disabilities and with completing documentation. Specific concerns with documentation included inexperience and a lack of knowledge in writing goals and objectives. Students mandated to complete an Inclusivity Assessment Tool within the community did not use the tool for its recommended purpose of supplicating information for their individual working with the RRS.

The number of individuals served depended on the level of advertising and awareness of the service. Training and education of recreation professionals and recreation agencies depended on the willingness the professionals and agencies to cooperate with IRRC. The recreation agencies’ willingness to adopt best practices for inclusion depended on the administration and staff of the recreation agencies. Due to the lack of students using the IAT, no agencies received training or education from the IRRC by way of the RRS.
The small size and newness of the RRS limited the number of individuals who actually delivered services (1 full-time employee, 1 full-time student intern, 1 part-time graduate assistant, 2 graduate students, 8 undergraduate students). The short time span of one semester limited the quality of service provided by students, while many students did not complete the necessary paperwork in a timely fashion, thereby delaying commencement of services. Students and the student intern reported issues with families or individuals not following through with planned services.

**Definitions**

*Inclusion:* Overall, it is “belonging”, truly being a part of a group or community in every aspect, where interactions are positive, all individuals are valued, and opportunities and freedom of choice are available (Mitsubishi Electric America Foundation, 2007).

*Best Practices for Inclusion:* The implementation of practices by agencies and programs that provide inclusive programs that meet the needs of individuals with disabilities based on research. These may include the use of adaptive equipment, education of new skills for the individual with a disability, disability education for participants without a disability, provision of a staff or partner for the individual, and some form of follow up or evaluation of the program by the individual with a disability (Klitzing & Wachter, 2005).

*Developmental Disability:* A condition, disorder, or disability that develops at birth or during childhood that causes mental or physical limitations or that inhibits an individual
from performing a variety of necessary daily living activities independently (NYS-OMRDD, 2007).

Disability: The Americans with Disabilities Act of 1990 (P.L. 101-336) defines disability as “a physical or mental impairment that substantially limits one or more major life functions, a record of such an impairment, or being regarded as having an impairment” (Southeast Disability & Business Technical Assistance Center on the Americans with Disabilities Act, 2007).

Ecological Perspective: The understanding of a person’s environment and “the contexts in which an individual exists, [the ecological perspective] incorporates the interactions between the individual, other individuals and the social structure of society…” (Raymore, 2002, p. 41-42). The individual’s culture, ethnicity, community, and the general environment are considered (Raymore, 2002; Scholl, Dieser, & Davison, 2005).

Recreation: An activity or experience that is voluntary and does not involve work, the purpose of the experience is for the attainment of personal and/or social gains, these include personal renewal and/or social interaction and accord (Shank & Coyle, 2002).

Leisure: The quality of an activity or experience distinguished by the level of satisfaction, intrinsic motivation, and perceived freedom a person feels when performing or experiencing the action (Shank & Coyle, 2002).
**Leisure Lifestyle:** The ability of a person to choose the recreation and leisure activities of his or her own life, and to be independent and capable of participating in those chosen activities with little or no barriers (Shank & Coyle, 2002).

**Quality of Life:** “…The opportunities and supports that exist in the physical and social environment, which enable [individuals] to achieve and maintain physical health, a sense of belonging, and various personal aspirations that give meaning and purpose to life” (Shank & Coyle, 2002, p. 26).

**Therapeutic Recreation:** A recreation profession that assists an individual with a disability or illness through functional interventions, leisure education, and participation, in establishing an independent leisure lifestyle, where the person feels competent, capable, and in control of his or her life, particularly regarding recreation and leisure (Shank & Coyle, 2002).

**Therapeutic Recreation Specialist (TRS):** A professional who practices the use of functional interventions, leisure education, and participation to assist an individual with a disability or illness to live an independent leisure lifestyle (Shank & Coyle, 2002).

**Inclusive Recreation Resource Center (IRRC):** A program established through a grant received by the SUNY Cortland Department of Recreation and Leisure Studies. The grant involves the development of curricula, networking with individuals and organizations in New York, development of groups advocating for inclusion, and the development of a
recreation referral service for individuals with disabilities. The Recreation Referral Service is one piece of the multiple components of increasing inclusion practices throughout New York State (Anderson, 2006).

*Recreation Referral Service:* A program working with individuals with developmental and other disabilities that connects individuals with recreation and leisure resources in New York State. The IRRC staff and students intervene as the individual’s accommodations and the recreation and leisure resources require (Anderson, 2006).
Chapter 2

REVIEW OF THE LITERATURE

Introduction

The purpose of this literature review is to define inclusion and the theories that provide a greater scope of the understanding of inclusion. The review of the literature also discusses best practices used in non-segregated recreation and leisure programs. The purpose of this project is to develop, pilot, and evaluate the Recreation Referral Service (RRS) for inclusion of individuals with disabilities into community recreation and leisure resources, and to document the quality of life of the individuals after working with the RRS.

The Inclusive Recreation Resource Center’s (IRRC) Recreation Referral Service (RRS) connects individuals with developmental or other disabilities to recreation and leisure opportunities in New York State. The level of matching and referral service varies depending on the individual’s needs. Some individuals and/or their families simply need contact information. Other individuals require an in-depth assessment and a higher level of interaction with the recreation agency and the project coordinator or staff and students at the center. IRRC staff and SUNY Cortland students assess the interests,
desires, and abilities of the individuals seeking services through IRRC. The Inclusivity Assessment Tool (IAT) (Anderson, Wilson, & Penney McGee, 2007) assesses the degree of inclusion the recreation agency practices. Implementation of the IAT occurs when someone has identified a program or resource as a desired recreation provider. The assessment involves not only the assessment of physical access, but also the level of social inclusion, an essential part of the process (Anderson & Kress, 2003).

**Inclusion in Recreation and Leisure**

Inclusion involves the integration of an individual into a group, program, or place where traditionally, separation of those with and without disabilities was the pattern. Inclusion is more than having an individual with a disability present, and accessibility is more than architectural design. True inclusion involves an individual being present and playing a meaningful role in the group or community, the same as any other member in the group. The inclusion process includes provision of any necessary supports and services within programs the individual chooses in order for the individual to participate as fully as possible (Anderson & Kress, 2003; Wachter & McGowan, 2002).

According to King, Law, King, Hurley, Hanna, Kertoy, and Rosenbaum (2007), children with disabilities participate in recreation and leisure activities that are less varied and quieter, with less social opportunities than children without disabilities. Recreation programs have not always made the inclusion of individuals with disabilities their highest priority (Schleien, Ray, & Green, 1997), even though inclusion has received much attention by the recreation field. Multiple researchers have described programs that
implement different strategies to provide meaningful participation for people of all abilities (Anderson, Schleien, McAvoy, Lais, & Segilmann, 1997; Green & DeCoux, 1994; Klitzing & Wachter, 2005; Sable, Craig, & Lee, 2000; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002).

Recreation and leisure play an important part in experiencing a high-level quality of life (Stumbo & Peterson, 2004). A healthy leisure lifestyle affects the cognitive, social, physical, emotional, and even spiritual domains of an individual. A leisure lifestyle is the ability of a person to choose the activities of his or her own life, and to be independent and capable of participating in those chosen activities with little or no barriers. Therapeutic Recreation (TR) programs focus on finding a purpose and meaning in life through recreation and leisure. TR assists an individual in becoming independent in the leisure lifestyle he or she chooses (Shank & Coyle, 2002). This ultimately comes from finding and/or maintaining natural support systems, health education, skill or functional development, and advocacy training (Sable, Craig, & Lee, 2000). Outcomes such as cognitive and functional improvement, increased ability to make choices independently, decreased maladaptive behaviors, and enhanced coping skills strategies can occur by participating in therapeutic recreation programs (Hobbs Vinluan, 2005). Individuals with disabilities have not experienced the benefits discussed due to a long history of separation from self-driven and self-determining recreation.
History and Background of Disability Legislation and Practices

Disability legislation and practices have changed dramatically since the latter half of the twentieth century and they continue to change. Although Illinois park districts began as early as the 1960s to provide individuals with disabilities with recreation programs, inclusion came later as the passage of more state legislation increased the number of providers for recreation (Wachter & McGowan, 2002). Many state and other recreation and leisure programs followed a similar model of change and continue to adapt in order to meet the needs of individuals with disabilities and to provide inclusive programs (Schleien, Germ, & McAvoy, 1996). Before the evolution of legislation in the area of disabilities, many parents organized services for their children when agencies were unsure of how to implement strategies to include individuals with disabilities (Schleien, Ray, & Green, 1997).

The Architectural Barriers Act of 1968 and the Rehabilitation Act of 1973 are laws that made great strides regarding inclusion of individuals with disabilities. The Architectural Barriers Act addressed discrimination in the physical sense, stating that certain public facilities need to be physically accessible to all individuals. The Rehabilitation Act stated that discrimination due to disability was illegal and a violation of human rights (Schleien, Ray, & Green, 1997).

Since the 1970s, professionals in the human service field have worked to change the meaning of true participation for individuals with disabilities in the community. Through The Education for All Handicapped Children Act of 1975 now known as the Individuals with Disabilities Education Act of 1990 (IDEA) multiple services regarding
education, recreation and others have been made available to school-aged children and youth with disabilities. The students and involved families are able to choose services they feel will serve the individuals’ needs most appropriately (Ashton-Shaeffer, Johnson, & Bullock, 2000; Schleien, Germ, & McAvoy, 1996; Schleien, Ray, & Green, 1997).

Individuals have moved from a complete separation from the community prior to the 1970s to deinstitutionalization. Institutionalization is restrictive and a violation of civil rights, thus a change in perspective occurred regarding individuals with disabilities in the community. By promoting normalization, emphasizing environments where a person with a disability has the same opportunities and experiences as a person without a disability, society was making a step toward inclusion (Schleien, Ray, & Green, 1997). After the deinstitutionalization movement, many individuals moved in with their families, lived independently, or moved into smaller “group homes.” People with disabilities were to be a part of the community and the community acknowledged their presence, yet they were still merely present, not yet included (Schleien, Ray, & Green, 1997).

In an attempt to relieve the community of further discrimination, the existing legislation was expanded with the Americans with Disabilities Act of 1990 (ADA) by addressing the civil rights of individuals with disabilities in the community, in the workplace and beyond (Schleien, Ray, & Green, 1997). ADA states that recreation and leisure providers, both public and private, must serve individuals with disabilities according to the needs and interests of the individual (Schleien, Germ, & McAvoy, 1996).

Individuals with disabilities, professionals, families of people with disabilities, and advocates desire to move toward meaningful and true inclusion of individuals with
disabilities (Ippoliti, Peppey, & Depoy, 1994; Klitzing & Wachter, 2005; Sable, Craig, & Lee, 2000). In 1999, the National Recreation and Park Association (NRPA) and the National Therapeutic Recreation Society’s (NTRS) published a “Position Statement on Inclusion.” This statement strives to foster the inclusion of all individuals through the provision of opportunities by park, recreation, and leisure service providers. Statements included were for individuals with disabilities to have the “right to leisure,” to live a certain level of “quality of life,” to experience the “support, assistance, and accommodations” necessary, and to experience the least amount of barriers in recreation (NRPA, 1999).

**Need for Inclusion**

Individuals with disabilities often have a great amount of free time but are underrepresented in recreation and leisure activities. The lack of participation may be due to lack of awareness of resources available, lack of opportunity within programs or the community, or the continued use of programs specifically designed for individuals with disabilities. Individuals may desire to explore their interests and the opportunities in their community (Anderson & Kress, 2003).

Wachter and McGowan (2002) noted that more than 90% of the participants in their research on inclusive practices in recreation and leisure were school-aged children, recognizing the following trend regarding inclusion and age,

…may reflect the current generation of parents’ and children’s expectations and experiences of inclusion within and beyond the school environment. The adult participants were most likely products of more segregated educational experiences and more likely chose segregated recreation experiences. It is also
possible that adults were less represented in inclusive programs as a result of a lack of information about the options and support available for participation in community recreation programs; innovative marketing strategies may need to be employed if this is the case (p. 179).

Recreation services for individuals with developmental disabilities are often more available for elementary school through high school-aged youth due to IDEA, but still lack the ideal design for inclusion and there are a limited number of services available. Many individuals encounter even more exclusion or segregation after leaving school. The demand for services for individuals with disabilities is high and the opportunities for recreation and leisure become more limited. As individuals with disabilities age, they become a part of the largest group served by therapeutic recreation (Carter & Foret, 1991). Klitzing and Wachter (2005) stated that 94% of the participants in recreation programs they researched were preschool and grade school children. Scholl, Smith, & Davison (2005) note, in general, young individuals with developmental disabilities are not included in recreation and after-school programs in the broader community. As children age, specifically with physical disabilities, the diversity of participation decreases (King, Law, King, Hurley, Hanna, Kertoy, & Rosenbaum, 2007).

Individuals with severe disabilities, defined as “severe or profound mental retardation, severe behavior problems, blindness, physical disabilities, multiple disabilities, or severe autism,” receive services less often than those with mild to moderate disabilities (Conatser & Block, 2001, p. 173). According to the U.S. Census Bureau, individuals with some kind of disability represent close to 20% of the population, and nearly half of those individuals have “severe” disabilities (Klitzing & Wachter, 2005; McNeil, 2001).
Establishing a more equal balance of the types of services and the number of services for all individuals with disabilities, despite age and ability, is essential to ensure that as many individuals as possible receive services or will be able to participate as they choose. Inclusion is not about adding or creating more programs for individuals with disabilities, but enhancing existing programs in the community to include individuals of all abilities (Wachter & McGowan, 2002).

Therapeutic Recreation specifically focuses on assisting individuals with disabilities and/or illnesses in becoming as independent as possible in a healthy leisure lifestyle. The therapeutic recreation specialist uses strategies such as functional intervention, leisure education, and participation as needed by the individual, through continual assessment and evaluation of the person’s attitudes, knowledge, and behaviors. The professional sets goals with the individual and works toward accomplishing these goals with the individual. The goals focus on the individual’s strengths and use those strengths to obtain the established goals. Ultimately, the individual will end services feeling competent, capable, and in control of his or her future, particularly feeling this way in regards to his or her chosen leisure lifestyle (Shank & Coyle, 2002).

Benefits of Inclusion

Benefits for All People

People with and without disabilities experience many similar benefits from inclusion in the community. Research has shown that both participants with disabilities and participants without disabilities can experience positive changes in a variety of ways.
Individuals with and without disabilities can experience changes in attitude toward having a disability and toward people with a disability. Both groups also experience an increase in existing friendships, they can develop or increase skills and abilities, and they may experience personal growth (Anderson & Kress, 2003; Anderson, Schleien, McAvoy, Lais, & Seligmann, 1997; Miller, Schleien, Rider, Hall, Roche, & Worsley, 2002; Schleien, Ray, & Green, 1997).

Inclusion in recreation and leisure opportunities increases the amount of positive experiences and the quality of relationships for all individuals. Positive experiences add to the many domains of an individual, the physical, emotional, social, and even spiritual aspects of each person. An independent leisure lifestyle can promote health and actually decrease occurrence of illness (NRPA, 1999). Relationship enrichment occurs through “peer and intergenerational relationships that allow one to share affection, support, companionship and assistance” (NRPA, 1999, ¶ 3).

**Benefits for Individuals with Disabilities**

Individuals with disabilities, particularly those with developmental disabilities, experience an opportunity to increase socialization opportunities, to improve social skills, and to learn age-appropriate behaviors from their peers without disabilities (Anderson & Kress, 2003; Schleien, Ray, & Green, 1997). Independence can be a concern for many individuals; they desire to be as independent as possible. Inclusion provides an opportunity for individuals with disabilities to “step out,” make choices and exercise a level of independence they may not have had before (Anderson & Kress, 2003).
**Benefits for Individuals without Disabilities**

Participants without disabilities also have a meaningful leisure experience in inclusive settings. Exposure to a group of people they may have biases or prejudices against helps eliminate false ideations (Conatser & Block, 2001). Oftentimes meeting an individual from a group that may be different from his or her own allows a person to gain a better understanding of that group in general. By including individuals with disabilities, clarification and better understanding regarding certain disabilities occurs (Conatser & Block, 2001; Miller, Schleien, Rider, Hall, Roche, and Worsley, 2002). Through the development of support from the community and the encouragement of attitude changes in individuals who do not understand inclusion, the community can become a place that encourages and supports all individuals to participate as they desire (NRPA, 1999).

**Facilitators and Barriers**

By reducing barriers and promoting facilitators for all types of individuals with disabilities, the whole community can benefit. A facilitator is any situation or action that promotes or fosters participation in a leisure life (Raymore, 2002). The reduction of barriers allows individuals with disabilities to be a part of the community through contribution and participation. Individuals with disabilities experience the same benefits as individuals without disabilities through recreation and leisure opportunities, where therapeutic recreation often enhances these opportunities for individuals needing support in their leisure lifestyle. Improvements in the areas of the mind, body, and soul occur.
when all individuals are able to function freely through choice and decision-making opportunities, and live an independent leisure lifestyle (Shank & Coyle, 2002).

Crawford and Godbey (1987) state that a barrier is anything that comes between a person’s preference for an activity and that person’s ability to participate in the activity. Raymore (2002) complements the barrier research by focusing on the facilitators in recreation and leisure. In the same way that participants have barriers in common, they also share similar facilitators. Understanding both barriers and facilitators helps the recreation professional design programs that enhance participation and meet the needs of all participants in the program (Raymore, 2002).

Many individuals with disabilities live with family or in group-homes. The schedules and resources are limited according to which staff or family member is available and whether or not that person is willing to transport or assist the individual with a disability (Wehmeyer & Metzler, 1995). This is one reason a focus on facilitators is so important. By focusing on barriers, professionals do not see the ways to promote participation. By focusing on the conditions that draw participants into program, professionals can increase participation from the community (Raymore, 2002).

Theories and Constructs

Researchers in the field of parks and recreation have researched strategies and reasons individuals participate in recreation and leisure. Particularly, evaluation of the participation of individuals with disabilities is important because individuals with disabilities often participate in recreation and leisure less than others in the community
(Anderson & Kress, 2003). The types of recreation and leisure activities also vary for individuals with disabilities, as often the activities are less social and less varied as individuals age (King, Law, King, Hurley, Hanna, Kertoy, & Rosenbaum, 2007). The multiple theories and ideas regarding inclusion in recreation and leisure frequently use a holistic approach. The individual with a disability and his or her supports are considered to understand the person within the context of his or her environment.

**The Ecological Perspective**

The ecological perspective, in general, focuses on the factors and conditions that interact with an individual. This approach addresses culture, ethnicity, community, and the general environment of an individual’s life and its interaction with the individual (Raymore, 2002; Scholl, Dieser, & Davison, 2005). Raymore (2002) states that a person can be better understood by understanding his or her environment and “the contexts in which an individual exists, and incorporates the interactions between the individual, other individuals and the social structure of society…” (p. 41-42). Henderson (1997) notes the importance of recognizing that many constraints for individuals originate in the community and may be bigger than the individual’s own barriers. By ignoring the community’s role, researchers may be displacing society’s responsibility regarding inclusion. When considering the person, also consider the environment in which he or she lives.

The ecological approach assists therapeutic recreation specialists and other recreation and leisure professionals to understand the reasons an individual participates or
does not participate, and provides better understanding of the individual as a unique person (Raymore, 2002). Scholl, Dieser, and Davison (2005) note that because people are interdependent, it is essential to understand the involvement of familial or social relationships for people and as a professional, to consider the individual’s level of interdependence. Professionals must consider the important aspects in the person’s life while planning in order to meet the individual’s needs. Just as the person with a disability’s greater environment is considered, the roles that environment values are considered.

**Normalization/Social Role Valorization Theory**

All individuals, regardless of ability level, should experience life and participate in activities with a ‘normal’ level of “risk-taking, fun, choices and acceptance” (NRPA, 1999, ¶10). Normalization is about setting a standard and a specific manner, by which the evaluation of services for people with disabilities occurs. A person should have the same experience of risks and benefits through services and in the community that a person without a disability experiences. Services are not segregated and environments are the least restrictive, meaning the provision of services is at the lowest level of assistance and support necessary while still meeting the individual’s needs (Schleien, Ray, & Green, 1997; Wolfensberger, 2000). Green and DeCoux (1994) referenced the parents of a child with a disability who played on a community basketball team, stating the child’s “parents believed that normalized childhood experiences, including an
opportunity to play, take risks, and be with friends, outweighed the risks normally
associated with a child with an extensive physical disability” (p. 42).

Due to normalization’s reference to, what is subjectively termed ‘normal,’ there is
a move towards the acceptance of social role valorization over normalization theory
(Sherill, 2003; Wolfensberger, 2000). “Social role valorization” involves the
establishment of roles and conditions that the general community considers “valuable”
and allows individuals with disabilities to “take on” those valued roles and conditions
(Schleien, Ray, & Green, 1997, p. 10). Social role valorization states that individuals will
perform in the way others expect them to perform and that persons will expect of
themselves what others expect of them. The focus of valorization is on an individual
being his or her best, taking on roles in the community that he or she values and that
others in the community value (Sherill, 2003). Inclusion contributes to normalization and
valorization theory by emphasizing the quality of relationships originating in recreation
and leisure experiences. The inclusion process recognizes and values individual
differences and emphasizes development of natural supports, which increases the
person’s level of acceptance and esteem in the community (Wachter & McGowan, 2002).

Self-Determination

Self-determination theory addresses multiple facets of an individual. Self-
actualization, realizing one’s own abilities and strengths, and self-regulation, monitoring
one’s own behavior, are two pieces of self-determination theory (Wehmeyer & Metzler,
1995). There is a need for competence, autonomy, and relatedness in self-determination.
When an individual makes decisions on his or her own, he or she must feel capable of making an appropriate decision. Autonomy refers to an internal motivation and reasoning for a decision and the ability to be self-determined in an environment that supports the person’s individuality in making decisions. A sense of belonging is important in relatedness; the person must feel a part of a community where he or she is connected (Hill & Sibthorp, 2006). Some researchers believe self-determination is the most important ability in transitioning successfully from high school to adulthood for a person with a disability (Wehmeyer & Metzler, 1995).

Inclusion involves the encouragement of an individual to be self-determined, an essential piece to living a satisfying leisure lifestyle. Ippoliti, Peppey, and Depoy (1994) describe a focus group of five participants with developmental disabilities. The participants’ talked about their needs in a recreation program and the best ways to provide programs that would meet those needs. The overall theme of the multiple focus groups was the integration of individuals with developmental disabilities “on their own terms” (Ippoliti, Peppey, & Depoy, 1994, p. 459). These individuals highlighted self-determination as most important regarding inclusion in recreation services.

**Best Practices**

There is an abundant amount of literature regarding inclusive services for individuals with disabilities (Anderson, Schleien, McAvoy, Lais, & Seligmann, 1997; Green & DeCoux, 1994; Klitzing & Wachter, 2005; Miller, Schleien, Rider, Hall, Roche, Worsley, 2002; Sable, Craig, & Lee, 2000; Scholl, Dieser, & Davison, 2005; Scholl,
Smith, & Davison, 2005; Wachter & McGowan, 2002). Often the necessary adaptations for inclusion are simple and inexpensive (Anderson & Kress, 2003). While the process of inclusion may be complicated due to the variety of possible needs or necessary accommodations for an individual with a disability, it is essential to understand how inclusion can enrich a program if the professional and the community are willing to make some accommodations. Studies have shown successful inclusion of individuals with disabilities in team sports through simple modifications of the rules (Green & DeCoux, 1994). Other studies have demonstrated inclusion in the community with simple modifications to the local environment (Sable, Craig, & Lee, 2000). Individuals were able to pursue the recreation and leisure life they desired through the assistance of professionals, through natural supports, and through the willingness of the community (Green & DeCoux, 1994; Sable, Craig, & Lee, 2000). It is important to recognize that community willingness to make the necessary accommodations for individuals with disabilities makes the inclusion process smoother. Many times, there are simple solutions in order to include an individual. Other times the inclusion process may be more complicated, but it is essential to avoid exclusion due to lack of accessibility or inclusivity.

When considering inclusion in program planning and implementation, the ecological perspective views the individual as one piece of a complex system. A person’s environment contributes to characterization of that person. This environment includes the person’s immediate supports, friends, family, and it includes the community in which the person lives, works, and/or goes to school (Raymore, 2002; Scholl, Dieser, & Davison, 2005). The person’s environment, home, work, and school, even the political
aspects that affect the person are systems. The individual influences these systems, and in turn, the different systems influence the individual (Devine & Wilhite, 1999).

Professionals must consider normalization and valorization theories in creating the least restrictive setting for an individual and in the creation of natural supports and meaningful roles for an individual with a disability (Schleien, Ray, & Green, 1997; Sherrill, 2003; Wolfensberger, 2000). Recreation professionals look at self-determination when planning with the participant (Hill & Sibthorp, 2006; Ippoliti, Peppey, & Depoy, 1994; Wehmeyer & Metzler, 1995). The professional considers and applies the individual’s desires and expectations for the outcomes of inclusion when developing the plan for inclusion. The professional needs to understand the complex system in which the individual lives and the complexities of the individual with whom he or she is working. In order to follow best practices, an agency must consider the ecological perspective, normalization and valorization, and self-determination theories in their approaches to inclusion.

**Implementation of Inclusion at the Agency Level**

In order to ensure inclusivity, an organization must consider its mission statement and vision. Does this mission or vision discriminate in any way? Do the statements promote the participation of people of all abilities (Anderson & Kress, 2003)? By not looking at the participant with a disability as capable and valuable, administration can create obstacles for individuals with disabilities through specific protocols, or even in the agency’s mission statement (Allison & Hibbler, 2004). The agency may lack the
education regarding the needs of various populations in the community or lack the willingness for the organization to adapt to changes that recognize the abilities and strengths of a group. The implementation of inclusion practices through programmatic rather than organization practices are more common, yet they are both important for the successful implementation of an inclusion program (Anderson & Kress, 2003; Klitzing & Wachter, 2005).

Allison and Hibbler (2004) recognize the importance of diversity in a community. Groups that are not in the ‘majority’ can identify the “patterns of communication and interaction” of an agency that may deter them unintentionally from participating in a program (Allison & Hibbler, 2004, p. 266). Organizations develop reputations in their communities, and these reputations often influence whether individuals in the communities choose to participate or not (Allison & Hibbler, 2004; Anderson & Kress, 2003). The message the organization sends is dependent on the policies, procedures, staff, and administration.

Best practices for hiring and training staff include hiring staff with experience and education regarding disabilities and providing training for staff during orientation, before staff begin working with any participants. The mission and vision of the value of inclusion should be clear to all employees, whether they work directly or indirectly with the agency’s participants. When employees of the agency agree about the appropriate inclusion strategies the organization or agency uses, provision of services can be more successful and efficient for participants and staff (Anderson & Kress, 2003; Schleien, Germ, & McAvoy, 1996).
In general, an agency must evaluate “approach and enter” (Anderson & Kress, 2003, p. 31), referring to the physical accessibility of a site. Anderson and Kress (2003) state that the next steps refer to the “use and conveniences” (p. 31) of the programs and services offered. Larger print on flyers or brochures, the availability of interpreters for individuals with hearing impairments, a one-to-one staff member for individuals who need support, and program relocation to an accessible area as necessary, are all strategies that can facilitate true social inclusion in a program.

Implementation of Inclusion at the Individual Level

Anderson and Kress (2003) further break down the steps an agency can implement to facilitate successful inclusive programs. Advertising is a way for agency programs to express a desire to include people of all abilities, through language used in promotional materials and using materials in a variety of formats so that a diverse group of individuals can obtain the material. Understanding a community’s need and the unique needs of individuals within that community, no matter the population, is essential to creating services that fulfill the community’s desires (Allison & Hibbler, 2004). By using the universal symbol of accessibility on all information regarding agency programs, the agency expresses to the community that individuals of all abilities are welcome. “Program promotion” includes an agency contact person for any necessary accommodations. Agencies providing inclusive programs can send their information to known individuals in the community who have a disability, families with disabilities,
schools, agencies specializing in advocacy for individuals with disabilities, and other human or social service agencies (Anderson & Kress, 2003).

Best practices for program registration include physically accessible buildings or registration sites. Registration formats that include an area where accommodations or specific needs are noted allow a person with a disability to express any needs for supports or accommodations in a succinct and private way. Staff can follow up by means of an individualized assessment or simple interview with participants and/or their families in order to discuss, clarify, and assess necessary accommodations in a professional and confidential manner (Anderson & Kress, 2003).

Accommodations and Modifications

Accommodations or modifications are simple ways to adapt activities or programs in order to meet the needs of individuals with disabilities (Anderson & Kress, 2003; Green & DeCoux, 1994; Klitzing & Wachter, 2005). A variety of sources can initiate involvement for the successful inclusion of individuals. Most commonly, individuals’ with disabilities’ parents or caregivers initiate contact with agencies for programs or services (Wachter & McGowan, 2002). Agencies initiated participation of an individual with a disability in 63% of cases researched by Wachter and McGowan (2002). Agencies who reach out to known members of the community, if there appears to be a lack of participation by individuals with disabilities, can understand the reasons a person does or does not participate in a program (Raymore, 2002). By identifying those reasons, an agency can make changes or adaptations to foster participation of all individuals.
When an agency uses the input of the individual and/or his or her family, a variety of areas that may require adaptation or support are identified. Adaptive equipment or materials can be obtained by contacting agencies to borrow equipment, by purchasing through adaptive equipment providers or renting equipment (Anderson & Kress, 2003; Sable, Craig, & Lee, 2000; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005). Often simple modifications are sufficient in creating equipment an individual with a disability can use, such as providing larger handles or grip devices for smaller or hard to grasp materials. Through modifications, an individual with a disability can participate more independently (Anderson & Kress, 2003).

A common practice is for staff to break down activities into simple steps through task analysis. The individual with a disability’s experience is less stressful and it allows the individual to participate more independently. An individual with a disability learns the skills to work up to the level he or she desires or needs to perform an activity (Anderson & Kress, 2003; Carter & Foret, 1991; Klitzing & Wachter, 2005).

Much of the research literature recognizes that modifications to the rules of an activity or adaptations in the way the group interacts within the activity facilitates a person’s participation with the whole group (Anderson & Kress, 2003; Green & DeCoux, 1994; Klitzing & Wachter, 2005; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002). One example may be setting specific rules regarding the time in an activity or rotation of the participants (Anderson & Kress, 2003; Green & DeCoux, 1994). As mentioned in registration, a general practice is considering the physical location of a program. If a space is not large enough or presents physical barriers, then the agency finds one that is accessible (Anderson & Kress, 2003).
**Individual Supports**

When agencies consider the types of supports available, there are many options described in the research literature. An extra staff member or a staff who works specifically with the individual to teach recreation skills provides necessary support for some individuals with disabilities. Eventually the staff become less necessary as the individual with a disability develops the needed skills (Anderson & Kress, 2003; Klitzing & Wachter, 2005; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005).

Some agencies even allow support staff who work with the individual with a disability to accompany them free of charge to provide support for that person within programs or activities (Anderson & Kress, 2003; Klitzing & Wachter, 2005).

Peer orientation is another option that some agencies use. This type of support is when participants without a disability assist or support an individual within a program, it may be a group or individual providing support. The individual with a disability consents to “peer-orientation” and provides input as to how he or she desires or is comfortable with assistance (Anderson & Kress, 2003; Klitzing & Wachter, 2005). A “leisure partner” is another participant who provides support to the individual. A “coach” recruited from a variety of sources (local schools, universities, or colleges, social affiliation groups, human service agencies specializing in the field, and natural supports of the individual) may also be used to teach the individual the necessary skills for the activity (Anderson & Kress, 2003). By providing training to supports in inclusion strategies and facilitation techniques, research shows that a person with a disability’s reliance on one-to-one supports decreases (Scholl, Smith, & Davison, 2005).
In regards to personal care, agencies can set policies to determine how individuals who need assistance with personal care will be included. The agency may allow a natural support or a professional personal care assistant to attend the program without additional cost (Anderson & Kress, 2003).

**Staff Training and Education**

Another best practice is staff training and evaluation. It is important that staff working within programs and in administration understand the benefits and value of inclusion, as well as strategies for inclusion. Trainings and opportunities for education regarding disability awareness (Anderson & Kress, 2003; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002; Wilkins, n.d.) and person-first terminology are important in the implementation of inclusion programs (Anderson & Kress, 2003; Wilkins, n.d.). Person-first terminology refers to emphasizing the person for “who he or she is”, a person, before emphasizing the person as his or her disability (e.g. “autistic man” versus “a person with autism” or “a person”, etc.) (Wilkins, n.d.).

Inclusion is dependent on many factors. In recreation and leisure, one of the challenges for an individual with a disability may be the recreation director or the program instructor. Conatser and Block (2001) studied aquatic instructors and their willingness to offer non-segregated classes to accommodate individuals with disabilities and individuals without disabilities. The researchers linked the number of classes offered and the level of experience and education the instructor had with individuals with disabilities. The more experience and the higher the comfort level the instructor had, the
more likely he or she was to include an individual with a disability in the class. If a recreation or leisure professional lacks the appropriate training or education in working with individuals with disabilities, certain inclusion programs will not continue due to the lack of success. If the agency or community perceives inclusion as ineffective, it will no longer support the program, even though the failure of the program rested on the inadequate implementation (Conatser & Block, 2001).

**Evaluation**

Program implementation with constant monitoring and communication is important for agencies to provide successful inclusive services (Anderson & Kress, 2003). The therapeutic recreation process states that assessment and evaluation are a continual process to assure programs are an appropriate match and that they are meeting the needs of the participants (Stumbo & Peterson, 2004). In the same way, recreation and leisure program coordinators who regularly monitor the program and meet with the individual with a disability can determine if the program is meeting his or her needs (Anderson & Kress, 2003; Wachter & McGowan, 2002).

Documentation, as described in the research literature, records the interventions staff use, as well as the individual with a disability’s experience. If collecting documentation or communicating with individuals or agencies outside of the recreation program, professionals complete a release of information with the individual with a disability (Scholl, Dieser, & Davison, 2005). The release of information is a form identifying individuals who staff can speak with regarding the individual with a
disability. An individual with a disability’s privacy and confidentiality is protected by knowing who has access to the individual’s private information.

Evaluation is the constant assessing of a program to assure the program is meeting the needs of the individual with a disability and the other participants as well. Agencies using best practices utilize program feedback from all participants, the individual with a disability, and family members of persons with a disability (Anderson & Kress, 2003; Wachter & McGowan, 2002). The staff evaluate the program by looking through documentation, by interviewing participants, and by looking at documented outcomes from the program (Anderson & Kress, 2003).

Evaluation also includes collecting information about the level of acceptance of a person with a disability among his or her peers. Sociometry, or choice status, is a way that Green and DeCoux (2005) evaluated the popularity of an individual in a community basketball program. The participants listed individuals from the team they would invite to party; other styles are to choose with whom participants would like to spend time. The perception is that individuals identified most often are ‘most accepted’ (Anderson, Schleien, McAvoy, Lais, & Seligmann, 1997; Green & DeCoux, 1994).

The setting in which inclusion occurs is important and is highlighted in the research literature. Individuals with disabilities prefer age-appropriate settings, which make an environment more conducive to meeting and interacting with peers without disabilities (Anderson & Kress, 2003; Wachter & McGowan, 2002). Environments that are least restrictive and follow the standards of normalization and valorization mean that a person is as independent as possible and plays a socially valued role within activities (Sherrill, 2003; Wolfensberger, 2000). When an individual with a disability’s experience
includes the same risks and benefits that occur for other participants, the individual with a disability has the same opportunity as his or her peers without disabilities (Schleien, Ray, & Green, 1997).

Anderson and Kress (2003) describe specific principles and strategies for agencies to adhere to in order to provide successful inclusive programs. Structured social activities create a setting where individuals with and without disabilities communicate and get to know each other. Social role valorization can be applied in inclusion by establishing an equal standing and respect for all participants by providing opportunities for decision-making and for playing different roles within the group (Anderson & Kress, 2003; Devine & O’Brien, 2007; Wolfensberger, 2000). Inclusion often occurs when participants understand that they share a common goal and when there are opportunities to work together toward a common goal (Anderson & Kress, 2003). For an in-depth example of the inclusion process, see Inclusion: Including People with Disabilities in Parks and Recreation (2003) by Dr. Lynn Anderson and Carla Brown Kress.

**Model Programs**

Model programs utilize the best practices identified through the research literature. Special Recreation Agencies (SRA) and Together We Play (TWP) are two examples of programs that have implemented many of the aforementioned strategies (Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002). Other programs, such as the Individualized Recreation Inclusion Services (Anderson, et al., 2005) and the Peer Assisted Inclusion in Recreation at the
J.M. Murray Center (P.A.I.R. Program) (Anderson, et al., 2004) have followed the guidelines that Anderson and Kress (2003) discuss. Recreation referral programs exist in other areas of the United States and the world, such as Access Maine, Access Utah Network, and Disability Information and Referral Centre in Australia, but New York State does not have a recreation referral program.

Local communities have recognized some agencies as providing benchmark programs for implementing inclusion strategies (Klitzing & Wachter, 2005). These programs also network with other programs and agencies to accomplish the goal of providing inclusive services to the community (Green & DeCoux, 1994; Klitzing & Wachter, 2005; Levy, 1987).

By networking with agencies or groups that share a common interest, agencies can provide more effective programming, improve communication in their local area and increase the number of individuals who are aware of available services (Levy, 1987). These agencies also experience greater diversity within programs and provide a larger support and advocacy group for individuals with disabilities and their families (Anderson & Kress, 2003). Many human service or social service professionals, such as social workers, special education teachers, and therapeutic recreation specialists take on the role of advocate and educator regarding inclusion. As well, the individual with a disability needs to recognize that he or she has the right to live the leisure lifestyle he or she desires, this means he or she has a right to access services and see “existing service structure as legitimately …[his or her] domain” (Stumbo & Peterson, 2004, p.74).

Two case studies have emphasized a strong support system for the individual with a disability in an inclusive setting. In both cases reviewed in the research literature,
family or friends were present to provide support and to advocate with and for the individual (Green & DeCoux, 1994; Sable, Craig, & Lee, 2000). These natural supports are essential in the inclusion process for the simple reason that it should not only be a professional advocating for inclusion. The individual with a disability and those who play a meaningful role in the person’s life also advocate. The success of inclusion stems from the formation of an even larger support system for the individual. Support systems develop through participation in recreation and leisure programs. By being a part of different programs, the individual with a disability has an opportunity to meet other individuals who share the same interests, thereby widening the band of meaningful relationships in her or her life. The bond created has nothing to do with the fact that one of the individuals has a disability (Anderson & Kress, 2003; Sable, Craig, & Lee, 2000).

**Therapeutic Recreation Process**

Interdependence is a natural occurrence in life. Most individuals do not live in isolation but have a support system consisting of individuals that play many roles in their lives. The ecological perspective considers this interdependence in the interactions between an individual and his or her environment (Devine & Wilhite, 1999). The recreation professional assisting with inclusion efforts is a person who can advocate for and support an individual with a disability.
Assessments Used in Existing Programs and Case Studies

The first step for a therapeutic recreation specialist (TRS) is assessing the individual’s strengths to understand the individual better. This assists the TRS to begin to conceptualize the goals and path the individual and the TRS will take. The protocol for RRS referrals includes an ecological assessment of the individual’s strengths, needs, interests, preferences, supports, and environment. The literature discusses a variety of assessment strategies and tools (Anderson & Kress, 2003; Anderson, Schleien, McAvoy, Lais, & Seligmann, 1997; Ashton-Shaeffer, Johnson, & Bullock, 2000; Green & DeCoux, 1994; Klitzing & Wachter, 2005; Law, King, King, Kertoy, Hurley, Rosenbaum, Young, & Hanna, 2006; Miller, Schleien, Rider, Hall, Roche, Worsley, 2002; Sable, Craig, & Lee, 2000; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002).

Understanding the individual in order to elucidate goals for the person is one stage in the assessment process. Matching the person and the activity go beyond accommodating an activity for the individual or modifying the activity to meet the person’s needs. Assessment of the person’s skill level and abilities help a TRS to conceptualize his or her possible level of strengths and needs in an activity through an activity or task analysis (Anderson & Kress, 2003; Carter & Foret, 1991).

Carter and Foret (1991) break the assessment process into several stages. The agency considers the individual with a disability’s performance in certain aspects of an activity, the level of leadership or level of assistance needed is determined, and the environmental conditions that influence the individual’s participation in the program are
observed. According to Carter and Foret (1991), one must analyze the activity by breaking it down into steps. The agency selects the program, depending on the outcomes of the preceding factors, by considering the skills and interests of the individual and the level of assistance, support, and resources needed and available for the activity. The professional evaluates the individual’s level of assistance or “leadership” level and modifies the activity according to that level. Lastly, a staff member from the agency records the information and makes changes to the plan according to the individual with a disability’s improvements or needs (Carter & Foret, 1991).

The individual with a disability’s leisure preferences are essential when creating programs or matching individuals to appropriate programs that will meet the individuals’ interests (Ippoliti, Peppey, & Depoy, 1994). By focusing on strengths and abilities, the TRS or the professional has some guidelines to follow when planning, implementing, and evaluating possible programs or activities. The strengths perspective also empowers the individual with a disability by reaffirming him or her that he or she is capable and has some control in the therapeutic recreation process (Cowger, 1994). A professional may assess accommodations that are necessary for the individual to be successfully included in a program or activity when matching individuals with programs (Stumbo & Peterson, 2004). A functional abilities assessment helps a TRS understand the individual’s abilities to support the individual more meaningfully into programs.

Assessing the agency or program match for the participant is an important part of the assessment process with the TRS. The role of the TRS may be educating staff working in recreation and leisure program about inclusion processes, speaking with other participants in the group about particular disabilities, and noting necessary adaptations or
modifications in recreation and leisure program that may be necessary for the individual to participate. When the recreation professional visits the site with the potential participant, to evaluate the possible steps to take, it may clarify the inclusion process that will occur with the specific individual. It may be important for an individual with a disability to participate in the education of the recreation group or allow IRRC or program staff to educate the group before the participant begins (Anderson & Kress, 2003).

**Planning and Implementation**

The planning and implementation processes include the strategies discussed in the “Best Practices” section of this review. When implementing inclusion, the agency considers the multiple strategies and principles discussed when planning programs for individuals with and without disabilities. The practical application of mandated physical accessibility of a program area is only the first step, according to Anderson and Kress (2003). Necessary accommodations, providing additional staff or adaptive equipment, and staff training and educating peer participants in the programs are aspects of the inclusion process (Green & DeCoux, 1994; Klitzing & Wachter, 2005; Sable, Craig, & Lee, 2000). Throughout the implementation process, staff are documenting and monitoring progress of the individual and of the group. Staff use the documentation and monitoring to identify any necessary changes or adaptations before the program ends or before the experience fails to be successful for participants (Anderson & Kress, 2003).
Evaluation

Much of the literature discusses evaluation as an essential piece in the TR process (Anderson & Kress, 2003; Green & DeCoux, 1994; Sable, Craig, & Lee, 2000; Stumbo & Peterson, 2004; Wachter & McGowan, 2002). Agencies can evaluate the fit of the individual with the program or activity, evaluate the individual’s experience through observation and discussion with the individual, and evaluate the outcomes the person experiences in the program. Wachter and McGowan (2002) noted that some Special Recreation Associations (SRAs) in Illinois followed up with participants with disabilities regarding the program through personal phone calls, personal letters, and home visits to gain an understanding about the participants’ experiences.

True inclusion means a person with a disability is participating and having a meaningful experience in the same way anyone participating in the program would (Wachter & McGowan, 2002). There have been cases where individuals with disabilities participate in a competitive inclusive environment and do not have the necessary skills and/or supports to have a successful experience. As a result the individuals avoid similar situations in the future, thereby not living the leisure lifestyle they desire (Green & DeCoux, 1994). Some strategies to evaluate the success of inclusion practice are to measure the extent of the participation of the individual, how the individual contributes to the success of the group, and how the group accepts the individual into the program (Green & DeCoux, 1994). An agency can evaluate the program staff, as well as other participants to determine the overall success of the match and the outcomes the program, the individual, and other the participants’ experience.
Agencies use the feedback from participants to identify the needs, barriers, and facilitators that exist in programs. By identifying these areas, the agency can promote the effective strategies that help people with disabilities move beyond the barriers they experience into inclusive recreation opportunities where freedom and choice are valued (Allison & Hibbler, 2004; Raymore, 2002).

**Summary**

Individuals with and without disabilities share many of the same benefits from inclusion; they may experience increased friendships, skills and abilities, and personal growth. Even changes in attitude towards disability are discussed in the research literature, both by the person with a disability and the person without (Anderson & Kress, 2003; Anderson, Schleien, McAvoy, Lais, & Seligmann, 1997; Miller, Schleien, Rider, Hall, Roche, & Worsley, 2002; Schleien, Ray, & Green, 1997). In general, people want to be included and accepted in their communities and all can benefit from the experience.

The theories discussed in this literature review assist in understanding inclusion. Social role valorization emphasizes the important roles all individuals play in society and how those roles influence acceptance and participation in a community (Wolfensberger, 2000). Self-determination highlights decision-making and having choices, where participation in recreation and leisure is a natural atmosphere for this opportunity (Anderson & Kress, 2003; Ippoliti, Peppey, & Depoy, 1994; Wehmeyer & Metzler, 1995). The ecological perspective takes into account the individual with a disability, all his or her supports, and the greater community in which the individual lives (Raymore,
By doing so, inclusion is no longer viewed as an ‘individual with a disability’s problem’ but as an issue that all of society must consider.

Society has made strides toward inclusion through laws and legislation since the mid 1960s, such as the Americans with Disabilities Act of 1990 (P.L. 101-336) and Individuals with Disabilities Education Act of 1999 (P.L. 101-476). The passage of these laws helped to create a society where discrimination of persons with disabilities is illegal. Rights that individuals without disabilities have are rights that all individuals should experience, such as attending public schools and using public transportation and facilities. More recreation programs may be available for school-aged individuals with disabilities (Aston-Schaeffer, Johnson, & Bullock, 2000; Wachter & McGowan, 2002) and older adults with disabilities (Carter & Foret, 1991) but there continues to be a lack of representation of individuals with disabilities from all age groups in recreation and leisure opportunities (Anderson & Kress, 2003).

Recreation and leisure agencies can utilize the best practices for inclusion from the research literature in simple ways. Inclusion does not necessarily involve complicated and expensive changes or adaptations as frequently believed (Anderson & Kress, 2003). The practice of using participants without disabilities or volunteers for support of an individual with a disability is free. Agencies that use documentation for evaluation of programs experience benefits by understanding the overall satisfaction of all participants and of program effectiveness. Improving all programs and services for participants may draw more participants to the agency.
The IRRC Recreation Referral Service could be important in the inclusion process. The referral process includes an assessment of the individual to assist with the appropriate matching of programs and individuals. Planning and implementation apply the inclusion principles discussed in this review (Anderson & Kress, 2003). The evaluation process looks at the outcomes and the success of the individual’s experience and the program’s experience. Both assessment and evaluation are continual and the IRRC utilizes these strategies in the referral process.

New York State has a variety of recreation and leisure resources. There are outdoor programs, adventure programs, arts and music, parks and lakes, and more. When considering inclusion, the community and other professionals need to think beyond traditional services and programs designed specifically for individuals with developmental or other disabilities. Any program available can be an accessible one. Individuals with disabilities may need accommodations and may not always have identical experiences as participants without disabilities, but with creativity and cooperation, all individuals can experience what they consider a healthy leisure lifestyle.
Chapter 3

METHODS AND PROCEDURES

Introduction

The Recreation Referral Service (RRS) is a service component of the IRRC. The RRS provides a service focused on enhancing recreation opportunities for individuals with disabilities living in New York State by providing information and a range of support for participants. As discussed in Chapter 2, recreation opportunities become limited in scope for many individuals with disabilities (Anderson & Kress, 2003; King, Law, King, Hurley, Hanna, Kertoy, & Rosenbaum, 2007). The RRS locates, assesses, advocates, and educates agencies as needed to create or enhance inclusive recreation opportunities. In this way, the same opportunities are available to individuals with disabilities as they are for people of all abilities. RRS accesses programs and agencies that already exist to provide recreation, the RRS provides information about these resources to individuals with disabilities and, if needed, RRS works with the agency to enhance the inclusiveness to create a positive experience for the RRS participant and the recreation provider.
Project Description

The goal of the Recreation Referral Service is to connect individuals with disabilities with inclusive recreation and leisure resources. The purpose of this project was to develop, pilot, and evaluate the RRS. The RRS is one component of a grant received by SUNY Cortland’s Department of Recreation and Leisure Studies from the New York State Developmental Disabilities Planning Council.

The objective of this master’s project was to develop a service that would connect individuals with disabilities with recreation and leisure resources, and to evaluate the effect of the RRS on participants’ quality of life.

Objectives for the Overall Project

Objective 1: To identify best practices for inclusion in the research literature.

Objective 2: To identify general needs of individuals with disabilities and their families, through a needs assessment, to understand the resources used in the local area, individual and family experiences with inclusive programs, and whether individuals and families would use the RRS.

Objective 3: To develop and evaluate a protocol for the RRS that provides a description and guide for implementation of the service.

Objectives for the Recreation Referral Service

Objective 1: To increase inclusion of persons of all abilities in recreation and leisure programs and resources in the community.

Objective 1a: To assess recreation and leisure resources’ levels of accessibility, both physical and social using the Inclusivity

Objective 1b: To educate and train individuals and agencies to increase the knowledge and awareness of best practices for inclusion.

Objective 2: To increase the quality of experience in recreation and leisure for individuals with developmental and other disabilities.

Objective 3: To increase the individual’s quality of life after using the RRS.

Chapter 2 of this project involves a literature review identifying history of disability law and trends in the United States. Description and discussion of best practices for inclusion are included in the literature review. Parents of individuals with disabilities, whose children participated in an adaptive physical education program at SUNY Cortland, participated in a needs assessment. The assessment identified the resources individuals with disabilities have accessed, would like to access, and whether or not the individuals would use a recreation referral service.

The Inclusive Recreation Resource Center Recreation Referral Service Manual for Staff and Students and the overall protocol for the RRS provide foundations for inclusive recreation services, theory behind inclusion, guidelines and descriptions for implementing the RRS, and the necessary documentation staff and students complete for the RRS.

Assessment of more than 50 recreation and leisure resources using the IAT (Anderson, Wilson, & Penney McGee, 2007) occurred by the IRRC from May 2007 to
December 2007. When applicable, existing information from completed IATs provided the information needed to facilitate participation of an individual with a disability.

When needed, agencies received training on inclusion. Training included general knowledge on physical, social, emotional, and cognitive domains and the impact disability may have on functioning in the mentioned domains. Discussions during training involved best practices for including an individual with a disability, facilitating participation and socialization of an individual, and adapting activities as needed. When completing IATs, discussion regarding best practices in inclusion occurred and recommendations for inclusion strategies were provided at agency request. A visit to another local service provider in Cortland increased awareness of the availability of the RRS for individuals with disabilities and their families.

Undergraduate students from Recreation 393, graduate students from Recreation 529, and a student intern implemented the RRS through one-to-one matches with individuals with disabilities involved in community organizations. J. M. Murray Center and Person-to-Person Advocacy, Inc. participated in the project by linking their participants with developmental or other disabilities with SUNY Cortland students. Students received the RRS manual and six of the students participating in the project attended orientation to the protocol.

Students met with the individual with a disability for at least 20 hours throughout the semester. As they worked with the individual with a disability, students completed the necessary documentation, including, an assessment, an inclusion plan, specific pre and post evaluation resources, progress notes, and an end of service summary. After identifying goals and objectives to meet by the end of the semester, students and the
individual with a disability wrote an inclusion plan. The plan guided the implementation of RRS services that were specific to the individual with a disability. The greater purpose of these goals and objectives were to connect the individual with a disability with a recreation resource in the community where the individual participated after the student finished the semester.

The participants of the RRS and/or their families completed a pre “Quality of Life Survey” and a post “Quality of Life Survey” as developed by Anderson (2007a). For further evaluation, participants and/or their families completed a “Consumer Satisfaction Survey” (Developmental Disabilities Planning Council, n.d.). Other documentation of services included progress notes that also contained an “inclusive rating system.” The data collected from these sources provided information on the impact of the RRS on participants’ quality of life and experienced level of inclusion. The information from the satisfaction survey provided data on the participants’ experience working with the RRS.

Multiple individuals from SUNY Cortland participated in implementation of the RRS. IRRC staff, Dr. Lynn Anderson the project director (also an RLS professor), Laurie Penney McGee the project coordinator, Dr. Vicki Wilkins an RLS professor, 3 full-time student interns (2 in Summer Semester and 1 in Fall Semester 2007), Melissa Roeder a part-time graduate assistant, and 9 students from specific recreation courses contributed to the development and implementation of the RRS.
Background of Participating Agency

In January 2007, SUNY Cortland Department of Recreation and Leisure Studies received a grant from the New York State Developmental Disabilities Planning Council to develop the Inclusive Recreation Resource Center (IRRC). “The mission of the Center is to promote and sustain participation by people with disabilities in inclusive recreation activities and resources throughout the state” (Anderson, 2007b). Recreation and parks students are educated in inclusive practices to increase the number of professionals within the field providing inclusive services. Meaningful and lasting systems change occurs by networking with self advocates with disabilities and recreation agencies throughout New York State and by assessing inclusive and accessible recreation within New York State and developing a database where individuals with and without disabilities can utilize the information to access desired resources. By developing a recreation referral service, individuals with disabilities can receive the support needed to access recreation resources. Technical assistance is available for recreation and park providers to assist in understanding and implementing inclusive practices. Lastly, research on best practices of inclusion, and documentation and evaluation of IRRC services occurs. The results are disseminated to parks and recreation professionals, disability organizations, and individuals with disabilities and their families in New York State.

The IRRC personnel completed a literature review, researching the best practices of inclusion for individuals with disabilities. Staff from the IRRC completed eight focus
groups throughout New York State, meeting with recreation professionals, tourism professionals, disability agencies, individuals with disabilities, and their families. The focus groups provided information regarding development of IRRC services, specifically development of the IAT and the on-line database. After completion of the IAT design, IRRC staff assessed more than 50 recreation resources in New York State, including Long Island, the Catskills, the Finger Lakes Region, and the Thousand Island Region. To date, the IRRC staff has trained more than 100 individuals on using the IAT, including three universities or colleges in the IAT trainings.

**Target Population**

Based on the grant requirements for the IRRC, the focus population for the RRS was individuals with developmental disabilities, but any individual with a disability was eligible for RRS. Individuals living in the Finger Lakes Region received services for this pilot. The RRS protocol is specific for individuals with developmental disabilities but general enough to apply for individuals of all abilities.

**Procedures for Conducting the Project**

The goals and objectives of the overall project and of the RRS provided the structure for the project development and evaluation. The following phases describe the process in which development, implementation, and evaluation occurred. The first phase involved a review of the research literature on best practices for inclusion and historical
and current trends in inclusion for individuals with disabilities. Implementation of a needs assessment identified experiences of individuals with disabilities and their families with local recreation resources and whether individuals and their families would use the RRS. The second phase included the protocol development for the referral service. Phase Three involved orientation of student volunteers to the protocol, implementation and evaluation of the RRS, coordination between agencies and students, monitoring of students, and support for students. Further descriptions of each phase follow.

**Phase One: Literature Review and Needs Assessment**

Identification of the best practices for inclusion occurred through a literature review. The Recreation Referral Service protocol applies the literature’s best practices (Anderson & Kress, 2003; Green & DeCoux, 1994; Klitzing & Wachter, 2005; Scholl, Dieser, & Davison, 2005; Scholl, Smith, & Davison, 2005; Wachter & McGowan, 2002). Consultation with Dr. Lynn Anderson, who has contributed multiple pieces to the inclusion literature, guided the creation of the protocol.

A needs assessment survey (see Appendix A), completed during the SUNY Cortland’s Adapted Physical Education Programs for individuals with disabilities, provided information regarding individuals with disabilities and their families. Parents and guardians of the individuals attending the program voluntarily completed the survey. The purpose of the survey was to understand the level of need in the local region, the recreation resources used in the past, the recreation resources currently used, experience with inclusive practices, and whether individuals would utilize the RRS. The SUNY
Cortland Institutional Review Board approved the Application for Review of Projects using Human Research Participants in April 2007 (see Appendix A).

Phase Two: Protocol Development

The literature review and needs assessment guided the development of the RRS protocol. The protocol used the following steps: 1) Receiving a referral; 2) Completing an assessment; 3) Identifying a resource; 4) Developing an inclusion plan; 5) Implementing the inclusion plan; and 6) Evaluating the services provided.

The protocol involved multiple revisions after reviewing the protocol with the IRRC personnel and with individuals with disabilities before this project. Writing of the protocol began in the Spring of 2007 and was completed in October 2007.

Phase Three: Protocol Implementation and Evaluation

This phase included an orientation of students to the RRS protocol and coordination of communication and services between agencies and students. Monitoring and supporting students throughout implementation of the referral service also occurred during this phase.

The degree of involvement of the IRRC staff or students was dependent on the needs of the individual with a disability referred to the RRS. Staff involvement included a phone call and the provision of information about a recreation or leisure resource. Other individuals’ seeking services from the RRS required IRRC staff and students to
contact an agency and to facilitate the inclusion of the individual into a program. IRRC staff and trained students used the Inclusivity Assessment Tool (Anderson, Wilson, & Penney McGee, 2007) (see Appendix B) to assess recreation resources identified by participants as areas of interest for participation.

Implementation of the protocol occurred within the RRS by IRRC staff and SUNY Cortland students. The RRS manual was printed, posted online, and made accessible for all individuals working and volunteering at IRRC. The SUNY Cortland Institutional Review Board approved the collection of data for the pilot project. Piloting occurred within the regular curriculum of Recreation 393, Recreation 529, and Recreation 475/606, thus the Application for Review of Projects using Human Subjects was exempt status. Participants in the research, both students and individuals with a disability received a consent form, completed the form and returned it to the Inclusive Recreation Resource Center.

The project included the piloting of the RRS. Students and individuals with disabilities participating in the project completed consent forms (see Appendix C) to assure that all individuals involved understood that data collected was for research purposes. IRRC staff and students utilized the protocol to implement services. Description of the evaluation process, the individuals’ satisfaction with RRS services, their experience with RRS services, an inclusion rating scale, and a pre and posttest of their quality of life were all included in the manual. The final protocol is included in Chapter 4 of this project.
Role of the Project Agency

The Inclusive Recreation Resource Center (IRRC) is the larger agency in which implementation of the Recreation Referral Service took place. SUNY Cortland Department of Recreation and Leisure Studies received a three-year grant from the New York State Developmental Disabilities Planning Council (DDPC) to create a center with a goal of increasing the availability of inclusive recreation opportunities for individuals with developmental disabilities in the state. The RRS is one of many components described in the grant. The IRRC provided a home base for communication with recreation agencies, community services agencies, students working with the RRS, and participants.

Site Determination

Implementation of the RRS occurred at various sites. The J.M. Murray Center and Person-to-Person Advocacy, Inc. are two disability agencies that cooperated with Dr. Vicki Wilkins and Dr. Lynn Anderson, professors whose students from specific recreation courses piloted the RRS Manual. The nature of the RRS is such that the location of service implementation depends on which resources the participant desires to use or has previously identified. The intake form as well as the pre “Quality of Life” survey and assessments were completed at the disability agency or at the participants’ homes.
Instruments

Instruments in this project included the needs assessment survey, the “Inclusivity Assessment Tool” (IAT) (Anderson, Wilson, & Penney McGee, 2007) (see Appendix B), the “Quality of Life” survey (Anderson, 2007a), the Progress Note, the End of Service Summary, and the “Consumer Satisfaction Survey” (DDPC, n.d.).

The needs assessment is included in Appendix A. Parents or guardians of individuals with disabilities who participate in an adaptive physical education program at SUNY Cortland completed the survey. The purpose of the RRS was described at the top of the assessment form. Questions requested information regarding present and past inclusive and general recreation experiences. Parents and guardians also answered questions addressing the possibility of a recreation referral service, whether they would use the service, and the best ways the service could meet their family member with a disability’s needs. The needs assessment was developed by the researchers.

Because training is required to implement the IAT, all of the staff and students participating in this project completed the “Inclusion U” training needed to use the IAT to assess recreation resources. The IAT involves assessment of the physical, administrative, and programmatic inclusion practices of a recreation resource. Specific information collected by assessors allows an understanding of the degree of access a person with a disability would experience if they used the resource. Collection of factual and descriptive data occurs during the assessment to provide non-biased data to individuals in order for individuals to determine whether they can use the resource (e.g. “width of the door” or does the program make modifications to activities).
The validity of the Inclusivity Assessment Tool was tested through face validity, content validity, and predictive validity. Multiple expert recreation professionals and researchers in the field reviewed the tool and provided feedback to the IRRC personnel. IRRC personnel integrated and applied feedback to the tool where they felt it was appropriate. Much of the content of the tool came from the *ADA Accessibility Guidelines for Buildings and Facilities* (Access Board, n.d.) and the literature review completed by the IRRC. Individuals with disabilities completed assessments or followed up with agencies to determine its inclusiveness for their particular abilities and needs. IRRC personnel discussed the content of the tool regarding its usability or functionality regarding a person with a disability’s ability to transfer content of the tool to general use of a recreation resource. Testing of interrater reliability of the IAT occurred, where an IRRC staff member who had not completed the initial assessment of an agency, completed a second assessment of that agency. Agencies where testing of reliability occurred, were randomly drawn from a list of agencies that participated in initial piloting of the tool.

The “Quality of Life” survey created by Anderson (2007a) was included in the RRS protocol. The survey measures an individual’s level of satisfaction in areas of emotional well-being, interpersonal relations, material well-being, personal development, physical well-being, self-determination, social inclusion, rights, and subjective well-being. These areas were developed based on an extensive review of literature about quality of life for people with developmental disabilities (Jenaro, Verdugo, Caballo, Balboni, Lachapelle, Otrebski, & Schalock, 2005; Keith & Schalock, 1994; Lachapelle, Wehmeyer, Haelewyck, Courbois, Keith, Schalock, Verdugo, & Walsh, 2005; Schalock,
The emotional well-being scale, a sub-set of questions in the Quality of Life Scale was developed by Diener (1984), and has established validity and reliability and is used widely in social science research. Participants respond to statements from the different categories with “sounds like me,” “doesn’t sound like me,” or “not sure.” Each response has a numerical value, where “sounds like me” has a value of three, “not sure” has a value of two, and “doesn’t sound like me” has a value of one. The highest score possible on the survey, reflecting the highest quality of life, is seventy-eight. Completion of the survey occurs with the individual before referral services begin and after services have ended.

The Progress Note, completed by the student after each meeting with the individual, includes an inclusion rating system scoring from “very low” to “very high”. The ratings describe the feelings of inclusion experienced by the individual (e.g. “I was not included at all,” “I did not feel like a part of the group,” “I felt included but not like a full participant,” “I felt like a participant in the group,” and “I participated and felt like an important group member”). The inclusion rating scale assists in determining levels of inclusion experienced by the individual within a recreation experience.

The End of Service Summary provides a qualitative description for the completion of identified goals and the outcomes of participants after working with the RRS.

The “Consumer Satisfaction Survey” was developed by the New York State Developmental Disabilities Planning Council (2007). Specific questions from the survey provide information on the impact of the RRS on quality of life and overall satisfaction and experience with the RRS. Participants complete the hard copy of the survey for RRS
data collection as well as the on-line survey for DDPC data collection. If needed, participants could complete the survey with assistance from family or friends not affiliated with the RRS.

**Funding Source**

The New York State Developmental Disabilities Planning Council (DDPC) provided funding for the implementation of the Recreation Referral Service through a grant awarded to the SUNY Cortland Department of Recreation and Leisure Studies for the development of the New York State Inclusive Recreation Resource Center.

**Evaluation Plan**

Multiple strategies were used to understand increases in quality of experience in recreation and leisure and quality of life for participants. Scores on pre and post quality of life surveys were compared to evaluate changes in participants’ quality of life. Three questions drawn from the DDPC Consumer Satisfaction Survey directly addressed the impact of the RRS on participants’ quality of life. Evaluation of how well goals and objectives were met was ascertained using qualitative data from progress notes and the end of service summary data, as well as the number of objectives met. Use of the Progress Note inclusion rating scale assisted in determining the level of inclusion participants experienced throughout the RRS. Participant satisfaction was evaluated using the DDPC Consumer Satisfaction Survey.
Chapter 4

RESULTS

Introduction

The purpose of this project was to develop and evaluate a protocol for the Recreation Referral Service. Desired outcomes for the project included an increase in inclusive recreation opportunities for individuals with disabilities, an increase in quality of experience in recreation, and an increase in quality of life for RRS participants. This project involved multiple components. This chapter includes the results of a needs assessment, the RRS protocol, Inclusive Recreation Resource Center Recreation Referral Service Manual for Staff and Students, a description of the individuals with disabilities who participated in the service piloting, and the evaluation results.

Results of the Needs Assessment

A needs assessment was completed by parents and guardians of individuals with disabilities participating in an adaptive physical education program at SUNY Cortland. While participants were primarily school-aged and had developmental disabilities, some
respondents were parents of adult individuals or individuals with physical or other types of disabilities. More than thirty individuals participate in the adaptive physical education program. After surveying parents from two nights of programming, sixteen assessments were completed. Some parents chose not to complete an assessment while others took the survey but did not return it to the researcher.

The assessment provided a short description of the Inclusive Recreation Resource Center and the potential development of a “1:1 Matching and Referral Service.” An introduction on the assessment explained that the information obtained from the assessment would be used to develop a recreation referral service. By understanding the needs of individuals with disabilities in their families, the needs assessment could assist the IRRC in meeting the identified needs of individuals with disabilities and their families. The survey was anonymous and no incentives were provided to individuals who completed the forms.

Questions addressed past and present participation in recreation programs and services by family members with disabilities. Specific questions asked the individual completing the survey to describe what experiences were successful or difficult, as well as what kinds of supports or adaptations would be helpful or required for their family member with a disability to participate in community recreation. The last section of the assessment questioned families about use of a recreation referral service. These questions asked if families would use a referral service, how the service could best meet their needs, what activities would be of interest, and general suggestions regarding the service. Collection of demographics included town or city in which individuals lived, the
age of the family member with a disability, and the type of disability of the family member. The results of the assessment are included in the following section.

**Needs Assessment Themes**

*Parents’ Perceptions about Factors for Successful Inclusion*

The instructors’ skills and characteristics were most important in making the inclusion process successful for individuals with disabilities. Parents mentioned the use of aides and one-to-ones for their children. In general, the “non-competitive atmosphere [and] willingness of adults to include everyone” were important. Adults involved in the programs, whether parents, coaches, or adults in other roles must be patient, open and willing to allow the children to participate. One response included having other children present as well; it is unclear if this means children with or without disabilities.

*Perceived Difficulties with Inclusion*

The major theme that rose from the question regarding things that made an inclusive experience difficult addressed functional abilities of the children with disabilities. The needs assessment obtained the following responses, “still not being able to perform the same as others,” “frustrating that she can't do the activity the same as others,” and “not being able to keep up [with] other children.”

Another theme that came out of the same question was familiarity with the activity rules or the space where the activity took place. Some children had a difficult time participating in inclusive activities when they did not understand the directions or
rules of the activity and the space was not familiar. One quote sums up the issue, “my child had trouble following the verbal directions; the games were unfamiliar and so were the surroundings, so overall my child was a little lost the whole time.”

Necessary Supports, Accommodations, and Modifications

Regarding any necessary supports, six out of sixteen surveys included a response that mentioned a one-to-one support or an aide to work with the child. Providing information before an activity was another accommodation mentioned by parents that would be helpful. This included information about the activity itself, “some concrete [information] beforehand regarding what to expect (first we line up, then…) so that I can prepare my child ahead of time; a few routines, at least in the beginning, are helpful.” Other requests for information included finding out what programs were available in the area and the strategies school districts or area programs could use to contact and inform individuals interested in community programs.

Parents emphasized a general understanding of children’s needs, this includes physical accommodations to meet needs but also understanding the children’s social and emotional needs to enhance the recreation experience.

Use of the Recreation Referral Service

When asking whether families would consider using the Recreation Referral Service, 10 out of 16 responses were “yes.” Some individuals responded, “maybe” or “depends on who heads the grant.” Most of the respondents who said they would use the
service stated they would use it for finding and accessing community activities for their children.

**Meeting Needs through the Recreation Referral Service**

Responses to the ways the service could meet individuals’ needs also had a similar theme of finding and accessing resources. Another theme was that parents interpreted the service as a provider of one-to-one staff. “A 1:1 match would allow my daughter to participate in activities without a parent or sibling to interpret.” “Not only would it be a necessity for my kids to fully participate, (sometimes they require hand over hand assistance) but it would be tremendous for them to have another avenue for increasing socialization and for having a "friend" to do things with (besides mom and dad).” These responses and others throughout the survey made the evaluator realize the original name of “1:1 Matching & Referral Service” implied to parents that a staff member would be provided for each individual seeking the service. Although there was a description and explanation at the beginning of the survey, the interpretation by parents reflected a misunderstanding of the purpose of the service and required a change in the name to avoid confusion and of providing a false impression.

**Types of Programs to Access through the Recreation Referral Service**

When asked about the types of resources parents would access for their children with disabilities, parents overwhelmingly responded they would access sport programs in the community. “Horseback riding, swimming, snowshoeing, bowling, racquet ball,
walking, light hiking” are just some of the activities mentioned. Accessing the outdoors for hiking and walking appeared in many responses.

Regarding “other suggestions” for the service, responses implied the interpretation of a one-to-one provision of staff and justified changing the name of the service from 1:1 Matching & Referral Service to the Recreation Referral Service. Responses were “1:1 Match would be great for single events…” and “training for the individual working with the child!! This training needs to be person specific and not solely training on various disabilities. Getting to know the child as an individual is critical for success of program.”

**Demographics**

Eight out of sixteen respondents were from Cortland, and seven of the respondents were from areas within 10 miles of Cortland. Ages of individuals with disabilities ranged from 20 months to 17 years of age. Most children had a developmental disability, e.g., Autism, Asperger’s syndrome, Down syndrome, developmental delays, and cerebral palsy. Other disabilities included hearing impairments, brain injury, and other physical developments.

Because of the needs assessment, the evaluator identified the original name of the service was confusing to potential users. The Recreation Referral Service became the new name. Parents in the local area of Cortland, New York were primarily seeking access to sports or physical activities in the community.
The Recreation Referral Service Protocol

The Recreation Referral Service (RRS) varies according to the needs of the individual. Some individuals may simply be looking for information about recreation opportunities and others may need more in-depth assistance, such as working with a recreation agency to increase their inclusion efforts in order for the individual to participate successfully. The *Inclusive Recreation Resource Center Recreation Referral Service Manual for Staff and Students* describes the process and guidelines for the RRS. Both IRRC staff and SUNY Cortland students implemented the RRS by using the following protocol.
Inclusive Recreation Resource Center

Recreation Referral Service

Staff and Student Manual
Inclusive Recreation Resource Center  
Recreation Referral Service Manual

I. Introduction  
   A. Mission of Inclusive Recreation Resource Center  
   B. Partnerships with the Inclusive Recreation Resource Center

II. Foundations in Theory

III. Recreation Referral Service  
   A. Map of Recreation Referral Service process  
   B. How to Facilitate the Inclusion Process  
      1. Receive Referral  
         a. Participant documentation form  
         b. Confidentiality agreement  
         c. Intake form  
      2. Assessment with the Individual  
         a. Pre/Post “Quality of Life” Survey and Key  
         b. “Getting to Know You” Assessment form  
         c. Release of information  
      3. Identify Recreation Resource  
      4. Develop Inclusion Plan  
         a. Inclusion plan  
      5. Implement Inclusion Plan  
         a. Progress note  
         b. Agency Action Form  
      6. Evaluate the Inclusion Process  
         a. Ending RRS Involvement  
         b. End of Service Summary

IV. Appendix (example of Inclusion Plan)
I. Introduction

In January 2007 the Department of Recreation and Leisure Studies received a grant from the New York State Developmental Disabilities Planning Council. The purpose of the grant is to increase the level of inclusion for individuals with developmental disabilities in recreation and leisure services in New York State. The multiple facets of the Inclusive Recreation Resource Center (IRRC) include the development of a university curriculum, the implementation of focus groups throughout specific regions, the establishment of Regional Advisory Committees throughout New York State, the development of a database regarding the accessibility of recreation and leisure resources, research and evaluation of best practices in inclusion, and a recreation referral service.

A. Mission

“The mission of the Center is to promote and sustain participation by people with disabilities in inclusive recreation activities and resources throughout the state. The mission is achieved through: 1) educating and involving recreation and parks students in best practices in inclusive recreation, so that these future professionals know how to make recreation services and facilities inclusive as the norm; 2) developing collaborative and ongoing relationships with self advocates with disabilities and local and state recreation agencies to initiate systems change around inclusion that is sustainable and relevant; 3) assessing the availability of inclusive and accessible recreation opportunities in the state with rigorous tools and protocols, and cataloging the results in a user friendly, sustainable online database; 4) developing and sustaining a referral service that helps people with disabilities and their families find services and facilities for the recreation activities they desire, and assisting them in accessing those resources; 5) providing technical assistance to recreation and park providers to help them move toward more inclusive models of recreation service delivery; and, 6) carefully studying and documenting, through a rigorous evaluation design, best practices in improving inclusion in recreation for people with disabilities, then disseminating those practices throughout New York State and beyond” (IRRC Marketing Overview).

B. Agency Partnerships

“We are very excited that the New York State Developmental Disabilities Planning Council (DDPC) has awarded SUNY Cortland Recreation and Leisure Studies Department a substantial and renewable grant to establish a statewide resource center for inclusive recreation. Along with the DDPC, collaborating partners include I Love New York Tourism, the New York State Recreation and Park Society, the Self Advocacy Association of New York, the New York State Therapeutic Recreation Association, and the Department of Environmental Conservation. With the support of this grant and our partners, we hope to increase access to recreation programs and facilities across New York state so that all people of all abilities can recreate how and where they choose” (IRRC Marketing Overview).
The purpose of the Recreation Referral Service (RRS) is to connect individuals with developmental and other disabilities with recreation and leisure resources in their community and in New York State, in order to enhance the opportunity for those individuals to live an independent leisure life. The individual will be competent and capable of making decisions regarding activities in his or her leisure life (Shank & Coyle, 2002). The individual will be truly included in the community through the implementation of best practices by the staff and students of the Inclusive Recreation Resource Center and by recreation and leisure service providers in New York State. The practices applied are specific to the individual’s desires and needs. The practices for inclusion involve the implementation of a variety of strategies in order for the individual with a disability to obtain full and meaningful participation in existing non-segregated recreation and leisure activities.

The role of the Therapeutic Recreation (TR) professional or student is to use the basic principles and knowledge of TR to encourage the leisure development of an individual with a disability. Recreation professionals, particularly TR specialists, “can promote leisure participation in three ways: (a) provide leisure education to help individuals discover leisure opportunities and options, (b) work to remove perceived and actual leisure constraints and barriers for all populations, and (c) seek to effectively communicate the benefits of leisure experiences and help individuals prioritize leisure within their lifestyles” (Stumbo & Peterson, 2004, p. 15). The TR staff or student uses functional interventions, leisure education, and recreation participation to assist the individual in establishing an independent leisure lifestyle. The person feels competent, capable, and in control of his or her life, particularly regarding recreation and leisure. An independent leisure lifestyle is the ability of a person to choose the recreation and leisure activities of his or her own life, and to be independent and capable of participating in those chosen activities with little or no barriers (Shank & Coyle, 2002). Through the implementation of assessments, the staff or student will determine the functional ability of the individual. When deemed necessary, the TR will provide the individual with education for specific skills that enhance the true participation of the individual in the chosen recreation activity.

II. Foundations in Theory

Individuals with disabilities often have a great amount of free time, yet they are underrepresented in recreation and leisure activities. The lack of participation may be a lack of awareness of the resources that are available, a lack of opportunity in existing programs or resources in the community, or the continual use of programs designed specifically for individuals with disabilities (Anderson & Kress, 2003). As individuals age, the types of recreation and leisure activities become less social and less varied (King, Law, King, Hurley, Hanna, KertoY, & Rosenbaum, 2007). The RRS desires to create the opportunity for all individuals to explore the myriad of options for recreation and leisure in New York State. Through the use of the RRS, individuals will experience the opportunity to exercise decision-making and control over their recreation and leisure lifestyles.
Inclusion:
Involves integrating an individual with a disability into a community or program. It is the true participation of an individual regardless of the individual’s level of ability. The process involves assessing the accessibility, both physical and social, of a community or program. Physical accessibility addresses the physical aspects of a facility or program, whether the individual can approach, enter, and use the desired place. Social accessibility has two components, the degree the administration supports and practices inclusion and the degree the programs in the agency practice inclusion (Anderson & Kress, 2003). The person with a disability is included in the program and plays the same role a participant without a disability plays. The individual’s needs stipulate the level of accommodations and support provided during participation in the recreation activity. Accommodations and support enable the individual to be as independent as possible. Some adaptations are temporary, such as extra staff to provide support until the individual develops a natural support or until the individual develops the necessary skills to participate in the program. A support may also be permanent for some individuals, but services available to the individual are as inclusive as possible (Anderson & Kress, 2003; Watcher & McGowan, 2002).

Ecological Perspective:
The person is a system and the components that make up the person’s environment are systems, such as the political system, the neighborhood, work, school, and all other individuals included (Scholl, Dieser, & Davison, 2005).
Consider the following areas in the person’s life:
- Individual strengths, abilities, expectations, and needs
- Individual’s support system (family, friends, and others involved)
- The community in which the person lives

Normalization/Valorization Theory:
A person of any ability should have the same experience of risks and benefits through services in the community that any person experiences (Schleien, Ray, & Green, 1997).
- Least restrictive and age-appropriate environments
- The establishment of roles and conditions the general community defines as “valuable” and encouraging individuals with disabilities to “take on” those valued roles and conditions (Schleien, Ray, & Green, 1997, p. 10).
- An individual being his or her best, taking on roles in the community that he or she values and that others in the community value (Sherrill, 2003).

Self-Determination:
The ability and opportunity for an individual to make decisions, believing him or herself to be capable, self-driven, yet connected to the community and a support system, fosters self-determination (Hill & Sibthorp, 2006).
Strengths Perspective:
A person becomes empowered when provided the opportunity to use resources and contribute as a valued member of the community. A strengths perspective puts a person seeking services into an empowered position (Cowger, 1994).
- Focuses on the abilities of the individual
- Reinforces the individual’s feelings of competence
- Provides an opportunity “for liberating people from stigmatizing diagnostic classifications…” (Cowger, 1994, p. 265).

Using theory in the practice of inclusion

The ecological approach assists a therapeutic recreation professional and other professionals to understand the reasons and complexities of why an individual participates or does not participate in recreation and it provides a better understanding of an individual as a unique person (Raymore, 2002; Scholl, Dieser, & Davison, 2005). It is important to consider what aspects are important in a person’s life when planning to best match his or her interests, desires, and abilities with a recreation or leisure resource. By truly valuing an individual for his or her differences and uniqueness, valorization emphasizes the establishment of natural relationships and supports in the community. Valorization emphasizes the level of acceptance a person experiences by allowing the individual to play a valued role in his or her community (Wachter & McGowan, 2002). Individuals should be encouraged to be active in decision-making. Interventions that foster the ability for the individual to feel competent, autonomous, and still feel connected to existing supports and the community are critical (Hill & Sibthorp, 2006). Allowing the individual to experience self-determination through the recreation referral service reinforces the need for the person with a disability to live a life that is according to his or her “own terms”.

III. Recreation Referral Service

A. Map of the Recreation Referral Service Process

A map of the steps you will follow as the facilitator, to implement inclusion using the recreation referral service, is included on the following page. A description of each step is included in the rest of the manual content.
1st Step: Receive a referral and decide the steps to take with the individual (1a or 1b) Document using the Contact form (RRS Staff only) and the Intake form

1b: Person requires more assistance than general contact information or is seeking assistance with recreation involvement

2bnd Step: Assessment: complete a “Getting to Know You” assessment and a Pre “Quality of Life” survey

3rd Step: Identify a Recreation Resource or Resources in the person’s area or desired location

3a: Determine if the resource has been assessed. By IRRC? By another agency?

No

3b: Assess recreation resource using the IAT if you are trained, if not, contact the IRRC to complete an IAT

Yes

4th Step: Using information from the individual and the recreation resource develop an inclusion plan

5th Step: Implement the inclusion plan with the participant, the recreation resource, and identified supports; use the Progress and Update form as well as the Agency Action form as necessary

6th Step: Evaluate the inclusion process by completing an End of Service summary, a Post “Quality of Life” survey, and have the participant complete the DDPC Consumer Satisfaction Survey (online and a hardcopy for RRS)
B. How to facilitate the inclusion process

1st Step: 
Receive referral and decide the steps to take with the individual – this step is completed by the IRRC staff.

This is the first step, with the individual’s interests, abilities, desires, and needs determining the degree of involvement by the IRRC staff. Is the person looking for general information about a source? Is the person satisfied with receiving the information? Is the person looking for further support and assistance from the RRS?

The IRRC staff documents his/her action on the contact form and completes an RRS intake form with the individual (a hard copy is included in the manual). You may need to complete an intake form if the IRRC staff have not done so already. A confidentiality agreement is included for your completion and the IRRC will keep the completed form at the office. The intake provides the RRS with further contact information if necessary and provides data for quarterly reports. Both forms are filed at the IRRC office.

If the individual requires more than the provision of general information, then staff will move to the next step of the process. In the next step, it is important to include the individual in the process of locating and accessing community resources and supports to increase independent leisure functioning. It is a goal of the RRS that the individual seeking services will be capable of and knowledgeable about accessing recreation resources independently or as independently as possible once the Recreation Referral Service involvement has faded or ended.
## Recreation Referral Service

**Contact Log**

(to be completed by IRRC staff members)

<table>
<thead>
<tr>
<th>Date</th>
<th>Staff initials</th>
<th>Individual’s name and/or agency name</th>
<th>Region where individual lives/agency located</th>
<th>Source of contact and contact information (who you spoke with; phone, in person, email, etc.)</th>
<th>Nature of the request (what is the individual or agency requesting from RRS?)</th>
<th>Staff steps taken (information provided or obtained, follow up, assessment, etc.)</th>
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</thead>
<tbody>
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</tbody>
</table>
Recreation Referral Service
Confidentiality Agreement Form

I __________________ agree to keep all information that I obtain regarding all participants using the Recreation Referral Service completely confidential. I will not disclose or discuss any information regarding any participants to family, friends, colleagues, professionals, or other persons unless I have a signed agreement from the participant and this agreement is in the property of the Inclusive Recreation Resource Center. Any documentation I complete will be stored at the Inclusive Recreation Resource Center in a locked cabinet. Documentation will be kept accurately within the participant’s file and will be stored appropriately any time I do not need the information (when not working with the individual or completing documentation).

By signing below, I agree to keep all information obtained while working with the Recreation Referral Service completely confidential and after I have completed my time with the service, the information I obtained will remain confidential.

________________________________________  _____________________
Signature of Student                        Date

________________________________________
Print Student Name

________________________________________  _____________________
Signature of IRRC Staff                      Date

________________________________________
Print Staff Name
Recreation Referral Service
Intake Form
(completed by IRRC Staff)
The goal of the Recreation Referral Service is to connect individuals with recreation resources in New York State. The process may be providing general information about a resource or for individuals requiring more involvement, an assessment and facilitation into a resource may occur. All information is confidential.

Individual’s Name (person using the service): __________________________________
Address:  ______________________________________________________________________
City: __________________________ State: ___________ Zip: ___________
Phone: DAY (___) ____________________ EVENING: (___) ____________________
Email Address: ___________________________________________________________________

Parent/Guardian Name (if applicable): _____________________________________________
Parent/Guardian Contact Information:
Address:  ______________________________________________________________________
City: __________________________ State: ___________ Zip: ___________
Phone:  DAY (___) ____________________ EVENING: (___) ____________________
Email Address: ___________________________________________________________________

Age (of individual): _______  Sex: M____  F____

Disability: _____________________________________________________________________

Type of Recreation Service Individual is Seeking
1. ___ Program Information
2. ___ Resource Information
3. ___ Recreation Support for Inclusion
4. Other:________________________________________________________________________

If the participant needs support for inclusive recreation, complete the following information (to be provided to the facilitator who will provide the services).

Type of Communication Individual Uses:
Verbal  Limited-verbal  Facilitated/assisted communication  Sign language
Other/Comments:
______________________________________________________________________________
Type of Supports Individual Uses (wheelchair, assistive devices, hand-over-hand, etc.):
________________________________________________________________________
________________________________________________________________________

What are the basic goals or reasons the individual would like to use the recreation program or resource?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

IRRC will be doing regular newsletters (you will automatically receive updates by email or mail): Please check here if you would like us to take you off the mailing list:

I would prefer to be taken off the IRRC mailing list _____

Follow-up Steps made by RRS Staff (check one):
Provided General Information_____ Will follow Intake with Assessment _____
Referral Information provided:
________________________________________________________________________
________________________________________________________________________

Other/Comments:
________________________________________________________________________
________________________________________________________________________

This intake form can be accessed on-line and emailed or mailed to the IRRC. Intakes can also be completed over the phone by IRRC staff.
2nd Step:
Getting to know the individual: Assessment

The assessment process will be the first time, in most cases, the individual has made face-to-face contact with you. This is a good opportunity to establish a positive relationship with the individual and the individual’s supports and to get to know the person. The assessment is used as a guide for planning the inclusion process. You will use the RRS Assessment Form (a hard copy of the assessment is provided at the end of this section). You decide if alternate assessment forms or strategies are needed to obtain more information about the individual after the initial assessment has been completed. A general goal or accomplishment the individual wants to achieve is identified in the assessment. The person’s goal may be the same from the time of assessment throughout the process, or it may develop as the person is able to identify specific skills or accomplishments he or she would like to achieve. The identified goal should be one that the RRS can work with the individual to accomplish. Coming from a strengths perspective, the individual’s interests, abilities, and identified goals drive the path the inclusion process follows.

To begin, have the individual complete a Pre “Quality of Life” survey. Then complete the “Getting to Know You” assessment with the individual. (Both forms are included at the end of this section. The key to the “Quality of Life” survey is also included. The survey is the pre and post survey used at the beginning and end of services.) Allergies or other serious considerations are also included in the assessment and are necessary for you to be aware of in the event that you will be working with the individual alone at any time. Depending on the needs of the individual, you may use different strategies during the assessment. The use of observations, interviews, reading existing documents or speaking with other professionals, and implementing standardized tests are alternate ways you can get to know more about the individual.

After completing the assessment, you have much of the information needed to determine the next steps to take. Determine if further observations or assessments are necessary. Ask yourself how the person’s goals, interests, skills, abilities, and needs can best be supported? Discuss and make plans with the individual about how the inclusion process will look from this step, involving the individual and any supports. Hopefully any supports were identified during this “getting to know you” section. The support’s role is important as you will develop the inclusion plan with the support’s involvement.

Complete an information release form with the individual and his or her parent or guardian, if applicable. Any resources, such as service agencies or schools that you will be communicating with should be included on the form. Keep all records confidential and file them at the IRRC agency.
IRRC Quality of Life Scale  
(Anderson, 2007)

<table>
<thead>
<tr>
<th>Statement</th>
<th>Sounds Like Me</th>
<th>Doesn’t Sound Like Me</th>
<th>Not Sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I feel happy and enjoy most things.</td>
<td></td>
<td></td>
<td>?</td>
</tr>
<tr>
<td>2. I like myself.</td>
<td></td>
<td></td>
<td>?</td>
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<tr>
<td>3. I feel in control of my life.</td>
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<td>6. I have people in my life who help me when I need it.</td>
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<td>7. I have enough money to do what I want.</td>
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<tr>
<td>8. I have a chance to learn new things.</td>
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<td>9. I have recreation skills I use a lot.</td>
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<tr>
<td>10. I am good at recreation activities.</td>
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<tr>
<td>11. I exercise or do physical activity at least 20 minutes every day.</td>
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<tr>
<td>12. I know how to take care of myself.</td>
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<tr>
<td>13. I have hobbies and interests I like to do.</td>
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<tr>
<td>14. I do the recreation activities I like when I want.</td>
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<tr>
<td>15. I follow my dreams for recreation.</td>
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<tr>
<td>16. I choose my recreation activities.</td>
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<tr>
<td>17. I participate in recreation activities in my community.</td>
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<tr>
<td>18. I volunteer in my community.</td>
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<td>19. I have people who help me participate in the community.</td>
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<tr>
<td>20. People around me treat me with respect.</td>
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<td>?</td>
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<tr>
<td>21. I can access recreation activities and places in my community.</td>
<td></td>
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<td>?</td>
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<tr>
<td>22. My life is everything I want it to be.</td>
<td></td>
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<td>?</td>
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<tr>
<td>23. The things around me in my life are excellent.</td>
<td></td>
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<td>?</td>
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<tr>
<td>24. I like my life.</td>
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<tr>
<td>25. I have the important things I want in my life.</td>
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<td>26. If I could live my life over, I would keep it the same.</td>
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</tbody>
</table>

___ Total score ___. EW ___IR ___ MW ___ PD ___ PW ___ SD ___ SI ___ R ___ SW
# Key - IRRC Quality of Life Scale - Key

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<tr>
<th>Number</th>
<th>Description</th>
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<td>20.</td>
<td>People around me treat me with respect.</td>
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<td>22.</td>
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**Core Concepts of Quality of Life** (Schalock, 2004)

<table>
<thead>
<tr>
<th>Domain</th>
<th>Included Concepts</th>
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<tbody>
<tr>
<td>Emotional well-being (EW)</td>
<td>Contentment (satisfaction, moods, enjoyment)</td>
</tr>
<tr>
<td></td>
<td>Self-concept (identify, self-worth, self-esteem)</td>
</tr>
<tr>
<td></td>
<td>Lack of stress (predictability, control)</td>
</tr>
<tr>
<td>Interpersonal relations (IR)</td>
<td>Interactions (social networks, social contacts)</td>
</tr>
<tr>
<td></td>
<td>Relationships (family, friends, peers)</td>
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<tr>
<td></td>
<td>Supports (emotional, physical, financial, feedback)</td>
</tr>
<tr>
<td>Material well-being (MW)</td>
<td>Financial status (income, benefits)</td>
</tr>
<tr>
<td></td>
<td>Employment (work status, work environment)</td>
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<tr>
<td></td>
<td>Housing (type of residence, ownership)</td>
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<tr>
<td>Personal development (PD)</td>
<td>Education (achievements, status)</td>
</tr>
<tr>
<td></td>
<td>Personal competence (cognitive, social, practical)</td>
</tr>
<tr>
<td></td>
<td>Performance (success, achievement, productivity)</td>
</tr>
<tr>
<td>Physical well-being (PW)</td>
<td>Health (functioning, symptoms, fitness, nutrition)</td>
</tr>
<tr>
<td></td>
<td>Activities of daily living (self-care skills, mobility)</td>
</tr>
<tr>
<td></td>
<td>Leisure (recreation, hobbies)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Domain</th>
<th>Included Concepts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-determination (SD)</td>
<td>Autonomy/personal control (independence)</td>
</tr>
<tr>
<td></td>
<td>Goals and personal values (desires, expectations)</td>
</tr>
<tr>
<td></td>
<td>Choices (opportunities, options, preferences)</td>
</tr>
<tr>
<td>Social inclusion (SI)</td>
<td>Community integration and participation</td>
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<tr>
<td></td>
<td>Community roles (contributor, volunteer)</td>
</tr>
<tr>
<td></td>
<td>Social supports (support network, services)</td>
</tr>
<tr>
<td>Rights (R)</td>
<td>Human (respect, dignity, equality)</td>
</tr>
<tr>
<td></td>
<td>Legal (citizenship, access, due process)</td>
</tr>
<tr>
<td>Subjective well-being scale (Diener, 1984) (SW)</td>
<td></td>
</tr>
</tbody>
</table>
“Getting to Know You”
Recreation Referral Service Assessment
(All of the information obtained by the IRRC is confidential.)

Date of Assessment: ________ Assessment Completed By: ______________________

Individual’s Name (copied from Intake form):
________________________________________________________________________

Address: ________________________________________________________________
City: ___________________________ State: ___________ Zip: ____________
Phone: DAY (___) ____________________ EVENING: (___) ____________________
Email Address: _______________________________________________________

1. What kinds of things are you really good at doing?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. What are your favorite activities or hobbies? What activities do you enjoy the most?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. What would your ideal recreation look like?
   -What activities would you do?
   -How many people would participate with you?
   -How often would you participate in the activity?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4. With whom do you play/recreate?
   -Whom do you see daily/frequently?
   -What relationships are most important to you?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
5. What recreation resources/programs have you used in the past?  
   - Was the experience successful or not? Why or why not?

6. Do you currently use any other services or resources (i.e. service coordination, waiver services, recreation programs, YMCA, scouts, sports, etc.)?

7. What kind of recreation programs/resources are you interested in participating?

More About You: Below are some things that may help you to live the recreation life you desire (Circle the appropriate response):

Recreation/Leisure Functioning:

1. I have many activities that I like to do.  Yes  No  Not Sure
2. I am able to find information on recreation resources.  Yes  No  Not Sure
3. I have transportation to the recreation activities I enjoy.  Yes  No  Not Sure
4. I have friends/family with whom I recreate.  Yes  No  Not Sure

Comments:

Well-Being:

1. My life is close to ideal.  Yes  No  Not Sure
2. The conditions of my life are excellent.  Yes  No  Not Sure
3. I am satisfied with my life.  Yes  No  Not Sure
4. I have the important things I want in my life.  Yes  No  Not Sure
5. If I could live my life over, I would change nothing.  Yes  No  Not Sure

Comments:
Social Ability:
1. I make new friends easily. Yes No Not Sure
2. I have positive relationships with others when I recreate. Yes No Not Sure
3. I find it easy to talk to people. Yes No Not Sure
4. I enjoy meeting new people. Yes No Not Sure
5. I prefer to play/recreate on my own. Yes No Not Sure
Comments:________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Physical Ability:
1. I am physically able to do the activities I enjoy. Yes No Not Sure
2. I use adapted equipment during physical activities. Yes No Not Sure
Comments:________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Cognitive Ability:
1. I learn new things quickly. Yes No Not Sure
2. I am good at thinking of new things to do. Yes No Not Sure
3. I enjoy learning new games/activities to play/recreate. Yes No Not Sure
4. I easily remember people and places. Yes No Not Sure
Comments:________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Emotional Ability:
1. When I feel frustrated, I can tell someone how I feel. Yes No Not Sure
2. I can communicate my feelings in a positive way. Yes No Not Sure
3. I ask questions when I do not understand something. Yes No Not Sure
4. I feel comfortable talking to others about myself. Yes No Not Sure
Comments:________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
What are some goals or dreams you would like to achieve for your recreation?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Is there any other information you would like to add (ex. level of supervision, crowds, sensory issues, flight in the community, allergies, etc)?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

It may be helpful to schedule another time to observe you participating in an activity (work, school, program, etc.). If this is necessary, where are some times or places that staff could come to see you and get to know you better?
________________________________________________________________________
________________________________________________________________________

Directions for follow-up (what will the facilitator do next):
________________________________________________________________________
________________________________________________________________________

Emergency Contact Information:
Name: _________________________________________________________________
Address: _____________________________________________________________
City: ___________________________ State: ___________ Zip: ________________
Phone: DAY (___) ____________________ EVENING: (___) ____________________
Email Address: _______________________________________________________

Individual’s Allergies/Special Precautions (ex. bee stings, carries an epi-pen, peanut allergy, etc.):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Facilitator Signature ___________________________ Date ___________________________
Recreation Referral Service
Release

Individual’s Name (copied from Intake form):

________________________________________________________________________

Address: _______________________________________________________________
City: _________________________________ State: ___________ Zip: ____________
Phone: DAY (___) ____________________ EVENING: (___) ____________________
Email Address: __________________________________________________________

Parent/Guardian Name (copied from Intake form):

________________________________________________________________________

Address: _______________________________________________________________
City: _________________________________ State: ___________ Zip: ____________
Phone: DAY (___) ____________________ EVENING: (___) ____________________
Email Address: __________________________________________________________

Picture Release: The RRS would like to take pictures at times to put in our newsletters and on our website. Do you mind if the individuals working with RRS take your picture and use the picture in our newsletters and other places? Please sign here if that is okay with you!

Signature of Individual or Guardian: __________________________________________
Date of Signature: ____________________

It might be helpful to work with other people who you know. Who else should the RRS work with? Do you mind if the RRS speaks with the following agencies or individuals regarding your involvement in the RRS?

Agency Name: __________________________________________________________
Agency Name: __________________________________________________________
Agency Name: __________________________________________________________
Agency Name: __________________________________________________________

Signature of Individual or Guardian: __________________________________________
Date of Signature: ____________________
Facilitator Signature: ___________________________ Date: ____________________
3rd Step:
Identify a resource or resources in the person’s area: Use the Inclusivity Assessment Tool

Locating the resource the individual desires to explore or participate with is an invaluable step. Consider the following questions: What resource is the individual interested in? Has the person identified a specific resource? Does this person desire to use the resource in his/her local community, or is the resource a tourist or vacation opportunity? What resources are available in the individual’s community and what resources are available in New York State? Does the individual wish to access an organized and structured program, or a general public resource?

Contact the staff at the chosen resource to let the agency staff know an individual is interested in using or participating in the resource. Explain the purpose of the RRS. Discuss with the resource staff what types of supports or services their agency provides. Explain to the resource staff any supports, accommodations, or modifications the individual may require. Encourage the individual to participate as much as possible in order for the individual to be capable of accessing resources independently in the future. If possible, have the individual contact resources independently or with your support.

Once a resource has been identified, it may need to be assessed, if it has not already been done by IRRC or an outside agency. If you are a trained assessor through IRRC “Inclusion U” then set up an assessment with the agency. Request assistance from the IRRC to have the staff complete an assessment if you are not trained. RRS staff and trained assessors will use the Inclusivity Assessment Tool (Anderson, Wilson, & Penney McGee, 2007) to assess recreation resources. If an outside agency has completed the assessment, consider the type of assessment and the information available; does it tell you what you need to know so the individual will be able to access the resource? If the resource is not in a local or convenient location, contact the IRRC and the staff will arrange for a Regional Advisory Committee member to complete the assessment.

Set up a time to visit the site, preferably with the individual. If the resource has not been assessed, this is a good opportunity to explain to the staff at the site the multipurpose of the visit. The site assessment allows the opportunity for the individual with a disability to see the site and gain more information about using the site as a recreation resource. It is a chance to assess the site, for the specific individual’s needs and a general assessment for future use by the IRRC.

After the visit, have a clear plan about the available supports, accommodations, or modifications the resource can and will provide. Integrate the information from the resource with the information gathered by the assessment to create an inclusion plan (inclusion plans are discussed in the following section). Become clear about what actions the resource and the resource’s staff will take, the actions the individual will take, and the actions you will take. This information provides the initial design of the inclusion plan. Documentation includes completion of the Inclusivity Assessment Tool if you are trained and completion of an Agency Action Form after meeting with the recreation agency staff.
4th Step:
Develop an inclusion plan

Once you have completed an assessment with the individual and the agency you should have a good understanding of the experience the individual desires, the supports that will participate in the plan, and the actions that need to be taken by all persons involved in the inclusion process. The inclusion plan provides a descriptive layout of how the inclusion process will look. The plan includes dates the individual will participate, the persons involved, the actions each person will take, and when you will “check-in” with everyone on how the inclusion plan is progressing. The persons involved and the role each person will play in the inclusion process are identified. An explanation of the length of time the process will take, (this should be flexible to changes), and a description of the way the person will independently participate or will successfully continue participation by the time involvement ends are all elements of the inclusion plan. An important role for you will be to act as a liaison and an advocate for both the individual and the recreation site.

Consider some questions here: Does the staff at the recreation site require any training or education? (Remember that the IRRC staff can provide free training to agencies if interested.) Do the present participants require an opportunity to talk with the individual or about disability before the individual begins the program? Is the role the participant with a disability plays just as important or active as the roles the other participants play? Will the resource staff complete any paperwork or provide feedback to IRRC in any way? These questions are addressed before an individual begins program and while the individual participates with the resource. An inclusion plan example is provided in the Appendix of the manual.
Recreation Referral Service

Inclusion Plan for: ________________________________

Summary of Individual’s Strengths:

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Individual’s Goals and Objectives:

Individual’s Goals and Objectives:

Goal:
Objectives:
---------------------------------------------------------------------------
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Goal:
Objectives:
---------------------------------------------------------------------------

(attach more sheets if needed)
Summary of Recreation Plans (including follow-up):

Outline of Plan (use another page if needed):

<table>
<thead>
<tr>
<th>Individual</th>
<th>Task</th>
<th>Date Completed</th>
</tr>
</thead>
</table>

Facilitator Signature __________________________ Date __________________________

*Provide copies of the Inclusion Plan to all individuals involved in the process.*
5th Step:
Implement the inclusion plan

Once the plan is in place, you can put it into action. Recognize some core principles of inclusion and work with the agency to implement them as needed.

- Frequent structured opportunities for participants to get to know each other are provided
- Recreation staff emphasize group identity and likenesses
- An equal status is established within the group
- Each group member plays a valuable role in the group
- Information about disabilities is accurate
- Cooperation within and interdependence among the group is emphasized (Anderson & Kress, 2003)

You may need to discuss the principles of inclusion or contact IRRC staff to provide training to agency staff. It might not have happened prior to implementation or it may be identified as an agency need after implementation.

It is important to check-in with the individual and the recreation resource. Regular “check-ins” described in the plan can include visiting the site when the individual is participating, calling the site and receiving verbal or written information from the site, or calling the individual and his/her supports to find out how the process is going. Be sure to document any actions in progress notes or agency action forms (hard copies of the forms are included in the manual). Return to the goals set by the individual regularly to determine any necessary changes or modify goals as needed to maintain accurate goals for the individual. Remember that the goals set by the individual may change as he/she participates in the recreation resource.
Recreation Referral Service
Progress and Updates

Individual Name: ______________________________ Date: ____________

Goals: ____________________________________________________________

How did you interact with the participant?: Face-to-Face Phone Email Other: __

If contact was face-to-face, identify the location where contact occurred:
________________________________________________________________________

Data (What did you hear and observe during your time with the participant, in relation to the goals?):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Action (What did you do, in relation to the inclusion plan and goals?):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Response (How did the participant respond to your actions?):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Plan (What’s next? Follow-up, next steps, any changes):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Inclusion Rating (ask the participant what inclusion rating best describes his/her experience in the recreation activity):

Very High (I participated and felt like an important group member) ____
High (I felt like a participant in the group) ____
Medium (I felt included but not like a full participant) ____
Low (I did not feel like a part of the group) ____
Very Low (I was not included at all) ____

_________________________________________ __________________________
Facilitator Signature Date
Recreation Referral Service
Agency Action Form

Agency Name: ________________________________

Date of Contact: ____________________________

Type of Contact (circle one): Face-to-Face  Phone  Email  Other: _________

Name of agency staff person: ________________________________

Notes (information obtained):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Directions for Follow-up (next steps, any changes in plans):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Facilitator Signature ___________________________ Date ________________________
6th Step: Evaluation

Observe and “check-in” with the individual within the program. Through the documentation, you should have information regarding the success or ineffectiveness of the inclusion process. Communicate with the recreation resource staff regularly regarding your involvement. Any feedback you receive is used to determine the success of the individual and to identify areas of improvement for the RRS.

Meet with the individual with a disability, any supports involved, and with staff from the recreation resource to discuss the inclusion process. Recommended questions involve the extent the individual felt a part of the group, or was perceived as part of the group, and the outcomes from the individual’s involvement. Complete the posttest for quality of life to determine the impact of the RRS for the individual.

Evaluation occurs throughout the individual’s involvement in the recreation resource using progress notes. Continue to evaluate as you “step back” or discontinue services. You know you are almost finished when the individual is participating as independent as possible in the recreation he or she chooses, when the individual’s goals have been satisfied, or when the individual or RRS determines services are no longer necessary. Complete an “End of Service” form and a Post “Quality of Life” survey and file the forms with the individual’s information. The forms are included in the following this section.

Have individuals or families who used the RRS complete the Developmental Disabilities Planning Council “Consumer Satisfaction Survey”. The survey can be accessed through http://www.ddpc.state.ny.us/ then click on “Consumer Satisfaction Survey” under “Consumer” section on the left side of the home page). Have the individual or family also complete a hard copy for RRS records (the form is included at the end of this section). File evaluation documentation at the IRRC office.
Recreation Referral Service
End of Service Summary

Individual Name: __________________________________________________

Date of end of service: ______________________

Source of Contact:  Face-to-Face     Phone     Email     Other: _______________

If contact was face-to-face, identify the location where contact occurred:
________________________________________________________________________

Reason for ending service (i.e. achieved set goals, individual’s decision, etc.):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Outcomes for the individual from receiving services/Summary of services provided:
Goal:___________________________________________________________________
Outcome:________________________________________________________________
________________________________________________________________________

Services provided to help reach goal:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Facilitator Signature ___________________________ Date ____________________
IRRC Quality of Life Scale
(Anderson, 2007)

<table>
<thead>
<tr>
<th></th>
<th>Sounds Like Me</th>
<th>Doesn't Sound Like Me</th>
<th>Not Sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>27. I feel happy and enjoy most things.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>28. I like myself.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>29. I feel in control of my life.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>30. I know people I can call or talk to.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>31. I have family and friends I can do things with.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>32. I have people in my life who help me when I need it.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>33. I have enough money to do what I want.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>34. I have a chance to learn new things.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>35. I have recreation skills I use a lot.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>36. I am good at recreation activities.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>37. I exercise or do physical activity at least 20 minutes every day.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>38. I know how to take care of myself.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>39. I have hobbies and interests I like to do.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>40. I do the recreation activities I like when I want.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>41. I follow my dreams for recreation.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>42. I choose my recreation activities.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>43. I participate in recreation activities in my community.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
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<tr>
<td>44. I volunteer in my community.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>45. I have people who help me participate in the community.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>46. People around me treat me with respect.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>47. I can access recreation activities and places in my community.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>48. My life is everything I want it to be.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>49. The things around me in my life are excellent.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>50. I like my life.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>51. I have the important things I want in my life.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
<tr>
<td>52. If I could live my life over, I would keep it the same.</td>
<td>( )</td>
<td>( )</td>
<td>?</td>
</tr>
</tbody>
</table>

___ Total score ___ EW ___ IR ___ MW ___ PD ___ PW ___ SD ___ SI ___ R ___
## KEY - IRRC Quality of Life Scale -KEY

<table>
<thead>
<tr>
<th></th>
<th>Sounds Like Me</th>
<th>Doesn't Sound Like Me</th>
<th>Not Sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I feel happy and enjoy most things.</td>
<td>(EW) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2. I like myself.</td>
<td>(EW) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>3. I feel in control of my life.</td>
<td>(EW) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>4. I know people I can call or talk to.</td>
<td>(IR) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>5. I have family and friends I can do things with.</td>
<td>(IR) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>6. I have people in my life who help me when I need it.</td>
<td>(IR) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>7. I have enough money to do what I want.</td>
<td>(MW) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>8. I have a chance to learn new things.</td>
<td>(PD) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>9. I have recreation skills I use a lot.</td>
<td>(PD) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>10. I am good at recreation activities.</td>
<td>(PD) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>11. I exercise or do physical activity at least 20 minutes every day.</td>
<td>(PW) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>12. I know how to take care of myself.</td>
<td>(PW) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>13. I have hobbies and interests I like to do.</td>
<td>(PW) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>14. I do the recreation activities I like when I want.</td>
<td>(SD) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>15. I follow my dreams for recreation.</td>
<td>(SD) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>16. I choose my recreation activities.</td>
<td>(SD) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>17. I participate in recreation activities in my community.</td>
<td>(SI) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>18. I volunteer in my community.</td>
<td>(SI) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>19. I have people who help me participate in the community.</td>
<td>(SI) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>20. People around me treat me with respect.</td>
<td>(R) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>21. I can access recreation activities and places in my community.</td>
<td>(R) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>22. My life is everything I want it to be</td>
<td>(SW) 3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>23. The things around me in my life are excellent.</td>
<td>(SW) 3</td>
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<td>2</td>
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<tr>
<td>25. I have the important things I want in my life.</td>
<td>(SW) 3</td>
<td>1</td>
<td>2</td>
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<td>26. If I could live my life over, I would keep it the same</td>
<td>(SW) 3</td>
<td>1</td>
<td>2</td>
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</table>

### Core Concepts of Quality of Life (Schalock, 2004)

<table>
<thead>
<tr>
<th>Emotional well-being (EW)</th>
<th>Self-determination (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contentment (satisfaction, moods, enjoyment)</td>
<td>Autonomy/personal control (independence)</td>
</tr>
<tr>
<td>Self-concept (identity, self-worth, self-esteem)</td>
<td>Goals and personal values (desires, expectations)</td>
</tr>
<tr>
<td>Lack of stress (predictability, control)</td>
<td>Choices (opportunities, options, preferences)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interpersonal relations (IR)</th>
<th>Social inclusion (SI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interactions (social networks, social contacts)</td>
<td>Community integration and participation</td>
</tr>
<tr>
<td>Relationships (family, friends, peers)</td>
<td>Community roles (contributor, volunteer)</td>
</tr>
<tr>
<td>Supports (emotional, physical, financial, feedback)</td>
<td>Social supports (support network, services)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Material well-being (MW)</th>
<th>Rights (R)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial status (income, benefits)</td>
<td>Human (respect, dignity, equality)</td>
</tr>
<tr>
<td>Employment (work status, work environment)</td>
<td>Legal (citizenship, access, due process)</td>
</tr>
<tr>
<td>Housing (type of residence, ownership)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Personal development (PD)</th>
<th>Subjective well-being scale (Diener, 1984) (SW)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education (achievements, status)</td>
<td></td>
</tr>
<tr>
<td>Personal competence (cognitive, social, practical)</td>
<td></td>
</tr>
<tr>
<td>Performance (success, achievement, productivity)</td>
<td></td>
</tr>
</tbody>
</table>

| Physical well-being (PW) | |
|--------------------------||
| Health (functioning, symptoms, fitness, nutrition) | |
| Activities of daily living (self-care skills, mobility) | |
| Leisure (recreation, hobbies) | |
New York State Developmental Disabilities Planning Council
Consumer Satisfaction Survey

Please check the category that best describes you:
○ Individual with a disability
○ Family Member
○ Other

Please check either Yes or No to tell us your opinion about the following statements:

I (or my family member) was treated with respect during this project activity.
○ Yes
○ No

I (or my family member) have more choice and control as a result of this project activity.
○ Yes
○ No

I (or my family member) can do more things in my community as a result of this project activity.
○ Yes
○ No

Please select the answer that best describes your opinion.

I am satisfied with this project activity.
○ strongly agree
○ agree
○ disagree
○ strongly disagree

My life is better because of this project activity.
○ strongly agree
○ agree
○ disagree
○ strongly disagree

What has been helpful or not helpful about this project?
Appendix

Sample Completed Forms for “Sally”
Inclusion Plan for Sally

Strengths:
Sally has so many interests and is involved in physical and artistic activities. She has past experience dancing, swimming, and doing many other physical activities. Her home is located in an area that allows Sally to participate in many outdoor activities that she enjoys with her family. Her family is a support for her and is very involved in her life. Sue has sought many opportunities for Sally and she is close with her brothers. Sally’s family is interested in providing her with many opportunities and appears to have the resources to access programs that are available. The family has already connected Sally with different programs in the local area. Sally will be attending school in Cortland in the fall. This could open up more opportunities for Sally in regards to location. Her mother works in Cortland and it may be easier to find and attend programs close to Sally’s school. Sue states that Sally transitions well when meeting new people and exploring new activities. She communicates using the words “yes” and “no” or will physically prompt someone if she wants to show the person something.

Goals and Objectives:
1. Sally will improve her dance abilities
   a. Sally will attend dance class at least one time a week
   b. Sally will participate in dance class by completing 3 dance tasks as identified by the dance instructor
   c. Sally will practice her dance moves at home 2 times a week with Sue
2. Sally will expand her social supports
   a. Sally will partner with a peer each week at class
   b. Sally will ask her peers for assistance during class using her picture board
   c. Sally will attend one structured dance at the studio each month

RRS staff has found Sally a recreation resource that works with youth ages 12-18. There is an opening at the studio. Sally’s mother completed the application for the class. RRS staff and the family met with the studio. The following items were discussed and addressed. The following individuals will take action. Sally will begin class on 7/2/07.

<table>
<thead>
<tr>
<th>Individual</th>
<th>Task</th>
<th>Date Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRS Staff</td>
<td>Staff training at the dance studio</td>
<td>6/28/07</td>
</tr>
<tr>
<td>RRS Staff</td>
<td>Peer Orientation for participants in dance class</td>
<td>6/29/07</td>
</tr>
<tr>
<td>Sue (Sally’s Mother)</td>
<td>Bring Sally for a visit and orientation to studio</td>
<td>6/29/07</td>
</tr>
<tr>
<td>Sue and Sally</td>
<td>Participate in peer orientation with dance class</td>
<td>6/29/07</td>
</tr>
<tr>
<td>RRS Staff</td>
<td>Create picture board for Sally to use in class</td>
<td>7/2/07</td>
</tr>
<tr>
<td>Dance Instructor</td>
<td>Limit or arrange class to 8 students total</td>
<td>6/28/07</td>
</tr>
<tr>
<td>Dance Instructor</td>
<td>Modify a ballet bar so Sally can reach it</td>
<td>6/29/07</td>
</tr>
<tr>
<td>Dance Instructor</td>
<td>Send a class schedule with pictures to Sally</td>
<td>6/29/07</td>
</tr>
<tr>
<td>Role</td>
<td>Task</td>
<td>Date</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>----------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Dance Instructor</td>
<td>Staff support to work with Sally until peers identified</td>
<td>7/2/07</td>
</tr>
<tr>
<td>Dance Instructor</td>
<td>Identify two students as peer supports for Sally</td>
<td>7/10/07</td>
</tr>
<tr>
<td>Sally</td>
<td>Attend class and participate with peers</td>
<td>7/2/07</td>
</tr>
<tr>
<td>RRS Staff</td>
<td>Observe Sally on the first day of class</td>
<td>7/2/07</td>
</tr>
<tr>
<td>Studio Owner</td>
<td>Put flyers into Braille and large print formats</td>
<td>7/10/07</td>
</tr>
<tr>
<td>Studio Owner</td>
<td>Send flyers to local schools and disability agencies</td>
<td>7/10/07</td>
</tr>
</tbody>
</table>

The following individuals agree to work together to provide an inclusive dance class and to enhance Sally’s experience in dance class with her peers. The tasks described will be completed by the dates indicated. If individuals need assistance or support in any areas, RRS staff will be contacted.

RRS staff will observe Sally’s class at least one time every two weeks. RRS staff will speak with the dance instructor, studio owner, Sally, and Sue at least one time every two weeks. Progress Notes and the appropriate documentation will be completed after each contact.

Sally’s goals will be reviewed, as Sally or supports feel is necessary or will be reviewed every two weeks after visit with Sally.

Copies of the plan have been provided to each individual identified on the plan.

__________________________________________________________________________

Staff Completing Plan   Date
Description of Individuals with Disabilities Served During Service Piloting

Individuals participating in the Recreation Referral Service had developmental and psychiatric disabilities and participated in programs or services through the J.M. Murray Center and Person-to-Person Advocacy, Inc. Students piloted the RRS with nine individuals with unique interests and desired outcomes from using the service. Descriptions below provide a short characterization of each participant and his or her experience with the service. Pseudonyms are used to assure anonymity.

Allen enjoys many physical activities and is a friendly sociable person. Allen lives with his mother and frequently depends on his mother and grandmother for transportation to community events or programs. Allen is 36 years old and has mental retardation and epilepsy. One hour a week, Allen participates in therapeutic horseback riding. He works out at a local YMCA three times a week independently but would like to find a peer with whom he could exercise. Along with finding a friend, Allen set a goal to expand his knowledge of leisure opportunities by creating a list of activities and agencies. Once his list was complete, with the support of the student volunteer, Allen participated in the chosen activity. Discussion between Allen, his mother, and the student volunteer occurred to determine Allen’s level of comfort and feelings about inclusion during the activity. This discussion also assisted in deciding Allen’s future participation in the program.

Dorothy lives in a house with other individuals with developmental disabilities. She is 43 years old and enjoys a variety of activities, often participating with housemates,
staff, a boyfriend, and family members. Dorothy’s ideal recreation involved participating in social and active recreation frequently. After much research in the local community for recreation opportunities that met Dorothy’s interests, the student and Dorothy began attending Bingo regularly at a local country music park. The country music park participated in the assessment process with the IRRC prior to involvement with the referral service and had some knowledge of the overall purpose of the center and its services. The goal of enhancing and increasing social skills and contacts was met regularly as Dorothy responded to the inclusion rating scale in the Progress Notes as “felt like a participant in the group” (or experiencing a “high” level of inclusion).

Edna, who enjoys crocheting, making jewelry, bowling, horseback riding, and visiting animals at the SPCA, is over 60 years old and has mental retardation. She lives with other individuals with disabilities and recreates with her housemates and staff most often. When describing her ideal recreation, Edna stated that it looks like her current recreation lifestyle except for the lack of horseback riding. Edna’s responses to the “Getting to Know You” assessment were positive; she responded to areas of recreation/leisure functioning, well-being, social ability, and physical ability primarily in a positive manner. Responses to cognitive ability and emotional ability included a combination of positive, negative, and unsure feelings regarding the identified domains.

Kelly is very happy with her current recreation lifestyle. She has friends to support her and “enjoys her hobbies.” Kelly’s diagnosis is schizophrenia and she is 46 years old. Her primary goals were riding her tricycle into town and becoming comfortable using the tricycle to get around the community. The other goal Kelly
worked towards was to lose weight and increase her muscle mass by developing a routine with the student volunteer and by making healthier decisions each day.

Paul’s sense of humor, outgoing attitude, and friendly demeanor attribute to the many activities Paul explored with his student. Paul uses a wheelchair and transfers himself; he is 37 years old, has cerebral palsy, and lives with a roommate. Paul’s family and friends are most important to him. The major goals Paul desired to accomplish were to find recreational opportunities in the community and to find transportation to those activities. The student and Paul participated in many activities in the community, frequently discussing potential transportation resources. A regular activity in which the pair attended was wheelchair basketball at SUNY Cortland, where individuals with and without disabilities participate. Paul met several students and individuals from the Adaptive Physical Education Department.

Roberta lives with her father, and spends much of her time recreating with her friends and family. She enjoys learning new things, is proud of her job at a local store for more than 10 years, and likes to be involved in the community. Roberta participates in many activities through the J.M. Murray Center. She is 36 years old and has a diagnosis of Downs Syndrome. Due to the abundance of Roberta’s interests, the student and Roberta developed very broad goals. Roberta desired to increase healthy behaviors and eating habits when she had lunch with the student. She also focused on expanding existing social supports for recreation participation.
Evaluation Results

Evaluation of the services provided and the overall project included many components. Documentation completed by student volunteers, with the input of participants and/or their families, consisted of the Progress Notes, using the goals and objectives and the Inclusion Rating Scale, the pre and post “Quality of Life” surveys (Anderson, 2007a), the DDPC “Consumer Satisfaction Survey,” and the End of Service Summary. A discussion with the student volunteers at the end of the semester regarding the RRS took place, where students had the opportunity to provide feedback on their experience and any part of the service protocol or process. Discussion of each evaluation tool follows.

Progress Notes

The progress notes included a section where goals and objectives, set in the inclusion plan, were referred to and discussed by student volunteers regarding each meeting with the participant.

Dorothy and the student volunteer spent their time together accessing a local park where bingo happens regularly. Dorothy’s goal of increasing and enhancing her social skills and her social supports was successful as displayed through the narrative sections of the progress note. She told her student volunteer one evening before bingo, that she “wondered if her new friends were going to be [at bingo] tonight.” The data from the
inclusion rating scale included two of the sessions with the student volunteer. During those sessions, Dorothy stated she “felt like a participant in the group.” The qualitative data reflected that Dorothy was excited to attend bingo and was able to socialize and make personal connections with other participants.

Edna and the student participant developed the goals of attending church regularly and finding transportation to and from church. Another goal was to find other arts and crafts activities that Edna might enjoy. The student volunteer brought different types of arts and crafts to Edna’s home, after spending time in new activities, Edna stated she still enjoyed her old activities of crocheting and jewelry making. During one of the sessions with the student volunteer, Edna stated she “felt like a participant in the group.”

Roberta and her student volunteer set a goal to make healthier decisions and to expand social supports. The objectives under expanding social supports were to attend line dancing and ask for assistance when needed. Roberta attended line dancing, went to a hockey game, and spent a lot of one-to-one time with the student volunteer. Roberta responded that she experienced a “high” level of inclusion where she “…felt like a participant in the group” during two of the activities with the student volunteer. During four of the activities in which Roberta was with the student volunteer, she felt a “very high” level of inclusion where she felt she “…participated and felt like an important group member.”

Paul’s goals included finding new opportunities in the community and locating transportation resources to access the new opportunities. With the student volunteer, Paul participated in multiple activities in the community. The most lasting activity he discovered with the student volunteer was wheelchair basketball at SUNY Cortland. By
attending wheelchair basketball, Paul met several individuals who also use wheelchairs, or just enjoy playing wheelchair basketball. According to the student volunteer, Paul is planning to attend the activity each week after his student volunteer ends services because he made personal connections at wheelchair basketball and now feels comfortable enough to attend independently. Out of six sessions with the student volunteer, Paul responded to feeling a “very high” level of inclusion, where he felt like an important member of the group. In one of the sessions, Paul felt a “high” level of inclusion where he “…felt like a participant in the group.”

Pre and Post Quality of Life Survey

The pre and post “Quality of Life” survey addressed areas of (1) emotional well-being, (2) interpersonal relations, (3) material well-being, (4) personal development, (5) physical well-being, (6) self-determination, (7) social inclusion, (8) human and legal rights, and a (9) subjective well-being scale. A (10) total score of 78 was possible, or a maximum score of three for each question. Mean scores for all four participants are displayed in Figure 1. Figures 2 through 4 show the results for each participant on the pre- and post- measure.

Overall, there was little change in participant scores. Figure 1 displays the average pre and post scores; overall, the scores were high so there were little differences between participants’ average pre and post scores. Increases occurred in the subcategories of physical well-being, human and legal rights, subjective well-being scale, and total score. One participant’s score decreased slightly on the self-determination
subscale, as displayed in Figure 1. Two participants, Dorothy and Roberta, obtained the maximum score on both the pre and post “Quality of Life” surveys as displayed in Figure 2 and Figure 3, respectively. Paul’s scores increased from 2.85 to 2.92 (or 74 to 76). The increase occurred in the area of physical well-being, as seen in Figure 4. Edna’s overall scores increased from 2.81 to 2.88 (or 73 to 75) as displayed in Figure 5. Increases occurred in the subcategories of subjective well-being and in human and legal rights; her score dropped in the post survey by one point in the area of self-determination.

Figure 1

Mean Quality of Life Scores

![Graph of Mean Quality of Life Scores](image1)

Figure 2

Dorothy’s Quality of Life

![Graph of Dorothy’s Quality of Life](image2)
Figure 3

Roberta's Quality of Life

Figure 4

Paul's Quality of Life Surveys

Figure 5

Edna's Quality of Life Surveys
DDPC “Consumer Satisfaction Survey”

The New York State Developmental Disabilities Planning Council “Consumer Satisfaction Survey” was used to evaluate the provision of the RRS, which is funded by the DDPC. The survey is a hard copy of an online survey used by the public agency. Student volunteers completed the survey with the participant and/or the participant’s family. Table 1 displays participants’ responses to the survey.

Table 1  

<table>
<thead>
<tr>
<th>Survey Statement</th>
<th>Participants’ Responses (N)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>No Response</td>
</tr>
<tr>
<td>I (or my family member) was treated with respect during this project activity.</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>I (or my family member) have more choice and control as a result of this project activity.</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>I (or my family member) can do more things in my community as a result of this project activity.</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>I am satisfied with this project activity.</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>My life is better because of this project activity.</td>
<td>1</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>
Statements on the survey address overall experience and satisfaction with services provided by an agency receiving funding from the DDPC. RRS participants responded that they were “treated with respect” while using the service, two participants responded that they had “more choice and control as a result of” the service and one participant said she did not feel she more choice and control after using the service. One participant did not respond to the question regarding choice and control. All four participants responded that they “can do more things in the community as a result” of their involvement with the RRS. Regarding whether respondents were “satisfied with the project activity,” responses from of a 4-point Likert scale ranging from “strongly disagree” to “strongly agree,” were that two respondents agreed and two respondents strongly agreed. Respondents also agreed to the statement “my life is better because of this project activity,” and one respondent strongly agreed.

A comment box was provided at the end of the survey where individuals with disabilities or their families can state what was helpful or not helpful about the project in which they participated. Responses included, “meet new people, learn new things, experienced new things” and “having a friend like [the student volunteer].” Another participant stated, “…I loved playing bingo and meeting new people. It allowed me to get out and [be] active in the community.”

**End of Service Summary**

The End of Service Summary described the reason for ending services with the individual with a disability, the outcomes from receiving services, and a summary of the
services provided. The reason for ending services for student volunteers was that the SUNY Cortland semester ended. One student volunteer’s response to services ending was achievement of goals with the individual with a disability.

Dorothy was interested in participating in activities in the community; she set a goal with the student volunteer to increase and enhance her social skills and social contacts, and to increase the quality of her recreation experiences. As a result of Dorothy’s participation in the RRS, she is planning to continue attending bingo each week with the support of her house staff. She also met many individuals who regularly attend bingo.

Edna’s goals were to find more arts and crafts activities to enjoy and to find transportation to and from church so she can attend regularly. Edna and the student volunteer explored different crafting activities but by the end of the service, Edna stated her favorite activities were those she has always done (crocheting and jewelry making). The student volunteer was also unable to connect Edna with someone so that she could attend church. Overall, Edna still insists she is happy with her current recreation lifestyle.

Roberta’s objective of attending line dancing was achieved and she participated in other recreation activities within the community. As a result of finding new activities, Roberta met her goal of expanding social supports. A family member will take Roberta to line dancing and she has friends at the dances for support. The goal of making healthier choices was undetermined at the end of services.

Paul’s goal of finding opportunities within his community was met through his participation in wheelchair basketball. He also went to a hockey game, a bonfire,
shopping, and out to eat with the student volunteer. Paul is planning to attend wheelchair basketball, as he feels comfortable with the people participating. The student volunteer spent time discussing transportation with Paul, although no resolution for transportation came from services with the RRS.

**Student Volunteer and Agency Feedback**

Student volunteers participated in an informal group discussion where they provided feedback on their participation in the RRS and their overall perception of the service. Participating disability organizations received an email asking for feedback regarding their participation in the project.

Two of the students participating in the discussion stated they were confused at the beginning of services; they thought the agency would contact them to begin working with a participant, even though they were supposed to contact the agency. This prolonged their start dates and created a rushed experience where they tried to get 20 hours with the participant in less time than originally anticipated. Many students stated that time constraints were an issue in general. One student, who spent more than 20 hours working with his individual, said that it was hard to do all the necessary documentation and follow the steps in the process. Specifically, the student volunteer felt he needed more time to implement the inclusion plan.

Another issue students spoke about involved the documentation. One student stated that he did not think the participant he was volunteering with understood the questions in many of the forms. Specifically, the “Quality of Life” survey statements had
to be explained and even then, the student did not think the individual understood the meaning of some of the statements. The participant communicated by saying “yes” and “no,” therefore the student did not think his responses to the survey accurately represented the participant’s true feelings. Concerns regarding terms used in the documentation arose by students. For example, when questioning participants about their “recreation,” students felt that participants did not really know what that term meant. Other students stated there was so much documentation that there was a lack of personal interaction with the participant. One student even said that the participant was frustrated with the time the student volunteer and the participant spent completing documentation.

Students stated that having a checklist helped with organizing the documentation. The *Inclusive Recreation Resource Center Recreation Referral Service Manual for Staff and Students* was helpful when they were confused about the different forms of documentation. The student volunteers also stated that they did not read the manual but referred to it when they had a question.

A student commented on the issue of staff turnover in participants’ lives. One participant did not like getting to know the student and then having the student spend such a short amount of time with that participant. Another participant, according to one student volunteer, stated that he was comfortable with individuals coming in and out of his life because it gave him a chance to know many people.

Overall, students did not feel that participants understood the true purpose of the RRS. They recommended providing a clearer description of the service for the student volunteer and the participant with a disability.
The staff member from one of the participating disability organizations responded to an email requesting feedback on the agency’s experience with the RRS. Staff felt that the students’ involvement was very important in implementation of services. She stated that some students worked diligently to meet with their participant and to follow through with plans while others “were not as persistent.” They were less “thorough” with the individuals with disabilities that they were working with. Overall, the participants liked having their “own student” and they responded positively to the experience. The same staff member commented on some of the documentation. She was not specific but stated that one of the questionnaires was difficult for the individuals at her agency, she recommended a form that was more simple and concrete.
Chapter 5

DISCUSSION AND CONCLUSIONS

Introduction

The Inclusive Recreation Resource Center (IRRC) strives to increase inclusive opportunities for individuals with disabilities in New York State. One part of the IRRC, as outlined in the grant received from the Developmental Disabilities Planning Council, was to create a recreation referral service. The piloting of the Recreation Referral Service (RRS) began in the summer 2007. The purpose of the RRS is to make connections for individuals with disabilities with their desired recreation resources. Involvement of the RRS ranges according to the needs of the individual and the current inclusiveness of the recreation provider. Some individuals received information about a recreation resource while others used the RRS to increase the agency’s knowledge and practices of inclusion in order to facilitate a more successful participation experience.
Summary of Procedures

The Recreation Referral Service involved a needs assessment with the parents or guardians of individuals with disabilities who participate in a SUNY Cortland Adaptive Physical Education Program. One outcome of the assessment was clarification of the service’s name. Initially, the service was called the Matching and Referral Service. Those completing the needs assessment survey perceived the service as a long-term and specifically one-to-one support for individuals with disabilities. As the service meant to be a facilitator to participation in inclusive activities, the name change was changed in hopes of avoiding any misinterpretations of the service’s purpose. The needs assessment provided verification that individuals with disabilities and their families would use a recreation referral service to gain access to inclusive recreation opportunities in the community.

Development of the protocol, Recreation Referral Service Staff and Student Manual, provided a descriptive guideline and the necessary documentation for implementation of the RRS. Inclusive Recreation Resource Center (IRRC) staff, interns, and SUNY Cortland Recreation and Leisure students implemented the RRS using the manual.

The piloting occurred through in the following courses, Recreation 393, Recreation 529, and Recreation 475/606 with nine student volunteers. Approval by the IRB at SUNY Cortland occurred in October 2007 (see Appendix C).
Local disability service agencies in the Cortland community participated in the pilot study. The J.M. Murray Center and Person-to-Person Advocacy, Inc. serve individuals with developmental and other disabilities. Students, matched with individuals from the agencies, implemented the RRS. Students completed the Therapeutic Recreation model (APIE: Assessment, Planning, Implementation, and Evaluation) as outlined in the RRS protocol. The process involved the “Getting to Know You” assessment, a pre “Quality of Life” survey (Anderson, 2007a), an inclusion plan, a progress note, the “End of Service” summary, a post “Quality of Life” survey, and a DDPC consumer satisfaction survey.

Services offered varied from a provision of information about local recreation resources to the facilitation of inclusion in recreation resource settings within the community. Individuals implementing the program completed the IRRC “Inclusion U” training in order to use the Inclusivity Assessment Tool (IAT) (Anderson, Wilson, & Penney McGee, 2007). Use of the IAT when necessary, as outlined in the manual, assessed recreation resources for the agencies’ level of inclusion practices. This assessment assisted in determining the level of inclusion practices at the agency and the ways in which the agency could meet the RRS participants’ goals and objectives as identified in the “Getting to Know You” assessment.

The assessment provided the staff and students with information on participants’ strengths, interests, abilities, and needs. An inclusion plan design incorporated goals and objectives, things the participant would like to achieve by participating in the RRS. The progress notes offered a pathway to determining achievement of goals and objectives, or if the goals needed altering. The pre and post quality of life surveys provided
information regarding the impact of the RRS on the quality of life before and after participation in the service. The consumer satisfaction survey offered information regarding the effectiveness of the service and the individual’s general experience while using the RRS.

Students from identified courses, Recreation 393 and Recreation 529, as well as the IRRC intern, from Recreation 475, worked with individuals with developmental and other disabilities.

Summary of Project Outcomes

The first components of the project, the literature review and needs assessment, provided information on inclusion best practices and individuals with disabilities’ needs in the community. The second component was the development of a protocol for the RRS and the outcome was the Inclusive Recreation Resource Center Recreation Referral Service Staff and Student Manual. The Inclusive Recreation Resource Center will use the protocol for the Recreation Referral Service. IRRC staff and student volunteers will continue to use the protocol to connect individuals with disabilities with their desired recreation and to cooperate with recreation providers in implementing inclusion best practices.

The third component of the project was the implementation and evaluation of the protocol with student volunteers. This involved a student orientation and the coordination, monitoring and provision of support for students and cooperating agencies.
Overall, participants responded positively to services, feeling the RRS influenced their lives positively. Each participant met at least one identified goal through the service.

**Discussion and Conclusions**

Based on the outcomes of the pilot project, the Recreation Referral Service has great potential in positively influencing the lives of individuals with disabilities. The phases of the project were essential in gaining a comprehensive understanding of the immediate community, individuals with disabilities and their families living in the community, and the practicality and usability of the RRS. The protocol development provided a guideline for the IRRC to implement a program outlined in the DDPC grant at the beginning of the IRRC project.

As a result of this project, a need in the community was met. Individuals with disabilities accessed recreation in their community and they continued to participate after the student volunteer ended services. Individuals with disabilities made their own decisions and determined their own recreation lifestyles. One assumption of the project was that individuals want to be included and accepted in their community. Individuals with disabilities from this project seem to agree with this assumption as displayed through their goals. Each participant wanted “more” of something, whether it was being in the community more, finding more activities in which they could participate, or finding more supports to increase participation in recreation. As more individuals with disabilities, living in the Cortland community and in New York State, participate in RRS services, they will determine and experience the kinds of recreation they desire.
By working with disability organizations in the community, inclusion concepts are strengthened and disseminated. As more disability and recreation agencies work with the RRS, they will understand the true meaning and value of inclusive practices. More individuals with and without disabilities will benefit from this knowledge.

The RRS is unique regarding its purpose, to connect an individual with a disability with his or her desired recreation so that participation will be meaningful and sustained. Model programs exist, where agencies are providing recreation referrals to increase inclusion of individuals with disabilities in the community, but this program is unique to New York State. Individuals with disabilities determine the actions taken in the service and the degree of involvement by IRRC staff and volunteer students. Documentation integrates the individual with a disability’s interests, abilities, and desires into the inclusion plan, which drives the services provided. When necessary, RRS staff and students provide information and recommendations to recreation agencies regarding inclusion best practices. Interventions with recreation agencies do not only impact the RRS participant but all individuals of varying abilities who use or will use the recreation agencies’ services.

The RRS is a practical and valuable service for the students who implemented services, for the participants, for the cooperating agencies, and for the greater community. Student volunteers gained experience working within the profession of recreation and with working with an individual with a disability. They developed new relationships and experienced overall benefits of volunteering. Participants had the opportunity to make decisions and explore their community in regards to recreation. Because of the RRS, they made connected with lasting recreation resources. Cooperating agencies and the
community will continue to include individuals of all abilities as inclusion practices become more common. The RRS will continue working with individuals with disabilities, as more individuals participate there will be an increase in inclusion practices in the specific recreation resources and within the general community.

**Recommendations**

Recommendations for this project primarily address issues with implementation. An outline of the structure of the RRS is included in the *Inclusive Recreation Resource Center Recreation Referral Service Staff and Student Manual*. Student volunteers were the primary implementers of the service.

An orientation session held for students participating in the project was held during the fifth week of the semester. One staff member from a cooperating agency facilitated part of the orientation, discussing her agency and the agency expectations for students. The other staff member from another cooperating agency was unable to attend the orientation session. It is possible that due to the lack of contact and initial orientation to the program, the staff member from the other cooperating agency did not clearly understand the purpose of the RRS. Communication was limited with this agency making it difficult to implement services and coordinate students and RRS participants. Ensuring that participating agencies meet with RRS staff, at least once, to discuss services face-to-face would increase understanding between agencies.

This researcher facilitated part of the orientation, discussing the purpose of the project, expectations of the project, and the protocol process. Two graduate students and
four undergraduate students attended the session. The purpose of the project was still unclear to some students as displayed by issues brought up by students during the discussion at the end of the semester. Making orientation to the RRS protocol mandatory would assist in clarifying the purpose of the project.

During the discussion with students, where they provided feedback on the project, they stated that they had not read the manual but used it as a reference when necessary. Asking students at the beginning of the project at the start of the semester, to sign an agreement that they read the manual would have clarified confusion regarding the purpose of the project. If the student volunteers understand the purpose of the RRS, they can better explain it to the participants.

A major limitation came while working with students. Implementation of the RRS was part of the general curriculum of the courses from which students volunteered. Students may have lacked investment in providing the services since the RRS was implemented in an environment where they had to choose “fieldwork hours,” where the RRS was one of those options. Finding a way to clarify to students the purpose of the RRS and to ensure they understand that purpose, whether through quizzes or interviewing, might increase the students’ personal investment in the project.

The time constraints experienced while working with student volunteers was a limitation. Orientation was held the fifth week of the semester. Student volunteers had to complete a fingerprinting form, a criminal background check, a driver’s abstract (if they were using their car), and other required paperwork for the disability agencies. Some of the documentation was necessary before working alone with the participant; some students took three weeks to complete the mandatory paperwork that shortened the
amount of time they had to implement the RRS. Holding a mandatory orientation for
student volunteers the first week of the semester could increase the amount and quality of
time spent with individuals with disabilities, where students did not feel hurried to
complete the process.

The lack of follow through with completed RRS documentation made the
monitoring of the program difficult. Some students did not complete all of the
documents outlined in the protocol and this limited the data obtained during the project
for evaluation. Initially, eleven students were working with the RRS. One student never
completed the mandatory paperwork for the disability agency. Another student
completed 12 hours with an individual with a disability. After that time, the participant
decided to withdraw from the RRS because he stated he did not realize the student
volunteer would not be working with him on a long-term basis and that he did not want to
be included in the evaluation or research process. Out of the eight students left thus, only
four of the students completed all of the documentation needed for evaluation. Beginning
the service earlier in the semester with students and working closely with the course
instructors, where students receive penalties for late or missing work, could assist with
obtaining completed documentation in a timely manner.

The documentation consisted of multiple forms to be completed by student
volunteers. By streamlining the initial forms, which include the intake form, the “Getting
to Know You” assessment, the pre “Quality of Life” survey, and the release of
information, individuals completing the forms may feel less confused or overwhelmed.
In the same sense, participants from the RRS may feel less formal and more comfortable
with RRS staff and volunteers.
Regarding documentation, student and agency feedback expressed difficulty in terminology used in the forms. One agency staff member stated, “I think the questionnaire is too difficult for our…consumers. It could be made much more simple…the questions are far too abstract”. The students also stated they were not sure participants’ responses were accurately reflected, that participants were simply agreeing or disagreeing to something they did not comprehend. IRRC staff evaluated and compiled the “Getting to Know You” assessment and the “Quality of Life” survey using the research literature. The forms may need to be simplified in a way that still gathers the data the RRS personnel wished to obtain. It is unclear whether students referred to family members or staff for assistance in completing the forms; the protocol recommended using all supports for completion of forms as needed.

In summary, the RRS could assist the community in moving towards an inclusive one, where individuals of all abilities are valued and accepted. Understanding the purpose of the service is one start to appropriately implementing services described in the protocol. Once those participating and implementing the program understand the true purpose of the service, the greater community could benefit.
References


Wilkins, V. (n.d.). *Communicating humanness: Attitudes and language (or the spirit behind the Americans with Disabilities Act)*. Unpublished Manuscript, State University of New York: College at Cortland.
Appendix A

Human Subjects Proposal for Needs Assessment
APPLICATION FOR REVIEW OF PROJECTS USING HUMAN RESEARCH PARTICIPANTS

APPLICANT IS: (circle one): FACULTY STUDENT

INVESTIGATOR NAME: Melissa Roeder DEPARTMENT: Recreation and Leisure Studies PHONE: 4941

TITLE OF PROPOSAL: Needs Assessment for the Development of a 1:1 Matching and Referral Service

DURATION OF PROJECT: upon approval through September 1, 2007

(Faculty projects only): NON-FUNDED FUNDED X FUNDING AGENCY: NYS Developmental Disabilities Planning Council

PROJECT PURPOSE: ___Class Project ___Thesis ___X_Course Number and Title: Recreation 685

If the IRB approves this application and if the project is undertaken, I agree:

1. To review the Guidelines of the State University of New York at Cortland for the Protection of Human Research Participants on Research Investigations (See Research Using Human Participants at www.cortland.edu/osp/).
2. To report to the IRB any change in the research plan which affects the method of using human research participants before such change is instituted.
3. To report to the IRB any problems which arise in connection with the use of human research participants.
4. To cooperate with the IRB, and/or any sub-committee designated, in their efforts to provide a continuing review after investigations have been initiated.

I agree to the principles outlined in the aforementioned Guidelines and will adhere to these policies and procedures in my investigation.

For Faculty Projects:

Signature of Principal Investigator(s) Date Signature of Department Chairperson Date

For Student Projects: [Note: Topics of a sensitive nature should be avoided by student researchers who are not sufficiently experienced in such research]

Signature of Student Date Signature of Faculty Sponsor Date

Signature of Department Chairperson Date

CHECK APPROPRIATE CATEGORY OF REVIEW (please see attached guidelines for information regarding categories)

X Category I (Exempt), Section 2 (Identify which one of the six exemption categories in the instructions apply). Also, answer questions 1-5 in the instructions and attach information and/or approvals as requested.

Category II (Expedited Review) Answer questions 1-10 in the instructions and attach information and/or approvals as requested.

Category III (Full Review) Answer questions 1-12 in the instructions and attach information and/or approvals as requested.

EXEMPT FROM REVIEW Date APPROVAL DATE

Amy Henderson-Harr, IRB Designee

CERTIFICATION OF INSTITUTIONAL REVIEW BOARD

The Institutional Review Board for the Protection of Human Participants has reviewed this application. The Board believes that the research plan provides adequate safeguards of the rights and welfare of human research participants involved in the investigation and uses appropriate methods to obtain informed consent.

EXPEDITED AND/OR FULL BOARD REVIEW Date

APPROVED BY: IRB Chair, Nancy Aumann, Associate Provost for Academic Affairs, and/or an Appropriate IRB Representative

APPROVED FOR THE PERIOD OF:

Any changes in the protocol or extensions beyond the one year must be presented in writing and approved by the IRB.
1. Description of the Project

The purpose of this study is to understand the ways in which the Inclusive Recreation Resource Center’s 1:1 Matching and Referral Service can meet the needs of individuals with developmental disabilities. The 1:1 Matching and Referral Services will match individuals with developmental disabilities to recreation and leisure resources in New York State. The needs assessment will take place during the SUNY Cortland Adaptive Physical Education Programs, “Sports and Splash Programs”, “Skill Builders”, and “Challengers Sports Program” in Park Center. SUNY Cortland Graduate Student Melissa Roeder will be implementing the needs assessment as a part of a graduate project.

2. Objectives, Methods, and Procedures of the Project

The objectives of the study are to understand the needs of families with developmental disabilities to aid in development of a matching and referral services. The study procedures will include handing out a two-page needs assessment to parents and guardians as they wait for their child participating in the APE program. The needs assessment survey will address past recreation and leisure experiences and desired recreation and leisure experiences of individuals with developmental disabilities (see attached). The assessment consists of eight closed- and open-ended questions and will take 15 to 30 minutes to complete. An attachment announcing an information session on the 1:1 Matching and Referral Service, which will be provided on May 1, 2007, will be attached to the needs assessment (see attached).

Participants will be asked not to put any identifying information on the needs assessment survey. Participation is voluntary and the survey states that individuals can stop at any time without any consequences. A parent or guardian will complete the assessment for the individual with a disability. The assessment will be administered during the SUNY Cortland Adaptive Physical Education Programs, “Sports and Splash Programs”, “Skill Builders”, and “Challengers Sports Program”. A manila envelope will be placed by the gymnasium D305 where program registration occurs. The needs assessment will be placed in the envelope by the participants after completing the surveys. The envelope will be picked up at the end of the programs by Melissa Roeder.

3. Characteristics of Research Participants

Participants will be parents or guardians of individuals with developmental disabilities who are participating in the Adaptive Physical Education Programs. The anticipated number of participants is 75 parents or guardians. No remuneration will be offered.

4. Qualifications of the Researcher

Melissa Roeder, Graduate Assistant at SUNY Cortland, will be implementing the needs assessment as part of a graduate project. Dr. Lynn Anderson, SUNY Cortland’s Recreation and Leisure Studies Department Chair will be overseeing the project. Dr. Susan Wilson, associate professor in the SUNY Cortland Department of Recreation and Leisure Studies, and Laurie Penney McGee IRRC Project Coordinator will also be participating in the project research. The project is funded by a grant through the New York State Developmental Disabilities Planning Council.

5. Dates for the Project

The needs assessment will be administered upon approval of the Institutional Review Board. The projected date for administration of the survey is April 23 and 14, 2007. The needs assessment information gathering and analyzing will be complete by September 1, 2007.
SUNY Cortland Department of Recreation and Leisure Studies recently received a grant from the New York State Developmental Disabilities Planning Council to develop a 1:1 Matching and Referral Service. To gain a better understanding of the needs of families with a member with developmental or other disabilities, we are asking you to complete a brief survey. This information will help us develop the matching and referral service that will be most useful and relevant to people with developmental and other disabilities.

Participation in this survey is voluntary, and you can choose not to participate or discontinue with no consequences. To assure anonymity, please do not put any names on the survey. After you are finished with the survey, please return it to the manila envelope labeled “Needs Assessments” by Gymnasium D305. Thank you for taking the time to complete this form!

If you have any questions regarding the research for this project, please contact Dr. Lynn Anderson at SUNY Cortland Department of Recreation and Leisure Studies at (607) 753-4941. Contact Amy Henderson-Harr with any questions regarding research in general at the Office of Sponsored Programs, (607) 753-2511, 402 Miller Building at SUNY Cortland.

1. Inclusion is having your child participate in the same recreation programs and services as any child, alongside children without disabilities. What inclusive recreation programs has your family member with a disability participated in?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
-What types of things made the experience successful?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
-What types of things made the experience difficult?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. What supports, accommodations, or modifications does your family member need or desire in order to participate in existing recreation programs and services in the area?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
3. How would you like to see existing recreation programs in the area change, if at all, to be more inclusive of individuals with disabilities?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4. The 1:1 Matching and Referral Service will connect individuals with disabilities to existing recreation programs and resources in the community and will facilitate the inclusion process. Would you consider using the 1:1 Matching and Referral Service for recreation? In what ways?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5. What ways could a 1:1 matching and referral service meet your family member’s recreational needs?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

6. In general, what kinds of recreation programs or activities would be of interest to your family member?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

7. Please provide us with any other suggestions or ideas regarding the 1:1 matching and referral service.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8. Please feel free to help us think of a name for the Inclusive Recreation Resources Center’s 1:1 Matching and Referral Service! We’d love to hear your ideas!

________________________________________________________________________
Demographics:
Town/City where you live: ___________________________________________________
Age of family member with a disability: _______________________________________
Type of disability of family member: ________________________________________

Thanks again for taking the time to assist us with your valuable information on the needs assessment. Please detach this sheet and keep as a reminder!

Thanks again for taking the time to assist us with your valuable information. Please detach this sheet and keep as a reminder! The Inclusive Recreation Resource Center staff will be holding an information session at 7pm on May 1st in the Hall of Fame Room on the first floor of Park Center. The session will provide valuable information on how the center can be an asset to your family. We hope to launch the 1:1 Matching and Referral Service in the summer of 2007.
Appendix B

Inclusivity Assessment Tool (Anderson, Wilson, & Penney McGee, 2007)
Inclusivity Assessment Tool

The purpose of the *Inclusivity Assessment Tool* is to provide descriptive and detailed information to potential users of recreation programs, areas, and facilities so that they may make better plans for enjoyable inclusive recreation.

The *Inclusivity Assessment Tool* is comprised of three sections:
- **Section One:** Agency Information
- **Section Two:** Physical Inclusion
- **Section Three:** Social Inclusion (administrative practices, programmatic practices, & adaptive equipment)

As you complete the assessment, please use the accompanying *Inclusivity Assessment Tool Guide* for specific definitions and instructions. Also, please work closely with agency personnel to gather the needed information. Some of the items can only be completed by talking with staff who knows the agency/facility well, or by looking at agency written materials.

### Section One:
**Agency Information**

Complete Section One only once, even though you may do several different programs or facilities for this agency.

<table>
<thead>
<tr>
<th></th>
<th>Name of facility or agency</th>
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<tbody>
<tr>
<td>2</td>
<td>Street address</td>
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<tr>
<td>3</td>
<td>Mailing address</td>
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<td>4</td>
<td>City</td>
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<td>5</td>
<td>County</td>
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<td>6</td>
<td>Zip code</td>
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<tr>
<td>7</td>
<td>Telephone number</td>
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<tr>
<td>8</td>
<td>e-mail address</td>
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<tr>
<td>9</td>
<td>Web page address</td>
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<tr>
<td>10</td>
<td>I Love NY region</td>
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<td></td>
<td>___ Adirondacks</td>
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<td></td>
<td>___ Capital-Saratoga</td>
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<td>___ Catskills</td>
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<td>___ Central Leatherstocking</td>
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<td>___ Chautauqua-Allegheny</td>
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<td>___ Hudson Valley</td>
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<td>___ Long Island</td>
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<td>___ New York City</td>
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<td></td>
<td>___ Thousand Islands</td>
</tr>
<tr>
<td>11</td>
<td>Type of agency or facility</td>
</tr>
<tr>
<td>12</td>
<td>Activities offered</td>
</tr>
</tbody>
</table>
Section Two: Physical Inclusion

Complete Section Two for each major facility at the agency.

For this section, you will need a tape measure, a clinometer, and a fish scale (or other device to measure the force of the door opening). See the accompanying Guide for more specific information and definitions.

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<thead>
<tr>
<th>Facility</th>
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## APPROACH

2. Transportation

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<tr>
<th></th>
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<th>NO</th>
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<td>2c</td>
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3. Parking

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Comments/additional information about transportation:

Comments/additional information about parking and accessible route to entrance:
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<tr>
<th>ENTER</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Optional Photo #</th>
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<tr>
<td>4. Entrance</td>
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<td>4a Accessible entrance is clearly marked? (if only one entrance, mark N/A)</td>
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<tr>
<td>4b Stairs to gain entry?</td>
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<td>4c Number of stairs: ________</td>
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<tr>
<td>4d Type of railing: ____________________________</td>
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<tr>
<td>4e Ramp provided?</td>
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<tr>
<td>4f Width of ramp: ________ inches (at least 36”)</td>
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<tr>
<td>4g Slope of ramp: _____ % (maximum 8%)</td>
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<td>4h Ramp landing: _____ inches (at least 60” depth)</td>
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<td>4i Surface of ramp: ____________________________</td>
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<tr>
<td>4j Type of railing: ____________________________</td>
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<tr>
<td>4k Type of door: ____ manual _____ automatic _____ revolving ______ other: ____________________________</td>
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<td>4l Two sets of doors present to gain entry?</td>
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<td>4m If yes, distance between doors: ___________ inches</td>
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<tr>
<td>4n Width of door: ________ inches (at least 32”)</td>
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<td>4o Opening force: _____ pounds (8.5 pounds or less)</td>
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<tr>
<td>4p Handle type: _____ lever _____ pull _____ push plate _____ knob _____ push/pull paddle/bar _____ entry set- top button ____ other:</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>4q Clear space on pull side of door _____ inches (at least 18”)</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>4r Comments/additional information about entrance:</td>
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<tr>
<td>USE</td>
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<tr>
<td>5. Registration/reception/check-in area</td>
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<tr>
<td>5a Registration/reception/check-in counter easily located?</td>
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<tr>
<td>5b Height of counter: ______ inches (36” or less)</td>
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### USE (continued)

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<tr>
<th></th>
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<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Optional Photo #</th>
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<tbody>
<tr>
<td>5c</td>
<td>Fold-out shelf available, if counter is greater than 36”?</td>
<td></td>
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<tr>
<td>5d</td>
<td>Turning area for wheelchair: _____ inches (60” circle)</td>
<td></td>
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<tr>
<td>5e</td>
<td>Accessible signage in registration area?</td>
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</tbody>
</table>
| 5f | Check the alternative forms of communication available in registration area:  
   ____ large print  ____ computer screen with reader  ____ Braille  
   ____ pictorial  ____ oral communication also provided in print  
   ____ assisted listening devices  ____ TDD/TTY  ____ sign language  
   ____ close-captioned video  ____ language other than English:  
   ____ other: |   |     |     |       |                 |
| 5g | Comments/additional information about reception/registration/check-in area: |   |   |     |                 |

#### 6. Public restroom/toilet

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<tr>
<th></th>
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<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Optional Photo #</th>
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<tbody>
<tr>
<td>6a</td>
<td>Single use restroom provided (e.g., unisex, family, single room)?</td>
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<tr>
<td>6b</td>
<td>Signage is clear (word and picture provided for restroom signs)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c</td>
<td>Width of door to restroom: _____ inches (at least 32”)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6d</td>
<td>Opening force of door: _____ pounds (5 pounds or less)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 6e | Handle type: _____ lever  ____ pull  ____ push plate  ____ knob  
   ____ push/pull paddle/bar  ____ entry set top button  
   ____ other: |   |     |     |       |                 |
| 6f | Clear space on pull side of door _____ inches (at least 18”) |   |     |     |                 |
| 6g | Toilet stall door swings open to outside of stall? |   |   |     |                 |
| 6h | Toilet stall is large enough for wheelchair maneuvering? (60” circle)  
   (or provide dimensions of free space in stall: |   |     |     |       |                 |
| 6i | Grab bars are mounted on two sides of toilet? |   |   |     |                 |
| 6j | Number of grab bars: _______________ |   |   |     |                 |
| 6k | Toilet seat height: _____ inches (between 17”-19”) |   |   |     |                 |
| 6l | Height of sink: _____ inches (34” or less from floor) |   |   |     |                 |
| 6m | Depth of knee space under sink: _____ inches (from outer edge of sink to pipes or other obstruction under sink; 9”-11”) |   |   |     |                 |
| 6n | Height of soap dispensers _____ inches (no higher than 48” from floor and clear space around them)? |   |   |     |                 |
| 6o | Height of hand dryers/paper towel dispensers _____ inches (no higher than 48” from floor and clear space around them)? |   |   |     |                 |
### USE (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Optional Photo #</th>
</tr>
</thead>
<tbody>
<tr>
<td>6p Comments/additional information about public restroom/toilet:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 7. Lockers/showers/changing area

#### 7a Entrance into locker room/showers/changing area clearly marked?  

#### 7b Width of door: ______ inches (at least 32”)

#### 7c Opening force: ______ pounds (5 pounds or less)

#### 7d Handle type:     ____ lever     ____ pull     ____ push plate     ____ knob  
____ push/pull paddle/bar     ____ entry set top button     ____ other:

#### 7e Clear space on pull side of door ______ inches (at least 18”)

#### 7f Clear path from door to lockers and showers (36”)?

#### 7g Lockers are available that can be accessed from a wheelchair (36” or less from floor, no benches blocking access)?

#### 7h Changing area clear space: ______ inches  (60” circle of clear space)

#### 7i Shower entrance width: ______ inches (36”)

#### 7j Hand-held shower spray unit height: ______ inches (48” or less from floor)

#### 7k Shower controls height: ______ inches (48” or less from floor)

#### 7l Shower controls usable without grasping?

#### 7m Shower chair or bench is provided?

#### 7n Grab bars are placed on wall by shower unit? (if indoor shower)

#### 7o Comments/additional information about locker room/shower building/changing area:

### 8. Elevator(s)

#### 8a Elevator is provided to access recreation areas on other floors?

#### 8b Elevator control panel height: ______ inches  (54” max above floor)?

#### 8c Elevator controls provides alternate methods of communication?  
____ visual     ____ audible     ____ tactile

#### 8d Elevator door width: ______ inches (at least 36”)

---

The table above contains questions and options related to the accessibility of lockers, showers, changing areas, and elevators. Each question is followed by options for YES, NO, N/A, and an optional photo number for documentation. The comments sections allow for additional information about the facilities.
### USE (continued)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Optional Photo #</th>
</tr>
</thead>
<tbody>
<tr>
<td>8e</td>
<td>Elevator door stays open at least 20 seconds or has sensor that reopens door?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8f</td>
<td>Size of elevator car: _____ inches by _____ inches</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8g</td>
<td>Elevator is well-lit?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8h</td>
<td>Comments/additional information about elevator:</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### 9. Stairs

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Optional Photo #</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a</td>
<td>Stairs are well-lit?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b</td>
<td>Stair edges are clearly marked in contrasting color?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9c</td>
<td>Handrail is provided?</td>
<td></td>
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<td></td>
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<tr>
<td>9d</td>
<td>Comments/additional information about stairs:</td>
<td></td>
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</tbody>
</table>

### 10. Routes of travel to recreation use areas

<table>
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<tr>
<th></th>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>Optional Photo #</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>Is there access from reception/check-in to ___________________? (access means level surfaces, doors wide enough [at least 32&quot;], clear of obstacles, and well-marked and lit)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10b</td>
<td>Is there access from reception/check-in to ___________________?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c</td>
<td>Is there access from reception/check-in to ___________________?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10d</td>
<td>Is there access from reception/check-in to ___________________?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10e</td>
<td>Is there access from reception/check-in to ___________________?</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10f</td>
<td>Is there access from reception/check-in to ___________________?</td>
<td></td>
<td></td>
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<tr>
<td>10g</td>
<td>Is there access from reception/check-in to ___________________?</td>
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<td></td>
<td>(Add as many as needed on a separate sheet)</td>
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<tr>
<td>10h</td>
<td>Comments/additional information about routes of travel to various recreation areas in facility:</td>
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</tbody>
</table>

Check the specialized recreation areas present at this agency or facility; use the additional tools for physical inclusion provided by IRRC for each type of specialized recreation area or facility:
<table>
<thead>
<tr>
<th>Check if present</th>
<th>Area or facility</th>
<th>Check if present</th>
<th>Area or facility</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Amusement rides</td>
<td></td>
<td>Museums &amp; exhibits</td>
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<tr>
<td></td>
<td>Beaches</td>
<td></td>
<td>Picnic areas, grills and fire rings</td>
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<tr>
<td></td>
<td>Boating facilities</td>
<td></td>
<td>Play areas/playgrounds</td>
</tr>
<tr>
<td></td>
<td>Bowling lanes</td>
<td></td>
<td>Sauna/streamrooms</td>
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<tr>
<td></td>
<td>Cafes/restaurants</td>
<td></td>
<td>Shooting facilities</td>
</tr>
<tr>
<td></td>
<td>Campsites</td>
<td></td>
<td>Ski/snowboard areas</td>
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<tr>
<td></td>
<td>Exercise equipment &amp; machines</td>
<td></td>
<td>Stadiums &amp; amphitheaters</td>
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<tr>
<td></td>
<td>Fishing piers &amp; platforms</td>
<td></td>
<td>Swimming pools and wading pools</td>
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<tr>
<td></td>
<td>Golf</td>
<td></td>
<td>Trails (use DEC/UTAP tool with specialized training)</td>
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<tr>
<td></td>
<td>Ice rinks</td>
<td></td>
<td>Whirlpool hot tubs</td>
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<tr>
<td></td>
<td>Miniature golf</td>
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</tbody>
</table>

**Notes**
For this section, you will need to interview managers and staff, observe programs or services, and review written materials. This section is divided into three main sub-sections: administrative practices, programming practices, and adaptive equipment. You will likely need to do the Administrative Practices sub-section only once for an agency, but may need to do the Program Practices sub-section for each unique grouping of programs or services the agency provides. See the accompanying Guide for more specific information and definitions.

### Administrative Practices

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>1. Agency mission and values</td>
<td></td>
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</tr>
<tr>
<td>1a</td>
<td>Agency mission and vision clearly reflects a belief about inclusion of people with disabilities and other differences?</td>
<td></td>
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<tr>
<td>1b</td>
<td>Agency values articulate support for inclusion of people with disabilities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>When asked, staff states serving people with disabilities is important?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Comments/additional information about agency mission:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Upper administration (e.g., board of directors, administrators, managers) shows support for inclusion?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Point of contact is designated to coordinate inclusion at agency? (preferable a certified therapeutic recreation specialist)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>List point of contact’s name, job title, and email address:</td>
<td></td>
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</tr>
<tr>
<td>2d</td>
<td>Managers and front line staff is trained in disability awareness and inclusion as a routine part of staff orientation?</td>
<td></td>
<td></td>
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<tr>
<td>2e</td>
<td>If yes, list main topics covered in training:</td>
<td></td>
<td></td>
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<tr>
<td>2f</td>
<td>When observed, staff interacts with people with disabilities in a helpful and respectful manner?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2g</td>
<td>Comments/additional information about agency staff:</td>
<td></td>
<td></td>
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</tbody>
</table>
### ADMINISTRATIVE PRACTICES (continued)

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
</table>

#### 3. Agency planning

**3a** People with disabilities and/or their families are involved in agency planning efforts (e.g., board of directors, advisory board)?

**3b** List types of involvement:

**3c** Agency is involved in ongoing plans for inclusion and accessibility?

**3d** If yes, agency has made progress on identified areas in plan?

**3e** Comments/additional information about agency planning:

#### 4. Agency communication and marketing

**4a** Person first language is used in written materials?

**4b.** Person first language is used in oral communication?

**4c** Alternative forms of communication are available?

**4d** List alternative forms of communication:

- [ ] large print
- [ ] computer screen with reader
- [ ] Braille
- [ ] pictorial
- [ ] oral communication also provided in print
- [ ] assisted listening devices
- [ ] TDD/TTY
- [ ] sign language
- [ ] close-captioned video
- [ ] language other than English:
- [ ] other:

**4e** Marketing and other printed agency materials reflect inclusion of people with disabilities (e.g., access information provided, people with disabilities pictured in publications or on web site)?

**4f** Agency web site is accessible (e.g., simple design, consistent navigation, alt text for graphics, high contrast, no flashing/blanking features)?

**4g** Comments/additional information about agency communication:
## ADMINISTRATIVE PRACTICES (continued)

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>5. Agency policies and procedures</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td>Emergency warning and evacuation procedures are in place for safe exit of people with disabilities? (e.g., auditory and visual alarm systems, areas of rescue assistance identified, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b</td>
<td>Service dogs/animals are allowed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5c</td>
<td>Personal care attendants attend free when accompanying a person with a disability?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5d</td>
<td>Prices for services accommodate people with financial need?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5e</td>
<td>If applicable, special dietary needs are met?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5f</td>
<td>List other policies and procedures that are helpful to people with disabilities and their families:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5g</td>
<td>Comments/additional information about agency policies and procedures:</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>6. Evaluation</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a</td>
<td>Agency conducts evaluation on an ongoing basis and at the end of programs or services?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b</td>
<td>If yes, evaluation results are used to improve programs and services?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c</td>
<td>Evaluation includes feedback on inclusion, accessibility or use of supports and accommodations?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6d</td>
<td>Comments/additional information about agency evaluation of inclusion:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### ADMINISTRATIVE PRACTICES (continued)

<table>
<thead>
<tr>
<th>7. Partnerships and collaboration</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>7a</strong> Agency has partnerships with disability organizations?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7b</strong> List partnerships and purpose of partnerships:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7c</strong> Agency has partnerships with other community or area organizations?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7d</strong> List partnerships and purpose of partnerships:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7e</strong> Agency reaches out to create new partnerships?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7f</strong> Comments/additional information about agency partnerships and collaboration:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Notes

(Any additional administrative practices you noted at the agency that are not listed above that you feel are helpful to people with disabilities and their families)
Complete the Program Practices Section once for each **uniquely** different type of program at the agency. See the accompanying *Guide* for more specific information and definitions.

Agency does not offer programs (skip to Adaptive Equipment section on page 14)

<table>
<thead>
<tr>
<th>1. Program(s)</th>
</tr>
</thead>
</table>

## PROGRAM PRACTICES

### 2. Registration

<table>
<thead>
<tr>
<th>2a</th>
<th>Registration or sign-up form asks if additional assistance or accommodations may be needed for participation in the program or activity?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>2b</th>
<th>Individualized assessment of needs for participation is completed, if needed?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>2c</th>
<th>Comments/additional information about registration/needs assessment:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 3. Program staffing

<table>
<thead>
<tr>
<th>3a</th>
<th>If needed, staff conducts pre-program meetings or orientations with participants with disabilities, prior to starting a program or activity?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>3b</th>
<th>Staff models accepting and inclusive behavior?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>3c</th>
<th>When asked, program staff is able to list ways it modifies programs for people with disability?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>3d</th>
<th>Comments/additional information about program staff:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

### 4. Supports available

<table>
<thead>
<tr>
<th>4a</th>
<th>1:1 staff or volunteer is available to assist in inclusion, if needed?</th>
</tr>
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<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>4b</th>
<th>Peer orientations about disability and inclusion are available, if needed?</th>
</tr>
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<tr>
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</table>

<table>
<thead>
<tr>
<th>4c</th>
<th>Peers help provide assistance with inclusion?</th>
</tr>
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<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>4d</th>
<th>Positive behavioral supports are used in the program or activity, if needed?</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

<table>
<thead>
<tr>
<th>4e</th>
<th>Quiet area is available for calming or relaxation needs? Briefly describe:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>4f</th>
<th>Comments/additional information about supports:</th>
</tr>
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<tbody>
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<td></td>
<td></td>
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</tbody>
</table>


## PROGRAM PRACTICES (continued)

### 5. Activity accommodations

<table>
<thead>
<tr>
<th></th>
<th>Activity is modified to individual needs if needed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5a</td>
<td>YES</td>
</tr>
</tbody>
</table>

**5b** Typical modifications provided: _____ can be cooperative **or** competitive

_____ length of activity  _____ rules of activity  _____ activity space

_____ skill level  _____ other:

<table>
<thead>
<tr>
<th></th>
<th>Activity allows structured time for socialization between participants?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5c</td>
<td>YES</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Staff to participant ratio is modified if needed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5d</td>
<td>YES</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Alternative forms of communication are used during activity if needed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5e</td>
<td>YES</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Task/activity analysis is used to determine needs?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5f</td>
<td>YES</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Partial participation is accommodated as needed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5g</td>
<td>YES</td>
</tr>
</tbody>
</table>

**5h** Comments/additional information about activity accommodations:

### 6. Specialized programs or services

<table>
<thead>
<tr>
<th></th>
<th>Specialized/segregated programs for people with disabilities are provided?</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a</td>
<td>YES</td>
</tr>
</tbody>
</table>

**6b** List and describe specialized programs:

<table>
<thead>
<tr>
<th>Program</th>
<th>Brief description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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(add additional sheets if needed)

<table>
<thead>
<tr>
<th></th>
<th>Comments/additional information about specialized programs:</th>
</tr>
</thead>
<tbody>
<tr>
<td>6c</td>
<td>YES</td>
</tr>
</tbody>
</table>
### ADAPTIVE EQUIPMENT

<table>
<thead>
<tr>
<th></th>
<th>Adaptive equipment is available to allow fuller participation?</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
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<td>List adaptive equipment available:</td>
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<td><strong>Equipment:</strong></td>
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<td>1c</td>
<td>Comments/additional information about adaptive equipment:</td>
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### Notes

(Any additional social inclusion practices you noted at the agency that are not listed above that you feel are helpful to people with disabilities and their families)
### Additional Information & Summary

Please add any additional comments or information important to understanding inclusion at this agency

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<th>Assessment Information</th>
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<td>Date of assessment</td>
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<td>Name of assessor</td>
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<td>Job title of staff person interviewed</td>
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<td>Comments about assessment process:</td>
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Appendix C

Human Subjects Proposal for Data Collection

Student and Participant Consent Forms
APPLICATION FOR REVIEW OF PROJECTS USING HUMAN RESEARCH PARTICIPANTS

SUBMIT THIS FORM WITH A COPY OF THE RESEARCH PROPOSAL TO:
ASSISTANT VICE PRESIDENT OF RESEARCH AND SPONSORED PROGRAMS, MILLER BUILDING, ROOM 402

Investigator: Please Complete This Coversheet up to and Including the Category of Review Section

APPLICANT IS: (circle one): Faculty Student

INVESTIGATOR NAME: Melissa Roeder DEPARTMENT: Recreation and Leisure Studies PHONE: 4941

TITLE OF PROPOSAL: Effectiveness of a Recreation Referral Service, a matching and referral service with SUNY Cortland Recreation Students and individuals with disabilities

DURATION OF PROJECT: 9/06/07 - 12/31/07

For Faculty Projects Only: NON-FUNDED X FUNDED

FUNDING AGENCY: NYS Developmental Disabilities Planning Council

Signature of Principal Investigator(s) Date

Signature of Department Chairperson Date

For Student Projects: [Note: Topics of a sensitive nature should be avoided by student researchers who are not sufficiently experienced in such research]

Signature of Student Date

Signature of Faculty Sponsor Date

Signature of Department Chairperson Date

CHECK APPROPRIATE CATEGORY OF REVIEW (please see attached guidelines for information regarding categories)

X Category I (Exempt), Section 1 (Identify which one of the six exemption categories in the instructions apply). Also, answer questions 1-5 in the instructions and attach information and/or approvals as requested.

Category II ( Expedited Review) Answer questions 1-10 in the instructions and attach information and/or approvals as requested.

Category III ( Full Review) Answer questions 1-12 in the instructions and attach information and/or approvals as requested.

EXEMPT FROM REVIEW Date

Amy Henderson-Harr, IRB Designee

APPROVAL DATE

CERTIFICATION OF INSTITUTIONAL REVIEW BOARD

The Institutional Review Board for the Protection of Human Participants has reviewed this application. The Board believes that the research plan provides adequate safeguards of the rights and welfare of human research participants involved in the investigation and uses appropriate methods to obtain informed consent.

EXPEDITED AND/OR FULL BOARD REVIEW Date

APPROVED BY: IRB Chair, Nancy Aumann, Associate Provost for Academic Affairs, and/or an Appropriate IRB Representative

APPROVED FOR THE PERIOD OF: to

Any changes in the protocol or extensions beyond the one year must be presented in writing and approved by the IRB.
1. Purpose and location of the research:

The purpose of this study is to evaluate the effectiveness of the Recreation Referral Service (RRS) with SUNY Cortland Students in Recreation 393, Recreation 529, and Recreation 475/606 (internship undergraduate/graduate class) implementing the RRS with individuals with disabilities. The coursework for REC 393, 529, and 475/606 require that students complete a specific number of hours in the field working directly with individuals with differences in the community. For their fieldwork hours, students will be matched with individuals with disabilities from the community in order to connect the participant with inclusive recreation opportunities. Students will use the Recreation Referral Service protocol to plan and implement the hours they spend with a matched participant with a disability. As a part of the process, recreation opportunities are identified in the local area and are assessed by students using the “Inclusivity Assessment Tool” (included with this application). When recreation opportunities are not inclusive, students will work with the participant and the agency in order to create a more inclusive atmosphere for the individual with a disability. The fieldwork hours, utilizing the RRS protocol, will take place throughout the 2007 Fall Semester, upon IRB approval, and end before December 31, 2007. Students will complete the necessary paperwork and provide appropriate services with the individual and any recreation agencies as described in the “Inclusive Recreation Resource Center Recreation Referral Service: Staff and Student Manual” (included with this application). In sum, students will be completing their normal fieldwork hours using the format described in the Recreation Referral Service. This is the normal education practice for these two courses, but will be more formalized or standardized with the protocol. Faculty involved in this evaluation study are Dr. Vicki Wilkins, professor for REC 393, Dr. Lynn Anderson, Chair of the Department of Recreation and Leisure Studies and professor for REC 529, and Laurie Penney McGee, project coordinator for the Inclusive Recreation Resource Center. The evaluation is part of the master’s project for graduate student Melissa Roeder.

2. Objectives, methods and procedures of the project:

The objectives of this research are to document the effectiveness of the RRS in connecting individuals with disabilities with desired recreational experiences and in improving the quality of life of the individual in regards to recreation. The level of inclusion the individual experiences in the recreation resource will also be evaluated. Procedures for the RRS include completion of introductory referral with the participant, an assessment with the participant which includes an assessment of environmental factors, an inclusion plan identifying the participant’s goals, and contact with recreation agencies and the participant and any significant persons in the participant’s life. Throughout interaction between the student and participant, the student will complete a progress note to document any actions and outcomes of the service. At the end of the semester, the student will complete an End of Service summary form to end services or to continue services for the next semester involving a new recreation student. Participants will complete a post assessment of environmental factors and a satisfaction form (included in the RRS Manual). Participants will not
receive any remuneration but have the potential to be matched with the recreation opportunity they desire with the hopes of increasing the participant’s quality of life. This is the typical process used in the fieldwork hours in these two courses.

Prior to beginning their fieldwork hours, students in the identified courses will complete the training called “Inclusion U” and a thorough orientation to the *RRS Staff and Student Manual* (the protocol being used) within the coursework for Recreation 393, 529, and 475/606.

As a part of the evaluation, students and participants will be asked to sign an informed consent, stating that they understand that the referral service is being evaluated by project staff (see attached forms).

3. **Number and relevant characteristics of research participants:**

Individuals with disabilities will be identified by the various agencies in the local Cortland community participating in the coursework required for students in Recreation 393, 529, and 475/606. Participants are already affiliated with the identified agencies in the community. These individuals will volunteer to participate in the RRS. Students will meet with participants at least one time a week for 8-10 weeks during the semester. Participants will be matched with students one-to-one. There are 14 to 20 students participating in the RRS in Recreation 393 and 529 and there will be 14 to 40 participants involved in the RRS. There is no charge for the RRS.

4. **Status and qualifications of researcher(s) and their assistants and funding source:**

Dr. Lynn Anderson and Dr. Vicki Wilkins are faculty members in the Recreation and Leisure Studies Department. Dr. Anderson is Project Director for the IRRC. Laurie Penney McGee is Project Coordinator for the IRRC, and adjunct faculty in the RLS Dept. Melissa Roeder is a graduate student and graduate assistant in RLS, and has completed the year long research methods series of courses in RLS. All researchers and assistants have completed the IRB Human Participants Training.

The research is funded by the NYS Developmental Disabilities Council. See attached project proposal.

5. **Expected starting and completion dates for the project:**

Project will begin upon approval from the IRB, and will continue through December 31, 2007.
Student Information and Informed Consent Form

The research about the service in which you been asked to participate, the Recreation Referral Service, is being conducted by Melissa Roeder, a graduate student in the Department of Recreation and Leisure Studies at SUNY Cortland, under the supervision of Dr. Lynn Anderson, CTRS. We are asking for your informed consent to be a participant and volunteer in the project described below. Please ask any questions you might have about the project, how the project runs, or the purpose of the project evaluation study.

Information and Procedures of this Research Study:
The purpose of this study is to find out how effective the Recreation Referral Service is in helping participants to find the recreation they want and to help the recreation agency make the activity and place more inclusive. The assessments you will do will help us find out if the participant’s recreation changed because of the Recreation Referral Service.

By agreeing to participate you should know that:

- Your participation is completely voluntary and you are free to withdraw or leave the study at any time without any consequences. Even if you begin to participate in the study and realize for any reason that you do not want to continue, you are free to leave the study. Additionally, you may ask the researcher to destroy any responses or information you may have given.

- Your responses are strictly confidential. Your information is kept private. Only the professors instructing you and the researcher will read any of your information or responses. Your information will be kept in a locked cabinet in the Inclusive Recreation Resources Center Office at SUNY Cortland.

- You have a right to read and know any information written about you. You have a right to know the reason any information is written about you. The purpose of the study is to find out if the services you helped to provide are helpful or not to participants.

- You should not experience any discomforts or risk. You will be working with individuals with developmental disabilities, with the local agency, and with Inclusive Recreation Resource Center Staff. If you feel uncomfortable at any time please talk with Melissa Roeder. If this does not make you feel more comfortable, please contact Leslie Eaton, IRB Designee Department of Psychology, SUNY Cortland, email: eatonl@cortland.edu, 607-753-2079.

- From being in the study you should expect to fulfill the required fieldwork hours for your recreation course. You should be comfortable completing general paperwork and facilitating the inclusion process when working one to one with a person with a developmental disability. Your participation will help the Inclusive Recreation Resource Center understand if the service they are providing is making a difference in people’s lives.

Contact Information
If you have any questions concerning the purpose or results of this study, you may contact my advisor, Dr. Lynn Anderson at (607) 753-4941. For questions about research or research subjects’ rights, contact Leslie Eaton, IRB Designee, Department of Psychology, SUNY Cortland, email: eatonl@cortland.edu, 607-753-2079.

I __________________________________ have read the description of the project for which this (print name)
consent is requested, I understand my rights, and I agree to participate in this evaluation study.

__________________________________________  __________________
Signature Date
Participant Information and Informed Consent Form

The research about the service in which you been asked to participate, the *Recreation Referral Service*, is being conducted by Melissa Roeder, a graduate student in the Department of Recreation and Leisure Studies at SUNY Cortland, under the supervision of Dr. Lynn Anderson, CTRS. We are asking for your informed consent to be a participant in the project described below. *Please ask any questions you might have about the project, how the project runs, or the purpose of the project evaluation study.*

Information and Procedures of this Research Study:
The purpose of this study is to find out how effective the Recreation Referral Service is in helping you find the recreation you want and helping make the recreation activity and place more inclusive. The assessments we do will help us find out if your recreation changed because of the Recreation Referral Service.

By agreeing to participate you should know that:

- Your participation is completely voluntary and you are free to withdraw or leave the study at any time without any consequences. Even if you begin to participate in the study and realize for any reason that you do not want to continue, you are free to leave the study. Additionally, you may ask the researcher to destroy any responses or information you may have given.

- Your responses are strictly confidential. Your information is kept private. Only the student working directly with you, the professors instructing the student, and the researcher will read any of your information or responses. Your information will be kept in a locked cabinet in the Inclusive Recreation Resources Center Office at SUNY Cortland.

- You have a right to read and know any information written about you. You have a right know the reason any information is written about you. The purpose of the study is to find out if the services we provide are helpful or not.

- You should not experience any discomforts or risk but you will be working with students who may have limited experience. If you feel uncomfortable at any time please talk with Melissa Roeder. If this does not make you feel more comfortable, please contact *Leslie Eaton, IRB Designee* Department of Psychology, SUNY Cortland, email: eatonl@cortland.edu, 607-753-2079.

- From being in the study you should expect to be participating in the recreation activity or activities you have chosen. You should be comfortable participating in the activity or activities and feel more independent than when you first began working with the student. Your participation will help the Inclusive Recreation Resource Center understand if the service they are providing is making a difference in people’s lives.

Contact Information
If you have any questions concerning the purpose or results of this study, you may contact my advisor, Dr. Lynn Anderson at (607) 753-4941. For questions about research or research subjects’ rights, contact *Leslie Eaton*, IRB Designee, Department of Psychology, SUNY Cortland, email: eatonl@cortland.edu, 607-753-2079.

I ______________________ have read the description of the project for which this consent is requested, I understand my rights, and I agree to participate in this evaluation study.

____________________________________________________________________________________

Signature ____________________________ Date ____________________________

(print name)