THREE YEAR STATE PLAN

FISCAL YEAR 1981
OCTOBER 1, 1980 TO SEPTEMBER 30, 1981

STATE OF MINNESOTA

SUBMITTED BY
THE MINNESOTA GOVERNOR'S PLANNING COUNCIL
ON DEVELOPMENTAL DISABILITIES

THIS STATE PLAN IS A JOINT ENDEAVOR OF THE MINNESOTA GOVERNOR'S PLANNING COUNCIL ON DEVELOPMENTAL DISABILITIES

AND THE

DEVELOPMENTAL DISABILITIES PLANNING OFFICE OF THE MINNESOTA STATE PLANNING AGENCY

BRUCE BALOW
Chairperson
Minnesota Governor's Planning
Council on Developmental Disabilities

ARTHUR SIDNER
Director
Minnesota State
Planning Agency

Submitted:

SECTION 1 -- STATE DD COUNCIL AND ADMINISTERING AGENCY

1.1 STATE PLANNING COUNCIL

The Minnesota Governor's Planning Council on Developmental Disabilities was established in 1971 by executive order of the Governor to plan for the direction, development, implementation, and evaluation of a comprehensive system of services for persons with developmental disabilities in Minnesota and to advise the Governor on matters pertaining to programs, services, and facilities for persons with developmental disabilities.

Members of the State DD Council are appointed by the Governor for a threeyear term; and may, at the discretion of the Governor, be reappointed for a second three-year term. All appointments, reappointments and nominations for appointment are coordinated through the Office of the Governor.

1.2 RESPONSIBILITIES OF THE STATE COUNCIL

Executive Order No. 79-32 charges the State DD Council with the responsibility to "...supervise the development of an annual state plan describing the quality, extent, and scope of needed services being provided, or to be provided, to persons with developmental disabilities; to monitor and evaluate the implementation of the state plan; and to review the state service plans for the developmentally disabled..." Toward that end the State DD Council promotes the development of needed human and fiscal resources to support services for persons with developmental disabilities, including support from other public agencies, private organizations, and volunteer groups. The Council's activities include but are not limited to the following:

PLANNING In conjunction with consumers, agency personnel, and service providers, the DD Council conducts systematic long- and short-range planning activities using a structured, orderly process for establishing goals and objectives. These efforts seek to promote improved services for persons with developmental disabilities by emphasizing co-ordination and cooperation between the many human service agencies, consumer groups, and others involved with services for persons with developmental disabilities.

EVALUATION The DD Council promotes implementation and varied evaluation systems to measure the quality, effectiveness, and quantity of services, staff, and facilities while at the same time protecting the confidentiality of records and other information describing persons with developmental disabilities.

PUBLIC INFORMATION AND EDUCATION

The DD Council disseminates findings from projects and activities it sponsors in order to inform and educate professionals, consumers, parents, agencies and the general public regarding issues, research findings and

other matters of DD-related significance. The Council supports the establishment of public awareness and public education programs to assist in the elimination of social, attitudinal, and environmental barriers confronted by persons with developmental disabilities.

LEGISLATIVE AND PLAN REVIEW

In order to facilitate cooperation and eliminate unnecessary duplication the DD

Council provides an opportunity for its members and staff to give prior review and comment on all state plans which relate to programs affecting persons with developmental disabilities. The Council also reviews new and existing laws and regulations which may have some bearing on the planning, delivery, and evaluation of DD-related services. In order to promote service quality, accessibility and effective funding and implementation, the DD Council assists in moving its recommendations toward the executive and legislative processes in Minnesota. The Council supports the introduction and passage of new laws and appropriate changes in existing laws that would improve the service delivery system. The DD Council also seeks to promote effective implementation of existing laws and regulations affecting persons with developmental disabilities.

RESEARCH AND DEVELOPMENT

The DD Council supports needed research and development efforts to find new or improved techniques for providing services to persons with developmental disabilities. It also supports efforts to implement and use known research and development findings through programs of translation and dissemination of information.

PREVENTION AND EARLY INTERVENTION

signed to reduce the incidence of developmental disabilities. Such programs involve the early screening, diagnosis, and evaluation (including maternal care, developmental screening, home care, infant and preschool programs, and parent counseling and training) of developmentally disabled infants and preschool children; particularly those with multiple handicaps.

RESIDENTIAL SERVICES The Minnesota DD Council supports efforts to improve the quality of care and the environment of persons for whom institutional care is appropriate and to eliminate inappropriate residential placement of persons with developmental disabilities.

COMMUNITY PROGRAMS

The DD Council supports the establishment of community programs and promotes the provision of appropriate and effective services for persons with developmental disabilities. The Council seeks to promote the idea that such services should be available to all persons regardless of their place of residence.

ADVOCACY The DD Council promotes and supports systems advocacy which aims toward achieving legislative, social, and policy reform. In addition, the Council seeks to influence and heighten public awareness about the problems encountered by persons with developmental disabilities in order to gain support for improving the nature, extent, and quality of services available to persons with disabilities.

Executive Order No. 79-32

Providing for a Governor's Planning Council on Developmental Disabilities and Assigning Responsibilities to the State Planning Agency

I, Albert H. Quie, Governor of the State of Minnesota, by virtue of the authority vested in me by the Constitution and applicable statutes, do hereby issue this Executive Order:

WHEREAS, provision of services to persons with developmental disabilities is of concern and importance to the state; and,

WHEREAS, Public Law 91-517, as amended, directs state participation in assisting the developmentally disabled, provides funds for such assistance, and requires the establishment of a planning council and the preparation of a state plan; and,

WHEREAS, no state agency has been designated by Law to apply for, to receive, to accept, and to expend federal funds for such purposes,

NOW, THEREFORE, I Order:

- 1. That, in accordance with Public Law 91-517, as amended, there be established the Governor's Planning Council on Developmental Disabilities, whose responsibility it shall be to supervise the development of an annual state plan describing the quality, extent, and scope of needed services being provided, or to be provided, to persons with developmental disabilities; to monitor and evaluate the implementation of the state plan; and to review state service plans for the developmentally disabled; and,
- 2. That, pursuant to Minn. Stat. § 4.07, the State Planning Agency be designated the state agency to act for the Governor in applying for, receiving, accepting, and expending federal funds granted to the State of Minnesota by Public Law 91-517, as amended; and,
- 3. That the State Planning Agency be designated as the responsible agency to provide staff and other administrative assistance to the Governor's Planning Council on Developmental Disabilities, and to carry out all other responsibilities relating to the developmental disabilities program as required under state and federal law.

Pursuant to Minn. Stat. § 4.035, this order shall be effective 15 days after publication in the State Register and shall be in force until superseded or rescinded by proper authority or it expires in accordance with Section 4.035.

IN TESTIMONY WHEREOF, I hereunto set my hand on this 13th day of July 1979.

Celbert H Duie

- 4.035 EXECUTIVE ORDERS. Subdivision 1. Applicability. A written statement or order executed by the governor pursuant to his constitutional or statutory authority and denominated by him as an executive order, or a statement or order of the governor required by law to be in the form of an executive order, shall be uniform in format, shall be numbered consecutively, and shall be effective and expire as provided in this section. Executive orders creating agencies shall be consistent with the provisions of this section and section 15.0593.
- Subd. 2. Effective date. An executive order issued pursuant to sections 12.31 to 12.32 or any other emergency executive order issued to protect a person from an imminent threat to his health and safety shall be effective immediately and shall be filed with the secretary of state and published in the state register as soon as possible after its issuance. Emergency executive orders shall be identified as such in the order. Any other executive order shall be effective upon 15 days after its publication in the state register and filing with the secretary of state. The governor shall submit a copy of the executive order to the commissioner of administration to facilitate publication in the state register.
- Subd. 3. Expiration date. Unless an earlier date is specified by statute or by executive order, an executive order shall expire 90 days after the date that the governor who issued the order vacates his office.

[1977 c 305 s 2]

- 4.87 GOVERNOR AS STATE AGENCY FOR FEDERAL FUNDS. Subdivision 1. Whenever the United States of America, pursuant to federal law or any rule or regulation promulgated thereunder, makes available to the state of Minnesota or any department, agency, governmental subdivision, or other instrumentality thereof funds for any purpose and no state agency has been otherwise designated by law to apply for, receive, and accept such federal funds, the governor is hereby designated as the state agency for such purpose.
- Subd. 2. The governor may designate a state agency or agencies to act for him in applying for, receiving, and accepting federal funds under the provisions of subdivision 1. Such designation of a state department or agency shall be filed in the office of the secretary of state.
- Subd. 3. The governor or any state department or agency designated by him shall comply with any and all requirements of federal law and any rules and regulations promulgated thereunder to enable the application for, the receipt of, and the acceptance of such federal funds. The expenditure of any such funds received shall be governed by the laws of the state except insofar as federal requirements may otherwise provide, All such moneys received by the governor or any state department or agency designated by him for such purpose shall be deposited in the state treasury and are hereby appropriated annually in order to enable the governor or the state department or agency designated by him for such purpose to carry out the purposes for which the funds are received. None of such federal moneys so deposited in the state treasury shall cancel and they shall be available for expenditure in accordance with the requirements of federal law.

[1965 c 901 s 87]

MEMBERSHIP OF THE STATE PLANNING COUNCIL

REPRESENTATIVE OF FEDERALLY ASSISTED PROGRAMS	REPRESENTATIVE NAME	POSITION IN STATE AGENCY	NAME OF STATE AGENCY	TERM OF APPOINTMENT FROM TO
MENTAL RETARDATION AND/OR DD PROGRAMS EDUCATION FOR THE HANDICAPPED, VOCA- TIONAL AND OTHER REHABILITATION PROGRAMS	Edwin Opheim	Assnt Comm	Dept Econ Sec Div Voc Rehab	Permanent
PUBLIC ASSISTANCE				
MEDICAL ASSISTANCE SOCIAL SERVICES				
MATERNAL AND CHILD HEALTH	Richard Nelson	Dir Crippled Children Svcs	Dept Health	Permanent
CRIPPLED CHILDREN'S SERVICES	Richard Nelson	11	11	11
COMPREHENSIVE HEALTH PLANNING	Richard Nelson	"	".	"
MENTAL HEALTH SERVICES				

OTHER REQUIRED REPRESENTATION	REPRESENTATIVE NAME	TITLE	ORGANIZATION		1 OF NTMENT TO
HIGHER EDUCATION LOCAL GOVERNMENTAL AGENCIES	Bruce Balow		Univ of Minn	1/78	1/81
NON-GOVERNMENTAL AGENCIES	Betty Hubbard		St. Paul Pub Schools	1/77	1/80
OTHER GROUPS CONCERNED WITH DD:	Glen Samuelson Ben Kilgore E Silbernagel Linda Yates Bonníe Ford		U.S. Social Security Adm	1/79 1/79 1/80 1/78 1/78	1/82 1/82 1/83 1/81 1/81

1.3	MEMBERSHIP OF THE STATE	PLA	NNI	NG (JOUN	CIL				
	AND THEIR REPRESENTATIVE THE MEMBERSHIP OF THE S								HALF	
PERSON(S) WITH		FU	NCT	1 ON A	AL D	ISA	BILI	ΤY		
DEVELOPMENTAL DISABILITIES	ADDRESS	SELF-CARE	LANGUAGE	LEARNING	MOBILITY	SELF-DIR	LIVING	ECONOMIC	APPOI	RM OF NTMENT
NAME		SE	2	=	皇	SE	=	18	FROM	TO
Janice Den Hartog Mick Joyce Raymond Lundgren Richard Ramberg	St. Paul Marshall St. Paul Minneapolis								1/80 1/80 1/79 1/79	1/83 1/83 1/82 1/82
PERSON(S) REPRESENTING INDIVIDUALS WITH MENTAL IMPAIRING CONDITIONS	ADDRESS		(MU MME	LAT IND ST DIA		TERM OF APPOINTMEN				
NAME					·				FROM	T0
Ben Bryant Kathleen Berland Mary Hinze Marvin Tritz Tom Emery Chet Oden Barbara H. Dawson	Belle Plaine Milaca St. Paul Dumont Mahtomedi St. Paul Duluth								1/80 1/78 1/79 1/78 1/79 1/79 1/80	1/83 1/81 1/82 1/81 1/82 1/82 1/83
OTHER REPRESENTATIVES OF INDIVIDUALS WIT DEVELOPMENTAL DISABILITIES NAME	TH ADDRESS		RE		10N:					RM OF INTMEN
Dona Caswell Judy Graves Dottie Spencer	Osseo Worthington Madelia								1/79 1/79 1/79	1/82 1/82 1/82

1.4 PROFESSIONAL STAFF ASSIGNED TO THE COUNCIL

Developmental Disabilities Planning Office
Minnesota State Planning Agency
200 Capitol Square Building
550 Cedar Street
Saint Paul, Minnesota 55101
612/296-4018 - TTY 612/296-9962

MARYLEE FITHIAN

Director, Developmental Disabilities Planning Office Educational Backround: B.S., M.A., abd Ph.D. 25 Years of Work Experience in Human Services-related Fields 4 Years with the State DD Planning Office

ROSEANN FABER

Planner II

Educational Backround: B.A, M.S.W.

8 Years of Work Experience in Human Services-related Fields

5 Years with the State DD Planning Office

LEW MILLER

Planner II

Educational Backround: B.S., M.A.

17 Years of Work Experience in Human Services-related Fields One-plus Years with the State DD Planning Office

ROGER O. STRAND

Planner III

Educational Backround: B.A., M.S.W.

17 Years of Work Experience in Human Services-related Fields 8 Years with the State DD Planning Office

FRANK THIMMESCH

Planner II

Educational Backround: B.A., M.S.

17 Years of Work Experience in Human Services-related Fields One-plus Years with the State DD Planning Office

1.5 STATE ADMINISTERING AGENCY

The State agency responsible for the administration of the developmental disabilities program in Minnesota is the State Planning Agency. The person who is the appointed representative of the agency and who is responsible for the actions of the agency is:

ARTHUR SIDNER, Director Minnesota State Planning Agency 101 Capitol Square Building 550 Cedar Street Saint Paul, Minnesota 55101

1.5.1 DESCRIPTION OF THE DD ADMINISTRATIVE AGENCY AND PROGRAM UNIT

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

The purpose of the State Planning Agency is to assist in the management of the State's planning process, and to provide problem-solving assistance to the Governor and the Legislature. The agency's programs are designed to help the Governor and the Legislature analyze issues, formulate policy and develop programs; assist in the coordination of state activities and programs; provide planning and technical assistance to local and regional units; and provide a basic framework of data, projections, and future assumptions to guide the planning efforts of state agencies.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

The purpose of the State Planning Agency is accomplished through four programs. The first is State Planning and Development. The goal of this program is to provide services to the executive and legislative branches of Minnesota State government to insure: 1) effective policy formulation; 2) the preparation of a systematic strategy for state growth and development; 3) effective coordination of state programs and federal grants-in-aid; and 4) effective planning by other state agencies (by providing planning information and technical assistance).

The second program is Functional Area Planning. The goal is to engage in a systematic planning process in the areas selected, identifying issues, gathering relevant information, and portraying alternative solutions. In several instances, the planning process is matched with a grant-in-aid program. Four functional areas are included: Comprehensive Health Planning, Developmental Disabilities Planning, Environmental Planning, and Human Resources Planning. In addition, the administration of the Environmental Quality Board is included under this program.

The third program is Technical Assistance. The goal is to assist local governments and regional units to establish a planning capacity and to improve their management capability and utilization of federal grants-in-aid.

A fourth program is General Administration, which provides executive management, program guidance and administrative services to the activities of the State Planning Agency.

The primary clientele of the agency are the Governor and members of the Legislature, other state agencies, and regional and local units of government.

PROGRAM: FUNCTIONAL AREA PLANNING AGENCY: STATE PLANNING AGENCY

PROGRAM PURPOSE: The State Planning Agency engages in selected planning activities where the structure of state government precludes the assignment of these planning activities to a single department or agency. The purpose of this program is to engage in a systematic planning process in the areas selected, identifying issues, gathering relevant information, and portraying alternative solutions. In several instances, the planning process is matched with a grant-in-aid program. Four functional areas are included: Comprehensive Health Planning, Developmental Disabilities Planning, Environmental Planning, and Human Resources Planning.

OPERATION: Selected results of these activities include public information and grants to aid the developmentally disabled, designation of health systems agencies, review and approval of capital investment for health facilities and equipment, grants for health research, examination of declining enrollments in schools and teacher mobility, a special study of services to the hearing impaired, development of a land use planning process and the Minnesota Land Management Information System, designation of critical areas, and siting of power plants and transmission lines.

CLIENTELE: The clientele of the program are the Governor, Legislature, other state agencies, and regional and local units of government. This program has associated with it several citizens' committees: Citizen's Advisory Committee to the Environmental Quality Board, Governor's Planning Council on Developmental Disabilities and the Statewide Health Coordinating Council.

ACTIVITY: HUMAN RESOURCES PLANNING PROGRAM: FUNCTIONAL AREA PLANNING AGENCY: STATE PLANNING AGENCY

ACTIVITY DESCRIPTION: This activity addresses policies and needs which arise from the State's commitment to decentralize decision-making in human services (public assistance, social services, employment services, health, corrections) and education. Initiatives are required which assist policy bodies in assessing the total range of needs and resources to improve management and funding decisions at state and local levels. This activity: 1) conducts policy studies; 2) develops planning and management assistance material; 3) provides technical assistance;

4) coordinates planning efforts among state agencies; and 5) develops data sources and information which support interagency, cross program and intergovernmental planning and management.

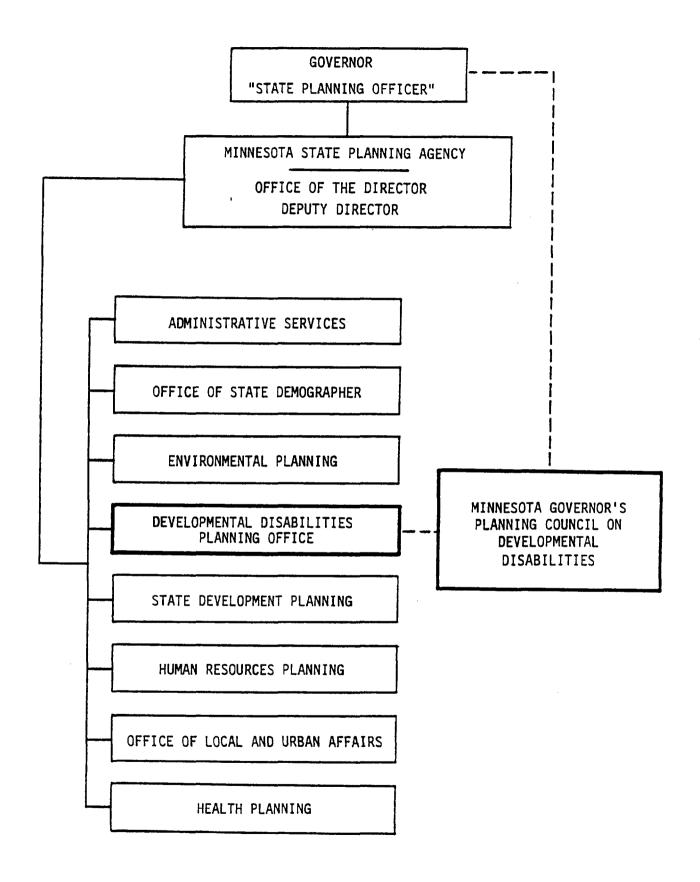
ACTIVITY OBJECTIVES

- 1. Provide management and planning materials and assistance to state and local human services, education agencies and officials.
- 2. Complete implementation of planning and data system for improving human services management and policy analysis and: 1) publish annual statistical county profiles of poverty levels, need for services, resources available, personnel, etc.; 2) produce reports describing distribution of need, expenditures and resources available for special populations, e.g., developmentally disabled, elderly, personpower; 3) prepare special analysis at the request of the Governor, legislative committees or agencies.
- 3. Conduct policy studies resulting in reports to the Governor's Office, Legislature or State agency heads; such as: 1) use of existing data sources for incidence-prevalence estimates of handicapping conditions; 2) relationship between post-secondary education resources and regional economic and cultural development; 3) cost to local government of collective bargaining; 4) scope of bargaining in the public sector; 5) local government tax burdens and relationship to state human services subsidies; 6) demographic impact on demand for and cost of social services and public assistance; 7) adequacy of education curricula in small school districts; 8) state and local management needs for monitoring the decentralized human services delivery system.

1.5.2 DESCRIPTION OF THE STATE AGENCY-STATE PLANNING COUNCIL RELATIONSHIP

As set forth in the Governor's Executive Order (No. 79-32), the State Planning Agency is the designated state agency which acts "...for the Governor in applying for, receiving, accepting, and expending federal funds granted to the State of Minnesota by Public Law 91-517, as amended; and, ..." is the agency "...designated as the responsible agency to provide staff and other administrative assistance to the Governor's Planning Council on Developmental Disabilities, and to carry out all other responsibilities relating to the developmental disabilities program as required under state and federal law."

The Developmental Disabilities Planning Office within the State Planning Agency is the administrative unit responsible for the administration of the annual State Plan and the federal monies which flow to the State under DD legislation. The DD Planning Office also provides staff support to the Governor's Planning Council on Developmental Disabilities. The director of the State DD Planning Office serves as the executive director of the Council; planners and clerical staff within the State Office perform staff support functions and provide administrative/technical assistance to the Council and its committees.



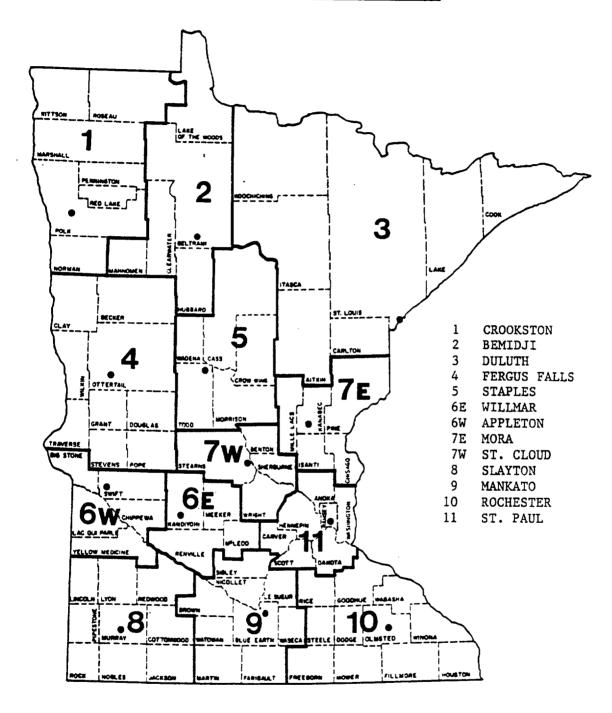
"DEVELOPMENT REGIONS" REGIONAL DEVELOPMENT COMMISSIONS

REGION ONE	REGION FIVE	REGION EIGHT
KITTSON	CASS	COTTONWOOD
MARSHALL	CROW WING	
NORMAN	MORRISON	JACKSON LINCOLN
PENNINGTON	TODD	
POLK	WADENA	LYON
RED LAKE	WADENA	MURRAY
ROSEAU		NOBLES
ROSEAU		PIPESTONE
•	BECION CITY E	REDWOOD
	REGION SIX-E	ROCK
REGION TWO	KANDIYOHI	
	McLEOD	
BELTRAMI	MEEKER	REGION NINE
CLEARWATER	RENVILLE	
HUBBARD		BLUE EARTH
LAKE OF THE WOODS		BROWN
MAHNOMEN		FARIBAULT
	REGION SIX-W	LeSUEUR
·		MARTIN
	BIG STONE	NICOLLET
REGION THREE	CHIPPEWA	SIBLEY
	LAC QUI PARLE	WASECA
AITKIN	SWIFT	WATONWAN
CARLTON	YELLOW MEDICINE	
COOK		
ITASCA		
KOOCHICHING		REGION TEN
LAKE	REGION SEVEN-E	
ST. LOUIS		DODGE
	CHISAGO	FILLMORE
	KANABEC	FREEBORN
	ISANTI	GOODHUE
REGION FOUR	MILLE LACS	HOUSTON
	PINE	MOWER
BECKER		OLMSTED
CLAY		RICE
DOUGLAS		STEELE
GRANT	REGION SEVEN-W	WABASHA
OTTER TAIL	•	WINONA
POPE	BENTON	
STEVENS	SHERBURNE	
TRAVERSE	STEARNS	
WILKIN	WRIGHT	REGION ELEVEN
		ANOKA

CARVER
DAKOTA
HENNEPIN
RAMSEY
SCOTT

WASHINGTON

MINNESOTA DEVELOPMENT REGIONS



REGIONAL DEVELOPMENT COMMISSIONS:

- 1 NORTHWEST
 2 HEADWATERS
 3 ARROWHEAD
 4 WEST CENTRAL
 5 REGION FIVE
 6E SIX EAST
 6W UPPER MINNESOTA VALLEY
- 7E EAST CENTRAL
- 7W CENTRAL MINNESOTA
- 8 SOUTHWEST
- 9 REGION NINE
- 10 SOUTHEASTERN MINNESOTA
- 11 METROPOLITAN COUNCIL

REGIONAL DEVELOPMENT COMMISSION CHAIRPERSONS AND STAFF DIRECTORS

REGION	CHAIRPERSON	EXECUTIVE DIRECTOR
Northwest (1)	Ervin Strandquist Newfolden, MN 56739 218/874-7305	Eugene Abbott 425 Woodland Avenue Crookston, MN 56716 218/281-1396
· Readwaters (2)	Ralph Moberg '819 America Avenue Bemidji, MN 56601 218/751-5592	John Ostrem Mental Health Building Box 584 Bemidji, MN 56601 218/751-3108
Arrowhead (3)	Innis (Sonny) Nesbitt - 200 Arrowhead Place 211 W. Second St. Duluth, MN 55802 218/722-5545	David Martin 200 Arrowhead Place 211 W. Second St. Duluth, MN 55802 218/722-5545
West Central (4)	Andy Leitch Route 1 Underwood, MN 56586 218/826-6969	James Myhra Administration Building Fergus Falls Community College Fergus Falls, MN 56537
Region Five (5)	Felix Kujawa Buckman, MN 56317 612/468-6593	David Loch 611 Iowa Avenue Staples, MN 56479 218/894-3233
Six East (6E)	O. Homer Bach Atwater, MN 56209 612/974-8837	Eugene Hippe City Auditorium 311 West 6th Street Willmar, MN 56201 612/235-8504
Upper Minnesota Valley (6W)	Thomas Johnson Route 1 Milan, MN 56262 612/734-4769	Dennis Dahlem 323 West Schlieman Appleton, MN 56208 612/289-1981
East Central (7E)	Richard L. Anderson 800 North 9th Avenue Princeton, MN 55371 612/389-4922	Philip DelVecchio 119 South Lake St. Mora, MN 55051 612/679-4065

REGION	CHAIRPERSON	EXECUTIVE DIRECTOR
Central Minnesota (7W)	Ralph Thompson R. R. 3, Box 141 Belgrade, MN 56312 612/346-2637	Otto Schmid 2700 1st Street North St. Cloud, MN 56301 612/253-7870
Southwest (8)	John Maurer Wabasso, MN 56293 507/342-5629	Jerry Chasteen Box 265 Slayton, MN 56172 507/836-8549
Region Nine (9)	Kenneth Albrecht R. R. #2 North Mankato, MN 56001 507/625-8428	Terence Stone 120 South Broad Street Mankato, MN 56001 507/387-5643
Southeastern Minnesota (10)	Charles Miller 1200 Prairie South Northfield, MN 55057 507/645-4105	Donald Hann 301 Marquette Bank Building South Broadway at 2nd St. SE Rochester, MN 55901 507/285-2550
Metropolitan Council (11)	Charles Weaver 300 Metro Square Building 7th and Robert Street St. Paul, MN 55101 612/291-6359	

REGIONAL DD COORDINATORS

REGION 1 AND 2

Ms. Sari Clark Northwest R.D.C. 425 Woodland Ave. Crookston, MN 56716 218/281-1396

REGION 7-E

Mr. Phil Schroeder
East Central R.D.C.
Kanabec County Courthouse
18 N. Vine Street
Mora, MN 55051
612/679-4065

REGIONS 6 AND 8

Mr. John Walsh Six East R.D.C. City Auditorium 311 West 6th St. Willmar, MN 56201 612/235-8504

REGION 9

Ms. Sarah Johnston-Rodriguez Region Nine R.D.C. P.O. Box 3367 120 S. Broad Street Mankato, MN 56001 507/387-5643

REGION 10

Ms. Marilyn Bothun Southeastern Minnesota R.D.C. 301 Marquette Bank Building 2nd St. S.E. & S. Broadway Rochester, MN 55901 507/285-2583

REGION 11

Ms. Toni Lippert
Metro Health Board
300 Metro Square Building
7th & Robert Sts.
St. Paul, MN 55101
612/291-6364

REGION 11

Mr. Joe Banda Metro Health Board 300 Metro Square Building 7th & Robert Sts. St. Paul, MN 55101 612/291-6365

1.5.3 - Fiscal Control

Funds received by the State of Minnesota from the Federal government under P.L. 95-602 are controlled basically by the computerized state-wide accounting system. Accounting personnel of the State Planning Agency assigned to the Developmental Disabilities Planning Office maintain manual accounts of the funds, according to standard procedures, and make quarterly reports to the Regional DD office. There is additional control of funds granted to various demonstration projects by the Agency through financial reports required of each project quarterly as well as yearly audits of each project.

1.5.4 - Administration of the State Plan

The Director of the Council, staff of the Agency, and Committees of the Council all have established work programs, as indicated in Section V of this Plan and provided in previous Plans, and responsibilities that are designed to properly and efficiently administer the State Plan. Operational policies of the Council and the Agency are reviewed regularly and revised as needed.

1.6 - Application Procedures for Subgrantees

When an RFP has been developed, it is announced in three ways. A brief statement of its purpose and important parts is published in the <u>State Register</u>. A like announcement is mailed to an established mailing list of interested agencies and individuals and the regional coordinators under contract with the agency also receive copies. Agencies wishing to see the RFP are required to request it by mail. A RFP packet contains general instructions for preparing an application, a copy of RFP specifications, forms for budget and instructions on what is included in each line item,

forms to indicate the proposed work program of the project, and a form stating the general operating standards of grant administration that must be signed by an official of the applicant agency agreeing to compliance with those standards. When individual habilitation plans are to be a part of the project, a sample of that requirement is also included.

At the closing date specified in the RFP, the review process begins. Staff of the Agency make up a check list/review sheet that each reviewer must complete. The Grant Review Committee of the Council reviews all applications and makes recommendations of approval or rejection to the Council and the Council in turn does the same to the Agency. At the same time, independent review persons outside the state are contacted to review some or all of the applications when it is appropriate. Staff of the agency review the applications from their point of view of administrative responsibility. Final decision on what applications to fund and contract with is made by the Agency after full consideration of all reviews.

Applicants who are not to be funded are notified as soon as the decision is made.

Applicants who are chosen for funding are also notified and the process of contract negotiation begins. A staff person is assigned as project officer; this person will be responsible for the management of the project through its existence, and is the contact person in the agency for the grantee. The first task of the project officer is to meet with grantees to come to agreement on such items as parts of the work program that may need to be revised, parts of the budget that might need adjustment. All changes

in the original application are documented and become part of the total contract.

The project officer then oversees the movement of the contract through the state process of approval by the State Planning Agency Director, Attorney General, and Departments of Administration and Finance.

Funds for each quarter of activity are provided in advance by the Agency on the basis of estimated expenditure reports submitted by the grantee. At the end of each quarter the grantee must submit activity reports based on the work program along with their request for funds. At least one site visit by the project officer and Council Grant Review Committee members is conducted during the time the project is active. Final reports, including any manuals or data that were required by the contract, and audits are required.

1.7 - State Planning Process

This State Plan was developed by the State Developmental Disabilities Planning Office in conjunction with the State Developmental Disabilities Council.

During its annual two-day Planning Conference, the Council, with input from its various committee members, establishes its priorities and work program for the coming year. Fiscal year State Plan goals and objectives are also formulated at that session. The conference is conducted as an open, public forum-as are all of the Council's procedings. Interested persons in attendance at the conference/meeting have participated in the Council's discussions and have had input into the Council's decisions.

Once compilation of the data required by the developmental disabilities legislation/regulations is completed by the staff, the draft of the Plan is submitted to the Council for its review and comment. The Plan is then submitted to the Director of the State Planning Agency and the A-95 state clearinghouse for final review and comment by interested agencies and organizations in the state. After the review process is completed at the state level, the Plan is sent to the Regional Office in Chicago for approval and/or final action by the Department of Health and Human Services.

1.8 - Evaluation of Plan by Council

The Council evaluates the implementation of the State Plan in the following ways. Much of Council activity is accomplished through standing or ad hoc committees. During the regular monthly Council meetings, committee chairpersons give activity reports and present items for Council action. A quarterly report is compiled by the staff that details all accomplishments of committees, projects receiving grants, special conference activities and this is sent to all Council members. Council members are invited to share in the site visits to grantees projects and are expected to complete evaluation forms that become a part of the project files. Projects receiving funding, whose activities may be of interest to the Council, are invited to make presentations to the Council at their meeting. Finally, there is an annual review of the goals and objectives of the plan at the Spring planning session.

A new source of documentation will be in effect beginning September 1980. Called a "Profile of Council Activities", it is a two-page form used to indicate Council impact. All major activities, publications, conferences, projects, and studies will be evaulated through the use of this profile.

1.9 - Council Accomplishments

Each quarter, staff of the Agency compile a report, the same one mentioned in Paragraph 1.8, which is sent to the Regional Office. Included in the report are the expenditures of each project receiving grants, status sheets on each project that indicate the number of developmentally disabled persons served and progress in the individual work programs, activities of each Council committee. These reports comprise over 80 double-sided pages each and are too voluminous to include in this plan. Copies of each Quarterly Report are widely disseminated and are available upon request to the Developmental Disabilities Office of the State Planning Agency.

2.1 - Definition of Developmental Disabilities

Since Public Law 95-602 gave a new meaning to the term "developmentally disabled" in 1978, members of the Council, staff of the Agency and service providers have sought to apply the various aspects of the definition to their work with, and for, the disabled who are encompassed by the law. Although previous definitions are still used in a comparative way, the definition as given below is used in determining who is to be served, the number in that population, and the services to be provided.

The term "developmental disabilities" means a severe, chronic disability of a person which:

- a. is attributable to a mental or physical impairment or combination of mental and physical impairments;
- b. is manifested before the person attains age twenty-two;

c. is likely to continue indefinitely;

- d. results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency;
- e. reflects the person's need for a combination and sequence of special, inter-disciplinary, or generic care, treatment, or other services which are of lifelong or extended duration and are individually planned and coordinated.

The major problem with the definition has been in determining what a substantial functional limitation is for each of the seven areas of life activity. After considerable study of the problem, it was determined that the best definitions for use in Minnesota at this time were those given in a publication of the EMC Institute by Elizabeth Boggs and Lee Henney.

A substantial functional limitation definition for each of the areas of life activity included in P.L. 95-602 is given below.

- a. Self-Care Substantial Functional Limitation
 A person who has a long-term condition which requires that person to
 need significant assistance to look after personal needs such as food,
 hygiene and appearance. Significant assistance may be defined as assistance at least one-half of the time for one activity or a need for some
 assistance in more than one-half of all activities normally required
 for self-care.
- b. Receptive and Expressive Language Substantial Functional Limitation A person who has a long-term condition which prevents that person from effectively communicating with another person without the aid of a third person, a person with special skill or with a mechanical device, or a long-term condition which prevents him/her from articulating his thoughts.
- c. Learning Substantial Functional Limitation
 A person who has a long-term condition which seriously interferes with
 cognition, visual or aural communication, or use of hands to the extent
 that special intervention or special programs are required to aid that
 person in learning.

- d. Mobility Substantial Functional Limitation A person who has a long-term condition which impairs the ability to use fine and/or gross motor skills to the extent that assistance of another person and/or a mechanical device is needed in order for the individual to move from place to place.
- e. Self-Direction Substantial Functional Limitation
 A person who has a long-term condition which requires that person to
 need assistance in being able to make independent decisions concerning
 social and individual activities and/or in handling personal finances
 and/or protecting his/her own self-interest.
- f. Capacity for Independent Living Substantial Functional Limitation A person who has a long-term condition that limits the person from performing normal societal roles or which makes it unsafe for that person to live alone to such an extent that assistance, supervision or presence of a second person is required more than half the time.
- g. Economic Self-Sufficiency Substantial Functional Limitation A person who has a long-term condition which prevents that person from working in regular employment or which limits his or her productive capacity to such an extent that it is insufficient for self-support.

An early concern with this section of the definition was that its application would deprive individuals once receiving services under a former definition from continuation of those services. To the best of our knowledge, this has not happened.

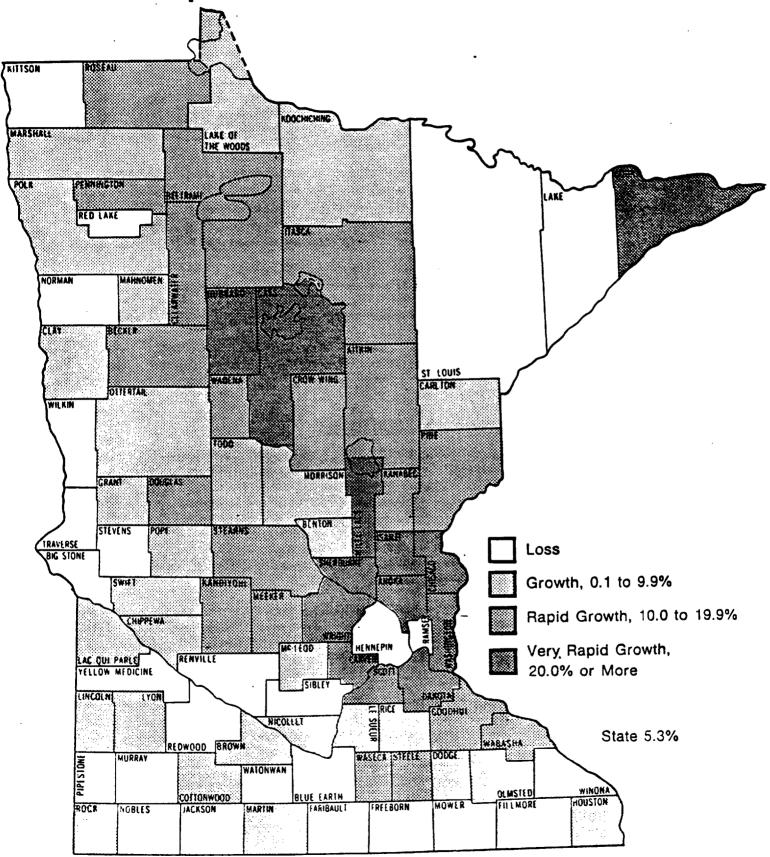
Prevalence Rates, Estimates and Projections

Previous to the P.L. 95-602 definition, DD population prevalence rates were based upon percentages of the total population using widely accepted figures for each of the disabilities listed in P.L. 94-103. The new definition did not entirely change this process for planning in Minnesota, but has resulted in a single percentage, 2.75%, being used to determine the population to be served. When applied to large portions of the population, such as one of the regions, the numbers that result have been viewed as accurate for planning purposes. They are, however, questionable to smaller county populations especially in a rural setting.

Nearly half of the population of Minnesota resides in Region 11, the Metropolitan area. There is evidence of migrations from out-state regions by developmentally disabled individuals in order to receive the services that this larger base of population can support, as well as to take advantage of special transportation for the disabled available in the Metro area.

Figure 1, the first page following this narrative, indicates the population change in Minnesota from 1970 to 1978 on a county basis. The rate of growth shown in that figure is continuing at about the same level. The concentration of population in the Metro region will mean a continuing demand for services for the disabled. At the same time, counties experiencing loss in population may find it increasingly difficult to provide services to the disabled, and transportation of the disabled to services will be an increasing problem.

Population Change, 1970-1978



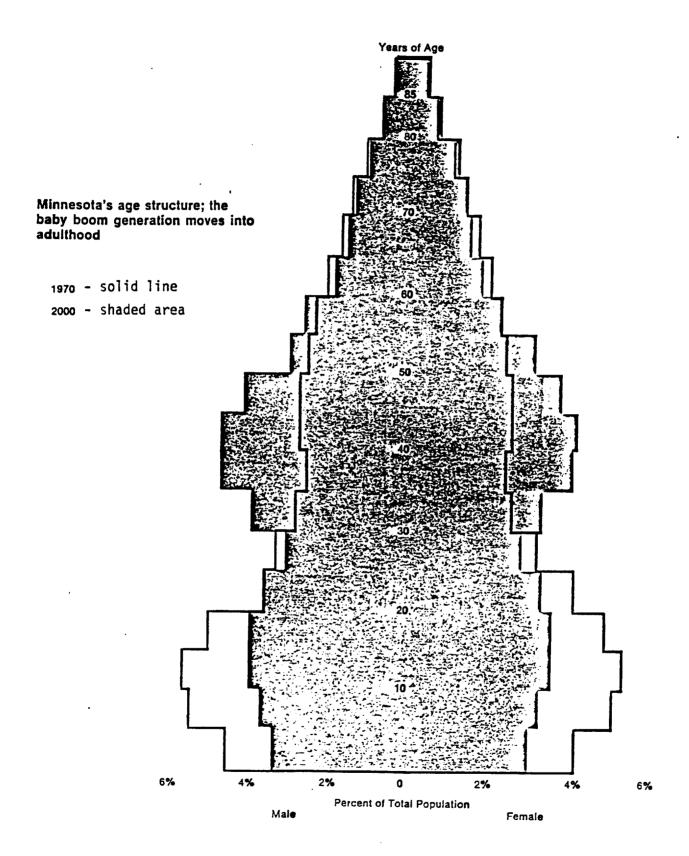


Figure 2 presents another factor; the changing age structure of the population as the baby boom generation moves into adulthood. This change has yet to be fully analyzed by planners for the DD population. However, one unavoidable conclusion is that as the school age DD population ages, there will be a greater need for work activity services and for alternatives to continued residence in the individual's family setting.

2.2 - Service Needs

The Minnesota Information System project (MIIS) was conducted in 1978-79 over a period of about nine months throughout the State of Minnesota. It represents a multi-agency survey effort aimed at identifying the characteristics and service needs of developmentally disabled people in the state. Surveys on 12,167 individuals were collected and the information placed on computer. The first request of the data produced regional and state-wide figures that appear on lines 1, 2, 3, 5 of the following tables.

Although the MIIS does present a sizeable sample of the DD population, there is one limitation to be kept in mind as it is used. Most of the surveys were done on individuals residing in institutions and group homes. The school age population is not well represented outside the Metro, Region 11, area.

The second request of the MIIS data dealt with the portion of the form that allowed respondents to indicate the most important services they felt would be needed within the next two years, as well as the most important services they presently were receiving. Using a percentage calculation, the present and future needs were applied to the estimated DD population. The numbers that resulted are shown in lines 4 and 6 of the tables and indicate the number of DD individuals who need the various services.

Two maps follow the tables. The first shows the location, by county, of respondents to the MIIS. The second shows county based estimates of the DD population for the plan year.

1980 SUMMARY OF MIIS DATA AND DD POPULATION PROJECTIONS

STATE TOTAL

		A	В	С	D	E	F	G	н	I	J	К	
		POPULATION	HIIS DD	MIIS 0-3	MIIS 4-21	MIIS 22-49	MIIS 50+	EST. 0-3	EST. 4-21	EST. 22-49	EST. 50+	EST DD 2.75 %	
POPULATION	#1	4,070,600	12,167	351	3,120	6,444	2,223	_	_	1	-	111,942	
								<u> </u>	/		<u> </u>		
		A .		В		С		מ	-	E		F	
		PRIMARY -	MR PRIM	IARY - CP	,	PRIMARY - E	PRI	AARY - A	PRIMAR	Y & SEC.	PRIM	RY & SIG.	
DISABILITY	#2	10,881		400		354		21		-		_	
		٨	В		С	D	Е		F	G		Н	
		FULL SUPERVISION	SPEC. LIVI ARRANGEMEN		OULT CARE	ADULT ED/TRAININ	SCHOOL ED/TR/		PRE-SCHOOL D/TRAINING	SHELTER EMPLOYN		OTHER EMPLOYMENT	
DIRECT SERVICE	#3	13,605	13,907	3,	277	3,234	2,1	83	1,398	752		507	
DD SERVICE POPULATION	#4	60,626	45,673	20,	332	21,938	21,0	09	7,596	17,990		4,889	
			,							· • · · · · · · · · · · · · · · · · · ·			
		A	В		С	D	E		F	G		Н	
		IDENTI- FICATION	COUNSELING	PRO	rective	FOLLOW-ALON	TREAT	ENT	RECREATION	PERSONA CARE		TRANS- PORTATION	
SUPPORT SERVICE	i¦5	14,879	1,866	2	,232	11,146	38,	078	6,631	5,0	49	4,911	
DD SERVICE POPULATION	#6	154,297*	20,203	18	,542	20,000	366,	775*	59,155	22,2	16	39,327	

Population estimates: "REVISED POPULATION PROJECTIONS FOR MINNESOTA COUNTIES" Saint Paul: Minnesota State Planning Agency/Office of State Demographer, May 1979.

^{*} See Table 2-3 (page 46), Table 2-4 (page 47) and Table 2-6 (page 49).

REGION ONE 1980 SUMMARY OF MIIS DATA AND DD POPULATION PROJECTIONS

		A POPULATION	В	IS M		D MIIS	E HIIS	F HIIS	G EST.	E	Н 5т.	I EST.	J EST	. EST	DD
		POPULATION	DI	D	0-3	4-21	22-49	50+	0-3	4	-21	22-49	50	+ 2.75	
POPULATION	#1	102,000	324		6	54	184	78	-	-	-	-	-	2,80)5
		A .		В			C	ם		-		E	F		
		PRIMARY -	MR	PRIMARY	- CP	P	RIMARY - E	PRII	MARY - A		PRIHAR	Y & SEC.	PRI	MARY & SIC	
DISABILITY	#2	303		1	0		5		_			-		-	
			-										.4		
		A	,	В	С		D ·	E	!	F	•	G		н	
		FULL SUPERVISION		C. LIVING ADU			ADULT ED/TRAINING	SCHOOL ED/TR	L AGE NINING	PRE-SC ED/TRA		SHELTER EMPLOY		OTHER EMPLOYMEN	NT
DIRECT SERVICE	#3	458	4	66	107		81	1:	12)	7		13	
DD SERVICE POPULATION	#4	1,876	8	43	399		414	100	100		86		}	120	
•	•														
		٨	1	В	C		D	E		F	,	G		н	
		IDENTI- FICATION	COUNSE	ELING	PROTECT	IVE	FOLLOW-ALONG	TREATI	1ent	RECRE	ATION	PERSON/ CARE	ν L	TRANS- PORTATION	
SUPPORT SERVICE	# 5	325	2	6	52		315	1,	592	111		74		114	
DD SERVICE POPULATION	#6	2,946	26	9	491		-			98	39	456		823	

REGION TWO

1980 SUMMARY OF MIIS DATA AND DD POPULATION PROJECTIONS

		A	В		С	D	E	F	G	н	I	J	к		
		POPULATION	MI IS		11S 0-3	MI15 4-21	HIIS 22-49	M11S 50+	EST. 0-3	EST. 4-21	EST. 22-49	EST. 50+			
POPULATION	#1	64,600	202		1	36	119	56	-	-	-	_	1,777		
		A		В			C	D		-	E		F		
		PRIMARY -	MR I	PRIMARY	- CP	P	'RIMARY - E	PRI	MARY - A	PRIMAR	Y & SEC.	PRIM	ARY & SIG.		
DISABILITY	#2	197		5			4		_		_		-		
		٨	В	В		В		C	D	E		F	G		Н
		FULL SUPERVISION		LIVING AD			ADULT ED/TRAINING	SCHOO ED/TR	L AGE AINING	PRE-SCHOOL ED/TRAINING	SHELTER EMPLOYI		OTHER EMPLOYMENT		
DIRECT SERVICE	#3	255	98	В	71	l	68	2	2	21	14		4		
DD SERVICE POPULATION	#4	1,094	564	664 41		1	485	19	4	141	238	40			
		A	В	,	(c	D	E		F	G		н		
		IDENTI- FICATION	COUNSE	LING	PROTE	CTIVE	FOLLOW-ALONG	TREAT	MENT	RECREATION	PERSON. CARE		TRANS- PORTATION		
SUPPORT SERVICE	#5	508	57	57 300 202 788 153		157	87		116						
DD SERVICE POPULATION	#6	2,361	46:	2	37	72	_	-		1,023	284		600		

REGION THREE

1980 SUMMARY OF MIIS DATA AND DD POPULATION PROJECTIONS

		A POPULATION	М		C IIIS 0-3	D MIIS 4-21	E HIIS 22-49	F MIIS 50+	G EST. 0-3	H EST. 4-21	I EST. 22-49	J EST.	
POPULATION	#1	349,500	1,2		42	273	687	326	-	-	-	-	9,611
		A .		В			С		D	-	E		F
		PRIMARY -	MR	PRIMARY	- CP	F	PRIMARY - E	PRI	ARY - A	PRIMAR	Y & SEC.	PRIM	ARY & SIG.
DISABILITY	#2	1,193		5	5		37		2		···		-
		A		В			D	E	i	F	G		н
		FULL SUPERVISION		. LIVING ADUL' NGEMENTS DAY CA			ADULT ED/TRAINING	SCHOOL ED/TR		PRE-SCHOOL ED/TRAINING	SHELTE:		OTHER EMPLOYMENT
DIRECT SERVICE	#3	1,356		717	41	9	397	16:	2	143	90		33
DD SERVICE POPULATION	#4	4,930	4,	304	2,35	9	2,530	1,25	1,257		1,759		243
	•	A		В	С		D	E		F	G		Н
		IDENTI- FICATION	COUNS	SELING	PROTEC	TIVE	FOLLOW-ALONG	TREATI	ENT	RECREATION	PERSON/ CARE		TRANS~ PORTATION
SUPPORT SERVICE	# 5	1,527		33	15	7	1,248	4,4	63	666	520		438
DD SERVICE POPULATION	#6	11,960	23	31	1,09	5	_			4,645	1,665		2,586

1980
SUMMARY OF MIIS DATA
AND DD POPULATION PROJECTIONS

REGION FOUR

		A	В		С	D	E	F	G	н	I	J	к
		POPULATION	MT IS		IIS 0-3	MIIS 4-21	HIIS 22-49	MIIS 50+	EST. 0-3	EST. 4-21	EST. 22-49	EST.	
POPULATION	#1	199,800	629	1	6	106	407	131	_	-	-	-	5,495
													
		A		В	3		С		D	-	E		F
		PRIMARY -	HOR P	PRIMARY	- CP	P	RIMARY - E	PRI	iary – A	PRIMAR	Y & SEC.	PRIN	ARY & SIG.
DISABILITY	#2	613		1	1		12		-		-		_
												- 1	
		A	В		С		D	E		F	G		11
		FULL SUPERVISION	SPEC. L ARRANGE				ADULT ED/TRAINING	SCHOOL ED/TRA		PRE-SCHOOL ED/TRAINING	SHELTER EMPLOYN		OTHER EMPLOYMENT
DIRECT SERVICE	#3	679	760)	23	0	141	38		16	44		29
DD SERVICE POPULATION	#4	3,034	2,308	3	1,00	6	1,056	338		133	671		264
											·····		
		A	В		С		D	E		F	G		н
		IDENTI- FICATION	COUNSEL	LING	PROTEC	TIVE	FOLLOW-ALONG	TREATI	ient	RECREATION	PERSON/ CARE		TRANS- PORTATION
SUPPORT SERVICE	#5	587	102	2	13	3	629	2,7	91	257	177		232
DD SERVICE POPULATION	#6	5,508	830)	1,26	0	_	_		2,161	521		1,546

REGION FIVE

1980
SUMMARY OF MIIS DATA
AND DD POPULATION PROJECTIONS

		A POPULATION	н	B IIS P	C IIIS 0-3	D MIIS 4-21			F MIIS 50+	G EST. 0-3	H EST. 4-21	EST. 22-4		Ј sт. 50+	K EST DD 2.75 %
POPULATION	#1	130,400	51		4	107	271	1	149	-	- 4-21	-	-	-	3,586
									·······			. 	I		
		A .	1	1	В	:	C	l		D	-	E		F	
		PRIMARY -	MR	PRIMARY	- CP	PRIMARY - E			PRIM	ARY - A	PRIH	RY & SE	C. P	PRIMARY & S	
DISABILITY	#2	498			.3	11						_			-
		A FULL SUPERVISION				LT ARE	D ADULT ED/TRAINI	NG	E SCHOOL ED/TRA		F PRE-SCHOO ED/TRAININ		G LTERED LOYMENT		H DTHER PLOYMENT
DIRECT SERVICE	#3	530		576	16	51	138		73		52		36		21
DD SERVICE POPULATION	#4	1,868	1,	524	61	18	819		517		352	3	71		138
		_													
		A		В	C		D		E		F		G		н
		IDENTI- FICATION	COUNS	SELING	PROTE	CTIVE	FOLLOW-ALO	NG	TREATH	ent	RECREATIO		SONAL ARE		RANS- PATION
SUPPORT SERVICE	# 5	616		91	10)4	512		1,59	8	⁻ 246]	41		164
DD SERVICE POPULATION	#6	4,190	7	10	67	72	_		_		1,554	2	56		986

RECION SIX-E 1980 SUMMARY OF MIIS DATA AND DD POPULATION PROJECTIONS

		A POPULATION	B MIIS DD	C HIIS 0-3	D MIIS 4-21		F HIIS 50+	G EST. 0-3	H EST. 4-21	I EST. 22-49	J EST. 50+	K EST DD 2.75 Z	
POPULATION	#1	107,500	309	1	48	179	77	<u> </u>	_	-	-	2,956	
		A .	В			С		D	-	E		F	
		PRIMARY - MR PRI		ARY - CP		PRIMARY - E	PRI	MARY - A	PRIMAR	Y & SEC. PR		IMARY & SIG.	
DISABILITY	#2	283	7			13		-		-		-	
		A FULL SUPERVISION	B SPEC. LIVII ARRANGEMEN	G ADI	C ULT CARE	D ADULT ED/TRAINING	SCHOO ED/TR	L AGE	F G PRE-SCHOOL SHELT ED/TRAINING EMPLO			H OTHER EMPLOYMENT	
DIRECT SERVICE	#3	519	424	424 122		125	125 24		10	16		27	
DD SERVICE POPULATION	#4	1,917	947 662		2	683 206		6	13 67		677 250		
		A	В			D	E		F	G		Н	
		IDENTI- FICATION	COUNSELING			FOLLOW-ALONG	TREAT	HENT	RECREATION	PERSON/ CARE		TRANS- PORTATION	
SUPPORT SERVICE	<i>#</i> 5	692	25	35		273	884		205	131		187	
DD SERVICE POPULATION	#6	7,659	271	37	5				1,906	811		1,844	

REGION SIX-W

1980
SUMMARY OF MIIS DATA
AND DD POPULATION PROJECTIONS

		A	В	С	D	E	F	G	н	I	J,	K	
		POPULATION	MIIS DD	MIIS 0-3	MIIS 4-21		иііs 50+	EST. 0-3	EST. 4-21	EST. 22-49	EST. 50+		
POPULATION	#1	62,200	229	3	39	127	60	-	•	-	_	1,711	
		A	В			С		D	-	E		F	
		PRIMARY -	MR PRIHARY - CP			PRIMARY - B		HARY - A	PRIMAR	Y & SEC. PR		IMARY & SIG.	
DISABILITY	DISABILITY #2			4		4		-		-			
		A	В		C	D			F	G		н	
		FULL SUPERVISION	SPEC. LIVI ARRANGEMEN		ULT CARB	ADULT ED/TRAINING	SCHOOL AGE ED/TRAINING		PRE-SCHOOL ED/TRAINING	SHELTEI EMPLOYI		OTHER EMPLOYMENT	
DIRECT SERVICE	#3	190	187	187 89		88 32		2	13	23		12	
DD SERVICE POPULATION	#4	1,150	535	535 404		425 255		5	86 348		92		
							•						
·		A	В	ВС		D			F	G		н	
		IDENTI- FICATION	COUNSELING	PROT	ECTIVE	IVE FOLLOW-ALONG		HENT	RECREATION	PERSON/ CARE		TRANS- PORTATION	
SUPPORT SERVICE	# 5	242	28	3	34	224	872		155	155 76		154	
DD SERVICE POPULATION	#6	1,974	215	5 258		-		-	1,150	1,150 279		989	

1980 SUMMARY OF MIIS DATA AND DD POPULATION PROJECTIONS

REGION SEVEN-E

	A POPULATION	B MIIS DD	C MIIS 0-3	D MIIS 4-21	E HIIS 22-49	F HIIS 50+	G EST. 0-3	H EST. 4-21	I EST. 22-49	J EST. 50+	K EST DD 2.75 X	
POPULATION #1	97,900	338	2	80	181	74	_	-	-		2,692	
		 	·	·						· · · · · · · · · · · · · · · · · · ·		
	A .		В		. C	D		-	E		F	
	<u> </u>		MARY - CP	- CP PRIMARY - E		PRIMARY - A		PRIMAR	Y & SEC.	& SEC. PRIMARY &		
DISABILITY #2	303		10		7		1			-		
		~										
	A	В	<u> </u>	c	D	E		F	G		н	
:	FULL SUPERVISION	SPEC. LIV ARRANGEME		1	ADULT ED/TRAINING	SCHOOL ED/TR/		PRE-SCHOOL ED/TRAINING	SHELTER EMPLOYM		OTHER EMPLOYMENT	
DIRECT SERVICE #3	251	891	14	40	70	40	5	35	26		19	
DD SERVICE POPULATION #4	251	1,150	38	81	375	378	378		385		165	
									· I · · · · · · · · · · · · · · · · · ·			
	A	В	ВС		D		E		G	-	н	
	IDENTI- FICATION	COUNSELIN	G PROTE	CTIVE	FOLLOW-ALONG	TREATE	TREATMENT RE		PERSONAL CARE		TRANS- ORTATION	
SUPPORT SERVICE #5	639	24	45	5	318	80	8	151	203		122	
DD SERVICE POPULATION #6	5,022	172	341	1	-	-	-	1,196	263		818	

REGION SEVEN-W

1980 SUMMARY OF MIIS DATA AND DD POPULATION PROJECTIONS

		A	В		С	D	E	F	G	н	I	. 1	к
		POPULATION	MII		11S 0-3	MIIS 4-21		MIIS 50+	EST. 0-3	EST. 4-21	EST. 22-49	EST. 50+	EST DD 2.75 %
POPULATION	#1	220,900	560		17	147	307	121	-	-	1	-	6,075
		A .			3		C		D		E	ļ	F
		PRIMARY -	MR	PRIMARY	- CP		PRIMARY - E	PRĮ	HARY - A	PRIMAR	Y & SEC.	PRIHA	RY & SIG.
DISABILITY	#2	538			17		12		1		-		_
		A	ī	В		С	D	E		F	G]	H
		Full Supervision		LIVING ADULT EMENTS DAY CAI			ADULT ED/TRAINING	SCHOOL ED/TRA	L AGE AINING	PRE-SCHOOL ED/TRAINING	SHELTER EMPLOYN		OTHER EMPLOYMENT
DIRECT SERVICE	#3	660	3	62	1	75	5 145			88	25		22
DD SERVICE POPULATION	#4	3, 132	2,4	57	1,0	66	1,139	887		575	944		218
		٨	F	В	(c	D	E		F	G	Ì	н
		IDENTI- FICATION	COUNSE	ELING	PROTE	CTIVE	FOLLOW-ALONG	TREATI	ENT	RECREATION	PERSON/ CARE		TRANS- ORTATION
SUPPORT SERVICE	# 5	1,134	5	8	9	0	560	1,5	91	· 275	167		209
DD SERVICE POPULATION	#6	11,652	57	7	93	6	_			2,723	784	1	,972

REGION EIGHT

		A	В	С	D	E	F	G	н	ı	J	К
		POPULATION	MIIS DD	MIIS 0-3	MIIS 4-21		MIIS 50+	EST. 0-3	EST. 4-21	EST. 22-49	EST. 50+	EST DD 2.75 %
POPULATION	#1	142,200	447	8	81	264	94	-	-	-	-	3,911
										•		
		A .		В		С		D	-	E		F
		PRIMARY -	MR PR	IMARY - C	CP P	PRIMARY - E	PRI	MARY - A	PRIMAR	Y & SEC.	PRIMA	ARY & SIC.
DISABILITY	#2	· 405		16		11		_		-		-
		A	В		С	D	E		F	G		н
		FULL SUPERVISION	SPEC. LI		ADULT AY CARE	ADULT ED/TRAININ	SCHOO ED/TR	L AGE AINING	PRE-SCHOOL ED/TRAINING	SHELTER EMPLOYN		OTHER Employment
DIRECT SERVICE	#3	640	460		197	143	5	5	22	28		23
DD SERVICE POPULATION	#4	2,224	1,582	1	,106	1,116	50	1	118	747		210
					•			******				
		A	В		C	D	E		F	G		н
		IDENTI- FICATION	COUNSELI	NG PR	ROTECTIVE	FOLLOW-ALON	TREAT	MENT	RECREATION	PERSON/ CARE		TRANS- PORTATION
SUPPORT SERVICE	#5	633	79		44	425	1,	380	343	127	7	326
DD SERVICE POPULATION	#6	5,956	558		3 96	_			2,960	451	1 :	2,347

REGION NINE

		A	н		C	D			F HIIS	G Est.	H EST.	I EST.	J EST.	
			 		0-3	4-21 175		┿	50+	0-3	4-21	22-49	504	
POPULATION	#1	220,400	79	3	11		464	<u></u>	176					6,061
		A		•	В		С			D	-	E	ĺ	F
		PRIMARY -	HR	PRIMARY	r - CP		PRIMARY - 1	2	PRIM	IARY - A	PRIMA	RY & SEC.	PRID	MARY & SIG.
DISABILITY	#2	756		2	22		22			-		-		_
		٨	,	. в с		C	D		E		F	G		н
		FULL SUPERVISION		. LIVING NGEMENTS			ADULT ED/TRAIN	NG	SCHOOL Ed/Tra		PRE-SCHOOL ED/TRAINING	SHELTE: EMPLOYI		OTHER EMPLOYMENT
DIRECT SERVICE	#3	853		591	1	59	225		265		77	93		30
DD SERVICE POPULATION	#4	3,627	2,	297	1,3	118	1,361		81	.7	281	1,526		203
											_			
		A		В		С	D		E		F	G		н
		IDENTI- FICATION	COUN	SELING	PROT	ECTIVE	FOLLOW-ALC		TREATH	ENT	RECREATION	PERSON. CARE		TRANS- PORTATION
SUPPORT SERVICE	# 5	.1,078		33	1	40	794		2,8	55	418	169	,	330
DD SERVICE POPULATION	#6	9,029	2	:00	1,1	72	-		-		3,145	660)	2,316

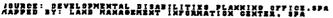
REGION TEN

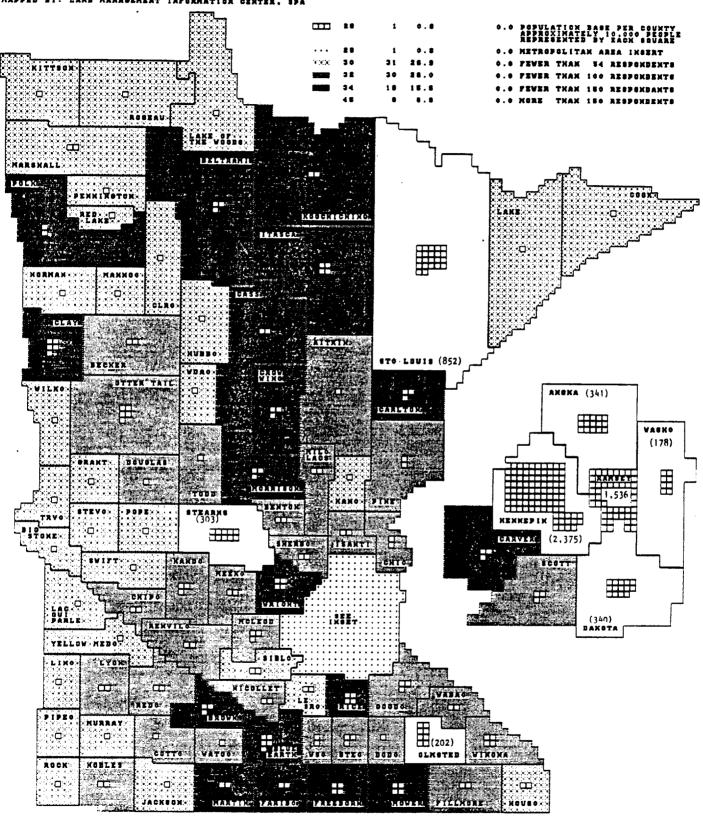
		A POPULATION		is h	C 115 0-3	D MIIS 4-21	E MIIS	F HIIS	G EST.	H EST.	I EST. 22-49	J EST. 50+	K EST DD
POPULATION	#1	410,500	1,08		31	284	612	50+ 240	0-3	4-21	-	-	11,289
		<u> </u>	<u></u>						I			L	_1
		A		P	3		С		D	-	E	T	F
		PRIMARY -	MR	PRIMARY	- CP	F	RIMARY - E	PRI	MARY - A	PRINAR	Y & SEC.	PRIMA	RY & SIG.
DISABILITY	#2	1,072		3	3		30		1		_		-
		A	(В	1		D	E	ŀ	F	G		н
		FULL SUPERVISION		LIVING			ADULT ED/TRAINING	SCHOO ED/TR	L ACE AINING	PRE-SCHOOL ED/TRAINING	SHELTEI EMPLOYI		OTHER EMPLOYMENT
DIRECT SERVICE	#3	1,417	2,	,006	32	21	318		67	177	56		49
DD SERVICE POPULATION	#4	6,226	4,	,541	2,04	40	2,264	1,7	85	902	1,864		497
		<u></u>	.		,					· · · · · · · · · · · · · · · · · · ·			
		A		В		c	a	E		F	G		н
		IDENTI- FICATION	COUNS	SELING	PROTE	CTIVE	FOLLOW-ALON	TREAT	HENT	RECREATION	PERSON. CARE		TRANS- ORTATION
SUPPORT SERVICE	#5	1,266	9	99	30	08	1,088	3,	948	648	505		476
DD SERVICE POPULATION	#6	13,082	9:	50	2,9	35	_		_	6,273	2,915	4	,435

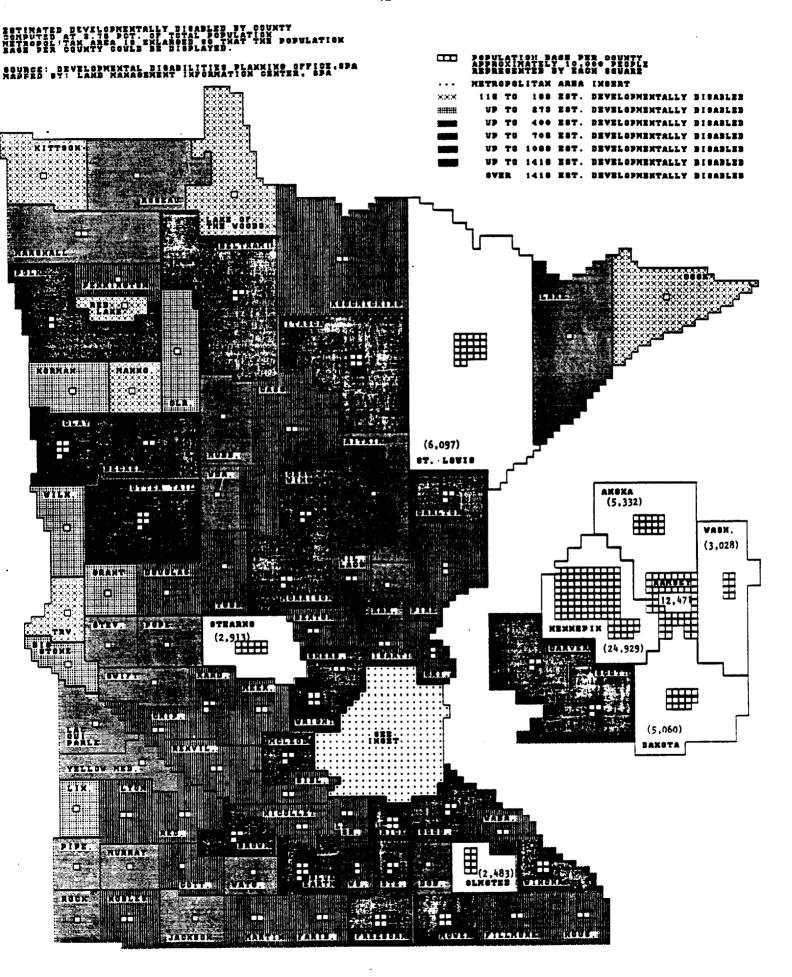
REGION ELEVEN

		A POPULATION	B HIIS DD	C MIIS 0-3	D MIIS 4-21	E MIIS 22-49	F MIIS 50+	G EST. 0-3	H EST. 4-21	I EST. 22-49	J EST. 50+	EST DD 2.75 X
POPULATION	#1	1,962,700	4,995	209	1,628	2,529	622	_	_	-	-	53,974
		A	T T	В	1	C	1	D	<u></u>	E	, <u></u>	F
		PRIMARY ~	MR PRI	MARY - CP	P	RIMARY - E	PRI	MARY - A		Y & SEC.	PRIMA	RY & SIG.
DISABILITY	#2	4,421		179		109		16		-		
		<u></u>								1		
		A FULL SUPERVISION	B SPEC. LIV ARRANGEME	ING AD	C ULT CARE	D ADULT ED/TRAINING	SCHOOL ED/TR/	LAGE	F PRE-SCHOOL ED/TRAINING	G SHELTERI EMPLOYM		H Other Employment
DIRECT SERVICE	#3	5,797	6,369	1,	086	6 1,295		199	724	294		225
DD SERVICE POPULATION	#4	29,297	22,621	8,	562	9,271	13,	774	4,142	8,200	2	,449
			,				- ₁				·	
		A IDENTI- FICATION	B COUNSELIN		C ECTIVE	D FOLLOW-ALONG	E TREATI	[F RECREATION	G PERSONAL CARE		H TRANS- ORTATION
SUPPORT SERVICE	# 5	5,632	1, 211	. 8	340	4,558	14,	508	2,999	2,672		2,043
DD SERVICE POPULATION	#6	72,958	14,758	8,2	239	-		-	29,429	12,871	1	8,065

NUMBER OF MINKESOTA INBIVIBUAL INFORMATION SYSTEM (MIIS) RESPONDENTS FROM EACH COUNTY. METROPOLITAM AREA 13 EXLARDED SO THAT THE POPULATION BASE PER COUNTY COULD BE DISPLAYED.







2.2.1 - Case Management Services

Three services provided to the DD population come under the Case Management priority. Counseling is a service offered to an individual and/or their family so that a client may be fully aware of the services offered generally to the population and specifically to the individual receiving the counseling. Protective services are understood as legal aid, again offered to individuals and/or families; by professionals, and advocates who have received training to undertake the activity for DD individuals, who may not fully understand their rights or have the ability to advocate for themselves. Follow-along is a necessary part of case management that assures, that once a client has chosen services, they are enabled to go from one service to another without being delayed in any way.

2.2.2 - Child Development

The two services provided under the Child Development priority are Pre-School Education; provided by Developmental Achievement Centers and public schools, and Identification which is provided by public schools, EPSDT, Early Periodic Screening and Services for Children with Handicaps.

2.2.3 - Alternative Community Living Arrangements

This priority has been chosen as number one for Council attention for the plan year. The goals and objectives found elsewhere in this plan indicate the activities the Council and Agency will support, mostly in the areas of Special Living Arrangements and Personal Care. Transportation is a constant problem for the disabled, but is placed under this priority area because of the restraints, both physical and financial, that may stand in the way of the DD population taking advantage of special living arrangements when separated at some distance from another service that they may need, such as work experience.

2.2.4 - Non-vocational Social Development

The five services that should be provided under this priority; adult day care, adult education/training, school age education training, treatment and recreation are self-descriptive.

TABLE 2-1
SUMMARY OF DD POPULATION BY AGE GROUPS
PLAN YEAR 1981

GEOGRAPHICAL	STATE POP	ULATION	DD POPUL	ATION		DD F	OPULATION	BY AGE	GROUPS -	PLAN Y	YEAR	
SUBDIVISION		WHICH*			PRE-SCH(OL	SCH00	L	ADULT		65+	
PLANNING REGIONS	TOTAL	IS MINORITY	NUMBER	8	NUMBER	*	NUMBER	*	NUMBER	*	NUMBER	8
REGION ONE	96,495		2,653	2.75	212	8.0	583	22.0	1,750	66.0	106	4.0
REGION TWO	60,766	,	1,671		133		367		1,102		66	
REGION THREE	330,295		9,083		726		1,998		5,994		363	
REGION FOUR	195,582		5,378		430		1,183		3,549		215	1
REGION FIVE	122,469		3,367		269		740		2,222		134	1
REGION SIX-E	104,015		2,860		228		629		1,887		114	
REGION SIX-W	60,306		1,658		132		364		1,094		66	
REGION SEVEN-E	93,541		2,572		205		565		1,697		102	Ì
REGION SEVEN-W	206,516	1	5,659		452		1,244		3,734		226	1
REGION EIGHT	140,964		3,856		308		848		2,544		154	
REGION NINE	227,928		6,268		501	1	1,378		4,136		250	
REGION TEN	410,221		11,281		897		2,481	1	7,445		451	
REGION ELEVEN	2,027,682		55,761		4,460		12,267		36,802		2,230	
STATE TOTAL	4,076,600	101,915	112,106	2.75	8,968	8.0	24,663	22.0	73,989	66.0	4,484	4.0

^{*} Based on most recent data/2.5% estimate: "SUMMARY OF INCOME AND EDUCATION: CONSUMER INCOME." Series P-60, No. 111.
U.S. Bureau of the Census (Household Survey Method), April 1978.

TABLE 2-2
SUMMARY OF DD POPULATION BY AGE GROUPS
PROJECTED YEAR - FY 1983**

GEOGRAPHICAL	STATE POP	PULATION	DD POPU	LATION	DD	POPUL	ATION BY	AGE GRO	UPS PROJE	CTED -	YEAR 1983	3
SUBDIVISION PLANNING	TOTAL	WHICH*			PRE-SCH	DOL	SCH00	DL	ADUL.	Г	651	-
REGIONS	TOTAL	MINORITY	NUMBER	ર	NUMBER	*	NUMBER	*	NUMBER	ર	NUMBER	ઢ
REGION ONE	09 225		0.704						_			
	98,235		2,701	2.75	216	8.0	594	22.0	1,782	66.0	108	4.0
REGION TWO	64,183		1,765		141		388	<u> </u>	1,164		70	İ
REGION THREE	332,554		9,145		731		2,011		6,035		365	1
REGION FOUR	202,283		5,562		444		1,223		3,670]	222	
REGION FIVE	127,581		3,508		280		771		2,315		140	1
REGION SIX-E	108,904		2,994		239		658		1,976		119	l
REGION SIX-W	60,435		1,661		132		365		1,096		66	1
REGION SEVEN-E	104,844		2,883		230		634		1,902		115	Ì
REGION SEVEN-W	226,760		6,235		498		1,371		4,115		249	
REGION EIGHT	143, 194		3,937		314		866-		2,598		157	
REGION NINE	234,427		6,446		515		1,418]	4,254		257	
REGION TEN	427,319		11,751		940		2,585		7,755		470	}
REGION ELEVEN	2,121,467		58,340		4,667		12,834		38,504		2,333	
STATE TOTAL	4,252,186	106,304	116,935	2.75	9,354	8.0	25,725	22.0	77,177	66.0	4,677	4.0

^{*} Based on most recent data/2.5% estimate: "SUMMARY OF INCOME AND EDUCATION: CONSUMER INCOME." Series P-60, No. 111.
U.S. Bureau of the Census (Household Survey Method), April 1978.

^{**} Figures represent projections for 1985.

TABLE 2-3
CASE MANAGEMENT

PLANNING REGIONS	COUNSELING	PROTECTIVE	FOLLOW-ALONG		
REGION ONE	269	491			
REGION TWO	462	372			
REGION THREE	231	1,095		-	
REGION FOUR	830	1,260			
REGION FIVE	710	672			
REGION SIX-E	271	375			
REGION SIX-W	215	258			
REGION SEVEN-E	172	341			
REGION SEVEN-W	577	936			
REGION EIGHT	558	396			
REGION NINE	200	1,172			
REGION TEN	950	2,935			
RECION ELEVEN	14,758	8,239			<u> </u>
STATE TOTAL	20,203	18,542	20,000*		

^{*} A reliable projection of "Follow-Along" service needs is not available. An estimate of 18,000 to 20,000 would appear to be acceptable, however, as it can be assumed that those needing counseling and protective services will also require follow-along services.

TABLE 2-4
CHILD DEVELOPMENT

PLANNING REGIONS	PRE-SCHOOL ED/TRAINING	IDENTIFICATION		
REGION ONE	86	2,946		
REGION TWO	141	2,361		
REGION THREE	592	11,960		
REGION FOUR	133	5,508	-	
REGION FIVE	352	4,190		
REGION SIX-E	13	7,659		
REGION SIX-W	86	1,974		
REGION SEVEN-E	175	5,022		
REGION SEVEN-W	575	11,652	,	
REGION EIGHT	118	5,956		
REGION NINE	281	9,029		
REGION TEN	902	13,082		
REGION ELEVEN	4,142	72,958		
STATE TOTAL	7,596	154,297*		

^{*} Represents a duplicated count. Involves a number of screening, diagnostic and identification services.

40

TABLE 2-5
ALTERNATIVE COMMUNITY LIVING ARRANGEMENTS

PLANNING REGIONS	SPECIAL LIVING ARRANGEMENTS	PERSONAL CARE	TRANSPORTATION	FULL SUPERVISION	
REGION ONE	843	456	823	1,876	
REGION TWO	564	284	600	1,094	
REGION THREE	4,304	1,665	2,586	4,930	
REGION FOUR	2,308	521	1,546	3,034	
REGION FIVE	1,524	256	986	1,868	
REGION SIX-E	947	811	1,844	1,917	
REGION SIX-W	535	279	989	1,150	
REGION SEVEN-E	1,150	263	818	251	
REGION SEVEN-W	2,457	784	1,972	3,132	
REGION EIGHT	1,582	451	2,347	2,224	
REGION NINE	2,297	660	2,316	3,627	
REGION TEN	4,541	2,915	4,435	6,226	
REGION ELEVEN	22,621	12,871	18,065	29,297	
STATE TOTAL	45,673	22,216	39,327	60,626	

TABLE 2-6
NON-VOCATIONAL SOCIAL DEVELOPMENT

PLANNING REGIONS	ADULT DAY CARE	ADULT ED/TRAINING	SCHOOL AGE ED/TRAINING	TREATMENT	RECREATION
REGION ONE	399	414	100		989
REGION TWO	411	485	194		1,023
REGION THREE	2,359	2,530	1,257	-	4,645
REGION FOUR	1,006	1,056	338		2,161
REGION FIVE	618	819	517		1,554
REGION SIX-E	662	683	206		1,906
REGION SIX-W	404	425	255		1,150
REGION SEVEN-E	381	375	378		1,196
REGION SEVEN-W	1,066	1,139	887		2,723
REGION EIGHT	1,106	1,116	501	•	2,960
REGION NINE	1,318	1,361	817		3,145
REGION TEN	2,040	2,264	1,785		6,273
REGION ELEVEN	8,562	9,271	13,774		29,429
STATE TOTAL	20,332	21,938	21,009	*	59,154

^{*} Projections for "Treatment" are not totally reliable. Arriving at an accurate figure is extremely difficult as individuals may require varied/several treatment services within any given time period--treatment might include anything from routine dental care to major medical procedures. Computer projections based upon MIIS data and other sources places the state total needing treatment services at some 366,000--over three times the estimated DD population of 112,000.

SECTION 3 -- DD SERVICE NETWORK RESOURCES AND CAPACITY

3.1 SUMMARY OF THE DD SERVICE STRUCTURE

Table 3.1 summarizes state agency services, responsibilities, and programs* pertinent to developmental disabilities. A comprehensive listing of non-public service providers, resources, and services for persons with developmental disabilities is available from the Minnesota State Planning Agency:

MINNESOTA DEVELOPMENTAL DISABILITIES ADVOCACY RESOURCE DIRECTORY (The Governor's Planning Council on Developmental Disabilities/The Developmental Disabilities Protection and Advocacy Program). Saint Paul: Minnesota State Planning Agency, 1978.

TABLE 3.1
RESPONSIBLE AGENCY, PROGRAMS, AND TYPES
OF SERVICES AVAILABLE TO DEVELOPMENTALLY DISABLED PERSONS

										SE	R۷	ICE	S										
					DIF	REC	T									•	SUP	PO	RT				
	DEF	BI- PIAL		RE OOL	DAY	PROC)L		ULT	EDOP ME	LOY-		ENT:			CASE		TR	EATK	Dez	PI	MIL OGR PPOI	UK
PUBLIC SERVICE PROVIDERS	DOMICILIARY CARE	SPECIAL LIVING ABRANGEDENT	DAY CARE	EDUCATION/TRAINING	DAY CARE	EDUCATION	TRAINING	DAT CARE	EDUCATION/TRAINING	SHELTERED	OTHER EMPLOYMENT	DIAGNOSIS	EVALUATION	INFORMATION & REFERRAL	COUNSELING	ARD SOCIO-LEGAL SERVICES	POLLOW-ALONG	MEDICAL	DENTAL	OT, PT, SPLH, OTHER	RECREATION	PERSONAL CARE	TRANSPORTATION
DEPT OF EDUCATION	•			•		•	•		•			•	•	•	•	•	•			•	•		•
DEPT OF HEALTH	•	•										•	•	•	•	•	•	•	•	•		•	
DEPT OF TRANSPORTATION		Г																					•
HOUSING FINANCE AGENCY		•																					
DEPT OF ECON SECURITY		•	•	•					•	•	•	•	•	•	•	•	•	•	•	•		•	•
COUNCIL ON HANDICAPPED														•		•							
DEPT OF NAT RESOURCES																					•		
STATE PLANNING AGENCY														•		•	L						
DEPT OF PUBLIC WELFARE	•		•	•	•	•	•	•	•	•		•	•	•	•	•	•	•	•	•		•	•

* Within the Department of Education are the Braille and Sight Saving School and the School for the Deaf. The Division of Vocational Rehabilitation is located within the Department of Economic Security. The Developmental Disabilities Planning Office is located within the State Planning Agency. The Department of Public Welfare administers the State Hospital System and the two State-operated nursing homes.

TABLE 3
CASE MANAGEMENT

PROGRAM ,	COUNSELING	PROTECTIVE	FOLLOW-ALONG	INFORMATION/REFERRAL		
DEPARTMENT OF HEALTH Prevention and Early Intervention Crippled Children's Services (SSI-Disabled Children's Program)	•		•	•		
DEPARTMENT OF ECONOMIC SECURITY Vocational Rehabilitation	•	•	•	•		
COUNCIL FOR THE HANDICAPPED			•	•		
DEPARTMENT OF EDUCATION Special and Compensatory Education	•	•	•	•		
DEPARTMENT OF PUBLIC WELFARE Social Services Mental Health	•	•.	•	•		

TABLE 3
ALTERNATIVE COMMUNITY LIVING ARRANGEMENTS

PROGRAM	SPECIAL LIVING ARRANGEMENTS	PERSONAL CARE/ TRAINING	TRANSPORTATION	CONSTRUCTION/ SUBSIDIZATION	FINANCING	COUNSELING	
DEPARTMENT OF HEALTH Health Care Facilities (Nursing Homes, Boarding Care Homes, SLFs)	•	•					
DEPARTMENT OF ECONOMIC SECURITY Vocational Rehabilitation (Comprehensive Services for Independent Living)	•	•	•				
DEPARTMENT OF TRANSPORTATION UMTA 16(b)(2)/Paratransit			•	•			
HOUSING FINANCE AGENCY Residential Group Home Program (DD) Housing Assistance Program (Sec. 8)				•	•		
DEPARTMENT OF PUBLIC WELFARE Residential Services/Mental Health Social Services			•			•	

TABLE 3
NON-VOCATIONAL SOCIAL DEVELOPMENT

	1						
PROGRAM ,	ADULT DAY CARE	ADULT ED/TRAINING	SCHOOL AGE ED/TRAINING	TREATMENT	RECREATION	TRANSPORTATION	COUNSELING
DEPARTMENT OF HEALTH Health Care Facilities (e.g., SLFs)	•			•			
DEPARTMENT OF ECONOMIC SECURITY Vocational Rehabilitation	•	•				•	
DEPARTMENT OF TRANSPORTATION UMTA 16(b)(2)/Paratransit						•	
DEPARTMENT OF NATURAL RESOURCES Parks and Recreation (accessibility)					•		
DEPARTMENT OF EDUCATION Special and Compensatory Education			•				
DEPARTMENT OF PUBLIC WELFARE Social Services Income Maintenance Catostrophic Health Expense Protection Program (CHEPP) Medical Assistance Mental Health MR Programs	•	•		•			•

TABLE 3
CHILD DEVELOPMENT

PROGRAM '	EARLY INTERVENTION SVCS	COUNSELING	IDENTIFICATION/ DIAGNOSIS	TREATMENT/SERVICES	FOLLOW-UP	PRESCHOOL ED/TRAINING	
DEPARTMENT OF HEALTH Early and Periodic Screening (EPS) Hearing and Vision Conservation Perinatal Care High Risk Infant Identification Early Periodic Screening Diagnosis and Treatment (EPSDT) PreSchool Screening (PSS) Nutrition Consultation Crippled Children's Services (CCS) DEPARTMENT OF EDUCATION Special and Compensatory Education DEPARTMENT OF PUBLIC WELFARE Social Services DACS Income Maintenance (EPSDT)	•			•			

** NOTE **

The following narrative summaries of state agency operations were adapted primarily from the "GOVERNOR'S BIENNIAL BUDGET 1979-1981" (presented to the Seventy-First Legislature -- January 23, 1979).

References to "Fiscal Year" in the narrative portions denote the fiscal year as it pertains to the State of Minnesota: July 1 to June 30.

The Federal fiscal year is from October 1 to September 30.

AGENCY: DEPARTMENT OF HEALTH

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

The purpose of the agency is to promote, maintain, and protect the health of the citizens of Minnesota. The Commissioner of Health, acting through the Minnesota Department of Health, has general authority and responsibility in the area of health, as the state's official health officer. In addition, he is responsible for the development and maintenance of an organized system of programs and services for protecting, maintaining, and improving the health of the citizens. This authority by statute includes but is not limited to the following:

Conduct studies and investigations, collect and analyze health and vital data, and identify and describe health problems.

Plan, facilitate, coordinate, provide, and support the organization of services for the prevention and control of illness and disease and the limitation of disabilities resulting therefrom.

Establish and enforce health standards for the protection and the promotion of the public's health such as quality of health services, reporting of disease, regulation of health facilities, environmental health hazards, and personpower.

Affect the quality of public health and general health care services by providing consultation and technical training for health professionals and paraprofessionals.

Coordinate and integrate local, state, and federal programs and services affecting the public's health.

Continually assess and evaluate the effectiveness and efficiency of health service systems and public health programming efforts in the state.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

The agency performs three major functions to fulfill its mission:

- 1. Provision of services to prevent disease and accidents, control spread of disease, identify health problems early, and provide for intervention in the disease process.
- 2. Regulatory functions directed at health facilities, health personpower, and environmental conditions intended to assure safe and healthy surroundings and services that are provided by competent personnel.
- 3. Assistance to local health agencies, both fiscal and technical; information, consultation, and assistance to health professionals of all disciplines and in a variety of settings in order to continually improve the health services available to people.

The clientele consists primarily of the health system personnel throughout the state; staffs of local health agencies, hospitals, health maintenance organizations, nursing homes, ambulance services, clinics, individual health providers, and the personnel of other regulated industries. In selected programs (for example: Crippled Children's Services) the direct clientele are citizens with health problems.

PROGRAM: PREVENTIVE AND PERSONAL HEALTH SERVICES

AGENCY: DEPARTMENT OF HEALTH

PROGRAM PURPOSE: The program is the aggregate of functions performed by the agency to promote healthful practices, to prevent disease, to provide for early detection of disease and disability, and in certain circumstances to provide for treatment and rehabilitative services. The program fulfills its purpose by means of providing specialized services (as in the Medical Laboratories activity and Services for Children with Handicaps), training and technical consultation for regional and local health personnel (as in Disease Control-Immunization and Chronic Disease programs), inspection and regulation (as in Environmental Health-Radiation Control and Field Services), in payments for treatment (as in Services for Children with Handicaps), and in the provision of information and assistance to both providers and consumers related to all the activities in this program.

OPERATION: This program consists of five major activities:

Disease Control includes Personal Health Services Supervision, Chronic Disease Programs, Infectious Disease Control, Venereal Disease Control and Immunization.

Medical Laboratories provide diagnostic testing of biological specimens for individuals throughout the state.

Environmental Health deals with the impact of the environment, both natural

and man-made on human health. A Health Risk Assessment unit has been added to provide a scientific basis for reviewing the effects of toxic materials in the environment on human health.

Prevention and Early Intervention encompasses the Maternal and Child Health activities of the department, and is largely federally funded. Important state directed activities include Family Planning, with grant funds to be available to Community Health Services Agencies and the Child Health Screening programs including Preschool Screening.

Services for Children with Handicaps includes the Crippled Children's Services program as well as the state resources allocated to the Gillette Children's Hospital.

CLIENTELE: The direct clientele of this program include the providers of local public health services; the owners and managers of food, lodging, recreational facilities; the operators of municipal and other public water supplies; handicapped children and their parents; and in some instances, persons with communicable and chronic diseases and their contacts. Each activity and its subparts have defined clienteles. The program in total affects directly or indirectly, all the citizens of the state.

ACTIVITY: PREVENTION AND EARLY INTERVENTION

PROGRAM: PREVENTIVE AND PERSONAL HEALTH SERVICES

AGENCY: DEPARTMENT OF HEALTH

ACTIVITY DESCRIPTION: This activity addresses identified preventive health needs of adults, infants and children who are served in local communities throughout Minnesota. The purpose of the activity is to support local programs to improve or maintain the health status and wellbeing of individuals and families served through a number of discrete activity components which encompass Early and Periodic Screening, Hearing and Vision conservation, Family Planning, Dental Health, Nutrition Consultation, Human Genetics, Maternal and Infant Care projects, Children and Youth clinics, Perinatal Care, High Risk infant identification, Child Abuse, and Sudden Infant Death. The activity directly serves local publicly supported Health agencies, individual health professionals, schools, and voluntary agencies through the provision of program planning, technical consultation and assistance, training, standards and program guidelines, grant review and monitoring. In turn, this clientele directly serves individuals and families. The activity is supported by state appropriations and federal formula funds, predominantly Title V, Social Security Act; Women, Infants and Children Nutrition Act (WIC); and contracts.

Comprehensive Child Health Screening includes Early and Periodic Screening (EPS) and components of Early Periodic Screening Diagnosis and Treatment (EPSDT) and Preschool Screening (PSS). The purpose of child health screening is to identify, at the earliest time, health or developmental problems and to assure further evaluation, diagnosis, and treatment so as to reduce or ameliorate the problems. This activity works closely with the other state agencies involved in screening children and with the many local, public, and private professionals so as to assure coordinated, non-

duplicative screening programs are available to all who need it, primarily directed to persons in the reproductive period.

The purpose of the Hearing and Vision conservation is to assure that children with hearing and vision problems are detected at the earliest time by providing quality, cost-efficient screening services by local agencies or schools. This activity works with local health agencies and schools and helps to assure that children identified as needing further evaluation and possible treatment are followed up. The activity works directly with the other child health screening activities within the department to assure coordinated efforts.

ACTIVITY: SERVICES FOR CHILDREN WITH HANDICAPS PROGRAM: PREVENTIVE AND PERSONAL HEALTH SERVICES

AGENCY: DEPARTMENT OF HEALTH

ACTIVITY DESCRIPTION: The Crippled Children Services Program mandated by Title V of the Social Security Act and supported by federal formula and state funds, provides for the identification, diagnosis, and treatment of children with chronic handicaps caused by birth defects, congenital cardiac lesions, hereditary diseases, or diseases such as diabetes, cystic fibrosis, or cancers. These children are cared for through the provision of about 250 itinerant field clinics, arrangements for diagnostic and treatment services in medical centers, and the arrangements for or the provision of health and social services necessary for the rehabilitation of children with handicaps.

The Crippled Children Services activity (CCS) provides for reimbursement of costs of care for eligible children with long-term handicapping conditions, including special statutory programs for children requiring a growth hormone called somatotropin, and persons 21 years and older with cystic fibrosis and hemophilia.

The activity maintains an interdisciplinary professional staff including nurses, social workers, nutritionist, and speech and hearing specialists who operate the regularly scheduled field clinics, provide inservice training and case consultation to local health professionals and schools about the children with serious handicaps. This field staff lives and works in the health districts. In addition, the field clinics are staffed by cardiologists, pediatricians, orthopedists, oral surgeons, psychiatrists, and orthodontists who are under contract.

In July, 1978, the CCS activity began implementing the new Supplemental Security Income (SSI), Disabled Children's Program under Section 1615 of the Social Security Act which makes CCS responsible to coordinate individual program planning for SSI eligible children.

In addition, the activity manages the federally funded Regional Cardiac Program, which provides for field clinics, inservice education, and reimbursement for care of children with serious cardiac lesions from other states when appropriate diagnostic and treatment resources are not available in that state or area.

As an added dimension, the activity maintains a contractual relationsip with Gillette Children's Hospital to reimburse that special state resource for the cost of caring for children with complex, multiple handicaps and whose families cannot afford the costs. Part of the state appropriation for the treatment of children with handicaps has supported this contractual relationship since 1975, when Gillette Children's Hospital had become a quasi-state hospital, with its own Governor-appointed board. Financial eligibility for state support for cost of care at Gillette is the same as eligibility for other CCS treatment services.

An increased demand for the Crippled Children Services resource is anticipated as a result of the effects of Early and Periodic Screening (EPS), and Preschool Screening, better coordination between the health and educational institutions, improved identification of high risk children at birth and during their early years, and better case identification through coordinated efforts with the Social Security Administration, SSI Program.

ACTIVITY OBJECTIVES: The provision of a coordinated, comprehensive, high quality program for children suspected of having or having identified physical or developmental handicaps so as to assure that these children can function, recover, and develop to the fullest extent possible by:

- 1. Providing diagnostic evaluation and continuing treatment at about 250 itinerant field clinics for about 6,500 children with suspected or diagnosed handicapping conditions to assure the availability of accessible services throughout the state.
- 2. Coordinating medical center diagnostic evaluations of new children and children known to the program to assure the children receive the treatment and rehabilitation services they need at times and places appropriate to the children's conditions.
- 3. Authorizing anticipated medical, surgical, dental, and rehabilitation treatment services for more than 3,000 medically and financially eligible children under 21 years which is paid in part by CCS, insurance companies, Title XIX, and the family to assure that the children receive the care and it is paid for.
- 4. Providing special treatment services payments for persons 21 years or older with hemophilia, cystic fibrosis, and growth hormone deficiencies requiring somatotropin, in keeping with special statutory requirements.
- 5. Providing follow-up, counseling, and referral services by an interdisciplinary staff of nurses, social workers, nutritionist, and communication specialists to assure CCS patients and families have assistance in resolving health-related emotional and social problems.
- 6. Providing technical consultation and inservice education to local health and social agencies to improve levels of awareness, and skills in professionals involved with serving children with handicaps.
- 7. Developing cooperative agreements with other state agencies such as the Department of Public Welfare, Division of Vocational Rehabilitation, and the Department of Education and private voluntary agencies so as to improve the coordination and provision of services to handicapped children and their families who are frequently served by more than one agency.

LICENSED AND CERTIFIED HEALTH CARE FACILITIES* DEPARTMENT OF HEALTH

NURSING HOMES

A nursing home provides for the accommodation of persons who are not acutely ill and not in need of hospital care, but who do require nursing care and related medical services. Examples of nursing care include: bedside care and rehabilitative nursing techniques, administration of medicines, a modified diet regime, irrigations and catheterizations, application of dressings or bandages and other treatments prescribed by a physician. In addition, the social, religious, education and recreational needs of these patients must be fulfilled.

363 Nursing Homes / Bed Capacity: 36,262 (as of March 15, 1979)

BOARDING CARE HOMES

A boarding care home provides personal or custodial care only. Examples of personal or custodial care include: help with bathing, dressing, or other personal care; supervision of medications which can be safely self-administered; plus a program of activities and supervision required by persons who are not capable of properly caring for themselves.

138 Boarding Care Homes / Bed Capacity: 6,287 (as of March 15, 1979; includes boarding care home units of other facilities: 74 units at 3,597 capacity)

SUPERVISED LIVING FACILITIES

A supervised living facility provides a residential, home-like setting for persons who are mentally retarded, adult mentally ill, chemically dependent, or physically handicapped. Services include provision of meals, lodging, housekeeping services, health services, and other services provided by either staff or residents under supervision. Class A facilities include homes for ambulatory and mobile persons who are capable of taking appropriate action for self-preservation under emergency conditions as determined by program licensure provisions. Class B facilities include homes for ambulatory, nonambulatory, mobile, or nonmobile persons who are not mentally or physically capable of taking appropriate action for self-preservation under emergency conditions as determined by program licensure provisions.

250 Supervised Living Facilities / Bed Capacity: 8,397 (as of March 15, 1979)

SUPERVISED LIVING FACILITIES BY CITY AND COUNTY

CITY/COUNTY

CITY/COUNTY

ARGYLE - Marshall
Marshall County Group Home

AURORA - St. Louis
Salmi Board and Lodging

* Source: Directory: Licensed & Certified Health Care Facilities 1979.
Minneapolis: Minnesota Department of Health, March 15, 1979.

ALBERT LEA - Freeborn Crest Home of Albert Lea Naeve Hospital

ALEXANDRIA - Douglas Project New Hope, Inc. Project New Hope 6 Project New Hope 7

ANOKA - Anoka Anoka State Hospital May Group Home

ATWATER - Kandiyohi Atwater House St. Francis Halfway House

AUSTIN - Mower Agape Halfway House Cedarvale Woodyale III

BAGLEY - Clearwater Pine Ridge Residence

BEMIDJI - Beltrami Diakonia I Diakonia II

BARRETT - Grant Steffen Group Home

BLOOMINGTON - Hennepin Bloomington Outreach Home St. Stephens Group Home A & B Gerarda House

BLUE EARTH - Faribault Assisi Residence I Assisi Residence II

BOVEY - Itasca Hawthorne House

BRAINERD - Crow Wing Brainerd State Hospital

BROOKLYN CENTER - Hennepin Brooklyn Center Outreach Residential Alternatives II Residential Alternatives III

CITY/COUNTY

BROOKSTON - St. Louis Maki Home

BUFFALO - Wright Alternative I Buffalo Group Home

CAMBRIDGE - Isanti Cambridge State Hospital

CANBY - Yellow Medicine Rem II, Inc. A & B

CENTER CITY - Chisago Hazelden Foundation South Center Manor

CHANHASSEN - Carver Chanhassen Center

CHISHOLM - St. Louis Range Center, Inc. Range Center-Oakwood

CLOQUET - Carlton Pine Ridge Home #1 Pine Ridge Home #2

COKATO - Wright
Warner Care Home
Warner Care Home II
Warner Care Home III

COON RAPIDS - Anoka Camelia Rose Community Living

COTTAGE GROVE - Washington Forestview-Hemingway

CROOKSTON - Polk Crookston Group Home

DELANO - Wright The Dells Place

DENT - Otter Tail Peleske Group Home

CRYSTAL - Hennepin Dungarvin V

DULUTH - St. Louis Caromin House -Dodge Caromin House -Tioga Champion Children's Home Cliff House Duluth Regional Care Center - Unit I Duluth Regional Care Center - Unit II Duluth Regional Care Center - Unit III Duluth Regional Care Center - Unit IV Nekton on Greysolon Nekton on London Road Nekton on Springvale Nekton on Wallace Residential Services of Northeast Minnesota Thunderbird Halfway House Wren House

EAGAN - Dakota Orvilla, Inc.

EDEN PRAIRIE - Hennepin Muriel Humphrey's Residence

EDINA - Hennepin Nekton-Williams

ELK RIVER - Sherburne
The Shire - Dungarvin IV

EVELETH - St. Louis
Range Center-Birchwood Home

EXCELSIOR - Carver
Mount Olivet Rolling Acres

FAIRMONT - Martin REM IV

FARIBAULT - Rice
Constance Bultman Wilson Center
Faribault State Hospital
Kroeger's House
Region Park Hall
Resident Homes, Inc. (Harmony)
Resident Homes, Inc. (Haven)
214 Park Avenue Home

FOSSTON - Polk Fosston Group Home

CITY/COUNTY

FERGUS FALLS - Otter Tail
Fergus Falls State Hospital
Koep Group Home
Lake Park - Wild Rice Children's
Home
Piper Group Home
Project Hew Hope I
Project New Hope II
Project New Hope III

FRAZEE - Becker Smith Group Home

FULDA - Murray New Dawn, Inc.

GRAND RAPIDS - Itasca Christus Group Home

GRANITE FALLS - Yellow Medicine Project Turnabout

HARMONY - Fillmore Sunshine Place

HASTINGS - Dakota Henry Hagen Residence

HAWLEY - Clay Clay County Residence

HERON LAKE - Jackson Heron Lake Halfway House

HUTCHINSON - McLeod Aveyron Homes, Inc.

JORDAN - Scott
Family Treatment Center of
Abbot-NW Hospital

KARLSTAD - Kittson Valley Group Home #2

KASSON - Dodge Fourth Street House

LAKE ELMO - Washington Nekton on Stillwater Lane

LITTLE CANADA - Ramsey Nekton on Sextant

LITTLE FALLS - Morrison Christus Group Home

MANKATO - Blue Earth Family House Harry Meyering Center, Rem III

MAPLEWOOD - Ramsey Nekton-Frost sur la rue de Skillman

MARSHALL - Lyon Rem I, Inc. A, B, C

MINNEAPOLIS - Hennepin
American Indian Services, Inc.
Charles Bronstein Home
Clara Doerr Residence
Hennepin County Residential Treatment
M & R II - Pleasantview Home
M & R III
M & R IV
Maria Home
Minneapolis Outreach
Nekton-Minnehaha Park
Nekton-Queen
Northeast House, Inc.
Northwestern Hospital Division

Nuway House I Nuway House II Outreach Northeast Group Home 180 degrees

Pharm House
Pillsbury Manor
Portland Residence, Inc.
St. Ann's Group Home
Forestview James
Freedom House A
Freedom House B
House of Icarus
Salvation Army - Harbor Light Center
Shanti House

335 Ridgewood
Turning Point, Inc.
Uptown Group Living, Inc.

Summit House

CITY/COUNTY

LESTER PRAIRIE - McLeod Alice Haney Home Alice Haney Annex

MINNETONKA - Hennepin Forestview Children's Home Hammer Residence #1

MOORHEAD - Clay Valley Group Home #1

MOOSE LAKE - Carlton
Moose Lake State Hospital

MORA - Kanabec Brighter Day Residence

MORRIS - Stevens Hoffman Group Home

NEW HOPE - Hennepin Homeward Bound, Inc.

NEW ULM - Brown MBW on Center

NORTHFIELD - Rice Laura Baker School

OSAKIS - Dodge Ella Bakke Group Home

OWATONNA - Steele West Hills Lodge Woodvale II

PARK RAPIDS - Hubbard Heartland Home

PINE RIVER - Cass Pine River Group Home

PIPESTONE - Pipestone Hiawatha Manor

PLYMOUTH - Hennepin Forestview Children's Home New Pioneer House

RED WING - Goodhue Redwing Group Home Vasa Lutheran Home for Children

REDWOOD FALLS
Robert Milton Home, Inc.

RICHFIELD - Hennepin Richfield Outreach Home Progress Valley II

RICHVILLE - Otter Tail
Shelton Group Home

ROBBINSDALE - Hennepin
Uptown Group Living Project

ROCHESTER - Olmsted
Bear Creek House
Guest House Sanitorium
Hiawatha Children's Home
Pine Circle Community Living
Rochester State Hospital
Sixth Street House
Meadow Park House

ROSEAU - Roseau Roseau Children's Home

ST. CLOUD - Stearns
Focus XII House

ST. LOUIS PARK - Hennepin Minnesota Jewish Group Home Parkview Treatment Center Summit Home II

ST. PAUL - Ramsey Dayton House of People Dungarvin, Inc. Dungarvin II, Inc. Dungarvin III, Inc. Greenbriar Home, Inc. Greenwood Residence East Hewitt House of People Hope Transition Center, Inc. Kent House of People Nekton on Goodrich Good Neighbor Homes Nekton on Mississippi Nekton on Wheeler Nekton on Wyoming New Connection A New Connection Nor Haven Home Our House of Minnesota, Inc. I

CITY/COUNTY

ST. PAUL - Ramsey (cont'd)
Our House of Minnesota, Inc. II
People's Child Care Residence
Petra Howard House
Phoenix Residence, Inc.
sur la rue de Breen
sur la rue de Wheelock Ridge
Twin Town Treatment Center
Reaney Heights

ST. PETER - Nicollet St. Peter State Hospital

SAUK CENTRE - Stearns
Dorothe Lane Home
Lakeview Children's Home
Pettit Children's Home

SAUK RAPIDS - Benton Granite Care Home

SHAKOPEE - Scott Delphi House

SHERBURN - Martin
Friendship Haven I
Friendship Haven II
Frien
SHOREVIEW - Ramsey
The Residence, Inc.
The Residence II
Lake Owasso Residence
Moores Haven

SOUTH HAVEN - Wright Madden Haven

SOUTH ST. PAUL - Dakota Bryant Avenue Residence

SPICER - Kandiyohi Alpha Homes, Inc.

STARBUČK - Pope Project New Hope - Starbuck

STILLWATER - Washington Nekton on Imperial Court

THIEF RIVER FALLS - Pennington Hanson's Boarding Home Johnson's Riverside Boarding Home

TOWER - St. Louis Hearthside Homes

TYLER - Lincoln Rem V

VICTORIA - Carver Community Living, Inc.

VIRGINIA - St. Louis Gethsemane Group Home

WABASHA - Wabasha 717 Rustic Lane

WAITE PARK - Stearns Waite Park Group Home

WANAMINGO - Goodhue Riverview Manor

WATERVILLE - Le Sueur Hope Residence, Inc.

WAYZATA - Hennepin Hammer Residence Shady Way Group Home Way 12 Halfway House

CITY/COUNTY

WEST ST. PAUL - Dakota
Dakota's Children
D.C.I. - Thompson Avenue Group
Home
Horizon Apartments

WHITE BEAR LAKE - Ramsey Northeast Residence, Inc. Northeast Residence II

WILLMAR - Kandiyohi Alexander Home Friendship House Heather Hill Kindlehope Willmar State Hospital

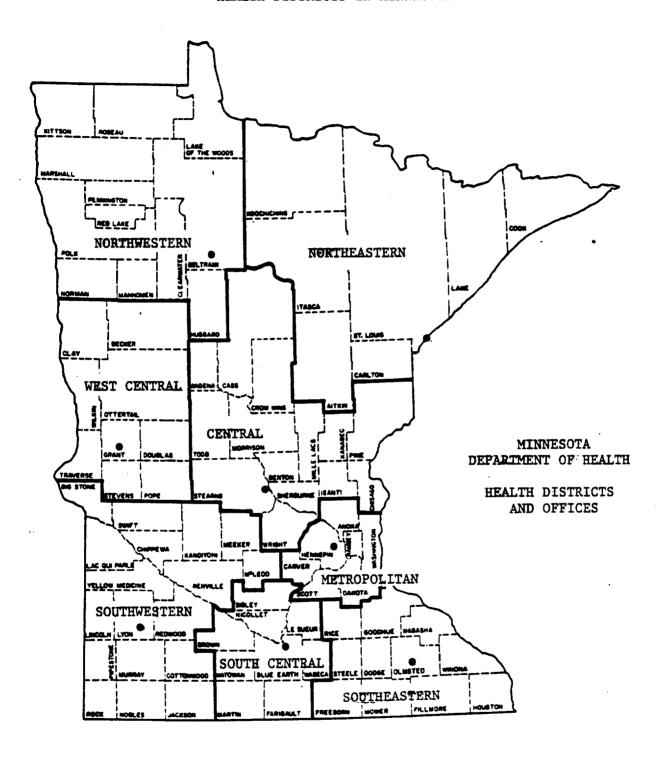
WINDOM - Cottonwood Home for Creative Living

WINONA - Winona Group Home of Winona

WORTHINGTON - Nobles
Project Independence - McMillan
Home
Southwest Manor
Unity House

WOODSTOCK - Pipestone New Life Treatment Center

HEALTH DISTRICTS IN MINNESOTA



DISTRICT/OFFICE: NORTHWESTERN - BEMIDJI

METROPOLITAN - MINNEAPOLIS

NORTHEASTERN - DULUTH

SOUTHWESTERN - MARSHALL

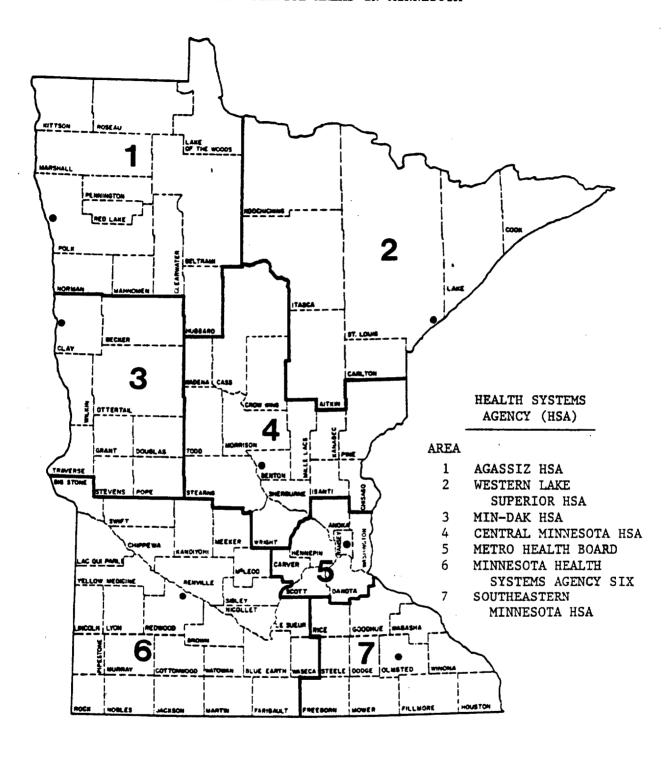
WEST CENTRAL - FERGUS FALLS

SOUTH CENTRAL - MANKATO

CENTRAL - ST. CLOUD

SOUTHEASTERN - ROCHESTER

HEALTH SERVICE AREAS IN MINNESOTA



- 1 EAST GRAND FORKS
- 2 DULUTH
- 3 MOORHEAD
- 4 SAUK RAPIDS

- 5 ST. PAUL
- 6 REDWOOD FALLS
- 7 ROCHESTER

AGENCY: DEPARTMENT OF ECONOMIC SECURITY

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

The Department of Economic Security develops, implements and coordinates public employment and income policies and programs for the State of Minnesota. The department assists people in need of employment training, vocational rehabilitation, job placement and temporary financial assistance services so that they can find meaningful work and become self-supporting.

The department and its programs contribute to the well-being of Minnesota's residents as well as to the overall economy of the state. By providing the opportunity to help people help themselves, whether they are unemployed, low income or disabled, the department attempts to provide Minnesotans with an opportunity to share in the state's high quality of life.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

The department provides temporary financial assistance, job training, vocational rehabilitation and job placement for the unemployed or underemployed. Programs and services are provided to all Minnesota residents — regardless of age, race, sex, color, creed or disability. Specialized services and programs are developed to meet the employment, training and rehabilitation needs of American Indians, displaced homemakers, welfare recipients, veterans, persons with disabilities, migrants, head of households, older persons and youth.

For those whose physical, mental or emotional disabilities are a handicap to employment, the department provides both training and placement. The department is committed to educate the community on the capabilities of persons with disabilities; to develop an awareness of their civil and personal rights; and to remove economic, social, architectural, transportation or attitudinal barriers. Vocational Rehabilitation (VR) and the department's other programs ensure that disabled persons have equal opportunities and services, programs and facilities.

PROGRAM: VOCATIONAL REHABILITATION

AGENCY: DEPARTMENT OF ECONOMIC SECURITY

PROGRAM PURPOSE: The purpose of the vocational rehabilitation program is to enable persons with physical and mental disabilities to become contributing members of the state's economy and to participate fully in the benefits and responsibilities of society at every level. Persons too severely disabled to achieve employment in conventional work settings receive opportunities for long-term sheltered work and work activity programs. Applicants for Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) payments receive eligibility adjudication services.

OPERATION: This program is administered by the Assistant Commissioner for

DEVELOPMENTAL DISABILITIES THREE YEAR STATE PLAN

FISCAL YEAR 1981 OCTOBER 1, 1980 TO SEPTEMBER 30, 1981

STATE OF MINNESOTA

SUBMITTED BY

THE MINNESOTA GOVERNOR'S PLANNING COUNCIL
ON DEVELOPMENTAL DISABILITIES

THIS STATE PLAN IS A JOINT ENDEAVOR OF THE MINNESOTA GOVERNOR'S PLANNING COUNCIL ON DEVELOPMENTAL DISABILITIES

AND THE

DEVELOPMENTAL DISABILITIES PLANNING OFFICE OF THE MINNESOTA STATE PLANNING AGENCY

BRUCE BALOW
Chairperson
Minnesota Governor's Planning
Council on Developmental Disabilities

ARTHUR SIDNER
Director
Minnesota State
Planning Agency

Submitted:

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Vocational Rehabilitation and has four sections - the offices of client services, rehabilitation resources, program and management support, and disability determination services. Special emphasis is given to obtaining direct consumer advice and counsel regarding all policies affecting rehabilitation concerns to assure that agency services respond to the needs of clients with disabilities.

The federal mandate giving priority for services to persons with the most severe disabilities has substantially affected the agency's ability to serve all Minnesotans who are eligible for services. It has resulted in needs for more intensive and more costly services, for more lengthy vocational plans, and in greater demands for professional counselor time. The net effect is that increased numbers of severely disabled persons are being served and rehabilitated although the total number of all clients has, of necessity, decreased.

In F.Y. 1978, 5,224 persons were successfully rehabilitated, about 4,000 persons were served in sheltered work stations, 24,000 applications for Social Security benefits were processed and a program to promote the rights of persons with disabilities to full access to public services, to employment opportunity and to freedom from discrimination, was initiated.

A study of persons rehabilitated in 1977 indicated that they earned 29.5 million dollars more than they had earned prior to receiving DVR services. In their first year of employment, they generated both contributions to state and federal income taxes and savings of public assistance payments which totaled 4.8 million dollars. The termination of disability payments saves an additional \$734,000 in each year after they are rehabilitated. These savings and benefits are expected to increase for the rehabilitated clients of each year through 1981.

Among the major policy issues to be addressed is the development and implementation of comprehensive independent living services to severely disabled persons.

CLIENTELE: The clientele of the agency are persons with physical and mental disabilities that result in vocational handicaps who are likely to become employed after receiving DVR services. The federal mandate to give first priority to persons with severe disabilities means that persons who may require many services over an extended period of time in order to become employed and persons who may only achieve the capability for sheltered work are entering the caseload in greater numbers. Persons defined as severely handicapped are not limited to any particular disability group. However, certain disabilities are "automatically" classified as severe by federal criteria. Persons who are deaf or hearing impaired constitute a group which DVR considers to have been underserved.

ACTIVITY: COMPREHENSIVE SERVICES FOR INDEPENDENT LIVING

PROGRAM: VOCATIONAL REHABILITATION

AGENCY: DEPARTMENT OF ECONOMIC SECURITY

ACTIVITY DESCRIPTION: This activity will implement authorities of the Rehabilitation Amendments of 1978. Independent living

services are designed to meet the current and future needs of individuals with disabilities so severe that they presently lack the potential for employment, but may benefit from services which enable them to live and function independently. The services aid severely disabled persons in achieving independent living status within the family environment, their communities, and may lead to securing employment. This activity provides for services other than those in basic vocational rehabilitation programs and includes services such as transportation, attendant care, and assistive devices. These services will be provided on a priority basis to persons who are not eligible for services through other provisions of the Rehabilitation Act. Those eligible for the independent living services program are persons who have the potential to move from a dependent living status to more self care and independence. Twenty percent of the funds available to this activity must be set aside for grants to private, non-profit rehabilitation facilities and related organizations serving the severely disabled. These grants are to be used to encourage new or expanded independent living services in existing programs and to create new centers for independent living which will provide housing and transportation referral help, group living, health education and maintenance, training for attendants and other services to the most severely disabled.

ACTIVITY OBJECTIVES:

- 1. To complete a State Plan for the implementation of this section of the Act, with broad representation from persons with disabilities, and to do so in such a way as to assure maximum coordination with existing programs and services.
- 2. To develop a system for administering the grant portion of the Act and to implement the grants portion of this activity.
- 3. To develop methods for evaluating services provided under this activity and to monitor this activity's programs as they develop.
- 4. To establish cost benefit measures for this activity so that long-term benefits from the program may be assessed.
- 5. To initiate the provision of services to eligible persons under this activity.

	ESTIMATED	ESTIMATED
	F.Y. 1980	F.Y. 1981
Number of independent living	•	
centers established	. 3	3
Number of grants provided to non-		
profit private agencies	6	10
Number provided Independent		
Living Services	250	400
Number served in Centers for		
Independent Living	50	80
Number of program reviews conducted		
on agencies receiving grants	2	6

ALTERNATIVE/MAJOR ISSUES: Severely disabled persons currently receive individual, specific services from numerous rehabilitation and welfare related agencies. This act authorizes development of the capability to provide comprehensive and integrated programs of service to assist severely disabled persons to move from disability-related dependence to independence and into employment when possible. This new program of rehabilitation services requires close coordination with existing programs and agencies. The intent and design of this activity is to fill gaps in services to severely disabled persons without duplicating existing services. The grant programs will be particularly valuable to Minnesota because the state's private non-profit rehabilitation facilities have the potential capability for developing innovative approaches to serving severely disabled persons, including those with mental illness and mental retardation.

ACTIVITY: LONG-TERM SHELTERED EMPLOYMENT AND WORK ACTIVITY

PROGRAM: VOCATIONAL REHABILITATION

AGENCY: DEPARTMENT OF ECONOMIC SECURITY

ACTIVITY DESCRIPTION: The Long-Term Sheltered Employment and Work Activity Program exists to develop and financially support a network of 35 private, non-profit sheltered workshops and work activity centers. Long-Term Sheltered Workshops (LTSW) provide employment for persons with severe handicaps who can work but cannot meet competitive employment production standards. Work Activity Centers (WAC) provide a paid work component, training in self-care, basic educational skills, socialization skills, and therapeutic recreation for persons having such severe handicaps that their production levels are below those required in long-term sheltered workshops.

Long-term sheltered work and work activity takes place in work stations located in the 35 Long-Term Sheltered Workshops/Work Activity Centers. Each work station may be filled by one or several workers during the course of the year.

DVR provides grants to the workshops to help maintain the work stations. Such grant subsidies are required since workshops do not operate at a profit. The workers employed in sheltered work/work activity stations produce considerably less than non-disabled workers and are paid less than minimum wages, depending on their productivity. They also need other services not required by non-disabled workers. Thus, workshops operate at a loss and need subsidization to exist. Long-Term Sheltered Workshops/Work Activity Centers also receive subsidy help from United Funds and county aid.

Long-term sheltered work and work activity programs are monitored and assessed to assure compliance with state standards for these kinds of programs.

ACTIVITY OBJECTIVES:

1. To maintain approximately the same number of LTSW stations from 1979 to 1981.

- 2. To maintain approximately the same number of WAC stations from 1979 to 1981
- 3. To evaluate and provide technical assistance to 11 LTSW and to 10 WAC programs for compliance with state standards and possible certification.
- 4. To develop and test 5 non-traditional LTSW programs principally involving the use of business and industrial sites for sheltered work.
- 5. To evaluate effectiveness of LTSW and WAC programs.
- 6. To investigate and resolve sheltered work complaints.

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Number of LTSW stations	2,300	2,300
Number of LTSW employees		
entering competitive employment	126	135
Number of WAC stations	1,670	1,670
Number of WAC employees		•
entering LTSW	58	61
Number of non-traditional		
LTSW stations	80	100
Average hr earnings:		
LTSW employees	\$1.30	\$1.30
WAC full time	\$.60	\$.60
WAC part time	\$.50	\$.50
Number of sheltered		
workers' complaints	100	120

ACTIVITY: BASIC CLIENT SERVICES
PROGRAM: VOCATIONAL REHABILITATION

AGENCY: DEPARTMENT OF ECONOMIC SECURITY

ACTIVITY DESCRIPTION: This activity provides direct vocational rehabilitation services to persons with vocational handicaps who are eligible for vocational rehabilitation services under Section 110 of the Rehabilitation Act of 1973, as amended. The services are delivered by vocational rehabilitation counselors housed in field offices throughout Minnesota. Eligibility for these services is contingent on: a) the presence of a physical or mental disability which, for the individual, constitutes or results in a substantial handicap to employment; and b) reasonable expectation that vocational rehabilitation services will benefit the individual in terms of employability. Services which may be provided to eligible persons include training, physical restoration services, maintenance and transportation, services to other family members, interpreter services, telecommunications, sensory and other aids for the deaf, fees for occupational licenses, tools and equipment and other goods and services. These services are provided solely to assist persons to become employable and obtain employment appropriate to their capabilities.

ACTIVITY OBJECTIVES:

- 1. To accept 6,030 new cases and initiate 5,010 vocational rehabilitation (VR) plans, no fewer than 60% to be severely handicapped, by the end of F.Y. 1981.
- 2. To place into competitive employment 4,170 clients, earning an average of \$185 per week at an average case service expenditure of \$1,000 per client.
- 3. To place into sheltered work 593 clients, earning an average of \$42 per week at an average case service expenditure of \$2,620.
- 4. To place no more than 135 clients as unpaid workers or homemakers at an average case service expenditure of \$800 per client.
- 5. To provide those counseling, placement and post-employment services which will increase job retention for DVR clientele one year after closure to 85 percent.

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Number of new cases accepted	3,015	3,015
Number of new VR plans initiated	2,505	2,505
Percent severely handicapped	55.0	60.0
Average number of weeks from		
application to acceptance	11	10
Average number of weeks from		
acceptance to plan initiation	12	12
Rehabilitants		
Number competitively employed	2,100	2,070
Percent competitively employed	85.0	85.0
Number of sheltered workers	303	['] 290
Number of unpaid workers or		
homemakers	70	65
Average weekly earnings of	••	
rehabilitants		
Competitive	\$ 180	\$ 190
Sheltered	\$ 39	\$ 45
Average cost of purchased	•	
services per rehabilitant		
Competitive	\$1,000	\$1,000
Sheltered	\$2,550	\$2,690
Unpaid	\$ 800	\$ 800
Percent of rehabilitants		
severely handicapped	55.0	60.0
Competitive	55.0	60.0
Sheltered	95.0	95.0
Unpaid	65.0	65.0
Percent of clients who retain	05.5	95 5
employment after one year	85.5	85.5

DIVISION OF VOCATIONAL REHABILITATION FIVE-YEAR PLAN FOR THE IMPROVEMENT OF SERVICES TO THE HEARING IMPAIRED*

To better serve the needs of hearing impaired persons, the deaf and hard of hearing, Minnesota's Division of Vocational Rehabilitation (DVR) has developed a plan to be implemented over the next five years.

DVR presently provides programming under the mandate of the Rehabilitation Act of 1973. Amendments to the Act in 1978 target the hearing impaired for additional services.

DVR proposes an outreach effort to identify more accurately the needs of the target group, determine the population to be served and to provide uniform statewide services to meet the needs. Referrals will be sought from schools, the Department of Public Welfare (DPW), speech and language therapists, medical service providers, the Social Security Administration and other sources.

Because the Division's responsibilities are vocationally oriented, the primary target population will be the 5,765 persons estimated to be in the 15-24 age group whose hearing impairment is their primary disability.

DVR intends to increase its hearing impaired caseload by 100% within the five year period. This will significantly reduce the imbalance between the number now being served and the many who may be eligible. Limited financial resources and the need for more counselors specifically trained to work with hearing impaired clients limit DVR's ability to meet the total need.

While all eligible hearing impaired applicants will be offered DVR services, agency outreach efforts will focus on the target population, whose needs are crucial and for whom timely programming can be most effective.

ACTIVITY GOALS:

- 1. Increase the involvement of deaf persons in planning, evaluating, and improving services for the deaf and hard of hearing.
- 2. Establish a deliberate and identifiable outreach plan statewide to increase the number of appropriate referrals of hearing impaired people to DVR.
- 3. Improve the quality of service to the deaf by increased and more appropriate utilization of interpreters throughout the rehabilitation process.
- 4. Improve and expand telecommunication services for the hearing impaired.
- 5. Improve the awareness, knowledge and skills of facilities staff and practitioners who provide diagnostic, evaluation, counseling, training, and employment services so that hearing impaired persons have access to these services and derive maximum benefit from them.
- 6. Substantially increase the number and improve the statewide distribution of staff qualified and trained to work with hearing impaired persons.
- 7. Double the FY 1978 number of hearing impaired clients accepted for VR service by the end of FY 1984.
- * Adapted from: Minnesota Division of Vocational Rehabilitation Five-Year
 Plan for the Improvement of Services to the Hearing Impaired.
 St. Paul: Division of Vocational Rehabilitation, November 1979.

DEPARTMENT OF ECONOMIC SECURITY

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WHITE BEAR LAKE FIELD OFFICE 3148 Century Avenue North Lincoln Square White Bear Lake, Minnesota 55110

WHITE BEAR LAKE SCHOOLS
3375 Willow Lane
White Bear Lake, Minnesota 55110

ROSEVILLE SCHOOLS
2151 Lexington Avenue North
Roseville, Minnesota 55113

ST. PAUL SCHOOLS
Administration Building
360 Colburne
St. Paul, Minnesota 55102

METRO SQUARE FIELD OFFICE
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7th & Jackson
St. Paul, Minnesota 55101

HASTINGS FIELD OFFICE 1250 Highway 55 West Hastings, Minnesota 55033

ST. PAUL PARK SCHOOLS 8040 80th Street South Cottage Grove, Minnesota 55016

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MENDOTA
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MINNEAPOLIS NORTH OFFICE 1315 Penn Avenue North Minneapolis, Minnesota 55411 MINNEAPOLIS NW SUBURBAN OFFICE 4th Floor "6040" Building 6040 Earle Brown Drive Minneapolis, Minnesota 55430

MINNEAPOLIS SW SUBURBAN OFFICE 3101 West 69th Street Minneapolis, Minnesota 55435

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Central Administration Building
10025 Penn Avenue South
Bloomington, Minnesota 55431

CIRCLE PINES SCHOOLS
Centennfal School District #12
Circle Pines, Minnesota 55014

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ANOKA STATE HOSPITAL Anoka State Hospital Miller East Anoka, Minnesota 55303

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Mankato, Minnesota 56001

MANKATO WELFARE PROJECT 400 Washington Court Mankato, Minnesota 56001

WINTHROP SCHOOLS
Winthrop Public School
Winthrop, Minnesota 55396

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MARSHALL FIELD OFFICE 107½ E. Main Street Box 168 Marshall, Minnesota 56258

ROCHESTER FIELD OFFICE
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Rochester, Minnesota 55901

FARIBAULT STATE HOSPITAL
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Faribault, Minnesota 55021

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WINONA FIELD OFFICE 1160 West 7th Street Winona, Minnesota 55987

RED WING FIELD OFFICE Vocational Technical School Pioneer Road & Highway 58 Red Wing, Minnesota 55066

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CENTRAL AREA Area Director: O. K. Hage

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COKATO SCHOOLS

Dassel - Cokato Public Schools
Cokato, Minnesota 55321

GLENCOE SCHOOLS
Lincoln School
Glencoe, Minnesota 55336

ALEXANDRIA SCHOOLS
Central Junior High
7th & Fillmore
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CAMBRIDGE FIELD OFFICE 135 NW 2nd Avenue Cambridge, Minnesota 55008

ST. CLOUD REFORMATORY
State Reformatory for Men
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BIRD ISLAND SCHOOLS
Bird Island Public Schools
Bird Island, Minnesota 55310

STILLWATER FIELD OFFICE
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Stillwater, Minnesota 55082

FERGUS FALLS STATE HOSPITAL
State Hospital Memorial Building
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BRAINERD STATE HOSPITAL
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VIRGINIA FIELD OFFICE Box 1285 Pearsall Industrial Park 1500 18th Virginia, Minnesota 55792 HIBBING FIELD OFFICE Hibbing Public Schools Hibbing, Minnesota 55746

GRAND RAPIDS FIELD OFFICE 401 11th Street Grand Rapids, Minnesota 55744

INTERNATIONAL FALLS FIELD OFFICE Drawer M South International Falls, MN 56679

56701 MOOSE LAKE STATE HOSPITAL CVRP Unit Moose Lake, Minnesota 55767

> PARK RAPIDS FIELD OFFICE 601 E 1st Street ' Park Rapids, Minnesota 56470

AGENCY: DEPARTMENT OF TRANSPORTATION

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

The Department of Transportation (Mn/DOT) has the overall responsibility for developing, improving, and managing Minnesota's transportation system in order to provide safe and efficient movement of people and goods. Mn/DOT has program responsibility for highways, aeronautics, railroads, bikeways, transit, and motor carrier regulation.

Minnesota Statutes (1976), Section 174.01 provides that the Department of Transportation will be the principal agency of the State for development, implementation, administration, and coordination of state transportation policies, plans, and programs. The transportation system as defined by this legislation includes public transit.

Minnesota Statutes (1976), Chapter 174 additionally provides that the Commissioner of Transportation shall assist and advise political subdivisions and recipients of public transit assistance in the planning, promotion, development, operation, and evaluation of programs and projects. The Commissioner shall establish, by rule, the procedures and standards for review and approval of applications for financial assistance.

One of the Mn/DOT objectives regarding transit is to help alleviate the transportation problems of Minnesota's elderly and handicapped residents. Mn/DOT will continue to develop and implement policies, programs and planning guidelines directed toward the improvement of transportation opportunities for these individuals.

Among the statewide transportation development priorities is the requirement that any transit system receiving state financial assistance show that provisions have been made for limited mobility persons to effectively utilize the systems service.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

Every citizen of or visitor to Minnesota is a client of Mn/DOT because everyone uses the transportation system either directly or indirectly. Mn/DOT's actions not only impact everyone who drives a car or truck or rides a bus a plane or train or bike, but also affect many industries through regulation or subsidy programs. It is Mn/DOT's continuing goal to ensure that the best direct services are provided within available resources and with the least negative impact on Minnesota's citizens and their environment, and to ensure that all people and businesses are treated in a fair and equitable manner by Mn/DOT regulation and subsidy programs.

Certain segments of the State's population (e.g., the elderly and persons with handicaps) experience problems of limited mobility, such as lack of access to public transportation services. Although the Minnesota Department of Transportation is attempting to address this problem through programs such as the paratransit demonstration program, additional programs are needed.

In Minnesota, 70% of limited mobility persons reside within the Twin Cities metropolitan area, Duluth, Rochester, and St. Cloud. Each of these urban areas has implemented programs specifically designed to increase the availability of transit services for limited mobility persons. Typical elements of these programs include door-to-door travel and reduced fares. In addition to these urban services, several smaller cities and rural communities have transit or paratransit programs that include vehicles with ramps or wheelchair lifts to accommodate persons with mobility handicaps.

A variety of additional federally funded and state administered transportation services for persons with handicaps also exist in the State. One of these federal programs provides funds to purchase capital equipment for private non-profit agencies that provide elderly and handicapped transportation (UMTA 16(b)(2) Program).

Other programs are operated by social service agencies and are subsidized by public funding. Additional services are provided by for-profit, non-emergency ambulance operators.

The paratransit demonstration program will include additional services for elderly and handicapped individuals. Examples of these projects include point-to-point service using shared-ride taxis and an accessible dial-a-ride bus operated county-wide.

As of January, 1978, there were approximately 70 taxi companies operating in over 50 cities in Minnesota. Many of these companies provide a wide variety of services, including the delivery of packages and special discount fares for elderly and handicapped patrons. In many communities, taxis are the only form of public transportation. Taxicabs are regulated by municipalities and, therefore, the fares and services differ greatly among Minnesota communities. Taxicab operators will also be participating in the paratransit demonstration program to provide shared-ride service and also specialized service for individuals with handicaps.

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Arthur J. Miller Administrator Valley View Nursing Home East Cedar Street Houston, MN 55943

AGENCY: HOUSING FINANCE AGENCY

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

The Minnesota Housing Finance Agency is charged to provide decent, safe and sanitary residential dwellings at prices and rentals which persons and families of low and moderate income can afford. The agency provides a variety of housing assistance options such as homeownership, rehabilitation loans and grants and rental assistance for persons of low and moderate income.

The Minnesota Housing Finance Agency was established to provide a source of low cost financing for the development, purchase, and improvement of housing for persons of low and moderate income. The agency coordinates and administers housing assistance programs of the federal government.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

Through the sale of tax exempt bonds the Minnesota Housing Finance Agency is able to provide below-market interest loans which decrease mortgage payments and, in developments financed by the Minnesota Housing Finance Agency, provide lower rents.

The agency services the housing needs of low and moderate income people with adjusted gross annual income under \$17,500 (\$19,000 in the metropolitan area) through its loan programs and people with adjusted gross annual income under \$5,000 through its grant program. Through the Federal Housing Assistance Program (Section 8), the agency is able to provide assistance to low income people to ensure that not more than 25% of their income goes toward rent.

The State Planning Agency has estimated that approximately 200,000 low and moderate income households will need housing subsidies by 1985. The agency currently anticipates serving approximately 30,000 households during the period from 1979 to 1981.

Clientele are affected by increasing the supply of housing, lowering rents and mortgage payments and improving the condition of existing housing.

Since the agency began operation in 1973, over 9,000 homes have been financed at interest rates ranging from 6½% to 8½% through the Minnesota Housing Finance Agency Mortgage Loan Program. The agency has also developed a graduated mortgage payment plan for qualified home buyers. The agency has provided interim or permanent financing for over 13,300 apartment units currently occupied or under construction. The Home Improvement Loan Program has assisted 24,600 households, and the Home Improvement Grant Program has assisted 9,000 households. In addition, the American Indian Program has provided financing for over 200 households.

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MINNESOTA HOUSING FINANCE AGENCY RESIDENTIAL GROUP HOME PROGRAM FOR THE DEVELOPMENTALLY DISABLED BY REGION - FINANCED, COMMITTED, AND PROPOSED

DEVELOPM	MENT NO./LOCATION	SPONSOR	NO. OF RESIDENTS	COMMITMENT OR MORTGAGE DATE	COMMITMENT OR MORTGAGE AMOUNT	COMMENTS/ CLASSIFICATION
REGION C	ONE					
KEGTON C	JAL .					
DD 76-14	Fosston	Polk County Group				
		Homes, Inc.	10	9/06/78	118,118	Class A New Const
DD 76-15	5 Argyle	Marshall County Group			-	
		Homes, Inc.	10	12/06/77	121,406	Class A New Const
DD 79-37	l East Grand Forks	Polk County Group				
		Homes Inc.	10	3/80	141,905	Class A Remodeling
TOTAL	3 Residences		30		381,429	
REGION I	rwo				·	
DD 77-28	B Park Rapids	Heartland Homes for				
<i>DD 77</i> 2 0	o rark maprab	Retarded Citizens, Inc	. 8	11/20/78	139,827	Class A New Const
	Bemidji	North Star Homes, Inc.	14	3/80 (c)	375,000*	Class B New Const
	Bemidji	Wilderness Farms, Inc.	6	5/80 (c)	150,000*	Class A New Const
TOTAL	3 Residences		28		664,827**	
REGION T	THREE					
DD 76-02	2 Chisholm	Range Center, Inc.	9	5/28/76	87,149	Class A New Const
	Grand Rapids	Lutheran Social Service	12	12/23/77	204,944	Class A New Const
) Virginia	Lutheran Social Service	12	11/01/78	238,607	Class A New Const
TOTAL	3 Residences		33		530,700	

^{*} Estimated Mortgage Amount

^{**} Esti ted Mortgage Amount(s) per Region(s)

⁽c) Actual or Estimated Commitment Date

DEVELOPMENT NO./LOCATION	SPONSOR	NO. OF RESIDENTS	COMMITMENT OR MORTGAGE DATE	COMMITMENT OR MORTGAGE AMOUNT	COMMENTS/ CLASSIFICATION
REGION FOUR					
DD 76-09 Starbuck	Project New Hope, Inc.	8	6/22/70	115.007	
DD 76-10 Alexandria	Project New Hope, Inc.	8	6/22/78 6/22/78	145,284	Class A New Const
DD 76-11 Alexandria	Project New Hope, Inc.	8	6/22/78	139,150	Class A New Const
DD 79-34 Breckenridge	Wilkin County Group		·	138,238	Class A New Const
Moorhead	Homes, Inc.	6	8/23/79 (c)		Class A New Const
Mornead	Clay County Residence, 1	Inc. 6	5/80 (c)	146,022*	Class A New Const
TOTAL 5 Residences		36		699,913**	
REGION FIVE					
DD 76-19 Little Falls	Lutheran Social Service	12	3/25/77	171,429	Class A New Const
DD 77-27 Pine River	Pine River Group			-7-1,127	CIASS A NEW COUST
DD 70 05 ** 1	Homes, Inc.	10	9/28/78	172,304	Class A New Const
DD 79-35 Wadena Long Prairie	Pembina Trail, Inc. Todd County Group	8	9/27/79 (c)	219,227*	Class A New Const
	Home, Inc.	10	5/80 (c)	200,000*	Class A New Const
TOTAL 4 Residences		40		762,960**	
REGION SIX					
NO DEVELOPMENTS					
REGION SEVEN					
DD 80-40 Sandstone	Community Involvement				
St. Cloud	Programs, Inc. Opportunity Training	8	2/28/80 (c)	138,409*	Class A Remodeling
St. Cloud	Center, Inc. Opportunity Training	12	5/80 (c)	250,000*	Class A New Const
	Center, Inc.	12	5/80 (c)	250,000*	
TOTAL 3 Residences		32		638,409**	

DEVELOPMENT	NO./LOCATION	SPONSOR	NO. OF RESIDENTS	COMMITMENT OR MORTGAGE DATE	COMMITMENT OR MORTGAGE AMOUNT	COMMENTS/ CLASSIFICATION
REGION EIGHT						
NO DEVELOPME	NTS					
REGION NINE						
DD 76-23 Wat DD 79-33 Ar1		Hope Residence, Inc. High Island Creek	14	6/23/77	176,947	Class A New Const
	80011	Shelter, Inc.	15	6/28/79 (c)	300,789*	Class A New Const
TOTAL 2 R	esidences		29		477,736**	
REGION TEN						
DD 76-16 Red		Lutheran Social Service	12	7/01/77	212,265	Class A New Const
DD 76-17 Waba DD 76-21 Hari		Great River Homes, Inc. Fillmore County Handi-	8	10/26/77	60,711	Class A Remodelin
DD 76-22 Wana Wana	amingo amingo	capped Services, Inc. Riverview Manor, Inc.	10 12	10/14/77 9/08/78	60,058 169,725	Class A Remodelin Class A New Const
	proposed addtn)	Riverview Manor Houston County Group	3	5/80 (c)	75,000*	Class A New Const
DD 79-38 Adar	ns	Homes, Inc. Southeastern Residential	14	9/27/79 (c)	274,741*	Class A New Const
DD 79-39 Lake	⊇ City	Planning Committee, Inc Great River Homes, Inc.	. 16 8	10/25/79 (c) 2/28/80 (c)	379,759* 139,464*	Class B New Const
Wind	_	Winona Group Homes, Inc.	10	5/80 (c)	170,000*	Class A Remodelin Class A Remodelin
TOTAL 8 Re	esidences		93		1,541,723**	
REGIONS ONE-	TEN (OUTSTATE/GRE	ATER MINNESOTA)				
TOTAL 31 Re	esidences		321		5,697,697**	

DEVELOPMENT NO./LOCATION	SPONSOR	NO. OF RESIDENTS	COMMITMENT OR MORTGAGE DATE	COMMITMENT OR MORTGAGE AMOUNT	COMMENTS/ CLASSIFICATION
PROTON DI SUDV. (167772.6)					
REGION ELEVEN (METRO)		· 			
DD 76-03 Shoreview (I)	The Residence, Inc.	8	3/23/76	98,872	Class A New Const
DD 76-04 Bloomington (I)	Lutheran Social Service	12	7/22/76	287,820	
DD 76-05 Bloomington (II)	Lutheran Social Service	12	-	207,020	Class A New Const Class A New Const
DD 78-33 Bloomington (addtn)	Lutheran Social Service	-	7/31/79	87 , 204	Class A New Const
DD 76-08 West St. Paul	Dakota's Children	8	6/06/77	133,295	
DD 76-25 Shoreview (II)	The Residence, Inc.	8	11/01/77	79,624	Class A New Const
DD 77-26 Eden Prairie (I)	Louise Whitbeck Fraser	•	11/01///	73,024	Class A New Const
	School, Inc.	12	12/02/77	780,004	Class A New Const
Eden Prairie (II)	Louise Whitbeck Fraser		12,02,11	700,004	Class A New Const
•	School, Inc.	12	12/02/77	_	Class A New Const
Eden Prairie (III)	Louise Whitbeck Fraser		,,		Class A New Const
	School, Inc.	12	12/02/77	_	Class A New Const
DD 77-29 St. Louis Park	Minnesota Jewish Group		//		Class A New Const
	Homes, Inc.	6	5/03/78	104,068	Class A Remodeling
DD 77-31 Wayzata	Episcopal Group Homes, In		4/04/78	102,702	Class A Remodeling
DD 78-32 Minnetonka	Hammer School, Inc.	6	1/18/79	131,197	Class A Remodeling
Minneapolis	People, Inc.	15	5/80 (c)	250,000*	Class A Remodeling
				250,000	Class A Remodelling
TOTAL 12 Residences		117		2,054,786**	
	•				
STATE TOTAL					
STATE TOTAL					

438

7,752,483**

43 Residences

AGENCY: DEPARTMENT OF NATURAL RESOURCES

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

The Department of Natural Resources exists to protect, conserve, regulate and manage the lands, waters, timber, minerals, fish, wildlife and other natural resources of the state so as to provide the public, now and in the future, with the optimum level, quality and combination of social, cultural and economic benefits. To this end the agency is charged with the administration of the public lands, parks, forests, and minerals of the state as well as with the regulation of a broad range of activities which affect nautral resources.

The goal for outdoor recreation in Minnesota is to manage and protect the appropriate natural, historic, and archaeological resources in Minnesota and develop supporting facilities and programs for an outdoor recreational system providing quality recreational and aesthetic experiences. The Minnesota State Comprehensive Outdoor Recreation Plan of 1974 recognized many objectives for the outdoor recreational and educational experiences for all persons, including handicapped and elderly persons. While working toward physical accessibility, educational and recreational programming for everyone is also necessary and will be incorporated into the entire program. It is essential for DNR to have continuous contact with the public, informing them of strides being made in outdoor accessibility and when necessary involving them in planning and developmental stages.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

DNR is organized by function into six operating divisions: Enforcement, Fish and Wildlife, Forestry, Minerals, Parks and Recreation and Waters.

Because the activities of DNR are so varied and geographically extensive, they affect virtually the entire population of the state (with nearly 7 million visitors to the state parks annually). The impact and clientele of the Department is defined by the extent of its responsibilities. It manages 12,034 lakes and administers 5.2 million acres of state lands.

PROGRAM: PARKS AND RECREATION MANAGEMENT AGENCY: DEPARTMENT OF NATURAL RESOURCES

PROGRAM PURPOSE: This program administers parks, waysides, trails, scientific and natural areas, public accesses and canoe and boating routes totalling over 630 units, along with related acquisition, development, maintenance and operation activities. Program activities include accessibility services.

OPERATION: With Legislative Commission on Minnesota Resources (LCMR) funds and other funds, new public facilities were constructed in parks including eight camping areas, two picnic areas, three interpretive centers, eight sanitation buildings, and 33 facilities were rehabilitated to provide accessibility for individuals with handicaps.

AGENCY: COUNCIL FOR THE HANDICAPPED

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

- 1. To assist inquiring people with disabilities statewide by referral to available services.
- 2. To increase public awareness of and community involvement by people with disabilities in Minnesota.
- 3. To expand statewide options for independent community living.
- 4. To increase mobility, communications, and program access statewide.
- 5. To promote appropriate educational and employment opportunities for people with disabilities.
- 6. To promote individual health and development.
- 7. To assist public and private recipients of federal funds to effectively and efficiently implement Title V of the Rehabilitation Act of 1973.

F.Y. 1980-81 objectives: to determine the effectiveness of P.L. 94-142. To promote Title V compliance by state government and other recipients; state-wide residential options and support services for mentally or physically disabled; transportation services; health/dental care; job opportunities; communications; access to education, government and media; preschool and vocational education opportunities; and uniform building code enforcement.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

The council exists to advise the Governor, state legislature, service providing agencies and the public regarding the needs and potentials of the over 500,000 people with physical, mental or emotional disabilities in Minnesota; to refer disabled persons to available services; to evaluate the effectiveness of services; and to advocate improved service planning, coordination and delivery.

	F.Y. 1980	F.Y. 1981
Number of disabled referred to		
service	1,600	1,600
Number of public inquiries		
handled	1,200	1,200
Number of newsletters	8,000	8,000
Number reached by awareness		
days (communities)	40	40
Number of conference		
participants	2,000	2,000
State/local agencies assisted	40	40
Non-state organizations		
advised	25	25

AGENCY: DEPARTMENT OF EDUCATION

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

The Department of Education provides leadership and service to maintain and improve a uniform and quality system of public education. To accomplish this purpose, the department proposes, modifies, and initiates educational policies aimed at improving education for Minnesota citizens; assures the provision of programs required in statute and rule and assists in the development and provision of comprehensive programs and services, in evaluating the effectiveness of these programs, in appraising student progress and in reporting the evaluation results to the public; increases the capacity to improve the management of educational services at state, regional, and local levels; undertakes to improve its capacity for effective and efficient exchange of information in order to support educational decision-making; assists other units of government in improving the availability, utilization, and quality of library services; and foster increased cooperation with other agencies and units of government.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

The Department of Education serves the majority of Minnesota's citizens through 438 school districts, 60 secondary cooperative centers, 33 area vocational-technical institutes, nine educational cooperative service units, seven elementary and secondary vocational computer regions and numerous organizations at different levels of government. Service and leadership activities are focused on a much broader population than the elementary and secondary enrollment of about 808,000. The department licenses and regulates 60 private vocational schools and 450 agencies providing post-secondary education for veterans and it operates the School for the Deaf and the Minnesota Braille and Sight Saving School. The department serves 92,000 non-public students through programs for which some are eligible. Leadership, information, and technical assistance are provided for libraries in cities, counties, and regions. The Department operates the Library for the Blind and Physically Handicapped. The adult population of the state receives services through community education in local districts, adult basic education programs, and extensive programming in the area of vocational-technical institutes.

PROGRAM: DIVISION OF SPECIAL & COMPENSATORY EDUCATION

AGENCY: DEPARTMENT OF EDUCATION

PROGRAM PURPOSE: To require the routine availability of appropriate educational programs for handicapped, educationally disadvantaged, Indian, migrant and bilingual individuals of school age in order to participate in fulfilling the agency's mission of ensuring education for all eligible residents. To operate the state residential schools for hearing/vision impaired and multiply handicapped sensory impaired students.

OPERATION: This program carries out the development, management and administration of laws, regulations, and policies for handicapped, edu-

cationally disadvantaged, Indian, migrant, and bilingual students. Special Education has developed a monitoring system and is implementing it statewide to assure compliance with federal and state laws and rules for education of handicapped students. Achievement of full service will be encouraged through allocating P.L. 94-142 discretionary funds and expansion of in-service training activities for district personnel. Title I will be emphasizing services to secondary students and the merging with other compensatory programs of like requirements such as application, monitoring and complaint processes. The state residential schools will continue to upgrade quality of services and emphasize serving the multiply handicapped sensory impaired. Migrant Education will expand services to secondary students, expand year round programs, and implement a credit reciprocity system among states. Bilingual Education will determine if a need exists to establish regular bilingual programs based on the outcome of current pilot programs. Indian Education will continue to maintain quality of services and gather data relative to scholarship, language, and cultural needs.

Direct services are provided to students and/or parents by operating the two state residential schools and expanding those services to provide quality programming to multiply handicapped sensory impaired students, and by providing post-secondary scholarships to Indian adults. Major goals include monitoring compliance with laws, rules and standards, and recommending legislative and policy changes for more effective delivery of services.

CLIENTELE: This program serves and regulates school districts and the state residential schools through the following activities:

1) assists and administrates allocation of federal funds to 438 school districts serving 55,000 students with supplemental help because of their limited reading and math abilities; 2) assists and administrates allocation of federal funds to 17 school districts serving 5,000 migrant students; 3) assists 110 districts serving 1,300 Indochinese children and is implementing five pilot programs in bilingual education and a statewide needs assessment of bilingual needs; 4) assists 115 districts serving 13,000 Indian students and implements 12 pilot programs in Indian language and culture; 5) assists and monitors 438 school districts serving 96,000 handicapped students; and 6) operates the state residential school which serves approximately 240 hearing/vision impaired and multiply handicapped sensory impaired students.

Percent (%) of State's population of handicapped children expected to be receiving full educational opportunities in each school year. Estimate of year all children expected to be provided full educational opportunities (full service)

	AGES 3	THRU 5	AGES 6 1	THRU 17		AGES 18	THRU 21	
HANDICAPPING CONDITIONS	SCHOOL YEAR 1978-79	ESTIMATE YEAR OF FULL SVCS	SCHOOL YEAR 1977-78	SCHOOL YEAR 1978-79	SCHOOL YEAR 1978-79	SCHOOL YEAR 1979-80	SCHOOL YEAR 1980-81	ESTIMATE YEAR OF FULL SVCS
MENTALLY RETARDED	73%	1980	84%	100%	60%	80%	100%	1980
HARD OF HEARING DEAF	80%	1980	65%	100%	50%	60%	100%	1980
SPEECH IMPAIRED	80%	1980	100%		85%	98%	100%	1980
VISUALLY HANDICAPPED	75%	1980	80%	100%	50%	60%	100%	1980
SERIOUSLY EMOTIONALLY DIST	70%	1980	80%	100%	50 %	60%	100%	1980
ORTHOPEDICALLY IMPAIRED	75%	1980	80%	100%	50%	60%	100%	1980
HEALTH IMPAIRED	67%	1980	98%	100%	49%	50%	100%	1980
SPECIFIC LEARNING DISABILITY	70%	1980	90%	100%	55%	60%	100%	1980

Estimate of year full services are expected to be reached for AGES 0 THRU 2 (non-categorical): School Year 1985.

SOURCE: Adapted from "MINNESOTA'S SPECIAL EDUCATION PLAN FOR FISCAL YEAR 1979 AS AMENDED BY PUBLIC LAW 94-142," - Minnesota Department of Education.

MINNESOTA STATE DEPARTMENT OF EDUCATION SPECIAL EDUCATION UNDUPLICATED CHILD COUNT DECEMBER 1, 1979

	TOTAL	REC'ING	% REC'NO
	ENRLMNT	SERVICE	SERVICE:
PUBLIC:	774,996	79,264	10.228
	87,393	2,876	3.291
TOTAL:	862,389	82,140	9.525

AGE*	SPEECH HANDI- CAPPED	EDUCABLE MENTALLY RETARDED	TRAINABLE MENTALLY RETARDED	PHYSICALLY HANDI- CAPPED	HEARING IMPAIRED OR DEAF	VISUALLY IMPAIRED OR BLIND	LEARNING DISABLED	EMOTION- ALLY DISTURBED	DEAF AND BLIND	OTHER HEALTH IMPAIRED	TOTA
0-2	95	117	38	80	42	26	76	8	4	74	560
3-5	4,993	414	271	207	241	50	866	138	2	74	7,254
6-8	9,368	1,470	481	285	317	82	6,250	343	0	249	18,845
9-11	6,418	2,268	571	287	303	100	9,826	579	0	281	20,633
12-14	1,792	2,833	698	246	345	110	9,613	1,090	4	417	17,148
15–17	618	3,090	733	188	224	93	7,778	1,570	1	599	14,894
18-21	59	700	749	33	53	12	868	150	1	43	2,668
+21	0	6	127	0	0	3	2	0	0	0	138
0-+21	23,343	10,898	3,668	1,326	1,525	476	35,279	3,878	12	1,735	82,140

^{*} Age as of September 1, 1979.

PROJECTED NUMBER OF PERSONNEL (IN FULL-TIME EQUIVALENTS) NEEDED TO MEET THE FULL EDUCATIONAL OPPORTUNITIES GOAL FOR HANDICAPPED CHILDREN IN THE 1980-1981 SCHOOL YEAR

PERSONNEL	TEACHERS OF SPECIAL CLASSES	RESOURCE ROOM TEACHERS	ITINERANT CONSULTING TEACHERS	TEACHERS OF SPECIAL CLASSES RESOURCE ROOM TEACHERS ITINERANT CONSULTING TEACHERS PSYCHOLOGISTS SCHOOL SOCIAL WORKERS	1,702 2,197 2,129 252 357
TOTAL	1,702	2,197	2,129	OCCUPATIONAL THERAPISTS	84
MENTALLY RETARDED	787	939		HOME-HOSPITAL TEACHERS	. 241
HARD OF HEARING	99		96	AUDIOLOGISTS	1
MARD OF HEARING	77		90	TEACHER AIDES	2,029
DEAF	38			VOCATIONAL EDUCATION TEACHERS	85
				WORK-STUDY COORDINATORS	140
SPEECH IMPAIRED	205		733	PHYSICAL EDUCATION TEACHERS	17
VISUALLY HANDICAPPED	14		48	RECREATION THERAPISTS	1
SERIOUSLY EMOTIONALLY DISTBD	199			SUPERVISORS	304
				OTHER NON-INSTRUCTIONAL STAFF	230
SPECIFIC LEARNING DISABILITY	310	1,258	1,246	TOTAL	9,766
ORTHOPEDICALLY IMPAIRED	50		6		-

Adapted from: Minnesota's Special Education Plan for Fiscal Year 1980 (As Amended by Public Law 94-142).

Saint Paul: Department of Education/Division of Special and Compensatory Education, 1979.

SPECIAL EDUCATION TRAINING PROGRAMS IN MINNESOTA

INSTITUTION OF		*				PROG	RAMS				- · ·	
HIGHER EDUCATION	LD	ED	SPC PATH	EMR	TMR	HI	ΛΙ	РН	PSY	SW	SPEC ED ADMIN	EARLY CHILD
University of Minn Minneapolis	•	×	•	•	•	x •	•	•	•	•	•	•
St. Cloud State	•		•	•	•	•		•	-		•	•
Mankato State	•	•	•	•	•							•
University of Minn Duluth	•	x	•	•	•	×			 			
Moorhead State	•	X •	•	•	•			 	•			<u>).</u>
Bemidji State	•	-										 .
St. Thomas College St. Paul	•	X •		•	•							
Winona State	•			•	•							
St. Theresa College Winona			•									

^{• -} Existing Programs

Source: Minnesota's Special Education Plan for Fiscal Year 1980 (As Amended by Public Law 94-142).

Saint Paul: Dept of Education/Division of Special and Compensatory Education, 1979.

x - Programs added or enhanced through 94-142 Discretionary Funds in 1979-81

PROJECTED NUMBER OF PERSONNEL TO RECEIVE PRE-SERVICE IN SCHOOL YEAR 79-80

					INSTRUC	TIONAL	DISABIL	ITY AREA	A			
INSTITUTION OF HIGHER EDUCATION	LD	ED	SP	EMR	TMR	VI	D/HI	SW	PSY	EARLY CHILD	DB MULTI	РН
University of Minn Minneapolis		5					5					
St. Cloud State									-			
Mankato State												
University of Minn Duluth		12					6		·			
Moorhead State		15										
Bemidji State												
St. Thomas College St. Paul		15 .										
Winona State	_											
St. Theresa College Winona												
(Stipends to Students	- Part	D Funds	s)								• · · · · · · · · · · · · · · · · · · ·	
Instate IHEs						15	15					10
Out-of-State IHEs											5	

PROJECTED NUMBER OF PERSONNEL REQUIRING RETRAINING (IN-SERVICE)

Pogular Transport	<u> 1978–79</u>	<u>1979-80</u>
Regular Instructional Personnel (includes Physical Education teachers)	9,622	10,199
Special Education Personnel (includes Educational Diagnosticians, Adaptive PE Teachers, Speech Clinicians, Vocational Educators and Work-Study Coordinators)	5,990	6,337
Paraprofessionals (Aides)	1,739	1,843
Related Services (includes Psychologists, Audiologists, OT's, PT's, MSW's, Therapeutic Recreation Specialists, Medical Personnel, etc.)	1,174	1,238
Parents/Surrogate Parents	1,466	1,576
Administrators/Supervisors Support Personnel	901	955
(Clerical, Transportation, Food Service, etc.)	237	251
Others (Volunteers, Hearing Officers, etc.)	27	29

includes appropriate non-public school personnel

it is assumed that all current and new personnel will need some amount of in-service training

AGENCY: DEPARTMENT OF PUBLIC WELFARE

AGENCY GOALS, OBJECTIVES, AND ACTIVITIES

The Department of Public Welfare exists to assure that financial and medical aid, social, rehabilitation and residential services are made available to help all needy Minnesota residents (who are economically, physically or mentally handicapped and who satisfy eligibility requirements) meet their basic living needs and further to assure that those aids and services are delivered in the most equitable, effective and efficient manner possible.

AGENCY SERVICES - DESCRIPTION, TARGET POPULATION AND ELIGIBILITY REQUIREMENTS

There are four main programs in the department, each responsible for a specific aspect of operation:

- 1. Administrative and Program Support Provides the various supportive services to the other three programs including fiscal administration, data processing and personnel management.
- 2. Income Maintenance Provides policy and procedural direction and supervision to local welfare agencies for the delivery of financial aid programs, makes direct payments to providers of medical services, maintains surveillance and promotes corrective measures in financial aid programs and collects from responsible payers for medical care and child support.
- 3. Social Services Provides: 1) funding policy and procedural direction and supervision to local welfare agencies for the delivery of social services; 2) statewide planning for aging programs plus funding for locally administered programs for senior citizens including foster grandparents; and 3) delivery of rehabilitative services to blind residents including help in establishing and operating small businesses. Among the programs being emphasized are improved in-home programs for the blind.
- 4. Mental Health Develops state plans for service delivery for mentally ill, chemically dependent and mentally retarded residents, provides funding and operating standards for area mental health centers and manages the state hospital and nursing home system. Among the programs being emphasized are the expansion of community programs for persons with mental retardation, and improvement of quality of care, beautification of physical facilities and completion of energy saving projects at state institutions.

In most instances, the primary clientele of the department are the various service providers for whom the department either has direct supervisory responsibilities, makes grant allowances, licenses, or provides rate reimbursement (e.g., the county welfare agencies, mental health centers, medical providers, providers of residential services for persons with mental illness, mental retardation, and chemical dependency). The exceptions to this are

in those areas where the department directly provides services (e.g., blind services and state hospitals). Ultimately, the department's clientele are the consumers of the services provided by the network of service agencies.

RESIDENTS OF FACILITIES LICENSED UNDER* DPW RULE 8: "STANDARDS FOR GROUP HOMES"

There were 63 group homes licensed for emotionally disturbed youths on September 30, 1979, compared to 66 licensed homes one year earlier (and 81 licensed homes in 1977). The utilization rate for the facilities reporting (one facility was not operating) was 77% compared to 75% one year ago.

QUARTER ENDING SEPTEMBER 30	1976	1977	1978	1979
TOTAL RESIDENTS DURING QUARTER RESIDENTS ON FINAL DAY AVERAGE DAILY POPULATION	1,475	1,350	927	1,137
	567	577	461	498
	544	552	450	492
UTILIZATION RATE	66%	72%	7 5%	77%
NUMBER OF LICENSED FACILITIES	95	81	66	63
CAPACITY OF LICENSED FACILITIES	888	810	689	655

RESIDENTS OF FACILITIES LICENSED UNDER DPW RULE 5: "STANDARDS FOR CHILD-CARING INSTITUTIONS"

There were 32 residential institutions for emotionally disturbed youths on September 30, 1979 with a utilization rate of 77% for the quarter. In 1978 27 facilities reported a utilization rate of 78%; and in 1977, 28 facilities reported a utilization rate of 82%.

QUARTER ENDING SEPTEMBER 30	1976	1977	1978	1979
TOTAL RESIDENTS DURING QUARTER RESIDENTS ON FINAL DAY AVERAGE DAILY POPULATION	1,459	1,690	1,929	2,129
	771	817	808	872
	761	781	774	855
UTILIZATION RATE	77%	82%	78%	77%
NUMBER OF LICENSED FACILITIES	30	28	30	32
CAPACITY OF LICENSED FACILITIES	984	957	1,073	1,119 ·

* Source: Trends in Social Services: July-September, 1979. Saint Paul: Dept of Public Welfare/Social Services Division, February 1980.

RESIDENTS OF FACILITIES LICENSED UNDER DPW RULE 34: "STANDARDS FOR THE OPERATION OF RESIDENTIAL FACILITIES AND SERVICES FOR PERSONS WHO ARE MENTALLY RETARDED"

There were 226 (exclusive of state hospital facilities) residential facilities licensed under DPW Rule 34 on September 30, 1979. The licensed capacity of 4,088 represented an increase of 173 (4.4%) over the previous year. Two facilities did not report: five licensed facilities were not in operation.

219 facilities, with a combined capacity of 4,026 reported a total population of 3,915 persons on September 30, 1979. The utilization rate for those facilities was 96%.

QUARTER ENDING SEPTEMBER 30	1976	1977	1978	1979
TOTAL RESIDENTS DURING QUARTER RESIDENTS ON FINAL DAY AVERAGE DAILY POPULATION	3,148	3,420	3,698	4,155
	2,918	3,183	3,456	3,915
	2,824	3,123	3,428	3,871
UTILIZATION RATE	92%	94%	95%	96%
NUMBER OF LICENSED FACILITIES	135	176	206	226
CAPACITY OF LICENSED FACILITIES	3,089	3,531	3,915	4,088

RESIDENTS OF FACILITIES LICENSED UNDER DPW RULE 5 (INSTITUTIONS) DURING JULY - SEPTEMBER 1979

COUNTY	NO. OF FACI. LITIES	RESIDENTS DURING QUARTER	RESIDENTS ON LAST DAY OF QUARTER	AVERAGE POPU- LATION	CAPACITY
STATE TOTAL	32	2,129	872	855	1,119
ANOKA	1	79	66	65	71
BELTRAMI	1	64	47	45	48
DAKOTA	1	100	14	11	20
HENNEPIN	7	1,000	173	149	217
ISANTI	1	50	34	33	44
MILLE LACS	1	55	39	43	50
MOWER	4	146	106	117	132
RAMSEY	9	310	164	152	201
RICE	1	51	41	42	50
ST. LOUIS	3	166	112	117	129
STEARNS	2	76	62	63	92
WINONA	1	32	14	19	65

RESIDENTS OF FACILITIES LICENSED UNDER DPW RULE 8 (GROUP HOMES) DURING JULY - SEPTEMBER 1979

COUNTY	NO. OF FACI. LITIES	RESIDENTS DURING QUARTER	RESIDENTS ON LAST DAY OF QUARTER	AVERAGE POPU· LATION	CAPACITY
STATE TOTAL	63	1,137	498	492	655
AITKIN	1	13	7	7	11
BELTRAMI*	2	44	1	2	12
CARLTON	1	52	8	5	10
CARVER	2	14	8	9	12
CASS CHIPPEWA CROW WING HENNEPIN	1	17	11	10	13
	1	4	4	2	8
	1	24	17	18	16
	23	429	188	190	239
HUBBARD	1	15	11	13	13
ITASCA	3	36	23	22	28
LAKE	1	7	5	6	8
LYON	1	13	9	9	10
MILLE LACS	1	8	6	5	9
MORRISON	1	9	1	4	10
OLMSTED	2	25	13	13	18
PINE	3	123	63	70	76
RAMSEY	3	36	22	18	24
RENVILLE	1	10	7	7	9
ROSEAU	1	8	7	6	6
ST. LOUIS	4	79	22	23	37
SHERBURNE STEARNS WASECA WASHINGTON	1 1 1	12 12 17 87	11 9 7 14	10 3 9 12	10 11 10 14
WILKIN WINONA WRIGHT	1 3 1	35 8	- 18 6	18 3	10 25 6

 $[\]ensuremath{\star}$ One facility was not operating during this period

RESIDENTS OF FACILITIES FOR PERSONS WITH MENTAL RETARDATION (DPW RULE 34) DURING JULY - SEPTEMBER 1979

COUNTY	NO. OF FACI- LITIES	RESIDENTS DURING QUARTER	RESIDENTS ON LAST DAY OF QUARTER	AVERAGE POPU- LATION	CAPACITY
STATE TOTAL	226 ,	4,155	3,915	3,871	4,088
ANOKA BECKER BELTRAMI* BENTON BLUE EARTH	2	59	58	58	59
	1	7	6	7	7
	3	24	20	20	40
	1	23	23	23	23
	5	97	95	95	95
BROWN CARLTON CARVER CASS CHIPPEWA	1	8	8	8	8
	2	12	12	12	12
	2	112	112	112	112
	1	10	10	10	11
	1	15	15	15	15
CHISAGO CLAY CLEARWATER COTTONWOOD DAKOTA	1	15	15	15	15
	2	18	18	18	18
	1	14	14	14	15
	1	47	45	45	45
	5	164	130	130	131
DODGE DOUGLAS FARIBAULT FILLMORE FREEBORN	1	14	14	13	14
	4	53	51	51	52
	2	19	19	19	19
	1	12	12	12	12
	1	18	15	13	15
GOODHUE	3	78	76	77	79
GRANT	1	6	6	6	6
HENNEPIN	44	945	849	8 43	855
HUBBARD	1	8	7	8	8
ITASCA	2	35	32	34	35
KANABEC** KANDIYOHI KITTSON KOOCHICHING LE SUEUR	2 6 1 1 1	151 11 15 14	136 10 15 14	- 136 11 15 14	17 139 11 16 14

One facility was not operating during this periodNeither facility reported for the quarter

COUNTY	NO. OF FACI- LITIES	RESIDENTS DURING QUARTER	RESIDENTS ON LAST DAY OF QUARTER	AVERAGE POPU- LATION	CAPACITY
LINCOLN	1 · · 3 · 3 · · · · · · · · · · · · · ·	15	15	15	15
LYON		45	46	46	46
McLEOD		69	68	68	69
MARSHALL		10	9	10	10
MARTIN		52	50	50	50
MORRISON	1	13	12	12	12
MOWER	2	74	72	71	74
MURRAY	1	14	13	14	14
NOBLES*	3	16	16	16	32
OLMSTED	4	60	58	58	62
OTTER TAIL PENNINGTON PIPESTONE POLK POPE	8	89	85	84	94
	2	30	30	30	30
	1	10	10	10	10
	2	20	20	20	20
	1	6	6	6	6
RAMSEY* REDWOOD RICE ROSEAU ST. LOUIS	29	708	688	674	713
	1	132	132	132	132
	7	125	121	116	130
	1	31	31	31	33
	24	316	297	292	311
SCOTT SHERBURNE STEARNS STEELE STEVENS	1 1 7 1	10 13 92 15 10	10 12 84 14 9	10 12 75 14 9	10 12 95 15 10
SWIFT* WABASHA WASECA* WASHINGTON WINONA	1	-	-	-	8
	1	8	8	8	8
	1	-	-	-	6
	3	18	18	18	18
	1	13	12	8	12
WRIGHT YELLOW MEDICINE	7 2	106 30	103 30	102 30	104 30

^{*} One facility was not operating during the quarter

DEVELOPMENTAL ACHIEVEMENT CENTERS ENROLLMENT ON SEPTEMBER 30, 1979 AND CHANGES DURING QUARTER

COLINER	PERSO	PERSONS ENROLLED LAST DAY OF QUARTER					
COUNTY	TOTAL	HOME BOUND	PRE SCHOOL	ADULT	SCHOOL CONTRACT	ENTERED DURING QUARTER	DEPARTED DURING QUARTER
STATE TOTAL	4,572	452	711	3,273	136	560	550
AITKIN ANOKA BECKER BELTRAMI BIG STONE	21 64 71 27 11	0 0 23 0 0	0 34 0 9 1	21 30 48 18 9	0 0 0 0 1	1 11 8 7 1	1 15 7 0
BLUE EARTH BROWN CARLTON CARVER CASS	71 25 61 66 47	16 2 2 18 0	16 5 7 6 0	39 18 52 42 46	0 0 0 0	9 2 2 5 1	10 4 7 0 2
CHIPPEWA CHISAGO CLAY CLEARWATER COTTONWOOD	36 42 38 30 29	0 3 6 0 3	0 2 0 0 9	36 36 32 28 17	0 1 0 2 0	0 8 5 0 3	2 5 5 2 1
CROW WING DAKOTA DODGE DOUGLAS FARIBAULT	36 179 32 40 28	0 47 7 10 0	0 70 5 0 4	36 61 18 30 24	0 1 2 0 0	3 54 2 3 1	2 18 17 6 0
FILLMORE FREEBORN GOODHUE GRANT HENNEPIN	25 34 51 21 824	1 0 13 0 139	3 6 9 0 199	15 19 22 18 463	6 9 7 3 23	1 4 7 2 159	0 2 2 0 194
HOUSTON HUBBARD ITASCA JACKSON KANABEC	23 21 36 15 43	0 2 0 0	3 0 8 0 0	17 19 26 15 43	3 0 2 0 0	1 7 4 1 2	2 3 1 0 1
KANDIYOHI KITTSON KOOCHICHING LAC QUI PARLE LAKE	37 19 51 7 16	0 0 3 0	6 0 5 0	31 18 42 7 16	0 1 1 0 0	6 1 3 0	1 0 5 2 0

DEVELOPMENTAL ACHIEVEMENT CENTERS ENROLLMENT ON SEPTEMBER 30, 1979 AND CHANGES DURING QUARTER

	PERSO	NS ENROLI	LED LAST 1	DAY OF QU	ARTER		
COUNTY	TOTAL	HOME BOUND	PRE SCHOOL	ADULT	SCHOOL CONTRACT	ENTERED DURING QUARTER	DURING
LE SUEUR LYON McLEOD MAHNOMEN MARSHALL	43 48 58 13 15	3 3 0 0	7 0 4 0	24 45 53 11 13	9 0 1 2 2	1 4 2 0 2	2 2 1 0 4
MARTIN MEEKER MILLE LACS MORRISON MOWER	40 19 31 31 71	0 3 3 0	5 0 0 0 6	35 16 28 31 59	0 0 0 0 6	4 1 3 6 9	5 1 2 6 2
MURRAY NOBLES NORMAN OLMSTED OTTER TAIL	25 12 7 65 68	0 0 0 16 0	0 0 0 25 0	25 12 7 20 68	0 0 0 4 0	0 0 1 6 3	3 0 0 12 0
PENNINGTON PINE PIPESTONE POLK RAMSEY	39 20 34 50 555	0 0 0 0 68	6 0 0 3 103	26 20 34 36 382	7 0 0 11 2	2 6 0 9 65	0 1 0 10 73
REDWOOD RENVILLE RICE ROCK ST. LOUIS	85 27 87 13 328	4 0 5 0 12	0 4 5 0 49	79 · 21 77 12 256	2 2 0 1 11	5 5 13 1 31	29 1 1 0 27
SCOTT SIBLEY STEARNS STEELE STEVENS	39 11 173 38 24	4 0 2 6 0	4 0 23 12 0	31 8 148 20 24	0 3 0 0	5 0 16 10 1	3 0 14 8 0
SWIFT TODD WABASHA WADENA WASECA	16 18 22 25 13	3 0 1 0 0	7 0 0 0 0	6 18 20 25 13	0 0 1 0 0	3 0 1 2 0	0 0 1 0 4

DEVELOPMENTAL ACHIEVEMENT CENTERS ENROLLMENT ON SEPTEMBER 30, 1979 AND CHANGES DURING QUARTER

	PERSONS ENROLLED LAST DAY OF QUARTER				ENTEREN	DED 4 DEED	
COUNTY	TOTAL	HOME BOUND	PRE SCHOOL	ADULT	SCHOOL CONTRACT	ENTERED DURING QUARTER	DEPARTED DURING QUARTER
WASHINGTON WATONWAN WILKIN WINONA WRIGHT YELLOW MEDICINE	107 24 6 30 31 34	19 4 0 0 1	19 5 0 8 9	68 9 6 20 21 34	1 6 0 2 0	8 2 0 5 2 2	21 0 0 0 0

PROGRAM: SOCIAL SERVICES

AGENCY: DEPARTMENT OF PUBLIC WELFARE

PROGRAM PURPOSE: This program fulfills departmental responsibility for assuring the provision of specific human services through a variety of delivery systems, such as the county welfare department, other public and private service providers, senior citizen organizations, and Department of Public Welfare (DPW) direct delivery of services to the visually handicapped and hearing impaired.

This program allocates funds or directly provides services to most efficiently achieve the following designated client-centered goals:

- 1. Achieving or maintaining economic self-support.
- 2. Achieving or maintaining self-sufficiency.
- 3. Preventing or remedying neglect, abuse, or exploitation of children or adults unable to protect their own interests.
- 4. Preserving, rehabilitating, or reuniting families.
- 5. Preventing or reducing inappropriate institutional care.

6. Securing referral or admission for institutional care when other forms of care are not appropriate.

OPERATION: Major goals of this program are:

- 1. To determine the need for specified human service programs (needs assessment).
- 2. To establish priorities within which identified needs should be met (planning).
- To allocate available resources to achieve the established priorities, within the limitations of available funds (program development and service delivery).
- 4. To foster and monitor maintenance of specified standards in delivery of the specified programs (standard-setting).
- 5. To evaluate the quality and quantity of services delivered.
- 6. To provide services directly to blind and deaf persons.

CLIENTELE: Agencies supervised and/or funded include the 87 local welfare agencies, 250 nutritional sites and 100 community service agencies for older people, 60 senior centers, 25 (approx.) child-placing agencies and 500 (approx.) child care providers. Clientele include 111,000 social service clients of county welfare and human service boards, 9,500 older persons daily through the nutritional programs, 500 deaf or hearing impaired persons, 5,000 visually handicapped persons receiving vocational rehabilitation, personal adjustment and self-sufficiency services and another 5,000 receiving communication center services.

ACTIVITY: DEAF SERVICES
PROGRAM: SOCIAL SERVICES

AGENCY: DEPARTMENT OF PUBLIC WELFARE

ACTIVITY DESCRIPTION: The Services for the Deaf and Hearing Impaired Division has responsibility to assist deaf and hard of hearing individuals and their families throughout the state by providing a variety of direct and indirect social services intended to promote "their personal, economic, and social well-being". It is estimated that there are 39,000 deaf and 267,500 hard of hearing persons in Minnesota.

Specialized services provided include counseling, information and referral, manual communication interpretation through the use of the language of signs, statewide interpreter referral, consultation, coordination and the maintenance of the Registry of the Deaf.

ACTIVITY OBJECTIVES:

1. Provide or arrange, on a statewide basis, counseling services upon request to deaf and hard of hearing individuals and their families with

respect to social and emotional development and adjustment.

- 2. Assist in the location, utilization and dissemination of appropriate resources for clients, agencies and general public.
- 3. Provide and coordinate statewide interpreter referral services.
- 4. Provide consultation and interagency coordination services to both public and private agencies at the state and regional levels.

	•	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Number of hearing impopulation (267,539)			
counseling services:	Metro Out-state	375 85	375 85
Number of information referral requests har		75	75
Counties having speci for hearing impaired		1	1
Number of interpreter	referrals handled	387	387
Number of hours of in provided monthly	terpreting service	12	12
Number of counties re	ceiving services	13	13
Number of consultation provided annually	on requests	130	130

ACTIVITY: BLIND SERVICES PROGRAM: SOCIAL SERVICES

AGENCY: DEPARTMENT OF PUBLIC WELFARE

ACTIVITY DESCRIPTION: This division administers and implements the direct service program of vocational and self-care support to blind and visually handicapped persons in Minnesota. The purpose is to provide an avenue for blind Minnesotans to be independent and to avoid institutional and other forms of public dependence. Services include individual counseling, skill training, including travel, braille and self-care techniques, and low vision aides/special devices to allow a blind person access to jobs, training or to remain in his/her own home. This is accomplished primarily through counselors and home teachers in nine district offices, the deaf/blind unit, a job placement adaptive equipment program, a system to upgrade community resources for the blind, and the Business

Enterprise Program.

The communication center, although not a unit of state government, is housed in the same location as the administrative office of Services for the Blind and its operation is closely coordinated with the total Services for the Blind Program. The communications center is financed through a combination of donated funds and federal vocational rehabilitation funds. The center provides specialized information and material of a vocational, educational and leisure time nature to visually handicapped persons. In F.Y. 1977, the center served 4,578 people; that number is expected to increase to 6,100 by F.Y. 1981. Radio talking book listeners are expected to increase from 3,000 in F.Y. 1977 to 5,000 in F.Y. 1981. In addition, the unit transcribes approximately 40,000 pages of braille per year. Since F.Y. 1977, the center has used and will continue to use approximately 400 volunteers in helping to deliver these services.

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Persons vocationally served	3,300	3,400
Rehabilitated	455	460
Older persons with blindness served	1,650	1,700
Rehabilitated	440	450
Children with blindness served	1,040	1,050
Persons with blindness employed	92	100
Persons with blindness trained	25	28
Enterprises outside metropolitan areas	27	30
Total enterprises	85	93

ACTIVITY OBJECTIVES:

- 1. To provide direct vocational and job placement-related services to assist blind persons to achieve and maintain gainful employment.
- 2. To provide mobility, self-care and communication skills to permit older blind persons to achieve or maintain independence in housing, family and community life.
- 3. To provide a direct service program to help children and their parents cope and deal with blindness or deafness and blindness and the problems it imposes, as well as to promote courses of training which lead to vocational readiness.
- 4. To increase number of blind persons employed in blind enterprises.
- 5. To provide increased training opportunities for blind persons.

- 6. To continue efforts to establish blind enterprises outside of the metropolitan areas.
- 7. To increase number of blind enterprises.

ACTIVITY: COST OF CARE - MENTALLY RETARDED AND EPILEPTIC CHILDREN

PROGRAM: SOCIAL SERVICES

AGENCY: DEPARTMENT OF PUBLIC WELFARE

ACTIVITY DESCRIPTION: Pursuant to M.S. 252.27, Cost of Care for Mentally Retarded and Epileptic Children exists as a financial reimbursement resource to help local welfare agencies defray the local costs of residential treatment services for children under the age of 18 years.

The program is administered by the local welfare agencies according to the procedures and requirements in 12 MCAR 2.030 which establishes: 1) the administrative procedures for claiming up to 70% reimbursement of eligible costs; 2) the allowable costs which are reimbursement eligible; 3) an eligibility procedure for determining the maximum financial liability for parents of children who have mental retardation or epilepsy; and 4) an eligibility procedure for determining the maximum financial liability for children in treatment to contribute toward their own residential treatment costs. The local county welfare board pays the total cost of the residential treatment and then claims reimbursement from the State Department of Public Welfare. This funding source is utilized by all 87 counties and specifically applies to treatment costs of children placed in 12 MCAR 2.034 licensed group homes and institutions and 12 MCAR 2.001 licensed family foster homes.

Through operation of this activity, parents have a viable alternative to state insitutional placement for their mentally retarded child at a cost to them that does not exceed what would be their parental financial responsibility if their child were placed in a state institution. The number of children served by this program is expected to remain at a near 1,200 level.

ACTIVITY OBJECTIVES: To reimburse county welfare boards for up to 70% of the cost of care of eligible children with mental retardation/epilepsy placed in private residential treatment facilities.

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Percent paid by State	44.3%	40.1%
Dollars paid by State	\$3,606,288	\$3,606,288
Percent paid by county	55.7%	59.9%
Dollars paid by county	\$4,534,317	\$5,386,949
Number of children	1,200	1,200
Dollars needed to pay 70% rate of reimbursement	\$2,092,135	\$2,688,978

PROGRAM: INCOME MAINTENANCE

AGENCY: DEPARTMENT OF PUBLIC WELFARE

PROGRAM PURPOSE: The Income Maintenance Programs provide cash assistance, food stamps, and payments to providers of medical and health care services to and on behalf of needy citizens of the state. These cash assistance and medical payments provide basic standards of living and enable low income citizens to have access to qualtiy medical care for both acute and chronic health-related problems. Through this assistance, low income citizens have access to the basic necessities—food, clothing, shelter, and medical care required by all persons.

OPERATION: State agency staff provide program guidelines to local agencies in the form of rules and policy which are designed to maximize federal funding while insuring that the needs of low income citizens are met. In addition, state agency staff make payments to providers of medical and health services, as well as conduct post-payment audits to detect abuse and/or fraud by recipients and providers of the Medicaid Program and recipients of the Cash Assistance and Food Stamp Programs. Local agency staff determine individual eligibility for all programs, make cash assistance payments, and issue food stamps. The major goal of the income maintenance program is to provide the appropriate cash assistance, non-cash benefits or medical benefits to all eligible citizens in an effective and efficient manner.

<u>CLIENTELE</u>: The primary clientele of the income maintenance program are the low income clients served by the program and the providers of medical and health care services who are paid by the Centralized Disbursement System.

The following number* of low income citizens are served by income maintenance programs in an average month:

Aid to Families With Dependent Children (AFDC)	137,298
General Assistance Maintenance (GA)	14,500
Medical Assistance (MA)	123,997
General Assistance Medical Care (GAMC)	9,500
Minnesota Supplemental Aid (MSA)	11,000
Food Stamps (FS)	143,969
Catastrophic Health Expense Protection Program (CHEPP)	170

^{*} duplicated count

ACTIVITY: EARLY PERIODIC SCREENING DIAGNOSIS AND TREATMENT PROGRAM

PROGRAM: INCOME MAINTENANCE

AGENCY: DEPARTMENT OF PUBLIC WELFARE

ACTIVITY DESCRIPTION: The Early Periodic Screening Diagnosis and Treatment (EPSDT) Program is a federally mandated preventive health program designed to bring comprehensive health screening, diagnosis and treatment services to the approximately 100,000 Minnesota children, ages

birth to 21, who are eligible for Medical Assistance (MA). The program includes outreach to encourage children to participate in EPSDT and case management and support services to ensure that all children who participate receive the health services they need. The state agency is responsible for developing program policies, monitoring local welfare agency performance, soliciting the participation of primary health care providers, assuring state compliance with federal requirements, and coordinating efforts with state and local agencies involved with children's health and developmental programs.

ACTIVITY OBJECTIVES:

- 1. Assure sufficient participation of primary health care providers who will screen children according to department standards so that all eligible children have access to complete screening services.
- 2. Develop policies and data systems which fulfill reasonable federal requirements; monitor local welfare agency program implementation.
- 3. Strengthen outreach and follow-up efforts so that eligible children participate and receive all health services they need.
- 4. Coordinate policies with other children's health programs so that services are not duplicated.

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Rate of new MA cases requesting EPSDT	35%	50%
Number of children screened	28,000	35,000
Diagnosis and treatment completed	75%	85%

ACTIVITY: CATASTROPHIC EXPENSE PROTECTION PROGRAM GRANTS

PROGRAM: INCOME MAINTENANCE

AGENCY: DEPARTMENT OF PUBLIC WELFARE

ACTIVITY DESCRIPTION: The Catastrophic Health Expense Protection Program (CHEPP) provides for reimbursement to families for the cost of medical expenses paid by the family in situations where eligibility is established. There are two types of assistance available under the program based on the type of medical expenses paid by the family. Basic eligibility for a non-nursing home resident requires medical costs be in excess of \$2,500 for a year and then a higher deductible may be required based on the family's previous year's income. The second type of eligibility involves custodial nursing home patients who are under age 65 years and have been residents in a facility for more than 36 months. This activity represents only the program payments and does not include the administrative costs for supervising the program. The administrative costs are reflected in the administration of Health Care Program activity.

ACTIVITY OBJECTIVES: To provide financial assistance to families who are not eligible for other programs of assistance but whose needs and resources permit eligibility for this program.

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Average monthly recipients	340	425
Dollars paid	\$5,304,000	\$7,104,000

PROGRAM: MENTAL HEALTH

AGENCY: DEPARTMENT OF PUBLIC WELFARE

PROGRAM PURPOSE: The Mental Health Bureau is a consolidation of administrative and program responsibilities previously assigned to the Residential Services Bureau and certain components of the Community Services Bureau. As currently structured, the Mental Health Bureau is responsible for the following functions:

- 1. Administration of 9 state hospitals and two state nursing homes.
- 2. Program offices: Mental Illness (MI)

 Mental Retardation (MR)

 Chemical Dependency (CD)
- 3. Reimbursement/collections for cost of patient/resident care
- 4. State grant-in-aid programs (Mental Illness, Mental Retardation, Chemical Dependency and Developmental Achievement Centers)

A range of services is provided either directly through state-operated facilities or indirectly through local agencies (mental health centers/human services boards, county welfare departments, or purchase of service from other vendors) to mentally ill, mentally retarded, chemically dependent, and geriatric individuals. The goal is to provide residential and non-residential services to assist each individual to live as productive and natural a life as possible.

OPERATION: The goal of the Mental Health Bureau is to provide humane care and appropriate treatment for mentally ill, mentally retarded, chemically dependent, and geriatric individuals in a variety of settings. Emphasis is placed on provision of these services at the most effective and accessible level throughout the state.

CLIENTELE: The clientele of the Mental Health Bureau include mentally ill, mentally retarded, chemically dependent and geriatric individuals.

Direct Services: State Hospitals

State Nursing Homes

Guardiansip/Conservatorship for MR

Indirect Services: Community MR Facilities

Other Settings for MR Persons Court Order CD Education Methadone Delivery Services

Community CD Education Contracts

Early CD Intervention

CD Diagnosis and Referral of Employees

Grant-in-Aid Services to MI Grant-in-Aid Services to MR Grant-in-Aid Services to CD Grant-in-Aid Services to

Developmental Achievement Centers

ACTIVITY: RESIDENTIAL SERVICES - MENTALLY RETARDED

PROGRAM: MENTAL HEALTH

AGENCY: DEPARTMENT OF PUBLIC WELFARE

ACTIVITY DESCRIPTION: This activity exists to provide residential, developmental and evaluation services to the mentally retarded (MR) in eight state-operated facilities. The MR residents receive 24-hour residential living service, developmental training and individualized programming. The services offered are designed to reduce the dependency of the resident and assist in achieving the highest level of independent functioning attainable, given the potential for development of each individual resident.

ACTIVITY OBJECTIVES:

- 1. To provide residential, developmental, and evaluation services for persons with mental retardation.
- 2. To meet the standards set by the Minnesota Health Department, the federal Medicare/Medicaid programs and the department's Licensing Division, and those established by the Joint Commission on Accreditation of Hospitals (JCAH) so that the needs of the residents are met.
- 3. To provide care and developmental services to residents to prepare them, where possible, for placement in the community.
- 4. To cooperate in the development of appropriate community facilities so that placement in the community may be effected as soon as possible in accordance with the resident's needs.
- 5. To provide short-term parental relief and short-term developmental services.

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Average daily population	2,700	2,600
Number of residents served	3,000	2,900

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Admissions:	927	912
first admissions	166	170
readmissions	161	167
transfers between state hospitals	600	575
Number of residents in program for TMR	883	787
Number of facilities licensed by Minn Health Dep	t 8	8
Number of facilities certified to receive federal Medicare/Medicaid funds	8	8
Number of facilities whose programs are licensed under 12 MCAR 2.034	8	8
Number of facilities to which JCAH accreditation as residential treatment facilities has been		-
awarded	4	4
Parental relief:		
Individuals	44	48
Admissions	59	65

ACTIVITY: MENTAL RETARDATION PROGRAMS

PROGRAM: MENTAL HEALTH

AGENCY: DEPARTMENT OF PUBLIC WELFARE

ACTIVITY DESCRIPTION: The Mental Retardation Program Office coordinates the planning, development and evaluation of Minnesota's programs for persons with mental retardation (MR). This activity is responsible for: 1) development of program policy and planning; 2) assisting and monitoring individual program development by service providers; and 3) program direction and consultation to mental health/human service/welfare agencies, and to local community and state hospital programs in carrying out their responsibilities to the MR population.

ACTIVITY OBJECTIVES:

- 1. To assess the service needs of the MR population and develop priorities for program development.
- 2. To plan, develop, monitor and evaluate the MR service system that includes residential and day developmental/treatment programs in local communities and state hospitals
- 3. To implement state laws governing services to the MR population and other developmentally disabled persons.
- 4. To provide program direction to mental health centers, county social service agencies, state hospitals, community residential and developmental achievement center (DAC) programs.
- 5. To administer and consult with county agencies in the implementation of the 1975 MR Protection Act (M.S. 252A.01 and M.S. 253A.01) concerning guardianship and conservatorship for persons with mental retardation.

	ESTIMATED F.Y. 1980	ESTIMATED F.Y. 1981
Average daily populations (county agency		· · · · · · · · · · · · · · · · · · ·
case management load):		
In community facility	4,100	4,200
In developmental achievement centers	4,975	5,175
In state hospitals	2,700	2,600
Own homes, foster or nursing homes	1,550	1,550
Persons with mental retardation affected		
by MR Protection Act:	•,	
Under guardianship/conservatorship	6,500	6,000
Recommendation change in legal status	300	200
Removed from guardianship or changed		
to conservatorship	250	150
In process of establishing guardian-		
ship or conservatorship	60	50
Newly accepted under guardianship		
or conservatorship	40	40
-		

FOR PERSONS WITH MENTAL RETARDATION - DPW RULE 34 (as of 12/79)

REGION ONE

CITY	COUNTY	FACILITIES	CAPACITY
Crookston	Polk	1	10
Fosston	Polk	1	10
Thief River Falls	Pennington	2	30
Argyle	Marshall	· 1	10
Roseau	Roseau	1 .	33
Karlstad	Kittson	1	11
TOTAL REGION ONE		7	104

REGION TWO

CITY	COUNTY	FACILITIES	CAPACITY
Bagley	Clearwater	. 1	15
Bemidji	Beltrami	3	40
Park Rapids	Hubbard	1	8
TOTAL REGION TWO		5	6.3

REGION THREE

CITY	COUNTY	FACILITIES	CAPACITY
Aurora	St. Louis	1	15
Brookston	St. Louis	2	38
Chisholm	St. Louis	3	37
Duluth	St. Louis	16	144
Eveleth	St. Louis	1	6
Hibbing	St. Louis	1	19
Virginia	St. Louis	1	12
Tower	St. Louis	1	40
Bovey	Itasca	1	23
Grand Rapids	Itasca	1	12
Northome	Koochiching	1	16
Cloquet	Carlton	2	12
TOTAL REGION THRE	JE	31	374

LICENSED RESIDENTIAL FACILITIES FOR PERSONS WITH MENTAL RETARDATION - DPW RULE 34 (as of 12/79)

REGION FOUR

CITY	COUNTY	FACILITIES	CAPACITY
Dent	Otter Tail	1	8
Fergus Falls	Otter Tail	4	66
Richville	Otter Tail	1	8
Alexandria	Douglas	2	36
Osakis	Douglas	1	10
Hawley	Clay	1 •	8
Moorhead	Clay	1	10
Morris	Stevens	· 1	10
Frazee	Becker	1	7
Barrett	Grant	1	6
TOTAL REGION FOUR		14	169

REGION FIVE

CITY	COUNTY	FACILITIES	CAPACITY
Little Falls	Morrison	1	12
Walker	Cass	1	5
Pine River	Cass	1	11
TOTAL REGION FIVE		3	28

REGION SIX

CITY	COUNTY	FACILITIES	CAPACITY
Atwater	Kandiyohi	1	15
Spicer	Kandiyohi	1	15
Willmar	Kandiyohi	4	109
Hutchinson	McLeod	1	13
Lester Prairie	McLeod	1	56
Litchfield	Meeker	1	15
Canby	Yellow Medicine	2	30
Montevideo	Chippewa	1	15
TOTAL REGION SIX		12	268

FOR PERSONS WITH MENTAL RETARDATION - DPW RULE 34 (as of 12/79)

REGION SEVEN

CITY	COUNTY	FACILITIES	CAPACITY
Buffalo	Wright	2	21
Cokato	Wright	3	29
Delano	Wright	1	9
South Haven	Wright	. 1	44
Sauk Rapids	Benton	1	23
Center City	Chisago	1	15
Chisago City	Chisago	1	12
Kimball	Stearns	1	24
St. Cloud	Stearns	· 2	33
Sauk Centre	Stearns	3	30
Waite Park	Stearns	1	8
Elk River	Sherburne	1	12
TOTAL REGION SEVE	N	18	260

REGION EIGHT

CITY	COUNTY	FACILITIES	CAPACITY
Pipestone	Pipestone	1	10
Windom	Cottonwood	2	57
Redwood Falls	Redwood	1	132
Fulda	Murray	1	19
Worthington	Nobles	· 3	32
Marshall	Lyon	3	45
Tyler	Lincoln	1	15
TOTAL REGION EIGH	Γ	12	310

REGION NINE

CITY	COUNTY	FACILITIES	CAPACITY
Blue Earth	Faribault	2	19
Mankato	Blue Earth	3	65
Fairmont	Martin	1	30
Sherburn	Martin	2	20

LICENSED RESIDENTIAL FACILITIES FOR PERSONS WITH MENTAL RETARDATION - DPW RULE 34 (as of 12/79)

REGION NINE (cont'd)

CITY	COUNTY	FACILITIES	CAPACITY
Waseca	Waseca	1	6
New Ulm	Brown	1	8
Waterville	LeSueur	1	14
TOTAL REGION NINE		11	162

REGION TEN

CITY	COUNTY	FACILITIES	CAPACITY
Faribault	Rice	6	57
Northfield	Rice	1	73
Red Wing	Goodhue	2	67
Wanamingo	Goodhue	1	12
Kasson	Dodge	1.	14
Albert Lea	Freeborn	1	15
Wabasha	Wabasha	1	8
Winona	Winona	1	12
Harmony	Fillmore	1	12
Owatona	Steele	1	15
Austin	Mower	3	84
Rochester	Olmsted	4	62
TOTAL REGION TEN		23	431

REGION ELEVEN

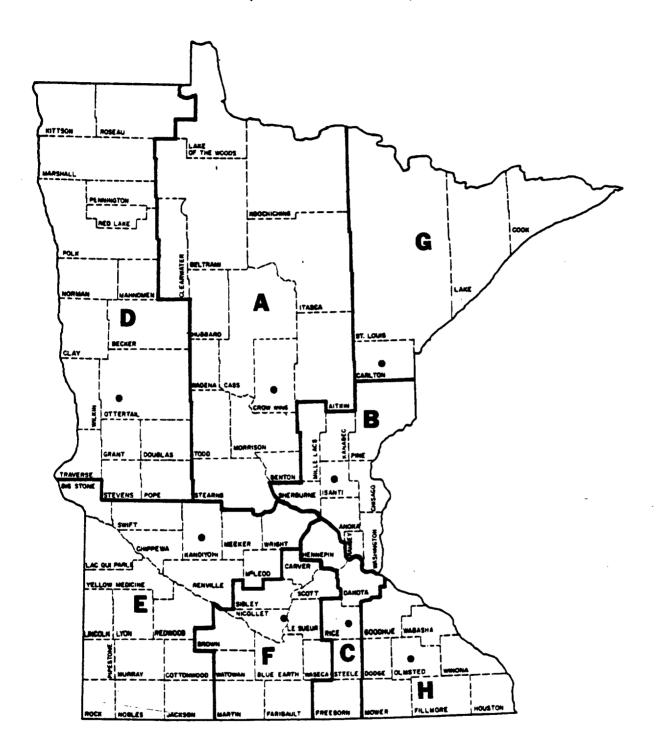
CITY	COUNTY	FACILITIES	CAPACITY
Bloomington	Hennepin	4	36
Brooklyn Center	Hennepin	2	14
Brooklyn Park	Hennepin	2	38
Crystal	Hennepin	1	12
Eden Prairie	Hennepin	1	36
Edina	Hennepin	1	6
Minneapolis	Hennepin	22	419
Minnetonka	Hennepin	2	12

FOR PERSONS WITH MENTAL RETARDATION - DPW RULE 34 (as of 12/79)

REGION ELEVEN (cont'd)

CITY	COUNTY	FACILITIES	CAPACITY
New Hope	Hennepin	1	64
Richfield	Hennepin	1	6
Robbinsdale	Hennepin	2	138
St. Louis Park	Hennepin	3	26
Wayzata	Hennepin	3	80
Maplewood	Ramsey	1	6
Roseville	Ramsey	1	6
Saint Paul	Ramsey	22	655
Shoreview	Ramsey	2	16
White Bear Lake	Ramsey	2	15
Coon Rapids	Anoka	2	58
Eagan	Dakota	ī	54
Hastings	Dakota	1	6
South Saint Paul	Dakota	1	15
West Saint Paul	Dakota	3	71
Excelsior	Carver	1	70
Victoria	Carver	1	· 42
Shakopee	Scott	1	10
Cottage Grove	Washington	1	6
Lake Elmo	Washington	1	6
Stillwater	Washington	1	6
TOTAL REGION ELEVEN		87	1,929
STATE TOTAL		223	4,098

STATE HOSPITALS FOR PERSONS HAVING RETARDATION (RECEIVING DISTRICTS)



HOSPITAL

A	BRAINERD	E WILLMAR
В	CAMBRIDGE	F ST. PETER
С	FARIBAULT	G MOOSE LAKE
D	PEDCIIC PATTC	U DOCUESTED

STATE HOSPITAL UNITS LICENSED UNDER DPW RULE 34

Brainerd - Crow Wing County
Brainerd State Hospital
MR Units, 532 Residents
0 years and over
Minnesota Learning Center
48 Residents
5-21 years

Cambridge - Isanti County
Cambridge State Hospital
Unit I, 100 Residents
0-25 years
Unit II & III, 110 Residents
0-25 years
Unit IV, 115 Residents
20-60 years
Unit V, 136 Residents

Unit VI, 96 Residents
18 years and over
Infirmary East & South
31 Residents
0-36 years

Mental Health Treatment Service 74 Residents 5-60 years

19 years & over at intake

Faribault - Rice County Faribault State Hospital Center Unit, 91 Residents 5-45 years Physically Handicapped Service 319 Residents 5 years and over Southcliff Unit, 177 Residents 12-65 years Green Acres Unit, 42 Residents 5-30 years at intake Northwood Unit, 106 Residents 5-20 years Skinner Unit, 172 Residents 21 years and over Sunnyside Unit, 180 Residents 21 years and over

Fergus Falls - Otter Tail County
Fergus Falls State Hospital
State Regional Retardation Center
295 Residents
3 years and over

Moose Lake - Carlton County
Moose Lake State Hospital
192 Residents
18 years and over

Rochester - Olmsted County
Rochester State Hospital
Rochester Social Adaptation Center
Division I, 79 Residents
5 years and over
Division II, 80 Residents
12 years and over

Willmar - Kandiyohi County
Willmar State Hospital
Glacial Ridge Training Center
209 Residents
5 years and over

FACILITIES LICENSED UNDER DPW RULE 80 (PHYSICALLY HANDICAPPED)

REGION: EIGHT

CITY	COUNTY	FACILITIES	CAPACITY
Windom	Cottonwood	1	45
REGION EIGHT TOTAL	,	1	45

REGION TEN

CITY	COUNTY	FACILITIES	CAPACITY
Austin	Mower	1	41
REGION TEN TOTAL		1	41

REGION ELEVEN

CITY	COUNTY	FACILITIES	CAPACITY
Golden Valley	Hennepin	1	64
New Hope	Hennepin	1	64
Robbinsdale	Hennepin	1	132
St. Louis Park	Hennepin	1	14
St. Paul	Ramsey	4 .	112
TOTAL REGION ELEVEN		8	386

GROUP HOMES IN MINNESOTA LICENSED UNDER DPW RULE #8

REGION FIVE

CITY	COUNTY	FACILITIES	CAPACITY
Remer	Cass	1	13
Brainerd	Crow Wing	1	16
TOTAL REGION F	IVE	2	29

REGION SIX

CITY	COUNTY	FACILITIES	CAPACITY
Bird Island	Renville	1	9
Montevideo	Chippewa	1	8
TOTAL REGION SIX	(2	17

REGION SEVEN

CITY	COUNTY	FACILITIES	CAPACITY
Elk River	Sherburne	1	10
Markville	Pine	.1	50
Milaca	Mille Lacs	1	9 ·
Pine City	Pine	2	26
St. Cloud	Stearns	1	11
Waverly	Wright	1	6
TOTAL REGION SEVEN		7	112

REGION EIGHT

CITY	COUNTY	FACILITIES	CAPACITY
Marshall	Lyon	1	10
TOTAL REGION E	IGHT	1	10

GROUP HOMES IN MINNESOTA LICENSED UNDER DPW RULE #8

REGION ONE

CITY	COUNTY	FACILITIES	CAPACITY
Warroad	Roseau	1	6
TOTAL REGION ONE	· · · · · · · · · · · · · · · · · · ·	1	6

REGION TWO

Blackduck Beltrami Nevis Hubbard	FACILITIES	CAPACITY	
Bemidji	Beltrami	1	6
Blackduck	Beltrami	1	6
Nevis	Hubbard	1	13
TOTAL REGION TWO)	3	25

REGION THREE

CITY	COUNTY	FACILITIES	CAPACITY
Aitkin	Aitkin	1	11
Bigfork	Itasca	1	8
Cloquet	Carlton	1	10
Duluth	St. Louis	3	32
Effie	Itasca	1	10
Grand Rapids	Itasca	1	8
Two Harbors	Lake	1 ·	8
TOTAL REGION THR	EE	9	87

REGION FOUR

CITY	COUNTY	FACILITIES	CAPACITY
Breckenridge	Wilkin	1	10
TOTAL REGION FOUR	{	1	10

GROUP HOMES IN MINNESOTA LICENSED UNDER DPW RULE #8

REGION TEN

CITY	COUNTY FACILITIES Olmsted 2		CAPACITY
Rochester	Olmsted	2	18
Waseca	Waseca	1	10
Winona	Winona	3	25
TOTAL REGION TE	N	6	53

REGION ELEVEN

CITY	COUNTY	FACILITIES	CAPACITY
Bloomington	Hennepin	1	8
Brooklyn Center	Hennepin	2	15
Chaska	Carver	1	6
Excelsior	Carver	1	6
Golden Valley	Hennepin	1	16
Hopkins	Hennepin	1	27
Long Lake	Hennepin	1	8
Minneapolis	Hennepin	16	158
Minnetonka	Hennepin	1	8
Roseville	Ramsey	1	6
St. Paul	Ramsey	2	18
Stillwater	Washington	1	14
TOTAL REGION ELEVE	N	29	290

COUNTY OPERATED GROUP HOMES CERTIFIED UNDER RULE #8

CITY	COUNTY	FACILITIES	CAPACITY
Duluth	St. Louis	5	44
Brookston	St. Louis	1	9
Virginia	St. Louis	1	10
So Intern1 Falls	Koochiching	1	8
Albert Lea	Freeborn	2	10
Mankato	Blue Earth	1	10
St. Peter	Nicollet	1	15
Fairmont	Martin	1	7
Little Falls	Morrison	1	10
Willmar	Kandiyohi	2	16

MANDATORY-PRIORITY-OPTIONAL STATUS OF SERVICES

Adoption 01X Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Chore 02X Optional Priority Optional O	WI CES	AFDC	SST-MSA	0-60	60-115	ALL OTHER
Courseling 03% Optional Priority Optional Optional Optional Developmental Achievement 04% Mandatory Nandatory Nandatory Mandatory Optional Option	ption 0	x Manda tory	Mandatory	Mandatory	Mandatory	Mandatory
Developmental Achievement O4X Mandatory Nandatory Mandatory Mandatory Mandatory Day Care O5X Day Care - Children O5R Nandatory* Priority Priority Optional		X Optional	Priority	Optional	Optional	Ontional
Achievement Day Care OSX Day Care - Children OSA Day Care - Adult OSA Optional		X Optional	Optional	Optional	Optional	Optional
Day Care - Children		X Mandatory	Mandatory	Mandatory	Mandatory	Mandatory
Day Care - Adult 05A Optional Optional Optional Optional Optional Optional Educational Assistance 06X Optional Optional Optional Optional Optional Optional Employability 07X Mandatory Priority Priority Optional	Care 05	\sim	\searrow	$\geq \leq$	$\geq \leq$	$>\!\!<$
Educational Assistance O6X Optional Optional Optional Optional Optional Employability O7X Mandatory Priority Priority Optional Op	Day Care - Children 0	R Mendatory*	Priority	Priority	Optional	Optional
Employability 07X Mandatory Priority Priority Optional Optional Family Planning 08X Mandatory Optional Priority Priority Optional	lay Care - Adult 0	A Optional	Optional	Optional	Optional	Optional
Family Planning 08X Mandatory Optional Priority Priority Optional Foster Care (Adult) 09X Optional Optional Optional Optional Optional Optional Foster Care (Children) 10X Mandatory Optional Opt	cational Assistance O	X Optional	Optional	Optional	Optional	Optional
Foster Care (Adult) Foster Care (Children) Foster Care (Adult) Foster Care (Children) Foster Care (Adult) Foster Care (Adult) Foster Care (Children) Foster Care (Adult) Foster Care (Children) Foster Care (Children) Foster Care (Adult) Foster Care (Children) Fosterity	loyability 0	X Mandatory	Priority	Priority	Optional	Optional
Foster Care (Children) 10X Mandatory Mandator	nily Planning 0	X Manda tory	Optional	Priority	Priority	Optional
General 111 Priority Priority Priority Optional Optional Deinstitutional. (MHCA) 112 Mandatory Mandatory Mandatory Mandatory Mandatory Home Del. & Cong. Meals 12X Optional Priority Priority Optional Optional Homemaker 13X Priority Priority Priority Priority Optional Optional Mousing 14X Optional Optional Optional Optional Optional Information & Referral 15X Priority Priority Priority Priority Priority Priority Legal 16X Optional Optional Optional Optional Optional Money Management 17X Priority Priority Priority Priority Priority Priority Protection (Adult) 18X Protection 181 Priority Priority Priority Priority Priority Sub-acute Oetoxification 182 Mandatory	ter Care (Adult) 0	X Optional	Optional	Optional	Optional	Optional
General 111 Priority Priority Priority Optional Optional Deinstitutional. (MHCA) 112 Mandatory Optional Optional Optional Optional Optional Optional Optional Information & Referral 15X Priority Mandatory Mandat	ter Care (Children) 10	X Manda tory	Mandatory	Manda tory	Mandatory	Mandatory
Deinstitutional. (MMCA) 112 Mandatory Mandator	ol th 1	x >	$\geq \leq$	$\geq \leq$	$\geq \leq$	$\geq \leq$
Home Del. & Cong. Meals 12X Optional Priority Priority Optional Optional Homemaker 13X Priority Priority Priority Priority Optional Optional Optional Optional Information & Referral 15X Priority Priori	ieneral 1	1 Priority	Priority	Priori ty	Optional	Optional
Homemaker 13X Priority Priority Priority Optional Optional Optional Information & Referral 15X Priority Sub-acute Detoxification 182 Mandatory M	einstitutional. (MHCA) 1	2 Mandatory	Manda tory	Mandatory	Mandatory	Mandatory
Housing 14X Optional Optional Optional Optional Optional Information & Referral 15X Priority Sub-acute Optional 182 Mandatory M	ne Del. & Cong. Meals 1	X Optional	Priority	Priori ty	Optional	Optional
Information & Referral 15X Priority Priority Priority Priority Priority Legal 16X Optional O	memaker 1	X Priority	Priori ty	Priority	Priority	Optional
Legal 16X Optional Op	ustng 1	X Optional	Optional	Optional	Optional	Optional
Money Management 17X Priority Priority Priority Priority Priority Protection (Adult) 18X Protection 181 Priority Priority Priority Priority Priority Sub-acute Detoxification 182 Mandatory Manda	formation & Referral 1	X Priority	Priori ty	Priori ty	Priori ty	Priority
Protection (Adult) 18X Protection 181 Priority Priority Priority Priority Priority Sub-acute Detoxification 182 Mandatory Ma	gal <u>1</u> 6	X Optional	Optional	Optional	Optional	Optional
Protection 181 Priority Priority Priority Priority Priority Sub-acute Detoxification 182 Mandatory Protection (Children) 19X Mandatory M	ney Management 1	X Priority	Priority	Priority	Priority	Priority
Sub-acute Detoxification 182 Mandatory Mandato	otection (Adult) 1	x S	$\geq \leq$			$\geq \leq$
MR Guardianship 183 Mandatory	Protection 1	1 Priority	Priority	Priority	Priority	Priority
Protection (Children) 19X Mandatory	Sub-acute Detoxification 7	Manda tory	Mandatory	Manda tory	Mandatory	Mandatory
Protection (diritien)	MR Guardianship 1	3 Mandatory	Manda tory	Mandatory	Mandatory	Mandatory
Residential Treatment 20X	otection (Children) 1	X Mandatory	Mandatory	Manda tory	Mandatory	Manda tory
	sidential Treatment 2	x S	$\geq \leq$	$\geq \leq$		
Emot. Disturbed-Child 203 Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory		3 Mandatory	Mandatory	Mandatory	Manda tory	Mandatory
Primary Treatment/Extended Rehabilitation - CD 204 Priority Priority Priority Priority Priority		4 Priority	Priori ty	Priority Priority	Priori ty	Priori ty
Halfway House-CD-MI 205 Priority Priority Priority Priority Priority	Halfway House-CD-MI 2	5 Priority	Priori ty	Priori ty	Priority	Priority
Correctional-Children 206 Optional Optional Optional Optional Optional	Correctional-Children 2	06 Optional	Optional	Optional	Optional	Optional
MR Children and Adults 207 Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory	MR Children and Adults 2	7 Mandatory	Mandatory	Mandatory	Mandatory	Mandatory
Social & Recreational 21X Optional Optional Optional Optional	cial & Recreational 2	X Optional	Optional	Optional	Optional	Optional
			Priority	Optional	Optional	Optional

For children receiving Ald to Families with Dependent Children (AFBC), whose parents are amployed or in training for employment.

Services so designated are required in State Law, Rule, or Federal Regulation. These services must be evailable to all geographic areas. MANDATORY:

OPTIONAL:

PRIORITY:

Services so designated are implied in statutory language, have significant legislative funding and have a history of extensive utilization. These services are strongly recommended to be available but are within welfare board discretion.

Services so designated have a significant history of utilization but are neither specifically or implicitly required. The availability of these services is totally at the discretion of the welfare board.

ESTIMATE OF PERSONS TO BE SERVED BY CLIENT CATEGORY

SE RVI CES	AFDC	AZN-122	0-60%	60-115%	WITHOUT REGARD TO INCOME	MIN.	OTHER	TOTAL
Adaption	721	112	1.014	292			2.016	4, 155
Chore	648	4,115	4,635	183			2,718	12,299
Counseling	14.315	5,532	15.954	1.745	5,368	7,028	105,220	155,162
Developmental Achievement	671	2,924	2,145	118			950	6,808
Day Care Children	8,897	314	3,908	1,146		2,602	925	17,792
Day Care Adult	53	368	263	26			166	976
Educational Assistance	3,674	923	1,642	57	·		2,233	8,529
Employability	3,470	1,548	2,946	192		2,239	1,039	11,434
Family Planning	2.947	417	3,581	92	419	384	569	8,409
Foster Care Adult	320	907	732	30			327	2,316
Foster Care Children	6,430	1,074	4,475	402			8,900	21,281
Health General	4,603	4,685	11,575	243		1,272	3,154	25,532
Health Deinstitutional.	664	2,660	4,020	151			1.983	9,478
Home Delivered & Congregate Meals	273	1,831	2,077	137			592	4,910
Homemaking	2,725	3.764	4,694	674	456	243	1.907	14,463
Housing	2,133	1,343	2,342	18		445	809	7,090
Information & Referral					361,617		96,673	458,290
Legal	3,108	662	1,558	17		431	4.026	9.802
Money Management	2,955	2,276	3,606	72	598	697	587	10,791
Protection Adult	805	3,223	4,994	126	1,851		833	11,829
Subacute Detoxification	- 302	433	1,735	439			12,016	14,925
MR Guardianship	181	2,387	1,216	61			146	3,991
Protection Children	12,581	72 7	5,845	414	9,957		2,845	32,269
Res. Treat. ED Child	1,142	202	1,026	141			2,504	5,015
Res. Treat. Pri. TreatCD	547	693	2,567	262			1.865	5,934
Res. Treat. Mouse-CD-MI	495	652	1,652	116			1,682	4,597
Res. Freet. Correct. Child	571	176	767	109			4,043	5,666
Res. Treat. MR Child/Adult	547	2,287	1,895	102			1,550	6,381
Social and Recreational	2,033	2,397	2,594	420			10,259	17,703
Transportation	3,928	4,015	5,417	575		792	5,639	20,366
TOTAL	81,736	52,647	.00,875	8,360	380,266	16,133	278,176	918,193

Source: Final Comprehensive Annual Services Program Plan: October 1,1972 to September 30, 1980. St. Paul: Department of Public Welfare, 1979.

ALLOCATION OF TITLE XX FUNDS* October 1, 1979 to September 30, 1980

County	Title XX Regular	Title XX Day Care	County	Title XX Regular	Title XX Day Care	County	Title XX Regular	Title XX Day Care
Aitkin	205,783	16, 133	Itasca	546,380	42,835	Rensey	7,379,704	578,546
Anoka	1,267,620	99,374	Jackson	128,225	10,052	Red Lake	56,395	4,421
Becker	338,664	26,550	Kanabec	146,507	11,486	Redwood	186,758	14,641
Beltrami	455,998	35,749	Kandiyohi	317,562	24,896	Renville	169,517	13,290
Benton	172,985	13,561	Kittson	78,938	6,189	Rice	348,970	27,358
Big Stone	89,009	6,978	Koochiching	245,481	19,245	Bock .	71,587	5,612
Blue Earth	482,222	37,805	Lac Qui Parle	87,533 ·	6,862	Roseau -	114,476	8,975
Brown	207,328	16,254	Lake	118,424	9,284	St. Louis	3,837,826	300,873
Carlton	380,258	29,811	Lake of the Woods	41,118	3,223	Scott	291,083	22,820
Carver	282,748	22,167	Le Sueur	193,872	15,199	Sherburne	184,722	14,482
Cass	345,379	27,077	Region 88**	427,978	33,552	Sibley	109,697	8,600
Chippewa	149,921	11,753	HcLeod	210,933	16,536	Stearns	728,226	57,091
Chisago	193,923	15,203	Mahnomen	78,351	6,143	Steele	197,986	15,521
Clay	330,924	25,943	Harshall	115,818	9,080	Stevens	97,197	7,620
Clearwater	182, 129	14,278	FIM HSBees	482,848	37,854	Swift	136,928	10,735
Cook	50,107	3,928	Macker	159, 187	12,480	Todd	280,808	22,014
Cottonwood	124,634	9,771	Hille Lace	243,264	19,071	Traverse	63,394	4,970
Crow Wing	498,917	39,114	Horrison	306,453	24,182	Wabasha	148,326	11,628
Dakota	1,102,875	86,462	Hower	379,431	29,746	Vadena .	177,688	13,930
Dodge	103, 175	8,089	Nicollet	162,112	12,709	Vaseca	130,734	10,249
Douglas	244,908	19,200	Nobles	194,562	15,253	Washington	792,456	62,126
Fillmore	180,883	14, 181	Norman	90,935	7,129	Wilkin	77,713	6,092
freeborn	293,718	23,.027	Olmsted	755,419	59,223	Winona	363,232	28,476
Goodhue	279,892	21,943	Otter Tail	457,436	35,862	Wright	396,627	31,094
Grant	65,540	5,138	Pennington	159,566	12,510	Yellow Medicine	139,351	10,925
Hennepin	15,080,527	1,182,266	Pine	288,002	22,578			
Houston	133,465	10,463	Pipestone	110,420	8,657	TOTAL	47,132,000	3,695,000
Hubbard	156,425	12,263	Polk	395,947	31,041			

114,157

8,950

16,603

Isanti

211,783

Source: Final Comprehensive Annual Services Program Plan: October 1, 1979 to September 30, 1980.

St. Paul: Department of Public Welfare, 1979.

^{*} Allocations represented are based on Minnesota Laws of 1979, Chapter 324

^{**} Region 8 - North = Lincoln, Lyon and Murray counties

^{***} F-M-W HSB = Faribault/Wantonwan Human Service Board

ESTIMATE OF COUNTY EXPENDITURE BY CLIENT CATEGORY

SERVI ŒS	AFDC/EP	A2H-122	0-60%	60-1152	WITHOUT REGARD TO INCOME	AIN.	OTHER	TOTAL
Adoption	190,172	42,708	265,064	74,455			410,784	983,183
Chore	243,771	1,694,895	1,318,790	82,604		****	903,241	4,243,301
Counseling	4,208,031	1,448,151	3,652,685	469,326	1,770,170	1,556,326	15,721,575	28,826,264
Developmental Achievement	996,421	4,435,645	3,024,719	213,414			1,358,043	10,028,242
Day Care Children	5,865,228	179,671	2,289,427	535,224		937,943	748,939	10,556,432
Day Care Adult	27,979	196,022	169,076	13,495	<u> </u>		176,904	583,476
Educational Assistance	403,647	174,698	217,840	7,186			271,689	1,075,060
Employability	881,953	349,724	463,400	12,620		220,296	157,227	2,085.220
Family Planning Foster Care	111,708	22,225	129,735	8,211	33,965	22,561	22,580	356,985
Adult Foster Care	22,229	184,963	159,467	11,710			47,783	426,152
Children Health	4,282,957	855,621	3,548,270	279,452			9,636,075	18,602,375
General Health	637,657	948,373	2,109,039	56,346		298,044	1,022,675	5,072,134
Deinstitutional. Home Delivered &	139,431	664,115	971,589	37,492			397,896	2,210,523
Congregate Meals	14,940	350,695	351,409	5,684			50.445	773,173
Homemaking	1,235,495	1,801,291	1,795,149	229,818	179,397	59,447	827,984	6,128,581
Housing Information &	243,738	169,440	259,369	1,765		34,913	269,720	978,945
Referral					6,166,678		1,664,324	7,831,002
Legal Money	353,656	70,629	184,564	2,324		33,388	480,415	1,124,976
Management Protection	332,682	383,884	500,964	10,326	65,201	51,334	107,759	1,452,150
Adult Subacute	99.741	685,432	1,136,696	16,319	502,356		128,433	2,568,977
MR MR	41,818	59,507	194,571	34,417			3,998,661	4,328.974
Protection	26,721 5,029,996	208.808	196,509	10,372	4,154,901		25,211	630,074
Children Res. Treat.	5,789,390	530,482	4,000,932	321,267	4,154,901			13,442.799
ED Child Res. Treat. Pri. TreatCD	417,933	342,890	1,706,433	273,997			2,590,448	23,730,429 5,331,701
Res. Treat. Mouse-CD-MI	386,285	569,272	1,803,494	99,095			1,207,615	4,065,761
Res. Treat. Correct. Child	776,196	182,536	1,794,172	215,823			8,154,013	11,122,740
Res. Treat. MR Child/Adult	398,285	1,333,307	927,114	101,500			4,833,625	7,594,282
Social and Recreational	268,235	197,860	270,230	38,344			1,222,975	1,997,644
Transportation	625,608	683,719	913,567	78,837		63,670	706,891	3,072,292
TOTAL	34,052,354	19,137,824	36,389,621	3,385,668	12,872,668	3,277,922	72,107,790	181,223,847

Final Comprehensive Annual Services Program Plan: October 1, 1979 to September 30, 1980. St. Paul: Department of Public Welfare, 1979.

ESTIMATE OF COUNTY EXPENDITURE BY FUNDING SOURCE

STATE	VICES 1	LOCAL	DOKATED	FEES	CERTIFIED PUBLIC EXPENDITURE	OTHER	TOTAL
106,523	lon	456,405	17	27,844	5,199	31	983,183
339,758		2,203,847	48	11,461	25,111	5,863_	4,243,301
4,013,504	ling	16,573,586	14,231	407,330	37,514	43,130	28,826,264
895,966	vement	4,390,599	8,348	23,725	9,753	9,073	10,028,242
759,106	ren	3,944,135	44,086	45,147	7,880	<u> </u>	10,556,432
2 40,902	LTR.	257,931	10,579	2,229	1,031		583,476
124,718	tance	449,661	3	1,261	719	42,018	1,075,060
5 198,700	rab111tv	775,094	111	1,350	3,925	5,660	2,085,220
2 32,493	Flanning	156,512	3	2,334	2,835		356,985
2 46,317	r Care	191,547	101	1,006	1,036	4	426, 152
1,657,329	r Care	12,930,772	571	383,561	115,315	180,790	18,602,375
651,322	n al	2,402,689	12	25,071	9,094	1,200	5,072,134
5 291,392	titutional.	914,751	37	12,675	1,871	28,024	2,210,523
6 27,597	Delivered &	488,157	1,009	12,310		39	773,173
1 632,939	eking	2,571,224	299	38,345	61	76,629	6,128,581
2 112.945	<u> </u>	316.942		166	448	135,000	978.945
5 1.101.366	nation a	3.519.194	22,226	240	27.565	8.693	7,831,002
125,539		604,325	7,467	250	50	66	1,124,976
171,535	ment	527,576	3,855	1,347	789	1,388	1,452,150
241,030	tion	1,150,647	3	3,001	9,230	1,329	2,568,977
1,217,147	ification	2,294,737	9	77,210	428		4,328,974
22,473	enship	312,770		1.766	428	21	630.074
7 579 A01	etion ren	5,484,746		5.864	66, 273	31,563	13.442.799
4,055,000	reet.	4,133,802	10	697,869	33,052	886, 498	23.720.429
427.5B9	reat. TreatCB	1,261,050		124 160	670	24.250	5.331.701
771 459	reat. e-CD-MI	2,142,171	5,408	56.265	670	2 659	4,065,761
1 :06 990	ireat. ct. Child	A.856.489		17,809	469	48.564	11.122.740
3,100,295	ireat. 11d/Adult	3,084,788	19	446.959	53,276	79,831.	7,594,282
134,419	l and ational	1,337,039	12,279	1,868,	2,713	152,843	1,997,644
428, 166	portation	1,299,992	14,538	18,105	946	23,860	3,072,292
24 .074 .119	744	97.661.168	143.404	2,448,508	379.951	1.788.976	181,223,847
	TAL	24,074,119	24,074,119 97,661,168	24,074,119 97,561,168 143,404	24.074.119 97,561.168 143.404 2,448,508	24,074,119 97,561,168 143,404 2,448,508 379,951	24.074.119 97.561.168 143.404 2.448.508 379.951 1.788.976

Source: Final Comprehensive Annual Services Program Plan: October 1, 1979 to September 30, 1980. St. Paul: Department of Public Welfare, 1979.

SUMMARY OF TOTAL PLANNED EXPENDITURES

SERVICE	COUNTY EXPENDITURES	STATE TITLE XX ADMINISTRATION	STATE CONTRACTS	TITLE IV-8	TOTAL
Adoption	983,183	16,637		6,695	1,006,515
Chore	4,243,301	71,805			4,315,106
Counseling	28,826,264	487,798		196,296	29,510,358
Developmental Achievement	10,028,242	169,698	3,866,667	68,288	14,132,895
Day Care Children	10,556,432	178,636	600,000	71,885	11,406,953
Day Care Adult	583,476	9,873			593,349
Educational Assistance	1,075,060	18,192		7,321	1,100,573
Employability	2,085,220	35,286	1,800,000		3,920,506
Family Planning	356,985	6,041		2,431	365,457
Foster Care Adult	426,152	7,211			433,363
Foster Care Children	18,602,375	314,789		126,675	19,043,839
Health General	5,072,134	85,831		34,539	5,192,504
Health Deinstitutional.	2,210,523	37,406		15,053	2,262,982
Home Delivered & Congregate Meals	773,173	13,084			786,257
Homemaking	6,128,581	103,708		41,733	6,274,022
Hous1ng	978,945	16,566			995,511
Information & Referral	7,831,002	132,516		53,326	8,016,844
Lega]	1,124,976	19,037		_	1,144,013
Money Management	1.452.150	24.573			1,476,723
Protection Adult	2,568,977	43,472			2,612,449
Subacute Detoxification	4.328.974	73.255			4,402,229
MR Guardianship	630.074	10,662			640,735
Protection Children	13.442.799	227,479		91,540	13,761,818
Res. Treat. ED Child	23,730,429	401,566		161,595	24,293,590
Res. Treat. Pri. TreatCD	5,331,701	90,223			5,421,924
Res. Ireat. Is House-CD-MI	4.055.761	68,801			4,134,562
Res. Treat. CorrectChild	11,122,740	188,219		75,741	11,386,700
Res. Treat. MR Child/Adult	7.594.282	128,510		51,715	7,774,507
Social and Recreational	1,997,644	_33,804		13,603	2,045,051
Transportation	1.072.292	51.989		20,921	3,145,202
TOTAL	181,223,847	3.066.667	5,266,657	1,039.357	191,596,539

Source: Final Comprehensive Annual Services Program Plan: October 1, 1979 to September 30, 1980. St. Paul: Department of Public Welfare, 1979.

SECTION 4 - PROGRAM GAPS AND BARRIERS

4.0 - Program Assessment

Preceeding sections have dealt with determining the DD population, their age groupings, the services offered in the State that fit into the priorities listed in P.L. 95-602, and the agencies responsible for delivering those services.

In the pages following, an attempt has been made to indicate the gaps in service to the DD population, under each of the four priority areas. The tables contain four lines of information. Service Population is the number of DD individuals, statewide, who are estimated to need the services. Each of the other lines will be either blank or contain a dot that indicates the existance of a gap. At this point, no effort has been made to enumerate the size of the gap, in most instances because that task is equal to the difficulty of precisely giving the number of DD individuals in an area.

Another factor is what has been called the "woodwork factor". Service providers have found that often a service must be begun and offered on the basis that it is a perceived need, on the part of providers or of clients, whose actual number may be quite limited. However, when the service is established, clients needing what is offered come "out of the woodwork" and the demand becomes greater than the capacity of the program. A good example of this factor is in the area of Case Management, where protective services or legal aid has experienced increasing demand with every year of its existance.

TABLE 4.1
PROGRAM GAPS AND BARRIERS
ALTERNATIVE COMMUNITY LIVING ARRANGEMENTS

	SPECIAL LIVING ARRANGEMENTS	PERSONAL CARE	TRANSPORTATION	FULL SUPERVISION	
SERVICE POPULATION	45,673	22,216	39,327	60,626	
UTILIZATION GAP				•	
SERVICE GAP	•	•	•		
FISCAL GAP	•	•	•		

TABLE 4.1
PROGRAM GAPS AND BARRIERS
NON-VOCATIONAL SOCIAL DEVELOPMENT

	ADULT DAY CARE	ADULT ED/TRAINING	SCHOOL AGE ED/TRAINING	TREATMENT	RECREATION
SERVICE POPULATION	20,332	21,938	21,009	366,775*	59,155
UTILIZATION GAP					
SERVICE GAP	•	•	•	•	•
FISCAL GAP	•	•	•	•	•

^{*} See Table 2-6, page 49.

TABLE 4.1 PROGRAM CAPS AND BARRIERS CASE MANAGEMENT

	COUNSELING	PROTECTIVE	FOLLOW-ALONG		
SERVICE POPULATION	20,203	18,542	20,000*		
UTILIZATION GAP					
SERVICE GAP	•	•	•	-	
FISCAL GAP	•	•	•		

TABLE 4.1
PROGRAM GAPS AND BARRIERS
CHILD DEVELOPMENT

	PRE-SCHOOL ED/TRAINING	IDENTIFICATION		
SERVICE POPULATION	7,596	154,297*		
UTILIZATION GAP				
SERVICE GAP	•	•		
FISCAL CAP	•	•		

^{*} See Table 2-3 (page 46) and Table 2-4 (page 47).

4.1.1 - Overall Program Strengths:

There is a growing recognition of the important role the State Developmental Disabilities Council can and does play in developing policies within the state regarding programs and services for persons with developmental disabilities. The Council's efforts at bringing about change and encouraging inter-agency cooperation, together with its information dissemination activities, have greatly enhanced the DD program in Minnesota.

<u>Case Management</u> - Services are beginning to exert a major impact upon the quality and appropriateness of services received by persons with developmental disabilities. The availability of case management services is matched by a rising demand which seems to indicate both the need and the importance of case management programs.

Services related to <u>Child Development</u> are an important component of several programs within the state. The Department of Health administers Early and Periodic Screening programs throughout the state. During the state's 1978-79 fiscal year, 9,000 children were screened through the EPS program. An additional 14,600 children were screened under the PSS program by EPS providers. Under the Department of Public Welfare's Early and Periodic Screening Diagnosis and Treatment program, 15,400 screenings were conducted. During the same period, 42,000 children were screened (approximately 45% of all persons in the state's $3\frac{1}{2}$ to $4\frac{1}{2}$ year age population).

Such identification and referral services obviously reach a significant number of young persons (0 - 21 years) in the state. This emphasis upon identification of physical and developmental problems helps lead to both appropriate treatment services and pre-school education and training programs.

Alternative Community Living Arrangements are well utilized within the state. The population of state institutions continues to gradually decline. Residential facilities for persons with mental retardation (licensed under DPW Rule 34) currently have a 96% utilization rate. In 1978, there were 206 licensed facilities; in 1979, 226 with a capacity of 4,088.

The trend in Minnesota appears to be toward further deinstitutionalization. The process of placing persons in alternative residential settings has been underscored by two important concerns: (1) residential placement and the type of facility/group home must match individual needs, i.e., placement must be appropriate; and (2) deinstitutionalization must not be absolute--special care and institutional facilities remain the most appropriate setting for some individuals. In those instances, every effort must be made to maintain the best possible living environment. The Department of Public Welfare has initiated capital improvement programs to help ensure quality and enhance the environment within its state hospital facilities.

Strides are being made in <u>Non-Vocational Social Development</u> areas as well. Increasing importance is being given to activities, programs and services which take place outside of traditional vocational/educational settings.

Attention is being focused upon the relationship between what happens in the vocational rehabilitation process, for instance, and the social non-vocational settings outside of work activity and/or sheltered workshops. There is a growing realization that the relationship between the two is an important one;

that individual needs transcend vocational programs; that rehabilitative processes cannot be divorced from personal growth and social involvement. The importance of this relationship is underscered by an increasing emphasis upon adult-school age education and training programs, treatment (when appropriate and necessary), and recreational opportunities.

4.1.2 - Overall Program Weaknesses

The provision of <u>Case Management</u> services is oftentimes hindered by a lack of fiscal resources and program providers. The demand for such programs is greater than the availability. In some instances case management services are constrained or rendered ineffective by the lack of cooperation and coordination between service agencies.

<u>Child Development:</u> Although screening, identification and diagnostic programs for children are quite extensive and rather comprehensive, post-screening activities are sometimes lacking--either because follow-up is not possible or because of parental refusal.

The DD Council has identified several issues within the <u>Alternative Community Living Arrangements</u> priority area which need to be addressed. Among these are the need to develop additional semi-independent living placements, to foster programs which encourage the retention of individuals with developmental disabilities within their own home, and to develop more efficient/effective administrative processes. The financing and construction of residential facilities for non-MR persons is another area which requires attention.

Community resistance to group homes remains a problem. And, as always, financing is oftentimes non-existent or difficult to obtain.

Programs which promote Non-Vocational Social Development services face certain problems. Maintaining some measure of adequacy and continuity are constant concerns. Like many programs, availability of non-vocational services is limited in the rural areas of the state. Scarce financial resources and limited access to and high cost of transportation services weighs against the effective delivery of services.

Goal:		To expand and improve the delivery of residential services in the least restrictive alternative.
<u>Objective</u>	<u>e;</u> 1.1	To develop legislation to support 500 semi-independent living placements by 9-30-82
Council F	Role/Activities:	
	- 12 m	
		Legislative support Review and comment Solicit support from relevant organizations.
Funding:		
Local	\$	
State	\$	
Federal	\$	
Total	\$	
Priority	Service:	Alternative community living arrangements
State pro	ogram and agency:	Department of Public Welfare, Legislature

Goal:	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.2	To secure legislative support to implement the state hospital population reduction recommended in the DPW Residential Care Study report by 9-30-83.
Council Role/Activiti	es: Legislative support Monitor process
Criteria for Evaluati	on:
Funding:	
Local \$	• · · · · · · · · · · · · · · · · · · ·
State \$	-
Federal \$	· -
Tota1 \$	-
Priority Service:	Alternative Community living arrangements.
State program and age	ency: Department of Public Welfare, Legislature

Goal:	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.3	To carry out a study of the supports necessary to encourage retention of D.D. persons in the home by 9-30-82
Council Role/Activities:	Legislative support Review and comment Technical assistance/advisory
Criteria for Evaluation:	
<u>.</u>	
Funding:	
Local \$	
State \$ 50,000	
Federal \$	
Total \$	·
Priority Service:	Alternative Community living arrangements.
State program and agency:	Department of Public Welfare

Goal:	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.4	To initiate the demonstration of creative alternatives to out-of-home placement by 9-30-81.
Council Role/Activities:	Grant review/advisory monitor and evaluate
Criteria for Evaluation:	One or more of following projects: Respite care models Family support programs Counceling Program supervision
•• ••	Home-based therapies Parent training
Funding:	
Local \$	
State \$	
Federal \$ 200,000	
Total \$	
Priority Service:	Alternative Community living arrangements.
State program and agency:	State Planning Agency/DD Planning Office

Goal:	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.5	To develop a single, inter-agency application, //22 for Certificate of Need, and DPW need determination by 9-30-81.
<pre>Council Role/Activities:</pre>	Facilitator Review and comment Monitor and evaluate
Criteria for Evaluation:	
<u>Funding:</u>	
Local \$	
State \$	
Federal \$	
Total \$	
Priority Service:	Alternative Community Living Arrangements
State program and agency:	Department of Public Welfare, State Planning Agency

Goal:	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.6	To develop a single inter-agency monitoring system for ICF-MR/DD facilities by 9-30-83.
Council Role/Activities:	Facilitator Monitor and evaluate
Criteria for Evaluation:	
Funding:	
Local \$	
State \$	
Federal \$	
Tota1 \$	
Priority Service:	Alternative Community Living Arrangements
State program and agency:	Departments of Health, Welfare, DD Council

Goal:	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.7	To adopt model standards for residential program licensing and/or improve/revise Rule 34 by 1-1-82
<pre>Council Role/Activities:</pre>	Monitor and evaluate
Criteria for Evaluation:	
Funding:	
Loca1 \$	
State \$	
Federal \$	
Tota1 \$	
Priority Service:	Alternative Community Living Arrangements
State program and agency:	Department of Public Welfare

Goal:	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.8	To determine the feasibility of a process of 5 year "redetermination of need" for DD residential facilities by 9-30-82.
Council Role/Activities:	Technical assistance/advisory Review and comment Provide public forum
Criteria for Evaluation:	
Funding:	
Local \$	
State \$	
Federal \$	
Tota1 \$	
Priority Service:	Alternative Community Living Arrangements
State program and agency:	Department of Public Welfare

Goal:	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.9	To provide technical assistance to individuals, organizations and agencies who are developing community living alternatives on an ongoing basis.
Council Role/Activities:	Monitor and evaluate
Criteria for Evaluation:	
Funding:	
Local \$	
State \$	
Federal \$	•
Total \$	
Priority Service:	Alternative Community Living Arrangements
State program and agency:	Regional Development Commissions DD coordination/technical assistance projects

<pre>Goal:</pre>	To expand and improve the delivery of residential services in the least restrictive alternative.
Objective: 1.10	To investigate potential funding sources for residential services provided to non MR/DD by 9-30-82
Council Role/Activities:	
Criteria for Evaluation:	
Funding:	•
Local \$	
State \$	
Federal \$	
Total \$	
Priority Service:	Alternative Community Living Arrangements
State program and agency:	Department of Public Welfare, DD Council

SECOND PRIORITY OF COUNCIL

Goal:	To assure more/better coordinated service deliver to persons with DD by providing inter-agency coor ination and technical assistance at the local lev of service delivery.
Objective: 2.1	To establish a statewide network of local DD coordinators to provide inter-agency coordination and technical assistance by 10-1-80
Council Role/Activities:	Grant review/advisory Monitor and evaluate
Criteria for Evaluation:	
Funding:	
Local \$	
State \$	
Federal \$ 260,000	
Total \$	
Priority Service:	Local coordination and technical assistance
State program and agency:	State Planning Agency - DD Office

SECOND PRIOIRTY OF COUNCIL

Goal:	To assure more/better coordinated service delivery to persons with DD by providing inter-agency coordination and technical assistance at the local level of service delivery.
Objective: 2.2	To continue development of the DD and other related modules of the Human Services data base on an Ongoing basis.
Council Role/Activities:	Monitor Disseminate data
Criteria for Evaluation:	
	•
Funding:	
Local \$	
State \$ 120,000 annual	ly
Federal \$	•
Total \$	· *
Priority Service:	Local coordination and technical assistance
State program and agency:	State Planning Agency/Human Resources

SECOND PRIORITY OF COUNCIL

Goal:	To assure more/better coordinated service delivery to persons with DD by providing inter-agency coordination and technical assistance at the local level of service delivery.
Objective: 2.3	To monitor the implementation of the Community Social Services Act on an ongoing basis.
Council Role/Activities:	Monitor and evaluate Initiate legislative activity if necessary Public Information/training for local officials
Criteria for Evaluation:	
Funding:	
Local \$	
State \$	
Federal \$	
Total \$	
Priority Service:	Local coordination and technical assistance
State program and agency:	Regional Development Commissions DD projects, DD Council

- GOAL: To plan, coordinate, monitor, evaluate and influence the delivery of services to DD persons.
- Sub-Goal 3.1: Advocacy and Protective Services Committee
 The State DD Council will serve as an advocate for the improvement of the life quality and services for persons who are developmentally disabled as well as support and assess and make recommendations related to the development/improvement of advocacy activities undertaken in Minnesota on behalf of persons having a developmental disability.
- OBJECTIVE 3.1.1: Provide training and technical assistance to community groups, advocates, consumers, and providers of services about individual rights and advocacy techniques so that advocacy services in both quantity and quality, are more evenly available/distributed throughout the state.
- Council Role/Activities: A. Provide training and technical assistance to community groups/agencies as needed or requested in order to develop or improve citizen advocacy services in their communities.

 Resources:

 DD staff, legal advocacy staff, citizen advocacy coordinators, and other outside resource persons, e.g., volunteer coordinators of MAVD.
 - B. Sponsor an annual statewide advocacy conference that will:
 - --explore innovative advocacy models and techniques; and
 - --provide a means for sharing and communicating among advocacy practitioners, consumers and providers of services; February or March 1981 Resources:

DD staff, University of Minnesota, Conference Planning and Evaluation Committee, PACER, Legal Advocacy, other advocates, and Advocacy Committee of the State Council.

- OBJECTIVE 3.1.2.: Systems Advocacy: explore with at least three other state agencies (that are related to advocacy for developmentally disabled persons) areas of common interest and concern and make recommendations regarding strategies for future cooperation and action. November 1980.
- Council Role/Activities: A. The Governor's Office of Volunteer Services (GOVS):

 1. Assemble information about GOVS and distribute to the Advocacy Committee, such information as --mandated services and responsibilities; --finance/budget;

- --personnel;
- --history:
- --testimony from key informants, e.g., staff, volunteer/citizen advocacy coordinators and other MAVD;
- --other; e.g., publications, public reports, and evaluation November 1980.
- 2. Study and interpret data. December 1980
- 3. Meet with Director/Commissioner
- 4. Submit recommendations to the State Council. January 1981
- 5. Follow-up on any assignments made by the State Council.
- B. The Department of Human Rights (DHR) tasks #1-5, above:
 - 1. February 1981.
 - 2. March 1981.
 - 3. April 1981.
 - 4. May 1981.
 - 5. As assigned and scheduled.
- C. The Supreme Court Study Commission on the Mentally Disabled and the Courts.

 Sub-objective: follow-up (krep informed) and make timely comments on the implementation of Recommendations #12 of the study, which reads:

 "The current system of Lay Advocates in State Hospitals should be made independent of the State Hospital Administration, and an opportunity for legal training should be made available to these lay advocates."
 - 1. Meet with spokesperson from the Commission and other key persons regarding their implementation strategies and schedules October/November '80
 - 2. Monitor and respond appropriately as events occur.
- OBJECTIVE 3.1.3: Address unresolved issues and recommendations from areas addressed in the Fiscal Year 1980 State Plan, as assigned by the State Council. By priority:

- A. Barriers to Deinstitutionalization.
- B. Community Residential Advocacy.
- C. Aversive Treatment.
- D. Child Abuse.

Given satisfactory resolution of the above, the following issues may be prioritized and addressed:

- --monitor out-of-home placement of children (18-month court review process and policies);
- -- Surrogate Parents (P.L. 94-142).
- -- Implementation of the Vulnerable Adult Protection Act.
- --Civil Service and the 700-Hour provision for hiring handicapped.
- -- Review of Advocacy Policies.

Resources:

DD staff, Director and staff of GOVS, Committee members, MAVD, and other resource persons, e.g., ACTION, Foster Grandparents, and Citizen Advocacy Coordinators.

Sub-Goal 3.2: Governmental Operations Committee

OBJECTIVE 3.2.1: To identify specific needs and innovative models of service in the areas of employment and related adult services for persons with developmental disabilities.

Council Role/Activities: The Developmental Disabilities Council will sponsor a series of public forums to identify needs and innovative models of services in the areas of employment and related adult services for persons with developmental disabilities. Representatives of public and private agencies, business and industry and consumers and consumer advocates shall be invited to participate. Findings of the forums shall be compiled and recommendations given to appropriate agencies.

OBJECTIVE 3.2.2: To influence the development of programs and policies affecting the interests of persons having a developmental disability.

Council Role/Activities: The Governmental Operations Committee will review/
comment on major federal and state plans, existing
laws and proposed legislation, administrative rules
and regulations following review procedures established by the issuing body. When time and circumstances permit, the committee will seek endorsements
of its concerns from the State Developmental Disabilities Council.

Sub-Goal 3.3: Public Information Committee

- OBJECTIVE 3.3.1: A. To build support and awareness for the Governor's Council and for the planning, coordinating and other influencing activities the Council carries out.
- Council Role/Activities: 1. Coordinate and assist the distribution of the slide/tape presentation on a statewide basis.
 - 2. Provide notification to other applicable agencies of annual and revised regional plans.
 - 3. Issue, on a monthly and/or as needed basis, press releases about Council activities and appointments of Council members.
 - 4. Participate in the publicizing to the media, information about workshops sponsored by the Council and the DD Planning Office.
 - 5. Coordinate other public information activities where appropriate.
 - Develop and distribute public service announcements on timely issues.

All of the above are ongoing activities without a specific schedule.

- B. Implement action to fill major gaps in public information as stated in the State Plan and by the State DD Council.
- Council Role/Activities: 1. Perform an advisory role and provide input regarding publicity for <u>DD Newsletter</u> and other DD publications.
 - 2. Review and comment on the DD Planning Office public information work plan. Annually.
 - 3. Monitor progress; mid-year and end-of-fiscal year.
- OBJECTIVE 3.3.2: Develop working relationships with applicable agencies and organizations regarding public information activities.
- Council Role/Activities: 1. Develop a file of existing newsletters and periodicals relating to DD issues.
 - Become involved with major publicity campaigns in behalf of persons with developmental disabilities such as telethons, statewide events like the Governor's Conference for the Handicapped.
 - 3. Coordinate other public information activities as appropriate.

4. Provide technical assistance to appropriate agencies and organizations as requested and as feasible.

Resources:

State staff, regional coordinators, Public Information Committee, relevant agencies and organizations, DD Council and its committees.

Sub-Goal 3.4: Prevention Committee

- OBJECTIVE 3.4.1: To review present status and make recommendations for developing a coordinated statewide sub-system in: Prevention, Identification (screening, referral, public information), Diagnosis/Assessment, Follow-along (track client through the system).
- Council Role/Activities: 1. To review present laws and regulations and identify major programs operating in Minnesota that provide services generally characterized as "prevention, identification, diagnosis/assessment, intervention, follow-along"; to develop a set of criteria to categorize these programs and services.
 - 2. To review recent studies addressing delivery coordination; to review recommendations made by these respective studies and follow-up on the status of these recommendations.
 - 3. To identify service delivery characteristics:
 - --personnel (numbers and qualifications);
 - -- costs for service:
 - --duplication and possible cost savings.
 - 4. Draft report reviewed by State Council and/or ad hoc committee, evaluation and recommendations.

Sub-Goal 3.5: Grant Review Committee

OBJECTIVE 3.5.1: To evaluate funding requests for State Council grant appropriations or through the State Council for other developmental or non-related DD appropriations.

- Council Role/Activities: 1. To draft and issue requests for proposals and program announcements for priority issue areas identified by the State DD Council as resources are available.
 - To evaluate applications submitted under such formats according to established Grant Review Committee operating procedures; to select and recommend proposals to the State Council for approval.
 - 3. To review and comment on projects seeking regional and national significance funds from the DD Office in the U.S. Department of HEW; to review and comment on DD-related grant applications under the U.S. Office of Management and Budget's A-95 review process.

OBJECTIVE 3.5.2: To monitor the activities and performance of projects supported by the State DD Council or other DD resources.

- Council Role/Activities: 1. To follow the operations of grants under current State Council support. Quarterly.
 - 2. To periodically monitor the operating characteristics of programs previously supported by the DD Council.
 - 3. Prepare revised grant review operating procedures manual. November 1980.

- GOAL: To design and implement the mandated developmental disabilities evaluation system.
- OBJECTIVE 4.1: To complete and submit Phase I of the evaluation plan by October 1, 1980.
- OBJECTIVE 4.2: To complete and submit Phase II of the evaluation plan by January 1, 1981.
- OBJECTIVE 4.3: To initiate implementation of the evaluation plan by October 1, 1982.

Council Role/Activities: Plan, development, minotor

Responsible Agency: State Planning Agency, Developmental Disabilities Planning Office, Developmental Disabilities Council.

Goal 5

- GOAL: To develop a plan for personpower training based on the assessed needs of persons working in the developmental disabilities field.
- OBJECTIVE 5.1: To assess the skill level of professionals and paraprofessionals working in the field by September 30, 1982.
- OBJECTIVE 5.2: To assess the availability and quality of pre-service and inservice training programs for persons working in the developmental disabilities field by February 15, 1983.
- OBJECTIVE 5.3: To develop a person power training plan by September 30, 1983.

Responsible Agency: Developmental Disabilities Planning Council.

5.2 - Summary Description of Plan Year Objectives

- Objectives 1.1 through 1.10 as listed below are Council activities chosen to meet the priority service area of <u>Alternative Community Living Arrangements</u>, the first priority of the Council.
- Objective 1.1 This objective will support the Department of Public Welfare in their effort to develop legislation to support 500 semi-independent living placements by September 30, 1982. The result expected is the reduction of presently institutionalized DD individuals and placement in the least restrictive alternative.
- Objective 1.2 The reduction of the DD population in state hospitals by 250 each year over the next three years is related to the previous objective.
- Objective 1.3 The Department of Public Welfare will be conducting a study of the supports necessary to encourage retention of the DD person in the home --numbers to be affected is undetermined at this time.
- Objective 1.4 The Agency will provide grants to projects that will demonstrate creative alternatives to out-of-home placement for DD individuals. \$200,000 in DD funds are to be used number to be affected is undetermined at this time.
- Objective 1.5 This objective seeks to reduce the number of forms facilities are forced to fill by developing a single inter-agency form to fit several purposes.
- Objective 1.6 The replacement of multiple monitoring of ICF-MR/DD facilities through the development of a single inter-agency monitoring system.
- Objective 1.7 This objective will seek to adopt the model standards that have been developed for the licensing of residential programs and revising of Rule 34.
- Objective 1.8 To support the Department of Public Welfare in determination of the feasibility of a process of a 5-year "redetermination of need" for DD residential facilities.
- Objective 1.9 The provision of technical assistance to individuals, organizations and agencies who are developing community living alternatives for the DD population.
- Objective 1.10 An investigation on the part of the Department of Public Welfare and the Council on potential funding sources for residential services provided to non-MR/DD.

Objectives 2.1 through 2.3 are activities chosen to meet the second priority of the Council which is local coordination and technical assistance to promote service delivery to the DD population. \$260,000 in DD funds will be used, through grants to regional programs to support these objectives.

Objectives 3.1.1 through 3.5.2 (10 objectives in all) - are activities of Council committees to support the planning, coordination, monitoring, evaluating, and influencing the delivery of services to DD persons. A second description of these activities as they are given in Table 5.1 does not seem appropriate.

Objectives 4.1 through 4.3 - are part of the mandated activity of design and implementation of a DD evaluation system.

Objectives 5.1 through 5.3 are part of the mandated activity of developing a plan for personpower training based on the assessed needs of persons working in the developmental disabilities field.

TABLE 5-3 SUMMARY OF PROPOSED DEVELOPMENTAL DISABILITIES EXPENDITURES

STATE OF MINNESOTA FY ENDING 1981

FEDERAL DD FISCAL YEAR ALLOTMENT \$727,784.00

DESIGNATED		NON-FEDE				
STATE AGENCIES	STATE	LOCAL	NON-PROFIT	TOTAL	FEDERAL* -FUNDS	TOTAL
State Planning Agency	\$ 64,537.00	\$ 103,058.00	\$ 75,000.00	\$ 242,595.00	\$ 727,784.00	\$ 970,379.00
	\$	\$	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$	s	e

DESIGNATED	TOTAL	PLANNING		ADMINIS-	AREAS OF PRIORITY SERVICES					
STATE AGENCIES	FEDERAL*	COUNCIL	OTHER	TRATION	CASE MGT.	CHILD DEVEL.	ALTERN LIVING	NON VOC.	OTHER	
State Planning Agy. F	\$727,784		\$ 98,169	\$ 36,389	\$	\$	\$225,000	\$	\$312,264	
NF_	\$242,595	\$ 8,490	\$ 13,426	\$42,621	\$	\$	\$ 75,000			
F	\$	\$	\$	\$	s	8	2 73,000	¢	\$103,058	
NF	\$	\$	\$	\$	Ś	\$	2	3	13	
SUBTOTALS F	\$	\$	\$	\$	Ŝ	<u> </u>	6	<u> </u>	\$	
NF	S	Ś	¢	ċ	ć		1	3	3	

^{*} BASIC FORMULA GRANT FUNDS UNDER P.L. 95-602

^{**}Local Coordination and Technical Assistance Projects

TABLE 6-1
IDENTIFICATION OF SKILL LEVEL STANDARDS

PROGRAMS/SERVICES STATE GOVERNMENT		LOCAL GOVERNMENT	PRIVATE NON-PROFIT	PRIVATE PROFIT	PRIVATE PRACTICE INDIVIDUAL
COMMUNITY RESIDENCES	State Standards/ Dept Rules	State Based	State Based	State Based	N/A
SHELTERED WORKSHOPS/WACs	State Standards	State Based	State Based	State Based	n/A
INSTITUTIONS FOR MR	ICF/MR State Standards	State Based	N/A	N/A	N/A
DACs/DAY CARE	State Standards/ Certification	State Based	State Based	State Based	State Based
SPECIAL EDUCATION	State Stand/ Certification Dept Rules	State Based	*	N/A	N/A
VOCATIONAL EDUCATION	State Stand/ Licensure Dept Rules	State Based	*	N/A	N/A
SCREENING-IDENTIFICATION PSS/EPS/EPSDT	State Stand/ Licensure Dept Rules	State Based	N/A	N/A	N/A

^{*} Limited application - depending upon program

TABLE 6.1.1.

IDENTIFICATION OF TRAINING PROGRAMS FOR PERSONS WHO WORK WITH INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES IN EACH OF THE FEDERALLY ASSISTED PROGRAMS WITHIN THE STATE

FEDERALLY ASSISTED PROGRAMS	STATE AGENCY RESPONSIBLE	TRAINING FOR PROF INCORPOR	RE SPECIAL S PROGRAMS SESSIONALS RATING DD STENT	ARE THERE SPECIAL TRAINING PROGRAMS FOR PARAPROFESSIONALS INCORPORATING DD CONTENT		
		YES	NO	YES	NO	
EDUCATION FOR HANDICAPPED	Education Dept	•		•		
VOCATIONAL REHABILITATION	Econ Security (DVR)	•		•		
PUBLIC ASSISTANCE	Dept of Public Welfare	•		•		
MEDICAL ASSISTANCE	Dept of Public Welfare	•		•		
SOCIAL SERVICES	Dept of Public Welfare	•		•		
MATERNAL AND CHILD HEALTH	Health Dept	•		•		
CRIPPLED CHILDREN	Health Dept	*		*		
COMPREHENSIVE HEALTH	COMPREHENSIVE HEALTH					
AGING	Dept of Public Welfare		•		•	
MENTAL RETARDATION	Dept of Public Welfare	•		•		

Availability and comprehensiveness of training programs varies

^{*} Limited - emphasis primarily upon physically handicapping conditions

6.2 - Comprehensive evaluation plan

At the present time the State assures, in Section 8, paragraph 8.9, that it will comply with Section 110 of p.L. 95-602. The goal and objectives of the Council concerning the evaluation system are given in Section 5 of this plan and are restated below.

- Goal 4: To design and implement the mandated developmental disabilities evaluation system.
 - Objective 4.1: To complete and submit Phase I of the evaluation plan by October 1, 1980.
 - Objective 4.2: To complete and submit Phase II of the evaluation plan by January 1, 1981.
 - Objective 4.3: To initiate implementation of the evaluation plan by October 1, 1982.
 - Council Role/Activities: Plan, development, monitor.
 - Responsible Agency: State Planning Agency, Developmental Disabilities Planning Office, Developmental Disabilities Council.

7.1 - Special assistance to poverty areas

At the present time, there is no program to be implemented for the provision of special assistance to the DD population in urban and rural poverty areas.

7.2 - Minority group representation

Every effort has been made to include minority representation on the Council, the Regional DD Councils, and on advisory committees for special activities sponsored by the agency and Council. In addition, a change in the contracts with each grantee assures that they will include minority representation in the advisory committees.

7.3 - Volunteers in the DD program

At the present time, there is no program to be implemented for the maximization of use of volunteers in the DD program beyond those individuals who are members of the Council, and Regional DD Councils.

7.4 INFORMING THE PUBLIC OF KINDS AND LOCATIONS OF SERVICES

The State DD Council and the State DD Planning Office undertake to inform the general public of the "kinds and locations of services and facilities which are available to individuals with developmental disabilities" by several means.

The Public Information Committee of the Council and the public information section of the DD Planning Office regularly publish literature pertaining to services for persons with developmental disabilities. The major publications include the DD NEWSLETTER (a quarterly publication of feature articles and timely topics), the DD NEWSBRIEFS AND CALENDAR (a monthly calendar of DD-related topics), and ADVOCACY DIMENSIONS (a quarterly newsletter devoted to advocacy issues). The DD Planning Office also has available a Resource Directory which lists services, sponsors, and locations of public and private service providers throughout the state. The annual State Plan contains listings of services which are available to persons with developmental disabilities from public/state agencies. All publications are distributed statewide, and, as resources will allow, free of charge.

In addition, regional DD programs sponsored by grants from the State Planning Agency have published and disseminated resource guides which outline the availability and location of services and facilities within their respective regions of the state.

7.5 PROVISIONS FOR EMPLOYEE PROTECTION

The rights and benefits of employees affected by deinstitutionalization processes and/or the closing of state institutional facilities are provided for, in part, under State Statutes, Chapter 43 (State Civil Service):

- 43.23 SENIORITY RIGHTS; POSITIONS ABOLISHED; PREFERENCE. Subdivision 1. Right of seniority. When one or more employees in the classified civil service are laid off because of a shortage of funds or curtailment of service or for any other reason beyond their control, the order of layoff shall be determined according to personnel rules which shall be based on seniority, and the names of such employees shall be placed at the head of the appropriate registers.
- Subd. 2. Notice of layoff. In every case of layoff of a permanent officer or employee, the appointing authority shall, at least seven days before the effective date thereof, give written notice to the employee and shall certify to the commissioner the reasons therefor. In any case where an appointing authority fails to certify before the effective date thereof, that the layoff was for reasons not reflecting discredit on the employee, it shall be deemed a dismissal and shall be subject to the provisions concerning dismissals, as provided in this chapter.
- Subd. 3. Positions abolished. When positions in the classified service are abolished by statute or by administrative action, the names of the incumbents of these positions, if they are members of the classified service, shall be placed at the head of the appropriate register, according to seniority.
- Subd. 4. Preferences. Persons who have been separated from the classified service because of layoff or the abolition of positions shall be given preference over all other eligibles in filling vacancies in the same or similar positions within the department in which they were employed immediately prior to their separation from the service, and the commissioner shall certify for each vacancy only the former officer or employee whose name stands first on the appropriate eligible register.

Legislation (Minnesota Laws 1977, Chapter 453, Section 17) which mandated the closing of Hastings State Hospital in May of 1978 contained provisions ensuring employment status, salary, benefits, relocation reimbursements, transfer rights, and, if transfer and/or employment rights are waived, severence pay for employees affected by the closing of the facility:

SECTION 17. On May 1, 1978, the Hastings state hospital shall be closed. . . All affected employees of the Hastings state hospital shall continue employment in the department of public welfare or they may voluntarily accept employment in another state department, with no reduction in salary or other benefits. The commissioner of personnel shall reimburse employees who relocate for all legitimate expenses incurred in relocation.

Notwithstanding any other law an employee who waives his right to transfer to a hospital other than Hastings state hospital or other state employment shall be entitled to severence pay in the amount equal to 5 percent of the employee's base salary or wage, not to exceed \$500, multiplied by the number of years of state service, but in no case shall the total amount exceed \$3,000.

Chapter 481 (H.F. No. 2028) further clarifies civil service seniority rights of former employees of the state hospital at Hastings. The Act was approved April 3, 1980 and will become effective August 1, 1980:

Section 1. The term "no reduction in salary or other benefits" in Laws 1977, Chapter 453, Section 17, includes within its scope the preservation and retention of seniority earned by employees at Hastings state hospital for any purpose for which seniority is used.

Specifically, without limitation and notwithstanding any law, rule, or collective bargaining agreement to the contrary, seniority spent in a classification or position at Hastings state hospital shall be added to seniority in the position or classification for another state government employer.

Any former employee of Hastings state hospital who transferred to a position with a state government employer which had a lower classification than his position at. Hastings state hospital, and was at or above the top of the salary range at the new position which resulted in the denial of step progression increases or in the denial of a salary increase effective July 4, 1979 pursuant to Minnesota Statutes, 1979 Supplement, Section 43.12, Subdivision 9a shall be awarded the increases retroactive to the time the increases were denied in the amount he would have received if he had remained in the position classification he had at Hastings state hospital.

Sec. 2. A person who was employed at Hastings state hospital and who transferred to another state facility or employer as an employee over the normal complement shall be permitted to remain with the new employer or facility, without demotion or relocation to a position more than 35 miles from the new facility or employer, until he is absorbed into the normal complement of the new employer or facility.

Approved April 3, 1980.

Though the latter two legislative acts address the Hastings situation specifically, the actions have in all probability set a precedent for employee protection should similar situations occur in the future.

7.1.1 IDENTIFICATION OF POVERTY AREAS IN THE STATE

STATE 27 MINNESOTA

POVERTY TRACTS AND MCDS. 1970 CENSUS

	TRACT OR MCD	POPULATION	POOR	PERCENT
COUNTY 001	AITKIN COUNTY	. 1751 . 284 . 169 . 141 . 235 . 217 . 216 . 171 . 52 . 336 . 177 . 230 . 208 . 141 . 121 . 121 . 54 . 195 . 370 . 121 . 57 . 223 . 111	261 363 61 77 55 71 61 57 16 57 16 80 66 42 42 34 42 34 139 39 125 44	20.78 20.73 21.48 45.56 39.01 30.21 28.11 28.24 33.33 30.77 23.21 494.78 31.73 24.11 34.71 62.96 38.40 37.03 36.42 56.05
	MCD 240 UNORG TERR OF NORTHEAST AITKIN MCD 245 UNORG TERR OF NORTHWEST AITKIN	. 10	27 10 125	60.00 100.00 36.34
COUNTY 003 COUNTY 005	ANOKA CCUNTY. MCD 005 ATLANTA TWP. MCD 015 AUDUBON VILLAGE. MCD 035 CARSONVILLE TWP. MCD 045 CUBA TWP. MCD 050 DETROIT LAKES CITY MCD 060 ERIL TWP. MCD 060 EVERGREEN TWP. MCD 070 FRAZEE VILLAGE. MCD 080 GREEN VALLEY TWP. MCD 085 HOLMESVILLE TWP. MCD 095 HOLMESVILLE TWP. MCD 120 MAPLE CROVE TWP. MCD 130 OSAGE TWP. MCD 135 PINE POINT TWP. MCD 145 RICHWOOD TWP. MCD 150 ROUND LAKE TWP. MCD 150 ROUND LAKE TWP. MCD 155 SHELL LAKE TWP. MCD 160 SPRUCE GROVE TWP. MCD 185 SUGAR BUSH TWP.	31 . 256 . 337 . 243 . 383 . 5625 . 946 . 340 . 996 . 369 . 257 . 232 . 163 . 447 . 390 . 556 . 164 . 443 . 92 . 262 . 366 . 179	12 68 75 91 79 1233 286 120 211 131 65 68 57 103 199 127 110 248 27 120 117 99	38.71 26.56 22.26 37.45 20.63 21.92 30.23 35.29 21.18 35.29 29.31 34.97 23.04 51.03 22.84 67.07 55.35 45.80 31.97 55.31 26.40

POVERTY TRACTS AND MCDS. 1970 CENSUS

					•			
			TRACT	OR MCD		POPULATION	POOR	PERCENT
			MCD	195	TWO INLETS TWP		39	20.86
			MCD	200	WALWORTH TWP	. 254	75	29.53
			MCD	205	WHITE EARTH TWP		222	43.79 36.59
		•	MCD	210	WOLF LAKE TWP		30 37	57.81
COUNTY	007	BELTRAMI COUNTY		. 010	BATTLE TWP		76	88.37
			MCD	025	BENVILLE TWP		132	20.99
			MCD	035	BLACKDUCK VILLAGE	A	53	22.18
			MCD	040 04 5	CORMANT TWP	• • • • •	96	45.50
		·	MCD MCD	060	FROHN TWP.	· III	146	29.03
			MCD	085	HINES TWP.		153	43.10
			MCD	090	HORNET TWP		75	45.18
			MCD	095	JONES TWP		29	22.48
•			MCD	110	LAMMERS TWP		101	30.33
		•	MCD	115	LANGOR TWP	. 92	31	33.70
			MCD	120	LEE TWP		19	65.52
			MCD	140	MOOSE LAKE TWP		82	50.31
			MCD	145	NEBISH TWP		104	38.81 34.02
			MCD	160	PORT HOPE TWP		99 50	45.05
			MCD	170	ROOSEVELT TWP		30	33.33
			MCD MCD	185 190	SOLWAY VILLAGE		46	56.79
			MCD	210	TEN LAKE TWP		69	31.08
			MCD	215	TENSTRIKE VILLAGE		39	27.86
			MCD	225	TURTLE RIVER TWP		73	29.80
			MCD	243	UNORG TERR OF BROOK LAKE		63	45.99
			MCD	246	UNORG TERR OF LOWER RED LAKE	. 2900	1299	44.79
			MCD	249	UNORG TERR OF NORTH BELTRAMI		47	61.04
COUNTY	009	BENTON COUNTY		005	ALBERTA TWP	A	223	25.08
			AICD	025	GRAHAM TWP		184	28.98 46.94
			MCD	030	GRANITE LEDGE TWP		238 74	20.61
			MCD MCD	035 040	LANGOLA TWP		168	21.99
			MCD	070	ST CEORGE TWP	•	179	22.18
COUNTY	011	BIG STONE COUNTY	77.2	005	AKRON TWP		88	31.54
COUNTY	011	BIG STORE COUNTY	MCD	015	ARTICHOKE TWP		67	54.03
			MCD	025	BIG STONE TWP		83	24.34
			MCD	035	CLINTON VILLAGE	. 529	119	22.50
			MCD	050	GRACEVILLE TWP		190	62.30
			MCD	055	GRACEVILLE VILLAGE		181	26.42
			MCD	060	MALTA TWP		113	58.85
			MCD	070	ODESSA TWP		88 42	36.36 24.85
001417	012	DILLE FARTH COUNTY	MCD MCD	075 020	ODESSA VILLAGE		92	27.22
COUNTY	013	BLUE EARTH COUNTY	MCD	070	LE RAY TWP		204	23.23
			MCD	080	LINCOLN TWP.	-	68	24.20
			MCD	090	MC PHERSON TWP		163	26.00
•			MCD	120	MEDO TWP		116	25.00
COUNT	015	BROWN COUNTY	, MCD	005	LBIN TWP	. 485	97	20.00
_			MCD	010	SHAW TWP	. 339	114	33.63

			TRACT	OR MCD	·	POPULATION	POOR	PERCENT
			MCD	020	CORDEN VILLAGE	87	26	29.89
		•	MCD	025	COMFREY VILLAGE (PART)		128	24.81
			MCD	030	COTTONWOOD TWP		198	22.92
			MCD NCD	040 0 55	EVAN VILLAGE	152	99	65.13
			MCD	060	LAKE HANSKA TWP		131	28,11
			MCD	075	MULLIGAN TWP		195 241	30.81 53.91
			MCD	085	NORTH STAR TWP		124	30.85
			MCD	110	STARK TWP	550	116	21.09
COUNTY	017	CARLTON COUNTY	MCD	015	BARNUM TWP	563	140	24.87
			MCD	025	BESEMAN TWP	61	17	27.87
			MCD	050	HOLYOKE TWP	117	29	24.79
			MCD	060	KETTLE RIVER VILLAGE	143	30	20.98
			MCD	105	SKELTON TWP		59	20.85
			MCD	110	SPLIT ROCK TWP	=	54	32.14
		•	MCD	120	THOMSON VILLAGE		21	23.86
			MCD	130	WRENSHALL TWP	291	97	33.33
COUNTY	019	CARVER COUNTY		150 060	UNORG TERR OF CLEAR CREEK	61 250	26	42.62
COUNTY	021	CASS COUNTY		005	HANCOCK TWP	3 79	63 61	21.90
			MCD	010	BACKUS VILLAGE		50	55.45 39.06
			MCD	015	BARCLAY TWP		90	27.52
			MCD	020	BECKER TWP	227	111	48,90
			MCD	025	BENA VILLAGE	180	94	52.22
			MCD	035	BIRCH LAKE TWP	341	71	20.82
			MCD	040	BLIND LAKE TWP	78	18	23.08
			MCD	050	BOY RIVER TWP	131	86	65.65
			MCD	055	BOY RIVER VILLAGE	10	10	100.00
		·	MCD	070	BYRON TWP	143	57	39.86
			MCD	075	CASS LAKE VILLAGE	1348	532	39.47
			MCD MCD	090 095	DEERFIELD TWP	127	75	59.06
			MCD	100	EAST GULL LAKE VILLAGE	543	143	26.34
			MCD	110	GOULD TWP	141	30 43	21.28 62.32
			MCD	125	HOME BROOK TWP	. 59	12	20.34
			MCD	130	INGUADONA TWP	. 59 58	15	25.86
			MCD	145	LEECH LAKE TWP	. 208	62	29.81
			MCD	150	LIMA TWP	141	80	56.74
			MCD	160	MC KINLEY TWP	87	26	29.89
			MCD	165	MAPLE TWP	160	90	56.25
			MCD	170	MAY TWP	590	121	20.51
			MCD	175	MEADOW BROOK TWP	147	53	36.05
			MCD	185	PIKE BAY TWP	791	358	45.26
		•	MCD MCD	195 2 00	PINE LAKE TWP	207	93	44.93
			MCD	210	PINE RIVER TWP	496 272	226	45.56
			MCD	215	POPLAR TWP	272 244	71 137	26.10 56.15
			MCD	225	REMER TWP.	190	69	36.32
			MCD	240	SALEM TWP	93	55	59.14
			MCD	255	SMOKY HOLLOW TWP	48	26	54.17

-17!

STATE 27	MINNESUIA	POVERI	T TRACIS AND MCDS. 1870 CENSUS			
		TRACT OR MCD		POPULATION	POOR	PERCENT
		MCD 270	TORREY TWP	. 80	42	52.50
		MCD 275	TRELIPE TWP	. 84	36	42.86
	•		WAHNENA TWP		63	31.03
	•		WALDEN TWP		84	43.75
			WILKINSON TWP		68	38.64
			WILSON TWP		118	30. 73 29.50
	•		WOODROW TWP.		82 68	23.29
			UNORG TERR OF NORTH CASS		98	28.00
COUNTY	023 CHIPPEWA COUNTY.		CRATE TWP		102	27.95
			GRANITE FALLS CITY (PART)		129	22.36
			HAVELOCK TWP		106	35.45
			KRAGERO TWP		60	25.64
			LEENTHROP TWP		80	22.54
			LOURISTON TWP		119	32.43
			RHEIDERLAND TWP		106	28.80
		MCD 095	STONEHAM TWP	426	205	48.12
•		MCD 100	TUNSBERG TWP		79	25.08
			WOODS TWP		110	29.97
COUNTY	025 CHISAGO COUNTY .		BRANCH VILLAGE		147	21.12
			LINDSTROM VILLAGE	· ·	294	26.34 22.16
	000 0154014750 001417		RUSH CITY VILLAGE		240 295	23.94
COUNTY	029 CLEARWATER COUNTY		BAGLEY VILLAGE		23	30.26
			CLOVER TWP	· -	31	70.45
		• • •	DUDLEY TWP		83	31,44
			EDDY TWP		171	51.20
			FALK TWP		50	21.37
	•		GONVICK VILLAGE		.94	29.47
		MCD 065	ITASCA TWP	. 86	23	26.74
			LA PRAIRIE TWP		138	46.00
	•		LEONARD VILLAGE		11	26.83
•			MINERVA TWP		95	36.68
			MOOSE CREEK TWP		39	30.47
			PINE LAKE TWP		141	44.34
			RICE TWP		37 37	33.33 21.76
			SHEVLIN VILLAGE		51	27.72
			WINSOR TWP		81	34.76
			UNORG TERR OF NORTH CLEARWATER		74	100.00
COUNTY	033 COTTONWOOD COUNT		AMO TWP		71	27.73
			BINCHAM LAKE VILLAGE		102	46.15
		MCD 025	CARSON TWP	465	130	27.96
			DALE TWP		78	23.21
		MCD 040 (DELTON TWP	236	54	22.88
			GERMANTOWN TWP		75	20.44
			HIGHWATER TWP.		102	34.11
			JEFFERS VILLAGE		90	20.63
			ROSE HILL TWP		114 109	35,08 25,00
•		MCD V9D	TTIMĄ TWP	436	109	23.00

MINNESOTA

					TRACT	OR MCD		POPULATION	POOR	PERCENT
COUNTY	035	CROW WING COUNTY		• •	MCD MCD MCD MCD MCD MCD MCD MCD MCD MCD	105 010 025 035 045 050 070 095 100 105 120 150 180	STORDEN TWP BAY LAKE TWP CROSBY VILLAGE CROW WING TWP DAGGET BROOK TWP DEAN LAKE TWP FAIRFIELD TWP GARRISON TWP GARRISON VILLAGE IDEAL TWP JENKINS TWP MISSION TWP PERRY LAKE TWP	. 430 . 2345 . 559 . 495 . 110 . 365 . 175 . 98 . 258 . 212 . 429	70 100 484 126 157 29 103 40 44 52 47 194 77	20.29 23.26 20.64 22.54 31.72 26.36 28.22 22.86 44.90 20.16 22.17 45.22 32.77
					MCD	185 205	PLATTE LAKE TWP	. 355	148 117	47.28 32.96
COUNTY	037	DAKOTA COUNTY		• •		CT 061 CT 061		153	37	24.18
COUNTY	039	DODGE COUNTY		• •	MCD MCD MCD MCD	025 060 065 070	CONCORD TWP	. 442 . 625 . 248	6 155 112 194 73	50.00 23.56 25.34 31.04 29.44
COUNTY	041	DOUGLAS COUNTY .		• •	MCD MCD MCD MCD MCD MCD MCD MCD MCD	075 015 060 065 075 085 090 095	VERNON TWP BELLE RIVER TWP. HOLMES CITY TWP. HUDSON TWP KENSINGTON VILLAGE LAKE MARY TWP. LEAF VALLEY TWP. LUND TWP. MILLERVILLE TWP.	. 466 . 613 . 406 . 312 . 594 . 548	112 109 223 115 73 151 165 73	20.44 23.39 36.38 28.33 23.40 25.42 30.11 23.10 29.32
COUNTY	043	FARIBAULT COUNTY	·	• • •	MCD MCD MCD MCD MCD MCD	105 115 125 130 135 150	MILLERVILLE VILLAGE	. 49 . 218 . 121 . 310 . 535	26 60 39 114 227 124 158	53.06 36.70 32.23 36.77 42.43 27.31 33.62
					MCD MCD MCD MCD MCD MCD MCD	025 030 035 040 050 055	CLARK TWP	. 648 . 560 . 579 . 1247 . 611 . 383	179 133 117 250 192 83	27.62 23.75 20.21 20.05 31.42 21.67 25.21
COUNTY	045	FILLMORE COUNTY.		• •	MCD MCD MCD MCD MCD MCD	108 005 010 015 020 045	WINNEBAGO CITY TWP	. 391 . 340 . 300 . 326	152 149 70 64 112 126	43.68 38.11 20.59 21.33 34.36 28.44

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		TRACT OR MCD	POPULATION	POOR	PERCENT
		MCD 060 FILLMORE TWP	. 665	321	48.27
		MCD 065 FORESTVILLE TWP	·	130	28.20
		MCD 005 FORESTATELE TWP		151	20.24
		MCD 085 HOLT TWP		102	33.44
				262	51.07
		MCD 110NORWAY TWP		75	25.34
				217	32,83
		MCD 155 SPRING VALLEY TWP		103	24.94
		MCD 180 YORK TWP		114	32.57
COUNTY	047	FREEBORN COUNTY	•	155	22.27
COUNTY	047	MCD 110 LONDON TWP		125	28.03
		MCD 120 MANCHESTER VILLAGE		37	43.02
		MCD 150 OAKLAND TWP.		174	28.25
		MCD 160 RICELAND TWP		148	24.26
COUNTY	049	GOODHUE COUNTY	127	41	32.28
COOM	045	MCD 015 BELVIDERE TWP		186	35.63
		MCD OBO KENYON TWP	_	106	21.16
		MCD 115 ROSCOE TWP		164	23.43
		MCD 150 WELCH TWP		151	26.17
COUNTY	051	GRANT COUNTY		61	32.62
COUNTY	031	MCD 035 ERDAHL TWP		63	21.50
		MCD 040 GORTON TWP		83	69.75
	•	MCD 050 HOFFMAN VILLAGE		115	32.12
		MCD 055 LAND TWP	•	126	29.93
		MCD 070 LOGAN TWP		55	23.31
		MCD 075 MACSVILLE TWP		118	56.46
		MCD 090 PELICAN LAKE TWP		82	25.47
		MCD 095 POMME DE TERRE TWP		81	45.25
		MCD 100 ROSEVILLE TWP		54	29.03
		MCD 110 STONY BROOK TWP	258	53	20.54
COUNTY	053	HENNEPIN COUNTY TRACT 0027	3278	688	20.99
		TRACT 0028	2838	647	22.80
		TRACT 0029	2687	1070	39.82
		TRACT 0033	2833	1088	38.40
•		TRACT 0034	1954	1105	56.55
		TRACT 0035	436	137	31,42
		TRACT 0036	1222	271	22.18
		TRACT 0037	3683	898	24.38
		TRACT 0038	3715	1180	31.76
		- TRACT 0039	1787	614	34.36
		TRACT 0042	2983	1507	50.52
		TRACT 0043	622	165	26.53
		TRACT 0044	1340	317	23.66
		TRACT 004601	60	12	20.00
		TRACT 004602	720	351	48.75
		TRACT 0047	1062	468	44.07
		TRACT OD48	1993	735	36.88
		TRACT 0049	3007	953	31,69
		TRACT 0052	2161	526	4.34
		TRACT 0053	1307	519	39.71
				· · · ·	

			ACT OR MCD		POPULATION	POOR	PERCENT
			TRACT 0054		1559	394	25.27
			TRACT 0057	•	3466	913	26,34
			TRACT 0058	•	1667	543	32.57
			TRACT 0059		2702	720	26.65
_			TRACT 0060		2450	639	26,08
·			TRACT 0061		1953	754	38.61
			TRACT 0062		1686	462	27,40
			TRACT 0063		1730	386	22.31
			TRACT 0069		2250	484	21.51
			TRACT 0072		3851	857	22.25
			TRACT 0084		2755	721	26.17
COUNTY	055	HOUSTON COUNTY		TWP		141	35.52
						85	45.21
			MCD 035 HOKAH TWP		351	94	26.78
			MCD 075 MOUND PRAIRIE	TWP	373	93	24.93
				WP		113	21.48
COUNTY	057	HURDADD COUNTY		· · · · · · · · · · · · · · · · · · ·		67	22.89
COORT	031	HUBBARD COUNTY		· · · · · · · · · · · · · · · · · · ·		131	61.79
			MCD 010 AKELEY VILLAGE MCD 015 ARAGO TWP		523	115	21.99
						253	65.04
						. 69	63.30
				· · · · · · · · · · · · · · · · · · ·	161 186	65 98	40.37
						95	52.69 25.33
				· · · · · · · · · · · · · · · · · · ·	51	17	33.33
						99	23.40
				P	136	34	25.00
			NCD 100 LAPORTE VILLAG	ίΕ	204	€8	33.33
			MCD 110 NEVIS TWP		317	99	31,23
				LLAGE		617	23.15
			MCD 125 ROCKWGOD TWP .		144	31	21.53
			MCD 135 STRAIGHT RIVER	TWP	258	74	28.68
			MCD 145 TODD TWP		772	257	33,29
			MCD 150 WHITE OAK TWP.		246	5.3	21.54
			MCD 160 UNORG TERR OF	STEAMBOAT RIVER	13	13	100.00
COUNTY	061	ITASCA COUNTY	MCD 015 ARDENHURST TWP	' · · · · · · ·	64	23	35.94
						59	21.00
			MCD 030 BEARVILLE TWP.		80	29	38,25
						144	36.64
			MCD 050 BOVEY VILLAGE.		913	183	20.04
			MCD 080 DEER RIVER TWP		361	124	34.35
		,	MCD 085 DEER RIVER VIL MCD 090 EFFIE VILLAGE.	LAGE	879	213	24,23
			MCD 090 EFFIE VILLAGE. MCD 100 GOOD HOPE TWP.		257	ខ១	33.33
			MCD 115 CRATTAN TWP		102	71	69.61
					37	12	32.43
						72 39	37.70
				• • • • • • • • • • • • • • • • • • •	65	20 20	23.93 30.77
						123	30.77 32.80
					256	82	32.03
			= = •••				02.00
		•	•				

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		TRACT OR MCD	POPULATION	POOR	PERCENT
		MCD 200 POMROY TWP	50	. 12	24.00
		MCD 210 SAND LAKE TWP		55	42.31
		MCD 220 SQUAW LAKE VILLAGE		53	42.74
		MCD 230 THIRD RIVER TWP		29 .	64.44
		MCD 250 WAWINA TWP	•	53	42.06
	•	MCD 255 WIRT TWP		65	48.87
		MCD 265 UNORG TERR OF BOW STRING LAKE		330	39.57
		MCD 280 UNORG TERR OF NORTHEAST ITASCA .	· •	258	26.14
COUNTY	063 JACKSON COUNTY			102	24.46
		MCD OB5 MINNEOTA TWP		88	29.63
		AICD 105 ROUND LAKE TWP		111	30.00
		MCD 110 SIOUX VALLEY TWP		281	54.78
		MCD 130 WISCONSIN TWP	400	81	20.25
COUNTY	065 KANABEC COUNTY	MCD O20 COMFORT TWP	598	162	27.09
		MCD 030 GRASS LAKE TWP	741	210	28.34
		MCD 040 HAY BROOK TWP	189	44	23,28
		MCD 050 KANABEC TWP	382	106	27.75
		MCD 075 PEACE TWP		121	33.06
		MCD OB5 QUAMBA VILLAGE		52	39.10
COUNTY	067 KANDIYOHI COUNTY	MCD 015 BLOMKEST VILLAGE		51	36.17
		MCD 020 BURBANK TWP		112	25,23
		MCD 025 COLFAX TWP		181	41.71
		MCD 035 EAST LAKE LILLIAN TWP		77	26.10
		NCD 040 EDWARDS TWP		96	29.36
		MCD 070 IRVING TWP		133	26.98
		MCD OGO LAKE ELIZABETH TWP		135	29.35
		MCD 095 LAKE LILLIAN TWP		127	31.28
		MCD 120 NORWAY LAKE TWP		151	42.54
		MCD 125 PENNOCK VILLAGE		125	50.61
		MCD 140 REGAL VILLAGE		23	42.59
		MCD 155 ST JOHNS TWP		. 198	47.03
		MCD 165 SUNBURG VILLAGE		44	30.56
COUNTY	069 KITTSON COUNTY			19	22.09
		MCD 035 DONALDSON VILLAGE		37	64.91
		MCD 055 HALMA VILLAGE		10	20.83
		MCD 060 HAMPDEN TWP		50	50.00
		MCD 070 HILL TWP		18	42.86
		MCD 095 LAKE BRONSON VILLAGE		64 18	22.94 23.08
				12	23.08
		MCD 120 PELAN TWP	-	103	47.25
		MCD 175 TEGNER TWP		20	36.36
		MCD 185 THOMPSON TWP		53	21.12
		MCD 187 UNORG TERR OF EAST KITTSON		26	100.00
COUNTY	D71 KOOCHICHING COUNTY			179	29.25
COUNT	or Roothiching Court 1 1 1 1 1 1	MCD 015 ISLAND VIEW VILLAGE.		11	35.48
		MCD 025 MIZPAH VILLAGE		58	54.21
		MCD 030 NETT RIVER TWP		11	100.00
		MCD 035 NORTHOME VILLAGE		78	33.62
		MCD 060 'RG TERR OF SOUTH KOOCHICHING.		356	39.87

			TRACT	OR MCD	,	POPULATION	POOR	PERCENT
COUNTY	073	LAC QUI PARLE COUNTY	MCD	005 010	AGASSIZ TWP	188 265	65 124	34.57 46.79
			MCD	025	BELLINGHAM VILLAGE	348	137	39.37
		•	MCD	030	BOYD VILLAGE	313	77	24.60
			MCD	040	CERRO GORDO TWP	290	100	34.48
			MCD	050	FREELAND TWP	235	74	31.49
			MCD	055	GARFIELD TWP		124	45.26
			MCD MCD	070 060	LAC QUI PARLE TWP		75 46	29.53
			MCD	095	MANFRED TWP.	87	46 47	52.87 2 8.48
			MCD	100	MARIETTA VILLAGE	165 303	100	33.00
			MCD	110	MEHURIN TWP	191	96	50.26
			MCD	115	NASSAU VILLAGE		67	64,42
			MCD	120	PERRY TWP		94	29.47
			MCD	130	RIVERSIDE TWP	248	51	20.56
			· MCD	135	TEN MILE LAKE TWP	333	151	45.35
COUNTY	077	LAVE OF THE HOODS COUNTY	MCD	145	YELLOW BANK TWP	257	80	31.13
COUNTY	077	LAKE OF THE WOODS COUNTY		015	UNORG TERR OF BELTRAMI FOREST	89	25	28.09
			MCD MCD	020 025	UNORG TERR OF NORTHWEST ANGLE UNORG TERR OF RAINY RIVER	155	42	27.10
COUNTY	079	LE SUEUR COUNTY		050	KILKENNY TWP	1946 476	412 162	21.17 34.03
			MCD	055	KILKENNY VILLAGE	174	42	24.14
			MCD	075	LEXINGTON TWP	754	155	20.56
			MCD	110	WASHINGTON TWP	239	67	28.03
COUNTY	081	LINCOLN COUNTY		005	ALTA VISTA TWP	366	204	55.74
			MCD	015	ASH LAKE TWP	285	110	38.60
			MCD	020	DIAMOND LAKE TWP	285	113	39.65
			MCD	025	DRAMMEN TWP	314	82	26.11
			MCD MCD	030 0 35	HANSONVILLE TWP		67	26.17
•			MCD	050	HENDRICKS TWP	390	142	36.41
			MCD	060	LAKE BENTON VILLAGE	601 653	187 148	31.11 22.66
			MCD	065	LAKE STAY TWP	251	126	50.20
			MCD	075	MARBLE TWP	384	183	47.66
			MCD	080	MARSHFIELD TWP	416	84	20.19
			MCD	085	ROYAL TWP	288	159	55.21
COUNTY	001	LVOU COUNTY	MCD	100	VERDI TWP	435	185	42.53
COUNTY	083	LYON COUNTY		005	AMIRET TWP		138	39.77
			MCD MCD	020	COON CREEK TWP	379	211	55.67
			MCD	035 045	EIDSVOLD TWP	343	146	42.57
			MCD	050	GARVIN VILLAGE	48 144	12 40	25.00 27.78
			MCD	065	ISLAND LAKE TWP	229	88	38.43
			MCD	030	LYONS TWP	255	149	58.43
			MCD	110	NORDLAND TWP	373	129	34.58
			MCD	115	ROCK LAKE TWP	314	145	46.18
			MCD	125	SHELBURNE TWP	375	146	38.93
			MCD	130	SODUS TWP.		89	29.47
			MCD MCD	140 155	TAUNTON VILLAGE	158	48	30.38
			NICU	199	WESTERHEIM TWP	309	77	24.92

			TRACT	OR MCD	·	POPULATION	POOR	PERCENT
COUNTY	085	MC LEOD COUNTY	MCD	020	BROWNTON VILLAGE		163	22.89
			MCD	025	COLLINS TWP		93	21.04
			MCD	075	PENN TWP		111	21.60
		•	MCD	085	RICH VALLEY TWP		190 152	21.81 34.70
		· · · · · ·	MCD.	.105	SUMTER TWP		307	26.47
50.WTV	007	MATINGMEN COUNTY	MCD	110	WINSTED TWP		92	38.17
COUNTY	087	MAHNOMEN COUNTY	MCD	005 010	BEAULIEU TWP		88	32.00
			MCD	015	BEJOU VILLAGE.	: _ : <u>-</u> :-	60	38.71
			MCD	020	CHIEF TWP		91	41.74
			MCD	025	CLOVER TWP		45	34.35
			MCD	030	GREGORY TWP	171	58	33.92
			MCD	035	HEIER TWP		90	60.40
			MCD	050	LAKE GROVE TWP		159	54.45
			MCD	055	MAHNOMEN VILLAGE	1416	285	20.13
			MCD	065	OAKLAND TWP	196	88	44.90
			MCD	075	POPPLE GROVE TWP	235	84	35.74
			MCD	080	ROSEDALE TWP	263	67	25.48
			MCD	085	WAUBUN VILLAGE	203	42	20.69
		********	MCD	090	UNORG TERR OF SOUTHEAST MAHNOMEN		221	61.56
COUNTY	089	MARSHALL COUNTY		005	AGDER TWP		. 44	44.90
			MCD	015	ALVARADO VILLAGE		63 155	20.19 25.66
•			MCD MCD	020 025	ARGYLE VILLAGE	604 208	140	67,31
			MCD	035	BLOOMER TWP.	163	38	23.31
			MCD	050	COMO TWP	55	20	36.36
			MICD	055	COMSTOCK TWP	191	43	22.51
			MCD	075	EAST VALLEY TWP	39	21	53.85
			MCD	080	ECKVOLL TWP	-	60	55.56
			MCD	095	FOLDAHL TWP		76	47.50
			MCD	100	FORK TWP		49	50.00
			MCD	105	GRAND PLAIN TWP		82	100.00
		•	MCD.	110	GRYGLA VILLAGE	256	108	42.19
			MCD	115	HOLT TWP	144	53	36.61
			MCD	120	HOLT VILLAGE	91	61	67.03
			MCD	130	LINCOLN TWP	202	119	58.91
•			MCD	140	MC CREA TWP	374	184	49.20
			MCD MCD	155 165	MIDDLE RIVER VILLAGE	431	150 81	34.86 32.93
			MCD	170	MOYLAN TWP	246 169	53	31.36
		•	MCD	180	NEWFOLDEN VILLAGE	400	116	29.00
			MCD	185	NEW MAINE TWP	160	72	45.00
			MCD	190.	NEW SOLUM TWP	226	65	28.76
			MCD	205	PARKER TWP	73	37	50.68
			MCD	210	ROLLIS TWP	193	59	51.30
			MCD	215	SINNOTT TWP	185	113	61.08
		•	MCD	220	SPRUCE VALLEY TWP	220	78	35.45
		•	MCD	230	STRANDOUIST VILLAGE	159	38	23.90
			MCD	235	TAMARAC TWP	190	122	64.21
			MCD	240	'IEF LAKE TWP	103	31	30.10

			TDACT	OD MCD				
			TRACT	OK MCD		POPULATION	POOR	PERCENT
			MCD	245	WALLEY TUB			
			MCD	245 255	VALLEY TWP	. 368	153	41.58
			MCD		VELDT TWP	. 30	10	33.33
			MCD	265 270	VIKING VILLAGE	. 121	50	41.32
			MCD		WANGER TWP		112	52.83
			MCD	285	WEST VALLEY TWP		39	22.16
			MCD	290	WHITEFORD TWP		8	24.24
COUNTY	091	MARTIN COUNTY		295	WRIGHT TWP		46	22.77
COOKII	031	MARTIN COUNTY	, .MCD	005	CEDAR TWP		93	25.62
				010	CENTER CREEK TWP	. 377	63	22.02
			MCD MCD	065	JAY TWP	. 409	102	24.94
				075	LAKE FREMONT TWP	338	76	22.49
			MCD MCD	080 085	MANYASKA TWP		67	20,49
		•	MCD	145	NASHVILLE TWP		96	20.78
COUNTY	093	MEEKER COUNTY		015	WELCOME VILLAGE		169	21.61
000	000	meenen coontil i i i i i i i i i i i i i i i i i i	MCD	020	CEDAR MILLS VILLAGE		35	32,71
		•	MCD	025	COLLINWOOD TWP	. 429	87	20.28
			MCD	035	COSMOS TWP	. 431	103	23.90
			MCD	040	DARWIN THE		175	38.21
			MCD	050	DASSEL THE		127	22.92
			MCO	055	DASSEL TWP	. 666	165	24.77
			MCD	060	DASSEL VILLAGE	935	194	20.75
		•	MCD	070	EDEN VALLEY VILLAGE (PART)	. 444	159	35,81
			MCD	080	FOREST CITY TWP	. 569	229	40.25
			MCD	097	GREENLEAF TWP	. 435	170	39.08
			MCD	110	KINGSTON VILLAGE	. 80	18	22.50
			MCD	120	MANANNAH TWP	. 732	188	25.68
COUNTY	095	MILLE LACS COUNTY		015	BORCHOLM TWP	, 545	242	44.40
			MCD	020	BRADBURY TWP	. 896	204	22.77
			MCD	030	EAST SIDE TWP	. 146	42	28.77
			MCD	035	FORESTON VILLAGE	. 503	212	42.15
			MCD	050	ISLE HARBOR TWP	. 301	98	32.56
			MCD	055	ISLE VILLACE	. 452	165	36.50
			MCD	660	ISLE VILLAGE	659	159	23.11
			MCD	085	MUDGETT TWP	. 583	187	32.08
			MCD	095	ONAMIA VILLAGE	· 93	24	25.81
			MCD	100	PAGE TWP	. 566	158	27.92
			MCD	120	SOUTH HARBOR TWP	429	95	22.14
			MCD	125	WAHKON VILLAGE	. 445	111	24.94
COUNTY	097	MORRISON COUNTY		005	AGRAM TWP.	. 209	60	28.71
			MCD	015	BELLEVUE TWP	. 254 . 441	98	38.58
			MCD	025	BUCKMAN TWP	635	110	24.94
			MCD	030	BUCKMAN VILLAGE	, 625 , 131	264 58	42.24 44.27
			MCD	035	BUH TWP.	, 131 , 518	148	44.27 28.57
			MCD	050	CUSHING TWP	. 286	109	37.65
			MCD	065	ELMDALE VILLAGE	89	31	34.83
			MCD	070	FLENSBURG VILLAGE	. 249 ·	59	23.69
			MCD	080	GRANITE TWP.	614	316	51,47
			MCD	100	HILLMAN VILLAGE	. 33	19	57.58
			MCD	105	LAKIN TWP	305	132	43.28
					•		-	

			TRACT	OR MCD	ı	POPULATION	POOR	PERCENT
			MCD	110	LASTRUP VILLAGE		48	27.43
			MCD	130	MORRILL TWP		278 41	52.35 28.47
		t .	MCD MCD	135 155	MOTLEY TWP	•	236	49.58
			MCD	165	PIKE CREEK TWP		251	44.19
		•	MCD	175	PULASKI TWP		99	33,11
			MCD	180	RAIL PRAIRIE TWP		44	52.38
			MCD	195	RIPLEY TWP	-	138	26,39
			MCD	210	SCANDIA VALLEY TWP		157	23.61
			MCD	215	SOBIESKI VILLAGE		141	54.86
			MCD	220	SWAN RIVER TWP	. 923	311	33.69
			MCD	225	SWANVILLE TWP		137	25.23
COUNTY	099	MOWER COUNTY		005	ADAMS TWP		122	21.67
			MCD	025	BENNINGTON TWP		62	23.48
		•	MCD	035	CLAYTON TWP		139	49.82
			MCD	040	DEXTER TWP		68	20.92
			MCD MCD	055	FRANKFORD TWP		163 103	27.67 30.29
			MCD	085 115	LODI TWP		96	21.72
			MCD	120	RACINE TWP		80	20.00
			MCD	150	TAOPI VILLAGE		15	40.54
			MCD	170	WINDOM TWP		45	20.18
COUNTY	101	MURRAY COUNTY		015	BONDIN TWP		131	25.39
			MCD	020	CAMERON TWP		113	38.69
			MCD	040	DES MOINES RIVER TWP		95	25.07
			MCD	050	ELLSBOROUGH TWP	. 309	126	40.78
		•	MCD	055	FENTON TWP		110	25.94
			MCD	080	IONA VILLAGE		62	20.33
			MCD	085	LAKE SARAH TWP		85	25.30
			MCD	165	LOWVILLE TWP		102	45.13
			MCD	110	MASON TWP		152	36.10
			MCD MCD	115	MOULTON TWP		90	20.88
COUNTY	103	MICOLLET COUNTY		120 050	MURRAY TWP		154	36.32 29.77
COUNTY	103	NICOLLET COUNTY	MCD	070	OSHAWA TWP		142 171	28.60
COUNTY	105	NOBLES COUNTY		020	BLOOM TWP.		114	26.82
COUNT	103		MCD	030	DEWALD TWP		158	34.65
			MCD	040	ELK TWP	421	92	21.85
			MCD	045	ELLSWORTH VILLAGE		156	28.57
			MCD	050	GRAHAM LAKES TWP		95	30.06
			MCD	055	GRAND PRAIRIE TWP	. 30a	69	22.40
			MCD	070	KINBRAE VILLAGE		30	50.85
			MCD	095	LITTLE ROCK TWP	· -	99	26.12
			MCD	105	OLNEY TWP		124	36.58
			MCD	110	RANSOM TWP		115	21.70
•			MCD	120	RUSHMORE VILLAGE		65	23.81 47.35
			MCD MCD	135 140	WESTSIDE TWP		143 105	29.49 47.35
			MCD	145	WILMONT VILLAGE.		96	22.86
COUNTY	107	NORMAN COUNTY		015	BFAR PARK TWP.		106	26.24
•				,		,- ,	-	

AIL 21	INT INTEGO I M		TOTE	111 1112013 AND MODO! 1370 OCHSOS	•		
	•	TRACT	OR MCD		POPULATION	POOR	PERCENT
	•	MCD	025	FLOM TWP	. 315	68	21.59
		MCD	040	GOOD HOPE TWP	. 153	36	23.53
		MCD	045	GREEN MEADOW TWP	. 236	63	26.69
	,	MCD	050	HALSTAD TWP		83	39.71
		·· MCD	060	· HEGNE TWP		67	49.26
		MCD	075	HOME LAKE TWP		42	20.59
		MCD	090	LOCKHART TWP		74	35.07
		MCD	115	ROCKWELL TWP		27	21.77
		MCD	125	SHELLY VILLAGE		79	26.78
		MCD	130	SPRING CREEK TWP		47	26.70
		MCD	140	SUNDAL TWP		90	44.12
		MCD	145	TWIN VALLEY VILLAGE		286	48.56
		MCD	150	WAUKON TWP		138	39.09
	400 0145777 00.4574	MCD	155	WILD RICE TWP		147	35.42
COUNTY	109 OLMSTED COUNTY				861	371 23	43.09 48.94
COUNTY	111 OTTER TAIL COUNTY		010 010	AMOR TWP	47 . 418	94	22.49
COUNTY	THE OTTER TATE COUNTY	MCD	025	BLOWERS TWP		201	53.17
		MCD	030	BLUFFTON TWP		116	21.17
		MCD	045	CANDOR TWP		97	33.33
		MCD	050	CARLISLE TWP	and the second s	64	24.81
		MCD	060	CLITHERALL VILLAGE		60	48.00
		MCD	065	COMPTON TWP		113	21.73
		MCD	070	CORLISS TWP		123	37.61
		MCD	090	DEER CREEK TWP		82	24.05
		MCD	100	DENT VILLAGE		55	48.67
	•	MCD	120	EASTERN TWP	. 338	- 111	32.84
		MCD	130	EFFINGTON TWP		223	62.29
		MCD	140	ELIZABETH VILLAGE		44	24.58
	•	MCD	145	ELMO TWP	. 403	92	22.83
		MCD	160	EVERTS TWP		115	28.61
		MCD	175	FOLDEN TWP	. 320	102	31.87
	•	MCD	185	GIRARD TWP		90	48.65
		MCD	195	HENNING TWP		187	41.37
		MCD	200	HENNING VILLAGE		204	27.13
		MCD	210	HOMESTEAD TWP		101	31.27
	•	MCD	215	INMAN TWP		100	32.26
		MCD	225	LEAF MOUNTAIN TWP		184	43.09
		MCD	235	MAINE TWP		115	27.38
	•	MCD	255	NIDAROS TWP		ย0 260	43.01 62.05
		MCD MCD	265	OSCAR TWP		63	20.39
		MCD	275 290	OTTO TWP		88	29.63
		MCD	295	PADDOCK TWP		145	46.18
		MCD	300	PARKERS PRAIRIE TWP		98	28.91
		MCD	305	PARKERS PRAIRIE VILLAGE		181	23.54
		MCD	325	PERHAM VILLAGE		3 96	22.69
		MCD	335	RICHVILLE VILLAGE	. 75	34	45.33
		MCD	355	SCAMBLER TWP		67	21.97
		MCD	365	SVERDRUP TWP		138	27.77

MINNESOTA

POVERTY TRACTS AND MCDS. 1970 CENSUS

			TRACT	OR MCD		POPULATION	POOR	PERCENT
			MCD MCD MCD MCD	400	TORDENSKJOLD TWP	. 397 . 263 . 102	181 127 69 35	53.08 31.99 26.24 34.31
COUNTY	113	PENNINGTON COUNTY	MCD MCD , MCD	405 410 015	WESTERN TWP	. 292	128 126 70	54.24 43.15 46.98
			MCD MCD MCD	030 035 040	GOODRIDGE VILLAGE	. 71	78 24 62	46.99 33.80 27.43
			MCD MCD	055 075 080	NORDEN TWP	• 98	73 70 37	29.92 71.43 27.01
			MCD MCD MCD	105 110 120	SMILEY TWP	. 239	46 111 21	27.38 46.44 33.33
COUNTY	115	PINE COUNTY	MCD MCD	015 020 025	ASKOV VILLAGE	. 366	73 128 85	26.16 34.97 29.31
			MCD MCD MCD	040 045 065	BROOK PARK VILLAGE	. 311	60 169 18	46.51 54.34 24.66
			MCD MCD MCD	095 125	DENHAM VILLAGE	. 25 . 502	11 6 128	30.56 24.00 25.50
	•	·	MCD MCD		NEW DOSEY TWP	. 75 . 147	34 29 51	45.33 38.67 34.69
			MCD MCD MCD	150 155 170	OGEMA TWP	. 41 . 2203	16 23 450	34.04 56.10 20.43
COUNTY	117	PIPESTONE COUNTY	MCD	180 005 010	POKEGAMA TWP	. 329 . 411	212 164 230	20.93 49.85 55.96
			MCD MCD MCD		BURKE TWP	. 481 . 408	67 189 184 21	27.69 39.29 45.10 27.63
		ļ.	AICD MCD MCD	055 070 080	HOLLAND VILLAGE	. 303 . 548	112 110 176	36.96 20.07 57.14
			MCD MCD MCD	095 100 105	TROSKY VILLAGE	. 94 . 439	30 142 36	40.43 32.35 22.64
COUNTY	119	POLK COUNTY		005 020 025	ANDOVER TWP	. 114	39 51 53	34.21 44.35 33.33
			MCD MCD MCD	030 040 0 50	BRANDSVOLD TWP	. 209 . 129	76 32 96	36.36 24.81 77.42

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		TRACT OR	MCD	POPULATION	POOR	PERCENT
		MCD O	060 COLUMBIA TWP	. 360	110	30.56
		MCD O	OTO CROOKSTON TWP	. 442	136	30.30
		MCD O	085 ERSKINE VILLAGE	533	107	20.08
			195 EUCLID TWP	. 204	94	46.08
			10 FARLEY TWP	. 76	26	34.21
			35 GARFIELD TWP	. 409	105	25.67
			50 GRAND FORKS TWP	. 374	107	28.61
			55 GROVE PARK TWP	. 255	68	26.67
			60 GULLY TWP	. 18	18	100.00
			65 CULLY VILLAGE	. 62	29	45.77
			75 HELCELAND TWP	. 122	27	22.13
			85 HILL RIVER TWP	. 195	116	59.49
			OO JOHNSON TWP	. 93	84	85.71
			110 KEYSTONE TWP	. 116	40	34.48
				. 251	88	35.06
			25 LENGBY VILLAGE	. 181	99	54.70
			35 LIBERTY TWP	. 294	112	38.10
			50 MENIOR VILLAGE	. 223	60	26.91
			80 QUEEN TWP	. 285 . 372	99	34.74
			10 SANDSVILLE TWP	. 109	141 52	37.90
		MCD 3:	25 SULLIVAN TWP	. 196	42	47.71 <u>1</u> 21.43 m
001111714		MCD 3:	35 TILDEN TWP	. 71	62	
COUNTY	121 POPE COUNTY	MCD Q	OS BANGOR TWP	. 271	94	87,32 ආ 34,69
			115 BEN WADE TWP	. 385	107	27.79
			20 BLUE MOUNDS TWP	. 174	37	21.26
			30 CYRUS VILLAGE	. 257	76	29.57
			55 GROVE LAKE TWP	. 260	87	30.00
			G5 LAKE JOHANNA TWP	. 199	127	63.82
			75 LEVEN TWP	. 449	135	30.07
	• •		85 LOWRY VILLAGE	333	95	28,53
	•		20 STARBUCK VILLAGE	. 1109	232	20.92
			25 VILLARD VILLAGE	. 259	57	1ن. 22
			35 WESTPORT TWP		78	27.56
COUNTY	123 RAMSEY COUNTY	TRACT	45 WHITE BEAR LAKE TWP	-	152	33.12
		TRACT	0328	5091	1284	25.22
		TRACT	0329.	1782	482	27.05
		TRACT	0330	2161	1321	61.13
		TRACT	0336	1704 1781	359	21.07
		TRACT	0338	2516	684 519	38.41
		TRACT	0339	2057	469	20.63
			0340	2163	649	22.75 30.00
			0342	1972	562	28.50
			0355	3108	761	24.49
			0359	1955	394	20.15
COUNTY	125 RED LAKE COUNTY	TRACT		2206	517	23.44
COUNTI	125 RED LAKE COUNTY			202	61	30.20
			15 EMARDVILLE TWP	370	មទ	23.24
•		MCD 02	25 GARNES TWP	203	76	37.44

STATE 27 MINNESOTA

			TRACT			POPULATION	POOR	PERCENT
			MCD	030	GERVAIS TWP	. 339	69	20.35
			MCD	045	LOUISVILLE TWP	·	108	50.23
	;	the state of the s	MCD	055	PLUMMER VILLAGE		70	29.17
			MCD	060	POPLAR RIVER TWP	378	158	41.80
			MCD	080	TERREBONNE TWP		93	40.97
			MCD	085	WYLIE TWP	4.0.0	. 43	22.87
00111171	407	REDWOOD COUNTY		010	BROOKVILLE TWP		109	27.74
COUNTY	127	REDWOOD COUNTY	MCD	025	DELHI TWP		60	24.62
			MCD	040	GRANITE ROCK TWP		142	29.22
			MCD	045	HONNER TWP		52	58.43
			MCD	050	JOHNSONVILLE TWP		101	26.79
			MCD	070	LUCAN VILLAGE		108	42.02
			MCD	080	MORGAN TWP		87	22.54
			MCD	100	NORTH REDWOOD VILLAGE		25	21,19
			MCD	105	PAXTON TWP		119	34.90
			MCD	115	REDWOOD FALLS TWP		102	25.89
			MCD	120	REVERE VILLAGE		36	26.28
			MCD	135	SHERIDAN TWP	4 . 4	126	30.14
			MCD	140	SHERMAN TWP		92	26.21
			MCD	145	SPRINGDALE TWP		64	20.25
			MCD	155	SWEDES FOREST TWP		39	21.67
			MCD	190	WALNUT GROVE VILLAGE	. 789	167	21.17
			MCD	200	WATERBURY TWP	. 476	224	47.06
			MCD	205	WESTLINE TWP		104	31.71
			MCD	210	WILLOW LAKE TWP		239	54.44
COUNTY	129	RENVILLE COUNTY	MCD	015	BIRCH COOLEY TWP	. 3ô6	75	20.49
005.11.1			MCD	065	EMMET TWP	. 437	134	30,66
		•	MCD	075	FAIRFAX VILLAGE	. 1226	339	27.65
			MCD	085	FRANKLIN VILLAGE	430	137	31.86
			MCD	095	HECTOR TWP		104	24.64
			MCD	105	HENRYVILLE TWP	. 502	204	40.64
			' NICD	115	MARTINSBURG TWP	. 301	83	27.57
			MCD -	125	MORTON VILLAGE	. 630	126	20.00
			MCD	160	SACRED HEART TWP		142	31.42
			MCD	175	WANG TWP	. 376	162	43.09
COUNTY	131	RICE COUNTY	MCD	025	ERIN TWP		244	36.09
			MCD	070	RICHLAND TWP	. 540	142	26.30
			MCD	075	SHIELDSVILLE TWP		212	41.17
COUNTY	133	ROCK COUNTY	MCD	015	BEAVER CREEK VILLAGE		73	30.04
			MCD	025	DENVER TWP		72	25.26
			MCD	030	HARDWICK VILLAGE		76	30.65
			MCD	090	SPRINGWATER TWP		120	22.86
COUNTY	135	ROSEAU COUNTY		015	BARTO TWP.		105	82.03
			MCD	020	BEAVER TWP		10	32.26
			MCD	030	CEDARSEND TWP		36 50	34,29
			MCD	035	DEER TWP		50	30.12
			MCD	040	DEWEY TWP.		48	37.50
			MCD	045	DIETER TWP		90 47	36.89 21.66
			MCD	C50	ENSTROM TWP.		47 69	41.32
			MCD	055	FALUN TWP	. 167	03	71.56

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					THE THE MODEL 1370 CENSOS			
			TRACT O	R MCD		POPULATION	POOR	PERCENT
			MCD MCD MCD	060 075 080	GOLDEN VALLEY TWP	. 212	58 57 62	35.80 26.89 34.44
	•	•	MCD	095 105	LIND TWP	. 97	40 77	41.24
		•	MCD MCD	110 120	MOOSE TWP	. 106	26	24.53
			MCD	125	PALMVILLE TWP	. 49	65 18	37.36 36.73
			MCD MCD	135 140	POLONIA TWP	. 149	24 82	30.00 55.03
			MCD MCD	145 160	REINE TWP	. 279	5 65	20.00 30.47
			MCD MCD	185 195	STOKES TWP	. 244	66 202	27.05 20.34
COUNTY	137	ST LOUIS COUNTY	MCD . TRAC	216 T 001	UNORG TERR OF SOUTHEAST ROSEAU	. 174 3110	38 813	21.84
			TRAC TRAC	T 001		2592 2822	692 655	26.70
			TRAC TRAC	T 001	9	1427 1118	658	23.21 46.11
			TRAC	T 002	.599 .899	55	326 11	29.16 20.00
			TRAC	T 011	2	30 2873	9 735	30.00 c
COUNTY	139	SCOTT COUNTY	TRAC	T 015	· · · · · · · · · · · · · · · · · · ·	2985 2 294	621 516	20.80 22.49
COUNTY	143	SIBLEY COUNTY	. MCD	005	BELLE PLAINE TWP	477	184 127	23.59 23.62
			MCD MCD	020 075	BISMARCK TWP	454	90 1 0 4	22.96 22.91
			MCD MCD	080 085	KELSO TWP	412	90 156	20.36 37.86
• .	• •	e e e	MCD MCD	095 100	NEW AUBURN VILLAGE	452	70 183	30.04 40.49
			MCD MCD	105 110	TRANSIT TWP	514 490	142 142	27.63 28.98
COUNTY	145	STEARNS COUNTY		115 005	WASHINGTON LAKE TWP.	. 691 . 729	184 322	26.63 44.17
			MCD MCD	015 030	BROCKWAY TWP	490	151 471	30.82 34.91
			MCD MCD	035 045	BROOTEN VILLAGE	666	156 205	23.42 21.35
tet.			MCD MCD	055 060	CROW RIVER TWP	321 944	157 238	48.91 25.21
			MCD MCD	0 80 0 85	FARMING TWP	751 607	325 180	43.28 29.65
			MCD MCD	090 0 95	GROVE TWP	577 980	197 288	34.14 29.39
			MCD MCD	100 105	HOLDING TWP	1032 599	406 133	39.34 22.20
			MCD	115	KRAIN TWP	847	313	30.95

			TRACT	OR MCD		POPULATION	POOR	PERCENT
		•	•					
			MCD		LAKE GEORGE TWP	. 404	85	21.04
		•	MCD		LAKE HENRY TWP		317	36.10
			MCE		LUXEMBURG TWP		296	29.45
			MCE		MELROSE TWP	. 938	368	41.36
			MCD		MILLWOOD TWP		544	67.33
			MCD	_	MUNSON TWP	. 954	309	32.39
			MCD		NORTH FORK TWP		56	20.74
			MCD		OAK TWP		219 113	31.02 34.24
			MCD		RAYMOND TWP		218	26.84
		•	MCD MCD		RICHMOND VILLAGE		325	25.31
			MCD		ROCKVILLE TWP		39	21.20
			MCD		ST ANTHONY VILLAGE		15	23.44
			MCD		ST JOSEPH VILLAGE.		327	24.33
			MCD		ST MARTIN TWP		190	23,43
			MCD		SPRING HILL TWP		201	28.19
•			MCD		ZION TWP		331	46.55
COUNTY	147	STEELE COUNTY			AURORA TWP		170	24.22
			MCD		MEDFORD TWP		114	24.52
COUNTY	149	STEVENS COUNTY	MCD	005	ALBERTA VILLAGE	. 143	34	23.78
			MCD		BAKER TWP	. 234	51	21.79
			MCD		DONNELLY TWP		68	36.56 o
			MCD	_	EVERGLADE TWP		54	30.51
			MCD		HANCOCK VILLAGE		160	22.32
			MCD		MOORE TWP		39	20.00
			MCD		MORRIS TWP	. 361	78	21.61
•			MCD		RENGSVILLE TWP		71	21.65
			MCD		SCOTT TWP ,		69	32.86
			MCD		STEVENS TWP		49	22.27
COUNTY	454	CHIET COUNTY	MCDMCD		SWAN LAKE TWP		85 339	41.06 20.32
COUNTY	151	SWIFT COUNTY	MCD		APPLETON VILLAGE		108	31.86
			MCD		CAMP LAKE TWP		118	37.22
			MCD		CLONTARF TWP		56	44.80
			MCD		CLONTARF VILLAGE		45	23.08
			MCD		DUBLIN TWP		96	34.41
			MCD		HAYES TWP		164	49.10
			MCD	075	HEGBERT TWP		74	30.45
			MCD	077	HOLLOWAY VILLAGE		88	75.21
			MCD	080	KERKHOVEN TWP	. 370	111	30.00
			MCD		KILDARE TWP		117	42.70
			MCD		MOYER TWP		72	32.14
			MCD		SHIBLE TWP		73	35.61
•			MCD		SIX MILE GROVE TWP . , ,		89	33.46 56.00
			MCD MCD		SWENODA TWP		198 53	56.09 21.63
COUNTY	153	TODD COUNTY	::: : ::::::::::::::::::::::::::::::::		TARA TWP		188	47.36
COUNTY	153	IGDD COURTES STATES	MCD		BERTHA TWP		246	45.05
			MCD		BERTHA VILLAGE		111	24.67
	,		MCD		BIRCHDALE TWP		143	28.77
			,0				• •	

	TRACT	OR MCD		POPULATION	POOR	PERCENT
	MCD MCD MCD MCD MCD MCD	025 030 035 045 055	BROWERVILLE CITY	. 386 . 332 . 128 . 514 . 634	253 105 113 31 249 259	36.51 27.20 34.04 24.22 48.44 40.85
	MCD MCD MCD	065 070 075	GERMANIA TWP	371	60 170	20.98 45.82
	MCD	085 095	GORDON TWP	. 249	325 85 69	47.94 34.14 34.67
	MCD MCD	100 110	IONA TWP	. 554 . 422	161 129	29.06 30.57
	MCD	115 120	LITTLE ELK TWP	. 234 . 502	77 175	32.91 34.86
·	MCD MCD MCD	125 135 145	LONG PRAIRIE TWP	519	353 264	35,26 50.87
	MCD MCD	150 155	ROUND PRAIRIE TWP	545	115 235 596	23.47 43.12 23.59
	MCD MCD	160 165	STAPLES TWP	950 526	232 168	24.42 <u> </u> 31.94 9
	MCD MCD MCD	170 180 195	TURTLE CREEK TWP	449	69 95	37.91 ? 21.16
COUNTY 155 TRAVERSE COUNTY		005 010	BROWNS VALLEY VILLAGE	92 997	143 56 248	26.09 60.87 24.67
·	MCD MCD	015 020	CROKE TWP	162 179	94 75	58.02 41.90
	MCD MCD MCD	035 050 055	FOLSOM TWP	312	50 72 60	24.15 23.08
	MCD MCD	060 065	REDPATH TWP	35 261	26 91	35.50 74.29 34.87
•	MCD MCD MCD	080 085	TINTAH VILLAGE	190 160	103 59	54.21 32.78
COUNTY 157 WABASHA COUNTY		095 030 045	WINDSOR TWP	399	8 121 177	38.10 30.33 43.60
	MCD MCD	055 065	KELLOGG VILLAGE	402 440	93 90	23.13 20.45
	MCD HCD NCD	080 -085 090	MILLVILLE VILLAGE	200	34 48	22.67 24.00
	MCD MCD	100	MINNEISKA VILLAGE (PART)	466	12 199 159	21.43 42.70 36.30
COUNTY 159 WADENA COUNTY	MCD COM	125 005 015	WATOPA TWP	370 405	75 118	20.27 29.14
	MCD	020	BULLARD TWP	389 241	155 119	39.85 49.38

			TRACT	OR MCD	•	•	POPULATION	POOR	PERCENT	
			MCD	025	HUNTERSVILLE TWP		. 54	12	22.22	
			MCD	_	LYONS TWP		. 196	122	62.24	
			MCD		MEADOW TWP		_	75	36.76	
			MCD	045	MENAHGA VILLAGE			252	31.78	
			MCD	055	NORTH GERMANY TWP		. 363	147	40.50	
			MCD	060	ORTON TWP			81	42.63	
			MCD		RED EYE TWP			70	20.29	
			MCD		ROCKWOOD TWP			100	23.53	
			MCD	_	SHELL RIVER TWP			72	52.94	
			MCD		VERNDALE VILLAGE			132	22.88	
			MCD		WING RIVER TWP		327	119	36.39	
COUNTY	161	WASECA COUNTY		020	FREEDOM TWP			131	22.90	
		•	MCD	-	IOSCO TWP			104	23.85	
			MCD		ST MARY TWP			253	44.62	
COUNTY	165	MATONIJAN COUNTY	MCD	065 005	WALDORF VILLAGE			59	21.22 37.50	
COUNTY	103	WATONWAN COUNTY	MCD	010	ADRIAN TWP			123 152	30.34	
			MCD	015	ANTRIM TWP			166	43.68	
			MCD	030	BUTTERFIELD VILLAGE			117	20.67	
			MCD	030	FIELDON TWP			108	23.46	
			MCD	035	LA SALLE VILLAGE			24	20.00	
			MCD	060	NELSON TWP			122	31,28	:
			MCD	080	RIVERDALE TWP			171	26.97	-
			AICD	100	SOUTH BRANCH TWP		478	112	23.43	-
COUNTY	167	WILKIN COUNTY	MCD	005	AKRON TWP		174	67	38.51	
		•	NCD	025	EKANDRUP TWP		464	171	36.85	
			MCD	040	CAMPBELL TWP		212	43	20.28	
			MCD	075	MC CAULEYVILLE TWP		. 86	23	26.74	
			MCD	080	MANSTON TWP		171	43	25.15	
		·	MCD	085	MEADOWS TWP			68	54.84	
			MCD	095	NILSEN TWP			44	27.50	
			MCD	100	NORDICK TWP			109	56.19	
			MCD	120	SUNNYSIDE TWP			41	23.16	
CCUNTY	169	WINDHA COUNTY	MCD . MCD	125	TANBERG TWP		95 '	22	23.16	
CCGNTT	109	WINONA COUNTY	AICD	005 015	ALTURA VILLAGE		373	91	24.40	
		•	MCD	015	DRESBACH TWP			58	23.29	
			MCD	040	HART TWP		200	48	24.00 36.95	
			MCD	050	HOMER TWP		387 1059	143 218	20.59	
•			MCD	065	MOUNT VERNON TWP	• • • •	402	126	31.34	
			MCD	070	NEW HARTFORD TWP	• • • •	560	204	35.17	
			MCD	105	ST CHARLES TWP		433	115	26.56	
			MCD	110	SARATOGA TWP		444	105	23.65	
			MCD	120	UTICA TWP			203	31,13	
			MCD	130	WARREN TWP			144	25.09	
			MCD	135	WHITEWATER TWP		224	134	59.82	
COUNTY	171	WRIGHT COUNTY	MCD	075	FRENCH LAKE TWP		798	304	38.10	
			MCD	145	SOUTH HAVEN VILLAGE		188	44	23.40	
			MCD	160	STOR TWP		856	227	26.52	
COUN	173	YELLOW MEDICINE COUNTY	MCD	010	IBY CITY		1861	400	21.49	

GRANITE FALLS CITY (PART).

POPULATION

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SECTION 8 -- ASSURANCES

- 8.1 In accordance with Section 133(b)3A, the State assures that funds paid to the State will be used to make a significant contribution toward strengthening services for persons with developmental disabilities through agencies in the various political subdivisions of the State.
- 8.2 In accordance with Section 133(b)3B, the State assures that part of the funds allotted under this Act to the State will be made available to public or non-profit private entities.
- 8.3 In accordance with Section 133(b)3C, the State assures that none of the Federal funds will be used to replace non-Federal funds presently used for services provided for individuals with developmental disabilities.
- 8.4 In accordance with Section 133(b)3D, the State assures that there will be greasonable State financial participation in the cost of carrying out the State Plan at 1903
- 8.5 In accordance with Section 133(5)(A)(i), the State assures that services furnished, and the facilities in which they are furnished, under this plan for persons with developmental disabilities will be in accordance with standards prescribed by the Secretary in Regulations.
- 8.6 In accordance with Section 133(5)(A)(ii), the State assures that buildings used in connection with the delivery of services assisted under this plan will meet standards adopted pursuant to the Architectural Barriers Act of 1968.
- 8.7 In accordance with Section 133(5)(C), the State assures that the human rights of all persons with developmental disabilities (especially those persons without familial protection) who are receiving treatment, services, or habilitation under programs assisted under this title will be protected consistent with Section 111 (relating to rights of the developmentally disabled).
- 8.8 In accordance with Section 133(b)(1)(C), the administrative agency assures the Secretary of the Department of Health & Human Services (HHS) or his/her designee that the agency will submit in a timely and complete manner all required program and fiscal reports.

8.9 - In accordance with Section 110, the State assures that it will develop a comprehensive system for the evaluation of service provided to persons with developmental disabilities (including residential and non-residential programs) assisted under P.L. 95-602 according to the time lines prescribed by the Secretary of Health and Human Services. The State assures that the evaluation system developed will be implemented as needed on and after October 1, 1982.

8.10 - Individual Habilitation Plans

No DD funded programs in Minnesota are providing direct services to DD individuals for whom an Individual Habilitation Plan would be appropriate. When such programs are funded, the Agency will be responsible for developing a model format IHP to be used by the grantees for their clients; the IHP developed will follow the Check List supplied in the State Plan guidelines.

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State Control (Section 1)

CHECK LIST FOR INDIVIDUAL HABILITATION PLANS

(The following is the minimum amount of information required in an Individual Habilitation Plan according to P.L. 95-602, Sec. 112)

1980 Program Guidelines

	YE	S	N	0
Is the plan in writing?	()	()
Has the plan been jointly developed by the following individuals? (i) appropriate program personnel; (ii) individual with developmental disabilities; (iii) legal representative of individuals with developmental disabilities (where appropriate).	()	()
Is the plan jointly signed by the following individuals? (i) the individual with developmental disabilities or his/her representative (where appropriate); (ii) responsible program representative.	()	()
(a) Does the plan contain long-term habilitation goals?	()	()
(b) Does the plan contain intermediate habilitation objectives?(c) Are the intermediate habilitation objectives expressed in	()	()
terms which are measurable?	()	()
Does the plan contain a description of how the objectives are to be achieved?	()	()
(a) Does the plan contain an evaluation procedure to determine if the goals and objectives were achieved? (b) Does the plan contain a schedule for the evaluation procedure?	((
Does the plan contain the name of the person responsible for the coordination of the program?	()	()
(a) Does the plan describe the specific habilitation service	()	()
(b)-Does the plantidentify the agency (ies) which is (are) to	()	()
(c) - Does the plan identify the personnel who is(are) to provide the service(s)?	((
(d) Does the plan describe the guidelines of the personnel who	,	`	,	`
(e) - Does the plan identify the specific date of initiation of	(,	(,
each service? (f) Does the plan specify the duration of each service?	()	()
Does the plan specify the role and objectives of all parties to the implementation of the plan?	()	()
Does the plan require an annual review of the plan involving all individuals who originally created the plan?	()	()

INFORMATION SOURCES/STATE DEPARTMENTS AND AGENCIES

		10 mg	
DEPARTMENT OF ECONOMIC SECURITY			
Division of Vocational Rehabilitation	n	infromation	612/296-5616
DEPARTMENT OF EDUCATION			
Special and Compensatory Education -		information	612/296-4163
		_	
STATE COUNCIL FOR THE HANDICAPPED		information	612/296-6785
HEALTH DEPARTMENT	y	, , , , , , , , , , , , , , , , , , , ,	·
Community Services Division		information	612/296-5581
Maternal and Child Health Services for Children with Handic	aps	information	612/341-7550
OFFICE OF HEALTH FACILITY COMPLAINTS		san is a second	
(Collect Calls Accepted)		information	K19/206_5562
(obliect dalls Accepted)		Intolmation	012/290-3302
HOUSING FINANCE AGENCY	: _		
HOUSING FINANCE AGENCY Apartment Development Division		information	612/296-7608
DEPARTMENT OF HUMAN RIGHTS		information	612/296-5663
STATE PLANNING AGENCY	AND THE	. Para .	. 5-4
Developmental Disabilities Planning	Office	information	612/296-4018
		TTY	612/296-9962
DEPARTMENT OF TRANSPORTATION Public Transportation Division			
Public Transportation Division		information:	612/296-3131
Office of Transit Administration			
DEPARTMENT OF PUBLIC WELFARE	‡ : *		7 - 2 %
DEPARTMENT OF PUBLIC WELFARE		information	612/296-6117
Income Maintenance Bureau	The state of the s		\$ \$.
Medical Assistance Division Mental Health Bureau		information	612/206_2701
Mental Retardation Program Divisi	00		1
Residential Facilities Division			
Bureau of Support Services	and the second s	2000 1000	100
Licensing Division		information	612/296-3971
Bureau of Social Services	·	information	612/296-2338
Deaf Services Division		information x	
	· .	TTY.	612/296-6853
Blind and Visually Handicapped			
Program Division		general	
	communicat	etropolitan ions center	612/296-6723
	Commenters	TOUS CEUTET	012/290-0723
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