

55th SESSION

FEBRUARY 25, 1969

Meeting was called to order by Chairman R. Young at 2:40 P.M. in the Ways and Means Room.

Present: R. Young, Howard, Bowler, Ashworth, Webb, Jacobsen, Close, F. Young, Glaser

Absent: None

Present to discuss the Department of Health and Welfare were: Mr. Karl Harris, Dr. Brown, Mrs. Piscevich, Mr. Flander, Mr. Grant Harris, Mr. Jay Gardner, Mr. John Aberasturi, and Mr. Michael Guariglia.

Mr. Karl Harris, Director, Department of Health, Welfare, and Rehabilitation discussed the Comprehensive Health Planning Budget. In-State Travel, the budget recommends two meetings each year for the Advisory Council. The agency requests funding for four meetings each year, request: \$3,000. It is necessary that all three staff members spend considerable time in the individual counties, Motor Pool requests: the original \$2,000 be reinstated. Printing, plan submitted to the planning agency must be duplicated for each of the 31 council members for review. Agency requests a \$1,5000 additional. Contract Services: The request for \$15,000 for Contract Services is to initiate some programming for research and analysis of health information. \$5,000 was recommended. Agency requests \$10,000 additional be reinstated. Telephone: The actual telephone rental cost is presently \$69.95 per month. Recommended amount of \$744 is below actual cost. Agency requests reinstatement of additional amount of \$96.00.

Mrs. Piscevich stated that the Advisory Council is made up of 31 members appointed by the Governor, the majority of which are health service consumers. The Advisory Council has an executive cabinet and six task forces which will serve in various health areas such services as facilities, manpower, environmental health, and the economics of health. Dr. Brown is the Chairman of the Board.

A Director, two professionals, and two clerical positions are recommended in the coming biennium. One professional will be a Health Planner and the other professional a Management Analyst.

Mr. Jay Gardner, Superintendent of the Nevada Youth Training Center commented that this Budget is based on 140 boys. If the population goes up we will have difficulty and will have to go somewhere else for funds. There are seven living units at the Center - two with a capacity of 30 each, and five with a capacity of 20 each. The capacity of the Training Center can be 160 boys. Except for a small sum from the Federal

Government for vocational training, the Center is financed entirely from the General Fund.

Three new positions are recommended for the biennium: Senior Clinical Psychologist, Physical Education and Recreation Instructor, and Clerk Typist.

The sixth category of expense is the Outside Agency Care. The money is used for contracting services for the more severely disturbed boys who are in need of a thorough psychiatric program. These boys are sent to the California Youth Authority Facility for treatment. It is expected that the agency will average five boys a month in this facility at a cost of \$435 a month.

Mr. Bowler asked whether these academic teachers were provided by the State or not.

Mr. Gardner stated that these are certified teachers through the State Department of Education, but they are not part of the Public School System.

Mr. Howard wondered how long a boy is kept on parole. Mr. Gardner said after a years satisfactory time on parole and when a boy reaches the age of 18. The basic idea is to keep him on parole until he has made an adjustment.

Mr. Frank Young asked what portion of the monies goes for operation and what portion for the boys.

Mr. Gardner noted that in the last fiscal year with an average daily population of 132 the total cost was \$737,941.07, per boy per year was \$5,590.46.

Mr. Mervin Flander, Services to the Blind stated that in 1967 the Division was awarded an expansion grant from the Federal Government designed to expand the services available to clients of the Division. Two orientation adjustment teachers and a business enterprise manager were hired out of the expansion grant. It is recommended that these positions be retained for the next biennium.

Mr. Grant Harris, Alcoholism Division commented that the agency has provided assistance to various non-profit organizations working with alcoholics such as the Washoe State Rehabilitation Inc. "Half-Way House" in Reno. There are four rehabilitation centers in Nevada. Two in Las Vegas, and two in Reno. Two for women and two for men. There are approximately 75-80 live-in patients in Reno.

A new position of manager-counselor is recommended for the Las Vegas area. A half-time clerical position is also recommended to support the manager-counselor. Slight increases in travel and operating expenditures are recommended to pay for the costs of the new position and the increased costs of operating. Office furniture and equipment are recommended in the first year of the biennium for the new positions.

Mr. John Aberasturi, Superintendent, Nevada State Children's Home stated that there are seven cottages at the Children's Home. Each cottage is designed to accommodate 10 children and the cottage couple assigned to the cottage. The male cottage parent works on maintenance, vocational, instructional, and counseling projects. The female parent does the cooking, housekeeping, etc.

The Budget is predicated on an average population of 70 with all seven cottages staffed. There is a waited list of nearly 40 children, all school age.

A new position of half-time cottage couple substitute is recommended. The regular cottage couple works a 24 hours day, five days a week, and is relieved two days a week by the cottage couple substitute.

A station wagon is recommended for purchase in the first year. The Home now has two automobiles - a 1961 Rambler station wagon with 88,000 miles and a 1964 Falcon with 54,000 miles.

Mr. Close wondered why Clothing is \$8,000 in both schools. Mr. Aberasturi stated that the children in Carson City need school clothing plus everyday wear.

Mr. Michael Guariglia, Administer, Vocational Rehabilitation Division discussed the maintenance of its existing levels of authroized programming. The Nevada General Agency during 1968 achieved a 46% increase in the number of cases referred, a 43% increase in the number of cases handled, a 34% increase in the number of cases served, most of which continue as cases into subsequent years, and a 31% increase in the number of cases closed successfully.

Under the Vocational Rehabilitation Act, a minimum of \$1,000,000 is allotted to Nevada for rehabilitation. \$125,000 goes to Services to the Blind, and \$875,000 to this program. The funds require 20% matching by the State. Not all of the matching funds need to be General Fund money, however, a portion can be other rehabilitation funds spent within the State. \$35,000 are 100% Federal planning funds.

Meeting adjourned at 5:10 P.M.



PAUL LAXALT
GOVERNOR
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DIRECTOR

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DEPARTMENT OF HEALTH, WELFARE,
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NEVADA GIRLS TRAINING CENTER
NEVADA YOUTH TRAINING CENTER
REHABILITATION
SERVICES TO THE BLIND
WELFARE

February 25, 1969

COMPREHENSIVE HEALTH PLANNING

IN-STATE TRAVEL:

Advisory Council Meetings

The budget document recommends two meetings each year for the Advisory Council. The agency requests funding for four meetings each year.

Request: \$3,000 additional

Motor Pool

It is necessary that all three staff members spend considerable time in the individual counties.

Request: The original \$2,000 be reinstated

PRINTING:

Plans submitted to the planning agency must be duplicated for each of the 31 council members for review. Our present budget of \$2,000 is tight.

Request: \$1,500 additional

CONTRACT SERVICES:

The request for \$15,000 for Contract Services is to initiate some programming for research and analysis of health information. \$5,000 was recommended.

Request: \$10,000 additional be reinstated

TELEPHONE:

The actual telephone rental cost is presently \$69.95 per month. This totals \$839 per year. Recommended amount of \$744 is below actual cost.

Request: Reinstatement of additional amount of \$96.00

SUMMARY

	<u>Governor Recommends</u>	<u>Request Reinstatement</u>	<u>State Funds</u>
In-State Travel	\$14,976	\$3,800	\$950
Printing	1,000	1,500	375
Telephone	744	96	24
Contract Services	5,000	10,000	2,500

STATE OF NEVADA

DEPARTMENT OF HEALTH, WELFARE AND REHABILITATION

PAUL LAXALT
GOVERNOR

REHABILITATION DIVISION

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MICHAEL M. GUARIGLIA, *Administrator*

Presentation to: WAYS AND MEANS COMMITTEE

NEVADA LEGISLATURE
Fifty-Fifth Session

STATE OF NEVADA

REHABILITATION DIVISION

Budget Justification
1969-71 Biennium

By: Michael M. Guariglia
State Administrator

REHABILITATION DIVISION
Budget Presentation

1. General Program Discussion 1
 - a. New groups served
 - b. Improved facilities and expanded services
 - c. Planning and consultation
 - d. Coordination
2. Present Work Program Fiscal '69 3
3. Economic Benefits and Impact 7
 - a. State
 - b. Community
4. Budget for Fiscal '70 and '71 Proposals. 8
 - a. Funding requirements
 - b. Program requirements
 - c. Production
5. Appendix

General Program Discussion

Maintaining its existing levels of authorized programming, the Nevada General Agency during Fiscal Year 1968 achieved a 46% increase in the number of cases referred, a 43% increase in the number of cases handled, a 34% increase in the number of cases served, most of which continue as cases into subsequent years, and a 31% increase in the number of cases closed successfully. It is noteworthy that there were no corresponding increases in staff during this period.

This level of achievement came about, in part, through the professional efforts of a seasoned staff working with the traditional types of cases, e.g., the physically, intellectually and emotionally disabled, aided by excellent facilities and resources. In addition, this achievement was expedited through the implementation in Fiscal Year 1966 of a special grant of Federal support required to enable the Agency to demonstrate that certain up to then unmet areas of significant need could be effectively served by the Rehabilitation program. The new groups upon which services were then concentrated were: (1) the mentally restored and other severely disabled in Southern Nevada, emphasizing services to those individuals released to Southern Nevada from the Nevada State Hospital in Sparks; (2) the industrially injured, emphasizing referrals from the Nevada Industrial Commission which agency experiences over 26,000 injury claims per year with a 15% disability rate; (3) the disabled indigents in Nevada, emphasizing those on public welfare rolls; (4) the individuals soon to be released from prison or other correctional institutions or those involved in other correctional programs; and (5) the severely disabled.

More specifically regarding program areas developed and/or emphasized in 1968, the following is submitted: A concentrated referral system for TB patients was initiated with a part-time counselor assignment in the Reno area; work with the Intermountain Regional Medical Program has resulted in planning for modern services to cancer, heart disease and stroke cases; there has also been an emphasis in staff training programs regarding working with the deaf, participation in programs focusing an attack on poverty, such as CAMPS, and evaluation and assessment of Title V Welfare referrals to help resolve work interests, work tolerance and capabilities.

During Fiscal Year 1968 an "Instant Service" program under Section 3 funding was initiated, whereby a newly referred client can obtain a general medical review, work sample evaluation, and psychometric testing immediately upon completion of the intake interview - and all in the same rehabilitation facility. This service will have an obvious effect on the speed of processing the case, the client's morale and the ultimate quantity and quality of rehabilitations. The project provides the services of a physician, an evaluator, and the facility. A complete evaluation of the actual effect this service has had on the speed of case movement has not yet been accomplished but preliminary findings are significant.

Concurrently, an evaluation unit has been developed at the Nevada State Hospital to provide early and thorough services to clients and prospective clients on the Hospital grounds. Transitions can then be made, when the client is deemed ready,

to the external facility (Adjustment Center), operated by the Agency, on a "night-hospital" basis. Subsequently, the client might leave the hospital entirely, remaining in the external facility program until the transition to job and community is complete. This particular program will emphasize services to the mentally ill and to the alcoholic as well. For continued and ancillary services to those people, a working agreement has been consummated with the community mental health agency.

The costs of these two projects will be subsumed under regular Section 2 funding in the future.

Concerning groups 1, 2, 4, and 5, defined on page 1, the development of such services, extending from Fiscal Year 1966 through Fiscal Year 1968, has amply demonstrated the ultimate ability of the Agency to integrate services to these individuals into the scope of the general program coverage.

The changes in service achievements from Fiscal Year 1966 can be seen in Table 1.

Experience with the third group, defined on page 1, disabled indigents, has led this Agency to support the national and local propounding that the culturally deprived and socially disadvantaged comprise the major economic and social problem today. The emphasis, then, should be upon the culturally deprived and socially disadvantaged instead of the disabled indigents per se, since the latter is inherently a part of the former groups anyway. With the other aforementioned categories now included in the general or traditional program, therefore, the special Federal support grant which is in its final year is being utilized for concentration solely upon the culturally deprived and socially disadvantaged groups of citizens. In turn, the major emphasis within these categories will be the public welfare recipient, and always the individual unable to engage in gainful activity.

Instead of the traditional definition of disability, then, as referring to a physical, emotional, or intellectual impairment, Federal and local moves as well have been made to penetrate the hard-core unemployed and heavy indigent case load groups. The definition of disability has now, therefore, come to encompass not only the traditional impairments noted above, but also behavioral disorders and the culturally deprived and socially disadvantaged.

This is pointed out here especially in order to emphasize the fact that the data estimates throughout this document are quite conservative considering the population scope of these new disability groups.

Work Program - Fiscal Year 1969

The expenditures budgeted for Fiscal Year 1969 by the Nevada General Program do not show radical increases in spite of the fact that services to clients are being expanded extensively to attempt to eliminate an obvious deficit in services to the number of disabled Nevadans needing rehabilitation services. With the notable absence of reliable census projections for Nevada's population beyond 1969 and in order to maintain conservatism in our estimates, the figure representing the disabled population in Fiscal Year 1970 and in 1971 is held at the level estimated for Fiscal Year 1969. (See Chart 1). As is graphically illustrated the disabled population in Nevada (estimated) has grown from 19,600 in Fiscal Year 1966 to 25,900 in Fiscal Year 1969, a 32% increase; and the number of disabled served by the Rehabilitation Division in this population has increased respectively from 700 to 4,000, a 471% increase. Yet there remains an estimated deficit in services in Fiscal Year 1969 to over 21,000 individuals.

During this same period the State appropriation has not increased appreciably. To begin with, program plans will be centered around a continuance and refinement of the activities begun and planned for in Fiscal Year 1968. In addition, some new efforts and emphases will be made as discussed below.

The case load projections in the 1969 columns of Table 1 indicate substantial increases over 1968 still as a result of the activities described above. This is with minimal staff increases as agreed upon between the Agency and the administration prior to July 1968.

The service activities referred to here are, currently financed by three funding programs, viz., Section 2, Section 4(a)(2)(a), Section 3 and Section 222. It should be particularly noted that during this year (1969) refinements will be made and plans completed for the continuation under Section 2 in Fiscal Year 1970 of the programs and services now under Section 4(a)(2)(a).

There will be no increase in staff specialization, although initiation of programs with all State institutions as well as all welfare and socially disadvantaged groups will be accomplished. May 13, 1968 to May 12, 1969 represents the final year of a Federally funded Expansion Grant Project [Section 4(a)(2)(a)] to do this. While the services and programs initiated and expanded by means of the first two years of this project will now be transferred and conducted under the on-going, regularly legislated, Section 2 program, it is noted here that such a broad and effective expansion of rehabilitation services to the variety of disabled populations would have been quite impossible without this Federal assistance.

The first project year was a year of the application of new program ideas, techniques, and emphasis to previously unreached segments of the disability populations of Nevada. The results of that project year, although reflecting at times awkward practices and somewhat ineffectual results, provided extensive and valuable information that made the second project year a significant success.

The sole emphasis designated for the Expansion Grant for the third year of the Project is in serving the disabled and socially disadvantaged indigents and other poverty groups. It has been our experience that many of these people cannot be effectively served because most community training programs and other services are geared with little consideration for those with disabilities. Those who do not qualify or who drop out of such training programs, must be served if the attack on poverty problems is to be meaningful.

We proposed an intensive individual approach to those who are to be served. It has already been established that such individuals do not qualify for training programs of other agencies or community projects and little is really offered with a realization of such particular needs in present programming.

The State Agency through its Adjustment Center program has the means to assess and evaluate the potential of the disabled welfare recipient and those from the other poverty groups, as well as providing much needed services in the area of getting along with others, getting involved in the dynamics of work, personal grooming, taking supervision, realizing the importance of being on time, and the management of money, to mention a few. Not only can the Center identify work interests and abilities, it can help establish the level at which a person can function and can strengthen the personal factors which will allow the person to succeed. Another factor to be considered is that by identifying the needs of these particular people more meaningful training programs can be established to reach the abilities of those to be served.

Such services as mentioned above either do not exist, as indicated, or those of other programs who might be involved have little experience in providing such services. The Center program in our Agency has been in existence three years, has worked with such groups, and has identified the areas of need. These services, if provided, can reduce the individual's confusion, disappointment, and fear of another failure. Studies are currently in progress which indicate that there is a significantly greater likelihood for successful closure of those cases which have received services in the Adjustment Center.

Preliminary findings from our Center program efforts in work with hard-core welfare cases indicate that services to this group must become more comprehensive if we are to meet the complex needs of this group. The real issue seems to be how to clearly identify the real problems or major problem area from which effective program planning can be initiated.

During this third and final project year, therefore, the highest priority has been given to a complete program tie-in with the welfare agencies to the extent that the Rehabilitation Agency is reviewing the majority of the welfare agencies' case loads, considering each case as a rehabilitation case referral; each case is receiving a complete review including all diagnostic services necessary to determine the reason the individual is indigent; each case is receiving specific recommendations regardless of whether an identifiable disabling condition is defined and whether the case moves into a rehabilitation service category - such recommendations are designed toward removing as many of these individuals as

possible from the indigent categories whether they are found to be in need of rehabilitation services or not. It will then be easier for the welfare agencies to serve those individuals who are not precluded from work by some disabling condition.

A close working relationship with the welfare agencies is required and achieved. Social caseworkers from the Department of Health, Welfare, and Rehabilitation are working closely with the Rehabilitation Agency. These caseworkers are responsible for the referrals, they sit in on and participate in staffings, they contribute to the evaluation and planning stages of the case, and they provide those services that are normally available from the welfare program, such as the Title XIX medical services.

The services during this last project year, as was the case during the first two years, are provided on a Statewide basis, not being limited to those individuals in any one particular area. With this in mind, it is estimated that about 1,000 additional indigent cases will be handled in this period.

Over the past several years, this Agency has maintained a working relationship with the State school districts on behalf of the retarded or otherwise disabled school child. A new development planned during Fiscal Year 1969 is the complete assignment by one of the major school districts of a staff member to be housed in and directed by the Agency-operated facility in that district. It is expected that this arrangement will result in closer coordination of rehabilitation services with the student's school program, as well as more intensive services to a greater number of disabled students. In addition, the special education staff is attending, along with the rehabilitation personnel, training programs on the rehabilitation of the retarded sponsored under VRA grants. The school programs are funded under Section 2.

Participation has been achieved through Section 12 (facility construction) funds with Washoe Medical Center in Reno, the largest hospital in Nevada, for the construction of a comprehensive rehabilitation center beginning in Fiscal Year 1969. This facility will create nearly unlimited services to most disability groups, such as heart, cancer, stroke, spinal cord injuries, etc., and will result in substantial future savings to the Nevada Section 2, case service program. Plans are also being developed for the Nevada Agency to become the pivot point of a long term detailed survey of the number and characteristics of spinal cord injuries in Nevada, beginning in Fiscal Year 1969, in close coordination with Rancho Los Amigos Hospital in Southern California. This should result in increased early referrals as well as creating a vital source of research information.

During the period under discussion there has also been additional Agency participation in such other programs as CAMPS with emphasis on strong linkage with the Concentrated Employment Program in Clark County.

The Agency, at this time, is also attempting to complete a full program of Comprehensive Statewide Planning.

These combined programs will contribute to decreasing the deficit described in the first paragraph of page 1 by increasing referrals to the Agency approximately 135% in 1969. (See Chart 2 and Table 1.)

Fiscal Year 1969 is a year devoted to the refinement and improvement of all the new programs of service initiated or carried out in 1968 in addition to a continuation of the stable and traditionally effective programs now considered standard in any rehabilitation agency. Obviously, the case load will experience significant growth during this period (see Table 1 and Chart 1), adding to the burden of the staff.

Economic Benefits and Impact

Disability means many things to many people. It can mean the inability of a child to walk, or to hear, or to think properly; it can mean the inability of a wife to care for her children or her home; it can mean the inability of a man to earn food for his family; it can appear so simple as an inability to read or write. To most it means reliance upon the productivity of others, upon the fruits of their labor, that is to say, reliance upon the non-disabled. This is reflected through the size and growth of the public welfare roles and the cost of maintenance of these individuals. For example, Welfare's Aid to Dependent Children Program projects increases of 20.5% and 18.0% during Fiscal Years 1969 and 1970 respectively, at an average cost of over \$100 per family per month. This represents an outlay of \$3,364,464 and \$4,047,240 during each of these two years from the ADC program alone. Many of these people could engage in gainful activity if they received evaluative and rehabilitative services.

Welfare's Title XIX program of medical services to the disabled costs approximately \$3,000 per year per case. The total average Rehabilitation Agency cost per client served per year is running less than \$400.

The average cost per day per patient at the Nevada State Hospital is \$10.56 while the Rehabilitation Agency cost per client per day is a little over \$1.00.

Through industrial injury alone as referred to above, 3,900 claims were approved during Fiscal Year 1968. Data available indicates that, while over \$2,000,000 were paid in compensation, over \$7,000,000 in salary losses accrued. This represents a loss of over \$1,700,000 in tax revenue, and this is from industrial injury alone! It is shocking to consider the loss to Nevada resultant from more than 20,000 disabled citizens!

The total benefits of rehabilitation that accrue to taxpayers cannot be stated without special analysis, but two main factors are: increase in tax revenues and decrease in welfare payments.

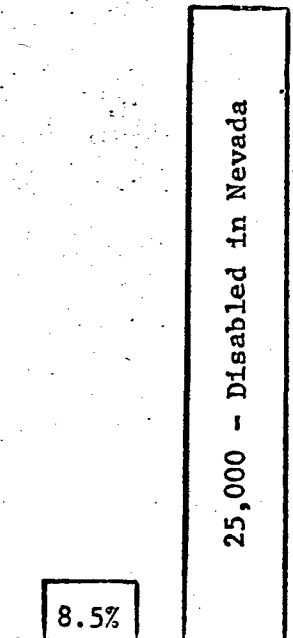
It is clear that helping the disabled to become employed benefits society far more than it costs.

In addition an average dollar spent for rehabilitation generates a flow of income of about \$18 with a present value of over \$7. ¹

¹ U.S. Dept. HEW, Human Investment Programs - Vocational Rehabilitation (Wash. D.C., Dec. 1967).

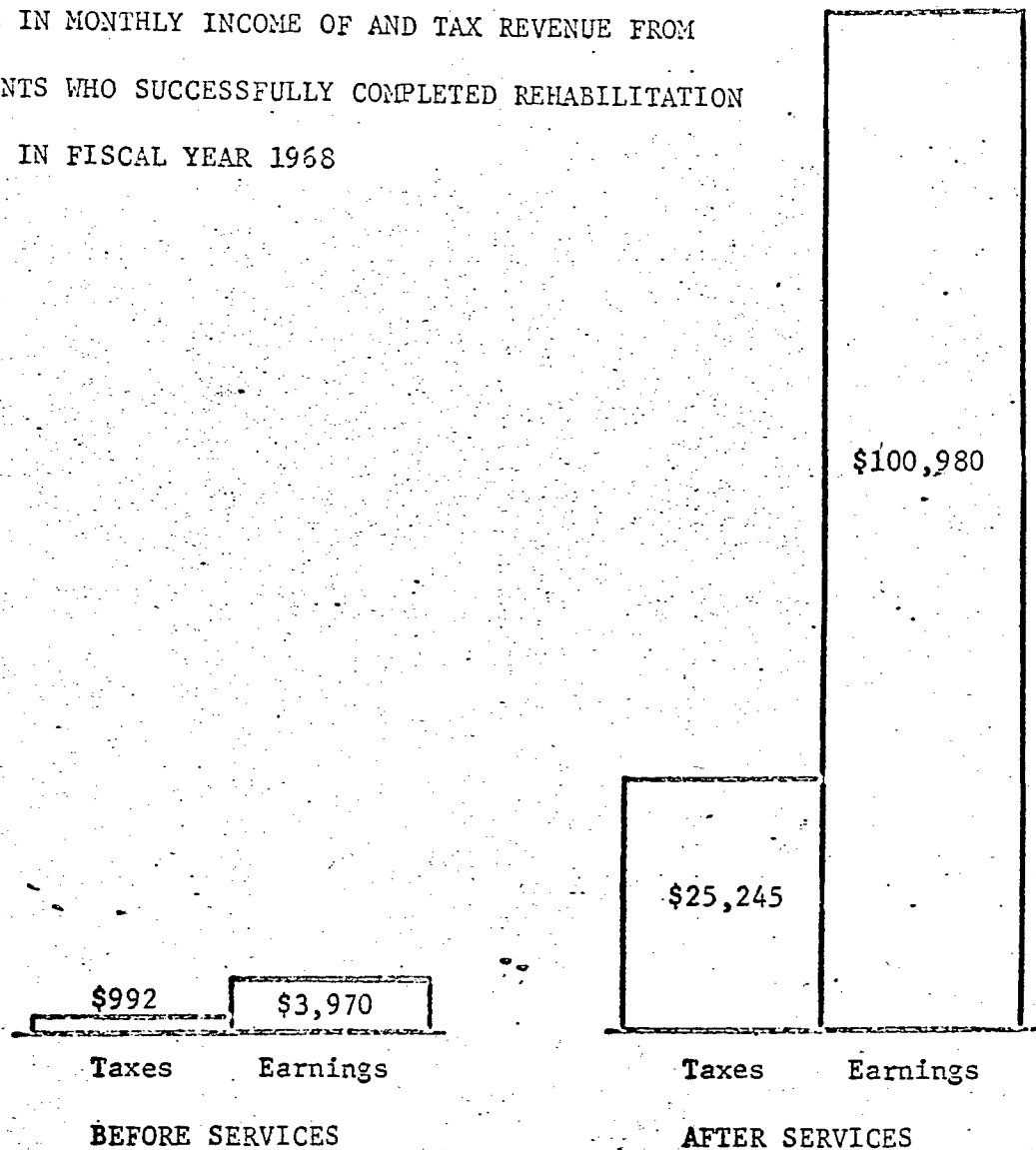
EXTENT OF REHABILITATION NEEDS SERVED

Utilizing the fullest capabilities of the Division as defined by State-appropriated funds, only 8.5% of the total need in Nevada was served in Fiscal Year 1968. This means that the Division needs more funds if it is to serve the 22,911 Nevadans who are not receiving services they need.



In view of the aforementioned facts, it is almost overwhelming to consider what rehabilitation services to the other 22,911 Nevadans would mean in increased income, purchase power and tax revenue.

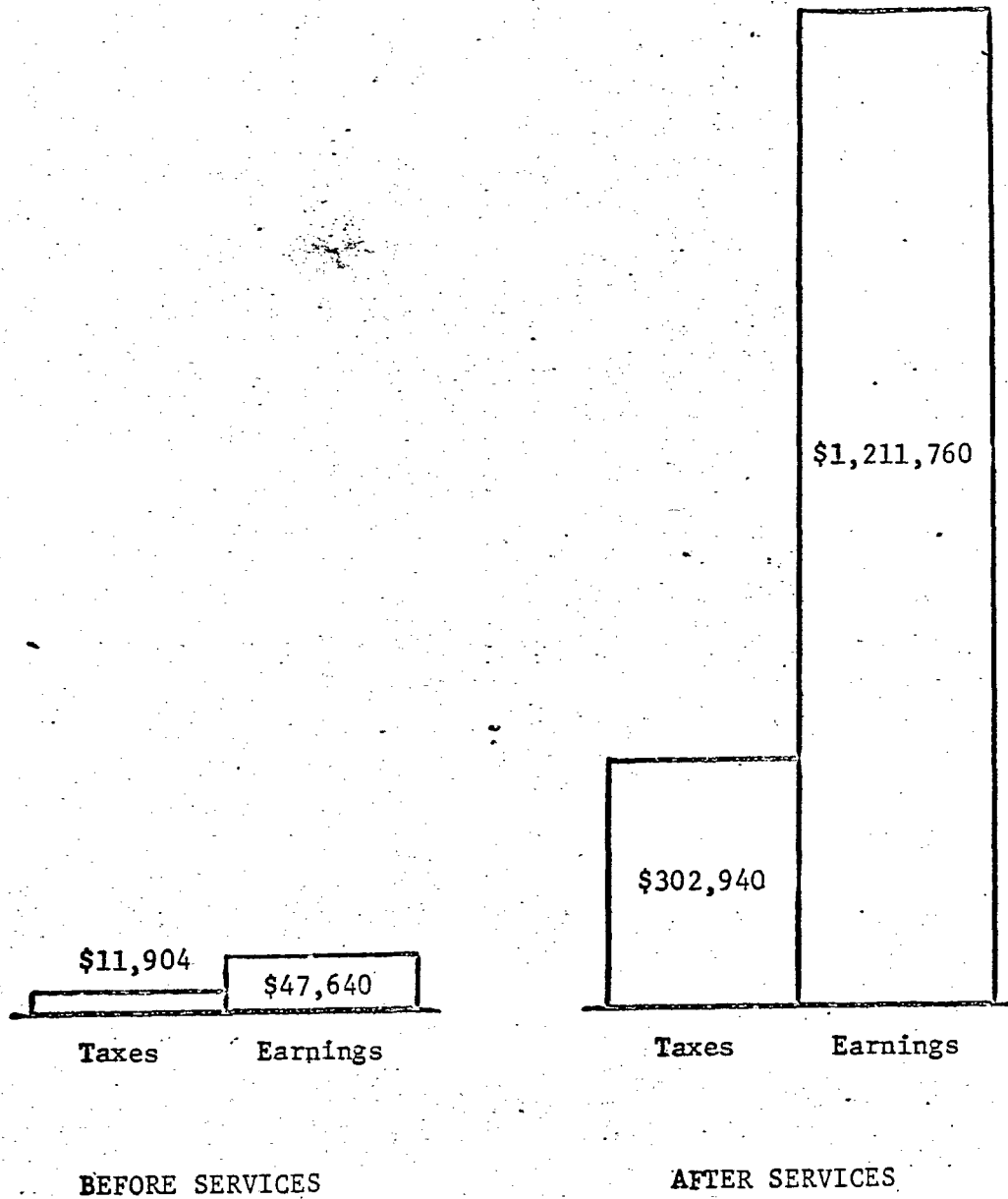
INCREASE IN MONTHLY INCOME OF AND TAX REVENUE FROM
302 CLIENTS WHO SUCCESSFULLY COMPLETED REHABILITATION
SERVICES IN FISCAL YEAR 1968



Of those cases who successfully completed their rehabilitation program, only 14.9% were wage earners at the time their services began, while 94.0% were wage earners at the time their services were completed. Along with an increase in the number of wage earners is an increase in monthly income for this group of \$97,010, and a resultant increase in monthly tax revenue of \$24,253 (noted in graph above).

The U. S. Department of Health, Education and Welfare recently stated: Every \$1,000 spent by federal and state agencies on the vocational rehabilitation of disabled persons results in an increase of more than \$35,000 in the lifetime earnings of a typical rehabilitated citizen. This means a gain in earning capacity of \$35 for every \$1 invested in such assistance.

INCREASE IN ANNUAL INCOME OF AND TAX REVENUE FROM 302 CLIENTS
WHO SUCCESSFULLY COMPLETED REHABILITATION SERVICES IN FISCAL YEAR 1968



Budget: Fiscal Years 1970 and 1971

The critical issue for Fiscal Year 1970 is that as the project grants phase out, their programs will have to be incorporated within Section 2, the basic support funding category. At this point in time it would appear that substantially more in-State support will be necessary in order to accomplish this. In addition, general program growth will result from services to the totality of the hard-core unemployed, welfare, and socially disadvantaged groups and complete penetration into all State institutions. The main emphasis will, of course, be upon the application of a Rehabilitation services to those individuals on public welfare rolls in a concerted effort to lessen the burden of public aid. Coordination will be concentrated with such programs as Title V, Title XIX, WIN, CEP, etc. The service by the Rehabilitation Agency will greatly emphasize comprehensive evaluation and work adjustment programs.

The State Agency has developed its Vocational and Personal Adjustment Center Program and now has the means to assess and evaluate the potential of the disabled welfare recipient and those from the other poverty groups, as well as providing much needed services in the area of getting along with others, getting involved in the dynamics of work, personal grooming, taking supervision, realizing the importance of being on time, and the management of money, to mention a few. Not only can the Vocational and Personal Adjustment Center Program identify work interests and abilities, it can help establish the level at which a person can function and can strengthen the personal factors which will allow the person to succeed. Another factor to be considered is that by identifying the needs of these particular people more meaningful training programs can be established to reach the abilities of those to be served.

Such services as mentioned above either do not exist, as indicated, or those of other programs who might be involved have little experience in providing such services. The Vocational and Personal Adjustment Center Program in our Agency has been in existence three years, has worked with such groups, and has identified the areas of need. These services, if provided, can reduce the individual's confusion, disappointment, and fear of another failure. Studies are currently in progress which indicate that there is a significantly greater likelihood for successful closure of those cases which have received services in the Adjustment Center. To further enhance our services we established an instant service program, whereby a referred client can obtain a general medical examination, work sample evaluation and psychometric testing immediately upon completion of the intake interview and all in the same rehabilitation facility. Therefore, the complete emphasis is on the intensive individual approach, reducing the element of delay.

The vocational and personal evaluation services provide the only true evaluation process for the Welfare Title V program clients. In addition, it has been found that, most especially with disabled hard-core indigents, such a thorough and comprehensive evaluation is the key to successful rehabilitation and removal of such individuals from the welfare rolls. In view of these facts, such services, especially to this group of people, will be even further developed and emphasized.

In reviewing such programs as WIN, CEP, and even CAMPS the emphasis is to coordinate service through a linkage of programming, to provide education and training along with peripheral services but, more important, to serve people without letting them drop out and remain a burden to themselves and the community. These programs in trying to work together many times do not properly utilize the services of other agencies as they do not have the means to clearly identify the needs of the disadvantaged or the welfare recipient. In those cases where it can be promptly noted that specific problems do exist and service can be provided, plan development can take place. More people can be served because while one thing is going on other things can take place. Proper services in the initial phase can likewise build up a confidence in agency people, showing that this group can be served; and the indigents will then begin to accept the programs which are designed to provide them employment.

During this period the Rehabilitation Agency, taking full advantage of its position in the Department, will seek to eliminate the duplication of Rehabilitation activities that are attempted by other divisions and bureaus. In addition, penetration will be completed into all State institutions with full program services designed to reduce the populations in these institutions by returning as many of these individual's as possible to gainful activity. Included here is more extensive direct services to the Nevada State Prison, the Industrial School for Boys at Elko, the State Training School for Girls at Caliente, the Nevada State Hospital, and the Children's Home.

Fiscal Analysis 1970 - 71

In review of the funding situation the following Federal Funds and income will comprise the budget for Fiscal Year 1970 and 1971:

Section 2	\$ 875,000
Section (4)(a)(1)	6,000
Section 222	100,000
Facility Income	50,000
Total	\$ 1,031,000

Those grants which will phase out at the end of this Fiscal Year include:

Section (4)(a)(2)(a)	148,000
Section 3	25,000
Facility Planning	8,000

It is obvious that the programs as developed within these grants must be absorbed under the basic support program (Section 2).

In comparing the maintenance of effort needed for the Fiscal Year 1970 and 1971 period with the amount of anticipated income we note an approximate difference of \$61,760 and \$70,220 respectively, which will have to be supplemented by a State appropriation. Any increase in program beyond its existing level will therefore require increased State support proportionately therein.

It appears incidental to discuss State to Federal matching levels as in the past since the level of program commitment requires State participation in excess of available Federal funds on a ratio basis. Perhaps it is significant to state, however, that there has always been a large discrepancy in the State's financial participation which has been extremely marginal as compared to the Federal support program.

For instance, over the past four years the amount of Federal support has increased approximately 86% while the State support has increased only 13%.

REHABILITATION

1970

Financing

Federal State (Matching Requirement)

Section 2	\$ 875,000	\$ 296,000
4 A 1	6,000	600
222	80,000	0
Section 3	25,000	2,800
Planning	35,000	0
	<u>\$ 1,021,000</u>	<u>\$ 299,400</u>

State Cash Availability + 3rd Party

<69,697>	3rd Party (not cash)
50,000	Facility Income
<u>179,703</u>	State Appropriation

\$ 1,021,000
229,703
\$1,250,703

Work Program *

Salaries	528,778
Out-State travel	2,000
In-State travel	8,000
Operating	167,145
Facility equipment	6,000
Client payroll	30,000
Client services	508,780
	<u>\$ 1,250,703</u>

*Will provide services to 15.4% of the population in need.
5,400 cases handled
4,000 served

1971

Financing

Federal State (Matching Requirement)

Section 2	\$ 875,000	\$ 296,000
4 A 1	6,000	600
222	80,000	0
Section 3	25,000	2,800
Planning	35,000	0
	<u>\$ 1,021,000</u>	<u>\$ 299,400</u>

State Cash Availability + 3rd Party

<41,237>	3rd Party (not cash)
60,000	Facility Income
<u>198,163</u>	State Appropriation

1,021,000
258,163
\$1,279,163 Cash Budget

Work Program *

Salaries	547,827
Out-State travel	2,000
In-State travel	8,000
Operating	167,416
Equipment	0
Facility Equipment	6,000
Client payroll	30,000
Client services	517,920
	<u>\$ 1,268,400</u>

*Will provide services to 15.47% of the population need.
5,400 cases handled
4,000 served

COMPARISON
of
FEDERAL SHARE VS STATE APPROPRIATION
(Section 2, Basic support only)

FISCAL YEAR	FEDERAL SHARE	STATE APPROPRIATION
1965	148,238	68,075
1966	230,403	97,079
1967	268,811	103,775
1968	384,411	105,964
1969	875,000	117,943

A P P E N D I X

Health, Welfare and Rehabilitation
Division of Rehabilitation

Table 1

	1966	1967	1968	1969 [*]	1970 [*]	1971 [*]
Percent of Disabled Population Served	3.6%	8.1%	8.5%	15.4%	25.9%	30.0%
Cases Referred	1,102	1,190	1,738	4,090	6,708	7,770
Cases Handled	1,546	1,793	2,557	5,374	8,502	11,538
Cases Served	668	1,554	2,089	4,000	6,708	7,770
Cases Closed Successfully	176	231	302	600	950	1,102
Cases Closed Other	767	743	971	2,980	3,784	7,310
Cases on Hand at end of Year	603	819	1,284	1,794	3,768	3,126
Number of Counselors	12	12	14	16	25	29

* These figures are estimates based on Agency projections

Disabled Nevada Population and Percent Receiving Services

Fiscal Years 1966 to 1970

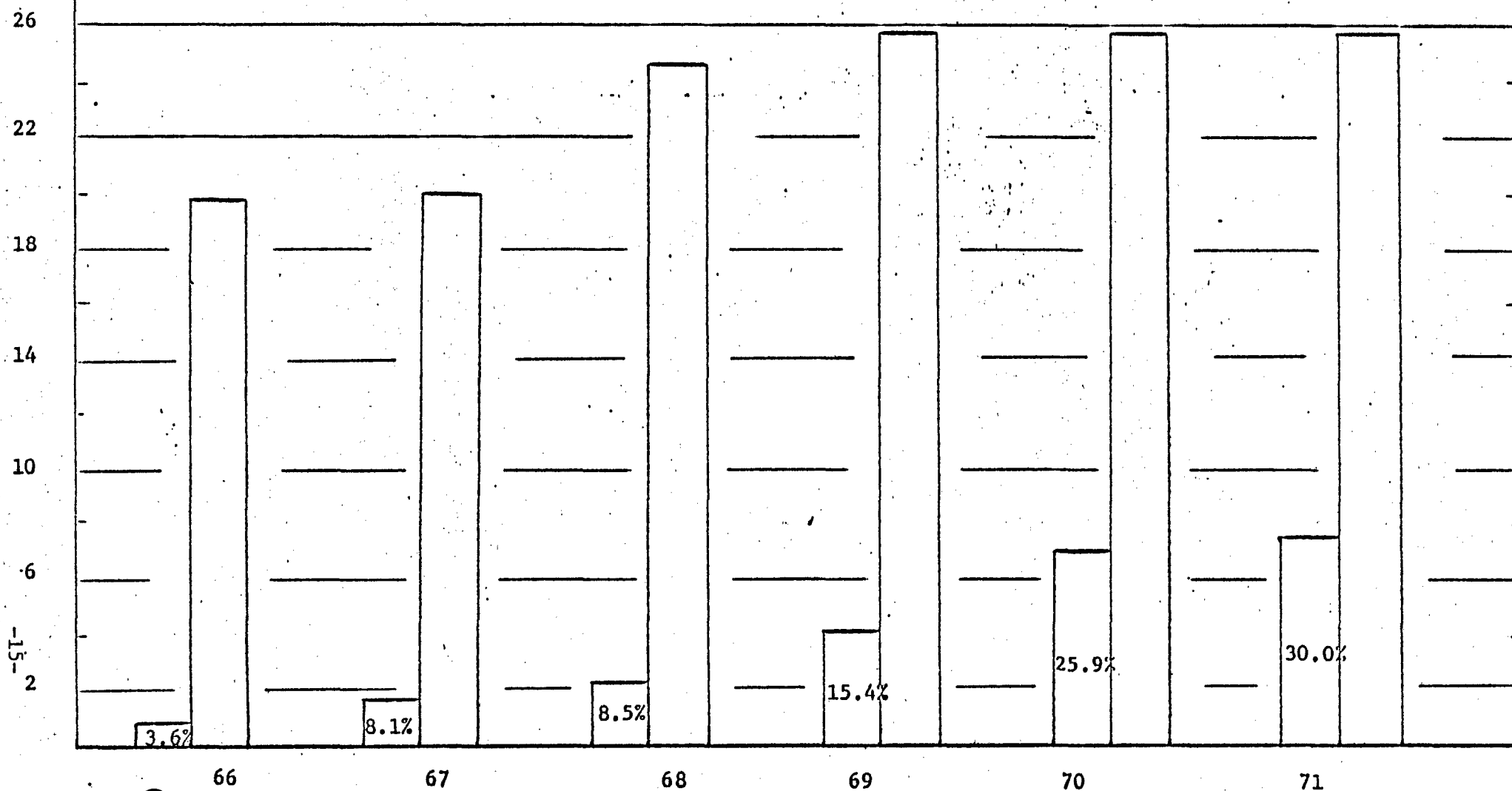


CHART 2
CLIENTS OF NEVADA REHABILITATION DIVISION

— Upper curve shows new referrals plus carryovers from previous years.
— Lower curve shows new referrals only.

