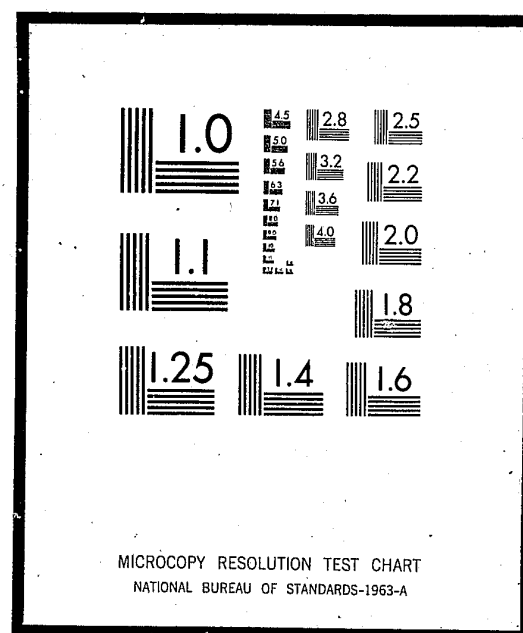


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Delaware -
Appendix to Report on
THE ORGANIZATION OF SERVICES FOR
CHILDREN AND YOUTH WITHIN THE
DEPARTMENT OF HEALTH AND SOCIAL SERVICES —

Appendix -
SUMMARY DESCRIPTION OF
CHILD AND YOUTH SERVICE PROGRAMS
ADMINISTERED BY THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES

December 15, 1973

14888

Appendix to Report on
THE ORGANIZATION OF SERVICES FOR
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December 15, 1973

APPENDIX

This section contains a summary description of all child and youth services of the various Divisions within the Department of Health and Social Services. These programs were identified and delineated as a product of the Child and Youth Services Study Project in September-December, 1973. The material was assembled by an Intra-Departmental Working Group as a basis for initial discussions regarding the services provided by DHSS and the attendant problems which hamper efficient and effective service delivery. These program documents have served as the foundation for more in-depth exploration of gaps, overlaps, and organizational inadequacies. It should be recognized that the programs described here do not represent the full range of services offered by DHSS. Rather, they are those activities which the Work Group perceived to be directed wholly or primarily at children and youth. An exception is the Division of Adult Corrections in which services are offered to a number of youthful offenders along with the Division's adult clients.

PROGRAM DESCRIPTION

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DIVISION OF ADULT CORRECTIONS

ADULT CORRECTIONS

Program Title: Work/Education Release

Client Group: /

- a. Adults over 18
- b. Offenders who have served most of their sentence and are within 6 months of their parole eligibility date.
- c. Must pass through structured selection process set up by the program
- d. Presently there are about 100 persons on work/education release throughout the State; of this total about 55 are at SCI; about 25 at Plummer House in Wilmington; about 5 at WCI; and about 25 at DCC

Program Objective:

- To promote the successful adjustment of the offender to the community
- To provide a treatment-oriented alternative to traditional confinement which helps bridge the gap between the institution and the free community.

Source of Clients:

- a. Delaware Correctional Center
- b. Sussex Correctional Institution
- c. Women's Correctional Institution

Staffing and Organization:

- a. The State-wide work/education release program operates out of different facilities.
 - 1. A program of traditional institutional work/education release operates out of Delaware's three adult correctional institutions.
 - 2. A group home setting for work/education release operates out of the Plummer House at 32d and Market Streets, Wilmington. This center is staffed with a counselor, correctional officers and a director of State-wide work/education release. Student interns from the University of Delaware Criminal Justice Program are also used.
- b. Staffing chart (see attached sheet)

Cost:

- a. The state subsidizes part of the work/education release effort at SCI in the sum of approximately \$80,000. This money is spent for correctional supervision of work/education release housed outside the gates in the "Old Warden's House."
- b. The work/education release effort is run at DCC largely from existing institutional staff. No separate cast is available at this time.
- c. A LEAA/DARC grant of \$215,000 subsidizes the Plummer House operation. Some of the work/education release staff at SCI, a correctional officer and and vehicle at DCC, and a correctional officer and counselor and vehicle at WCI.

Nature of Treatment:

- a. Supervision
- b. Counseling
- c. Jobplacement or school (usually college) placement in community
- d. Agency referral for needed human services.

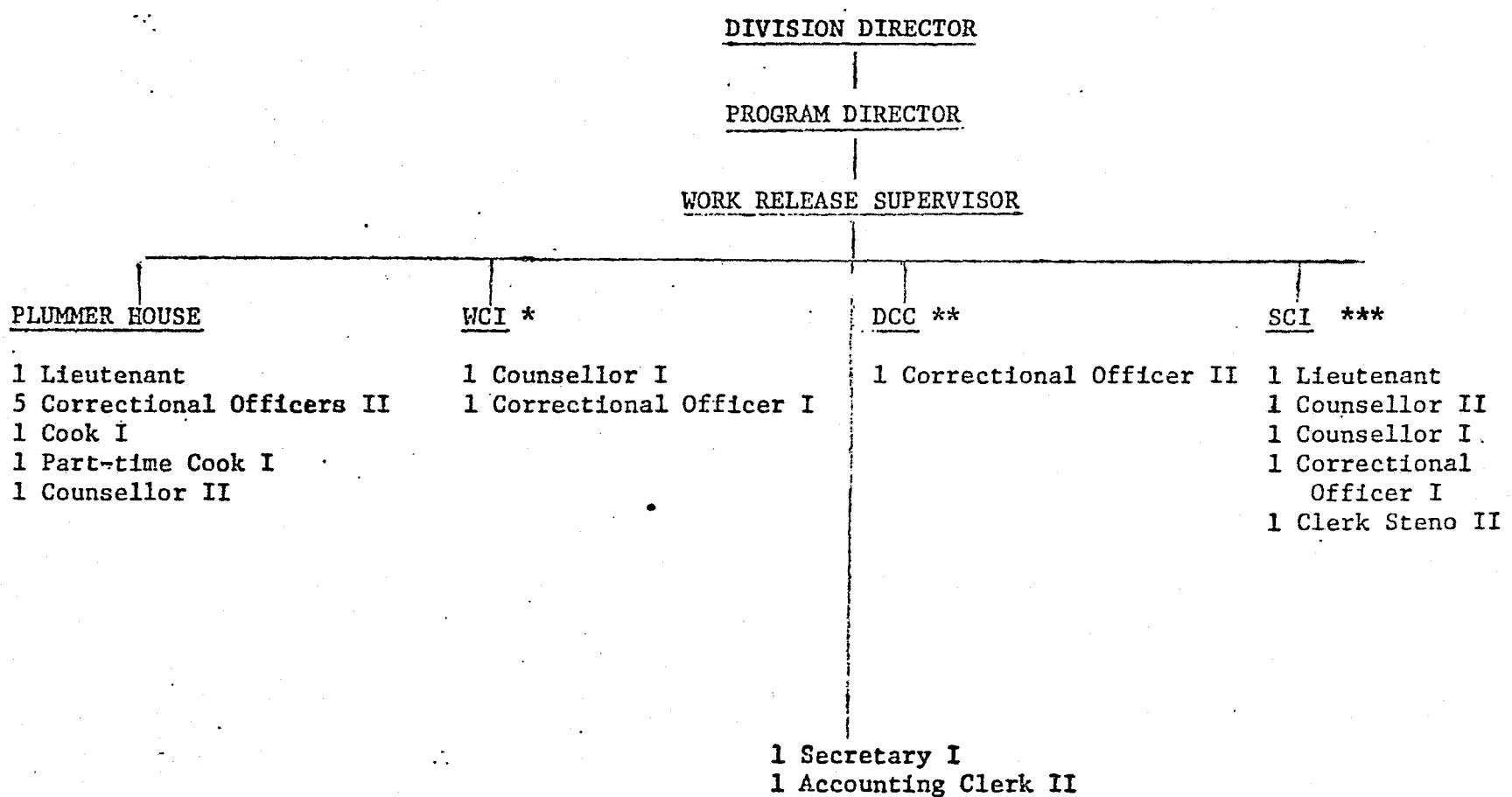
Client Egress:

- a. Parole
- b. Release by virtue of having served his/her entire sentence
- c. Abscond
- d. Return to DCC, SCI or WCI from work/education release status

Client Contact with Other Agencies:

- a. A majority (approximately 70 percent) of releases in the Plummer House center receive services from other agencies
- b. Those on work/education release from the institutions receive little assistance from other agencies as less time is spent on the treatment related areas; most emphasis placed strictly on work or education in the community

MANPOWER DISTRIBUTION FOR WORK RELEASE PROGRAM



* Women's Correctional Institution

** Delaware Correctional Center

*** Sussex Correctional Institution

Program Title: 308 West Residence Halfway House

Client Group:

- a. Parolees who need a temporary living facility immediately upon their release from prison
- b. Parolees released by the Board of Parole on the condition that they remain under the supervision of the 308 West staff

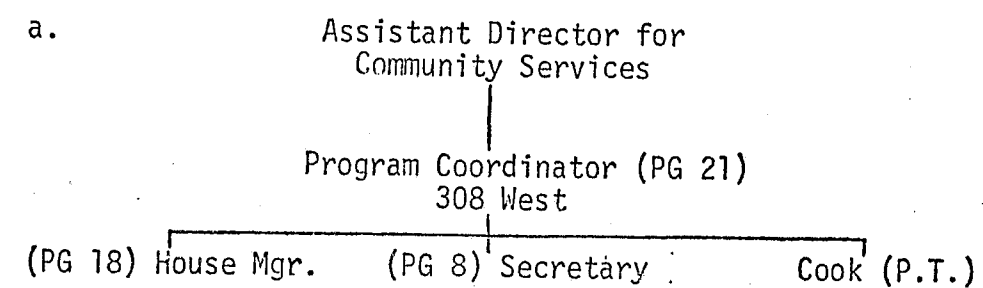
Program Objective:

- To provide a community-based group living situation which provides a measure structure for parolees needing such

Source of Clients:

- a. Correctional institutions via Board of Parole

Staffing and Organization:



- b. Program has a capacity for 12 male persons, 18 years old or over.

Cost:

- a. No Federal Funds
- b. State support: \$47,741.00

Nature of Treatment:

- a. Supervision
- b. Individual counseling
- c. Group counseling
- d. Agency referral
- e. Job Bank - Employment Service
- f. Occasional direct job placement

Client Egress:

- a. Upon release of parole condition by Board of Parole
- b. Parolees living situation becomes stable enough to leave

Client Contact with Other Agencies:

- a. Approximately 25 percent of clients are in contact with other agencies.

Program Title: Pre-Trial Release

Client Group:

- a. The Pre-Trial Release Program interviews those persons who are arrested and brought to the Magistrates Courts, Municipal Court or Court of Common Pleas. Clients must be adults. There is no set capacity for the program.
- b. Those not able to meet bail are sent to DCC where the Pre-Trial Release staff attempts to have their bail reduced or have them released on their own recognizance (ROR).

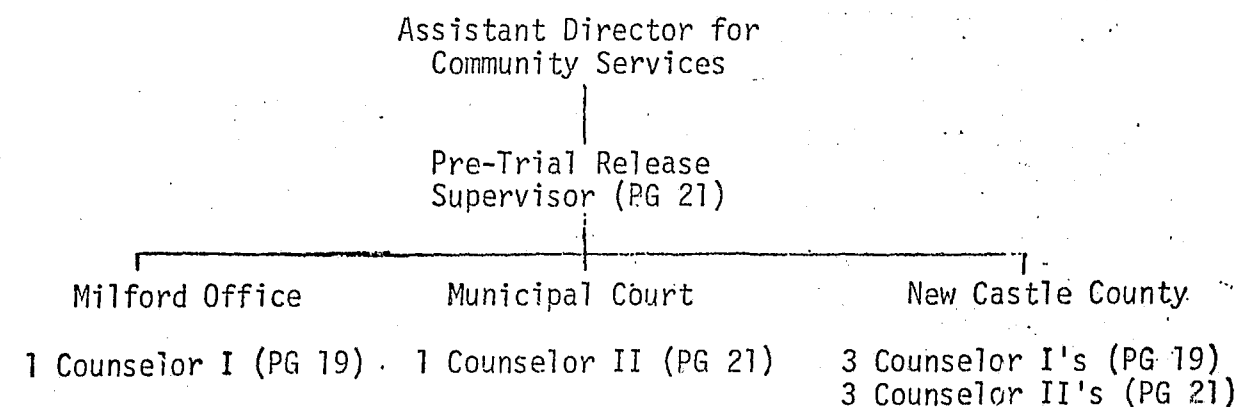
Program Objective:

- To provide an alternative to pre-trial detention for those persons accused of an offense and who may present no clear and present danger to the community while awaiting trial in the community.

Source of Clients:

- a. Clients come from Magistrate, Municipal or Common Pleas Courts or from any of the three correctional institutions (DCC, SCI, WCI) in the State.

Staffing and Organization:



Cost:

- a. State - \$71,706.00
- b. Federal - LEAA/DARC Grant approximately \$62,000

Nature of Treatment:

- a. Pre-trial supervision on a once/week basis

- b. Agency referral for needed services
- c. Occasional agency placement and job placement
- d. Counseling

Client Egress:

- a. Client leaves program once he has had his/her trial
- b. Abscond
- c. Charges dropped

Client Contact with Other Agencies:

- a. Approximately 25 percent of clients actually receive services of other agencies although a majority (approximately 75 percent) could use such.

Program Title: Custodial Services

Client Group:

a. Eligibility Criteria

1. be held in detention because of inability to put necessary bail; charged with a non-bailable offense
2. Sentenced by the Courts

b. Present population:

1. Delaware Correctional Center - capacity is 441 persons, 90 of these for pre-trial detention. Presently there is an average daily population of approximately 455 - 460 with 130 - 140 per day in detention.
2. Sussex Correctional Institution: approximately 215 persons held here
3. Women's Correctional Institution: approximately 25 persons per day - about $\frac{1}{2}$ of these are usually detentioners.

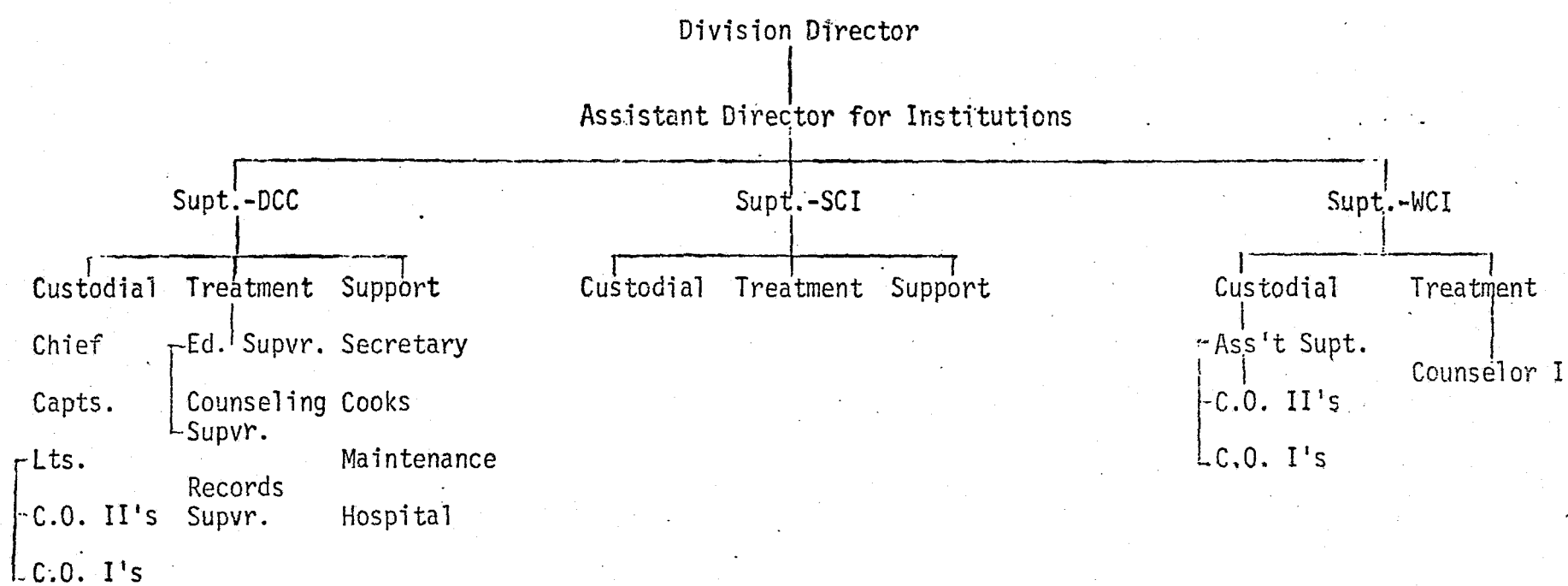
Program Objective:

1. To provide the necessary supervision required to ensure the safety of other inmates and citizens at large
2. To provide the opportunity through re-integrative type programs, for offenders to return and take their place in the community as lawabiding and productive citizens.

Source of Clients:

1. Courts -- Magistrate, Municipal, Common Pleas or Superior

Staffing and Organization:



Cost:

1. DCC - State funded FY 74 - \$3,176,784.00
2. SCI - State funded FY 74 - \$ 886,637.00
3. WCI - State funded FY 74 - \$ 219,531.00

Nature of Treatment:

1. Custodial Supervision - (DCC, SCI, WCI)
2. Counseling - (DCC, SCI, WCI)
3. Vocational Education
 - a. Welding - (DCC)
 - b. Climate Control - (DCC)
 - c. Building Trades - (DCC)
 - d. Automotive Repair - (DCC)
4. Academic Education
 - a. Adult Basic Education (DCC, SCI, WCI)
 - b. G.E.D. (DCC, SCI, WCI)
 - c. College level courses for University of Delaware credit
 1. Criminal Justice (DCC)
 2. Political Science (DCC)
 3. English (DCC)
 - d. Remedial Reading (DCC)
 - e. Academic testing (DCC)
5. Drug counseling (DCC, SCI, WCI)
6. Psychotherapy (on limited basis) (DCC)

Client Egress:

1. Through parole; placed on parole status with P & P program.
2. Escape
3. Mandatory release by virtue of having served full sentence.

Client Contact with Other Agencies:

1. Minimal because of confined situation
2. Some contact with Division of Drug Abuse Control because three counselors are assigned to DCC, one to SCI and one to WCI.

Program Title: Probation & Parole Supervision and Counsel

Client Group:

- a. No eligibility criteria are formally set down except that a person must be 18 years old or over and have been remanded to the custody of the Division of Adult Corrections, Bureau of Community Services by the Courts or in the case of parolees, by the Board of Parole.
- b. Present population - approximately 1,900 cases; approximately 80 percent of these are probationers and 20 percent are parolees.

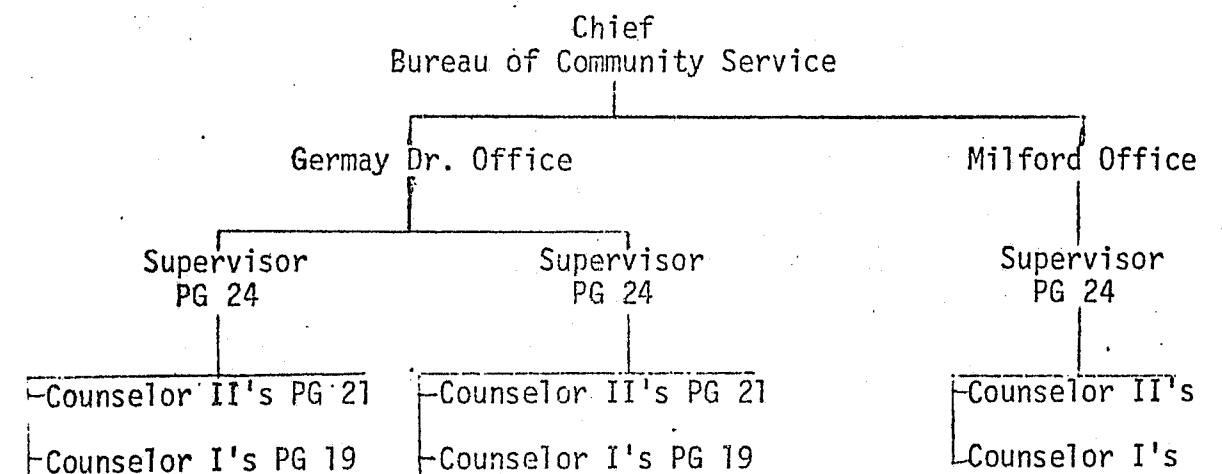
Program Objective:

- To provide the necessary supervision and counseling to ensure a client's needed adjustment in the community and the communities protection from harm by criminal offense.

Source of Clients:

- a. Parolees - from Board of Parole
- b. Probationers - from (1) Municipal, (2) Common Pleas, (3) Superior Court

Staffing and Organization: (for P & P function only)



The Probation and Parole operation, because of its very nature, is in constant contact with a myriad of outside agencies offering human services, e.g., Vocational Rehabilitation, Mental Health, Employment Services, Private Employers. It is difficult to pinpoint this relationship to flow chart it out neatly.

Cost:

This Probation and Parole program is completely state funded with the exception of a specialized caseloads unit of three caseloads of 30 clients each. This is funded from LEAA/DARC (\$62,000) and is intended to be a pilot project to promote new methods of caseload management and client direct services on a regular basis with the ultimate goal of better supervision to be evidenced by reduced recidivism while under supervision.

The Probation and Parole Program receives 11.2 percent of the FY 74 budget; i.e., \$714,537.00

Nature of Treatment:

- a. Counseling
- b. Agency Referral
- c. Correctional supervision

Client Egress:

- a. Client is released at the expiration of his probation or parole period.
- b. Client is released from supervision upon his reconviction and sentencing to a correctional institution.
- c. Client is released through Early Release. This is effected by recommendation of staff to courts on an individual case basis.
- d. Client is placed on supervision (probation or parole) in another state through the Interstate Compact Agreement.
- e. Client absconds

Client Contact with other Agencies:

- a. Approximately 80 percent of the probation and parole clients have a need for services from other agencies. A considerably smaller number actually receive this help either because of the inefficiency of the Probation and Parole Program or that of other programs in other agencies.

DIVISION OF SOCIAL SERVICES

RECEIVED

DIVISION OF SOCIAL SERVICES

Program Title: Day Care

Client Group:

Eligibility Criteria: (Both must be met)

1. Parents must pay all or part of costs in accordance with ability to pay.

Allowances:

- a) \$180.00 for head of household
- b) \$50.00 for each legal dependent including spouse
- c) \$50.00 work allowance for each working parent. Amount prorated if parent not working fulltime.
- d) Support payments and other income are subtracted from net income. Parents must pay the remainder, if any. Otherwise, parents are eligible for full payment.

2. There must be a reason for needing care:

Suitable relative not available and mother absent from home because working, in school, dead, or hospitalized.

Mother home but chronically ill, must care for family member who is ill, tensions or deviant behavior of a family member makes it desirable for child to be out of home; or large number of children prevent mother from providing adequate care for all; or child has special needs which cannot be met in the family setting.

Capacity:

Pre-school children

3,918 center slots (over 12 children)
1,100 family slots (under 7 children)
42 group home slots (7 to 12 children)

5,060 total slots (a conservative figure)

School-age children

135 slots are designated specifically for after school care in the centers. DSS also had the potential to pay for 110 summer school-age slots.

While no statistics on the total day care enrollment are available, the average monthly census for which DSS pays members is 2,956.

Program Objective:

With regard to DSS's objective, the goal is to provide good supplemental

care for children in order to "keep people in jobs and off welfare."

Until recently, DSS was attempting to provide quality developmental care for young children regardless of ADC relatedness. The state does not support such an objective. This is evidenced by the shortage of adequate staff, lack of money to pay for care, and lack of power of enforcement of licensing standards. In fact, enforcement or non-enforcement occasionally becomes a political game played by public officials supporting a constituent rather than the licensing standards enforcement arm of D.S.S.

Source of Client:

See eligibility criteria for D.S.S. purchase of service children.

Clients are any children for whom parents seek to provide alternative care.

Staffing and Organization:

(See following chart)

Cost:

Purchase of Day Care costs are \$800,000 per year of which 75 percent is provided by the Federal government. These funds are used to pay for children in a particular number of slots in each of fourteen centers.

Head Start Day Care also costs \$800,000 per year with the same proportion of the funds being supplied by the Federal government. Payments are by the children in attendance.

An additional \$1,153,326 was spent in FY 1973 as part of the Child Welfare Service appropriation.

Nature of Treatment:

Ranges from minimal custodial care to quality developmental-educational program.

Program Title: Foster Care

Client Group:

DSS purchased foster care for 1400 children in FY 1973. Of this total, 1,150 were in DSS foster homes and 250 received care from private agencies.

Program Objective:

Children go into foster homes due to serious problems of neglect by their own families, and there are no relatives who are able to care for them.

Foster parents are selected on the basis of their ability to provide care to children with problems, and the adequacy of their housing arrangements.

The case load has been consistently outstripping the ability of DSS to place children in foster homes. About 20 new cases arise every month, while foster parents are being found at the rate of only 6 per month.

Source of Clients:

Over 80 percent of all foster children come to DSS through Family Court action. However, in the majority of cases, DSS petitions the Court for custody usually through the protective services staff. In the remaining cases the Division receives voluntary custody from the child's parents or legal guardian.

Staffing and Organization:

See attached chart.

Cost:

See attached budget information.

Nature of Treatment:

Foster home finding involves investigating the prospective foster parents' background, and assessing their ability to provide adequate physical and emotional care.

In addition to finding foster homes, the primary function of the program is to provide counseling to foster children, their parents, and foster parents. The Division has no funds to provide or purchase other services. Therefore, a considerable amount of time is spent finding free community resources.

Client Egress:

Those clients who enter through Family Court leave through Family Court. The action can be initiated by either the Division or the child's parent. Voluntary custody can only be maintained for the period specified in the original agreement. When the agreement expires, the Division must either return the child to his parents or seek custody through Family Court.

ESTIMATED YEARLY FOSTER CARE COSTS
 BASED ON THE NUMBER OF ACTIVE CHILDREN AND PAYMENT SCHEDULES
 EFFECTIVE SEPTEMBER 1, 1973

	No. Children For Payment is made	Total Child Care Costs	State Share	Federal Share
D.S.S. Foster Care	1200	\$1,684,800	\$1,179,360	\$505,440
Purchase of Foster Care:				
Children's Bureau	76	\$ 113,554	79,488	34,066
Catholic Social Services	85	126,990	88,893	38,097
Total: Purchase of Foster Care	161	\$ 240,534	\$ 168,381	\$ 72,163
Purchase of Institutional Care				
Seton Villa	7	\$ 17,220	\$ 12,054	\$ 5,166
Sienna Hall	9	22,140	15,498	6,642
Turning Point	20	49,200	34,440	14,760
Child Foundation	5	12,300	8,610	3,690
Children's Home	29	71,340	49,938	21,402
Camelot	20	49,200	34,440	14,760
Our Lady of Grace	5	12,300	8,610	3,690
	95	\$ 233,700	\$ 163,590	\$ 70,110
TOTAL: ALL FOSTER CARE	1,456	\$2,159,034	\$1,511,331	\$647,713

Figures are based on average child care payments as

D.S.S. Foster Care	\$1404/child 1 year
Purchase of Foster Care	\$1494/child 1 year
Purchase of Institutional Care	\$2460/child 1 year

Figures are based on current ratio of all monies spent on foster care. At present for every \$10.00 spent on foster care payments \$7.00 are state funds and \$3.00 are federal funds.

PROJECTED TOTALS FOR F. Y. 1975

<u>Program</u>	<u>No. of Children</u>	<u>Total State Share</u>	<u>Total Federal (4A-AFDC-FC)</u>
D.S.S. Foster Care	1344	\$1,725,696	\$ 451,584
Purchase of Foster Care	186	406,717	145,301
Purchase of Institutional Care	131	606,121	112,115
Sub Total:	1661	\$2,738,534	\$ 708,900
Add Miscellaneous		69,440	
Sub Total:		\$2,807,974	
Less IV-B Funds		171,000	
		\$2,636,974	
Sub Total:	1661	\$2,636,974	\$ 708,900
Less Trust Fund		121,000	
Total:		\$2,515,974	

PROJECTED FOSTER CARE COSTS FOR FISCAL YEAR 1975

-20-

	<u>Number of¹ Children</u>	<u>Total Child Care Costs</u>	<u>State Share Child Care Costs</u>
D. S. S. Foster Homes ⁵	1344	\$2,177,280	\$1,725,696
Purchase of Foster Care ⁴			
Children's Bureau	88	114,400	84,832
Catholic Social Services	98	161,602	128,674
Total Purchase of Foster Care	186	\$ 276,002	\$ 213,506
Purchase of Institutional Care ⁴			
Seton Villa	8	\$ 53,728	\$ 51,040
Sienna Hall	10	64,420	61,060
Turning Point	20	50,620	43,900
Child Foundation	26	109,174	100,438
Children's Home	29	119,886	110,478
Camelot	20	50,000	43,280
Our Lady of Grace	8	17,288	14,600
Childhood Village	10	25,000	21,640
Total: Purchase of Institutional Care	131	\$ 490,116	\$ 446,436
Total Projected Foster Care FY 1975	1661	\$2,943,398	\$2,385,638

	<u>Federal² Share Child Care Costs</u>	<u>Total Service Costs</u>	<u>State Share Service Costs</u>	<u>Federal³ Share Service Cost</u>
D. S. S. Foster Homes ⁵	\$ 451,584	---	---	---
Purchase of Foster Care ⁴				
Children's Bureau	29,568	\$ 171,842	\$ 120,289	\$ 51,553
Catholic Social Services	32,928	104,174	72,922	31,252
Total Purchase of Foster Care	\$ 62,496	\$ 276,016	\$ 193,211	\$ 82,805
Purchase of Institutional Care ⁴				
Seton Villa	\$ 2,688	\$ 11,904	\$ 8,333	\$ 3,571
Sienna Hall	3,360	13,820	9,674	4,146
Turning Point	6,720	25,200	17,640	7,560
Child Foundation	8,736	98,748	69,124	29,624
Children's Home	9,408	40,948	28,664	12,284
Camelot	6,720	25,000	17,500	7,500
Our Lady of Grace	2,688	--	--	--
Childhood Village	3,360	12,500	8,750	3,750
Total: Purchase of Institutional Care	\$ 43,680	\$ 228,120	\$ 159,685	\$ 68,435
Total Projected Foster Care FY 1975	\$ 557,760	\$ 504,136	\$ 352,896	\$ 151,240

1. Based on approximate 12% annual increase in each of past two years.
2. Federal AFDC reimbursement based on maximum pay of \$56/child/month - 49% of Foster Children eligible for AFDCFC.
3. Federal 4-A reimbursement 75% - 25%. 49% of Foster Children eligible.
4. Based on actual cost to agencies and institutions. We currently pay less than half of actual care costs and no service cost.
5. D. S. S. Foster Home costs based on 15% increase in each Foster Care Payment.

Program Title: Protective Services

Client Group:

All children of families where there has been found to be a condition of neglect or abuse. There is an average of about 550 families per month active in the protective services program. Each month approximately 40 new protective complaints are received.

Program Objective:

To investigate all complaints of child neglect and abuse; to help parents in removing the factors which are causing them to neglect or abuse their children; to gain custody of those children who face serious risks if they remain in their own homes.

Source of Clients:

Cases come to the attention of Protective Services mainly through complaints by friends and relatives, schools, health officials and police.

Cost:

The only costs in Protective Services are related to staff. Exact amounts will be forthcoming, however, estimated current costs are \$300,000 per year of which 25 percent are state funds and 75 percent are federal funds.

Nature of Treatment:

The two major functions in Protective Services are investigation and counseling. The primary treatment made is casework, emphasizing family and child care counseling. A third major component is preparing and representing the agency in court cases.

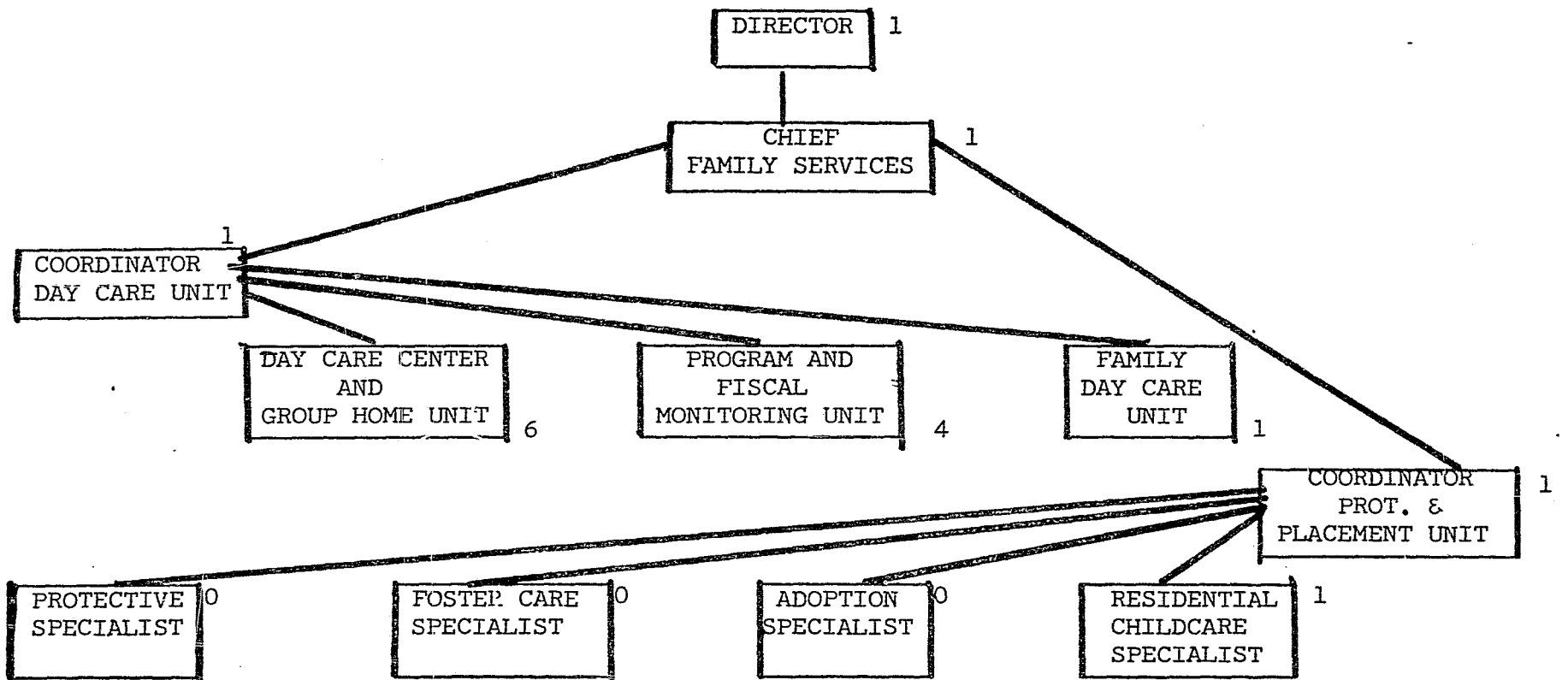
Client Egress:

A case will initially leave Protective Services if investigation shows the complaint to be invalid. If the complaint is found to be valid, the case will leave either at the point it is believed that the parent will no longer neglect his child, or when the child is removed from the home. In the latter instance, the case is transferred to placement.

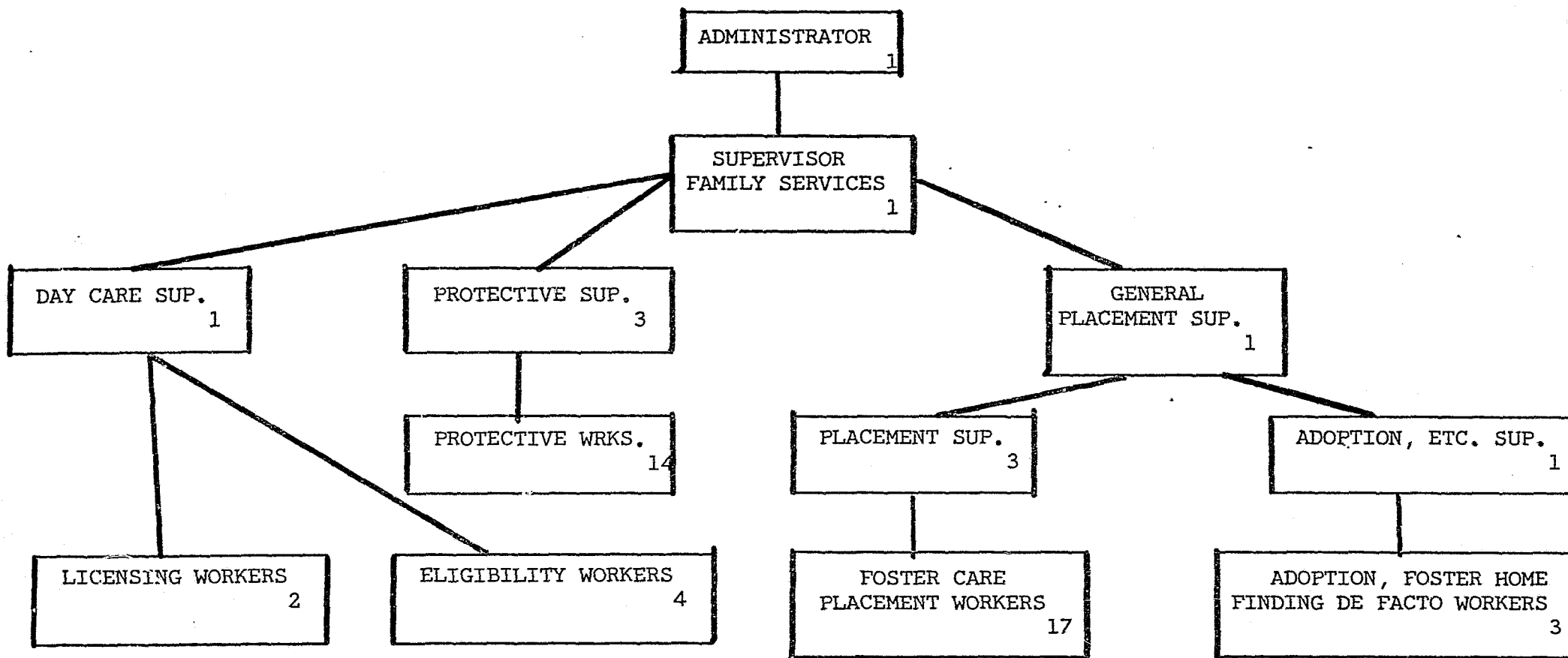
DIVISION OF SOCIAL SERVICES

PROGRAMS SERVING CHILDREN AND YOUTH

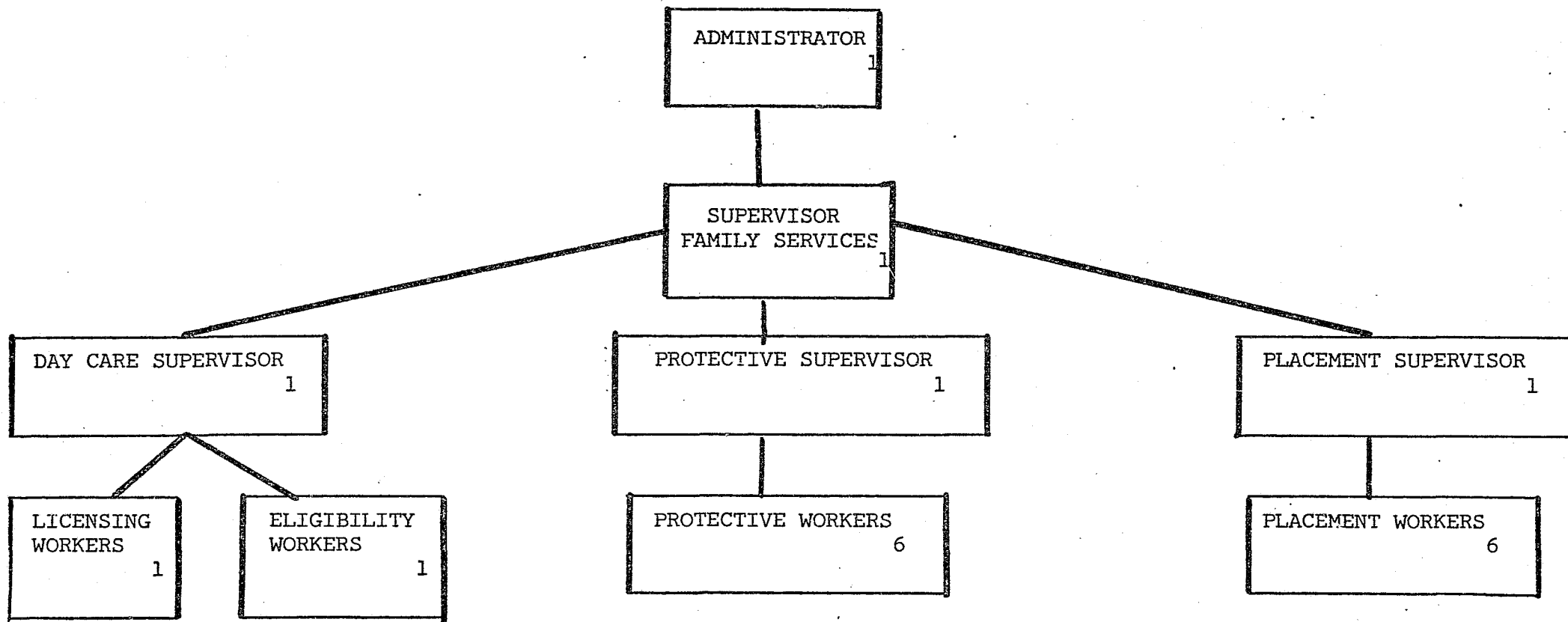
Headquarters Staff



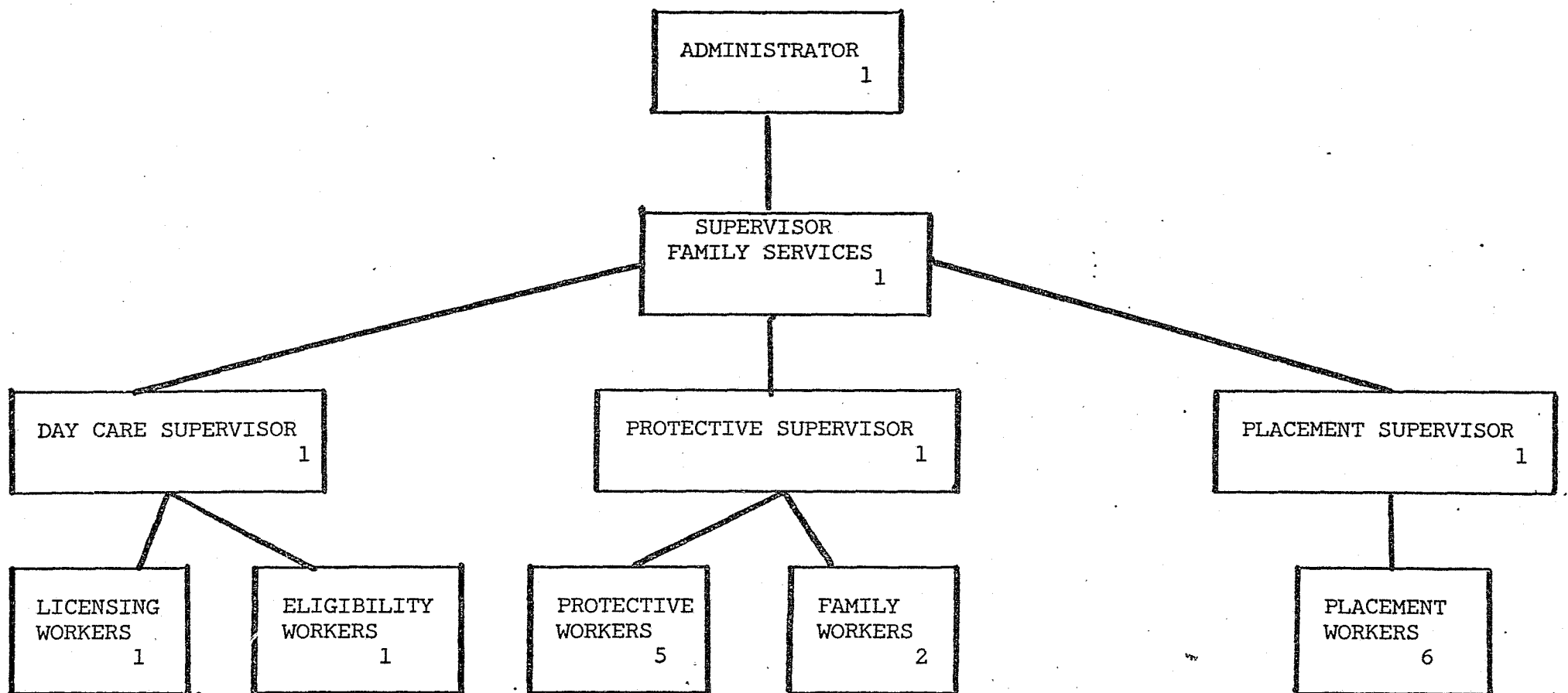
REGION I STAFF



REGION II STAFF



REGION III STAFF



DIVISION OF MENTAL RETARDATION

DIVISION OF MENTAL RETARDATION

Program Title: Daytime Care Centers

Client Group: Severely retarded children ages 3 - 18 who are not able to be enrolled in public school ER or TR programs. There presently are 180 children enrolled in ten daytime care centers throughout the state.

Program Objective: To provide a community-based work and activities program for those young people who cannot participate in school programs. This program is designed as an alternative to the residential care offered at the Hospital for the Mentally Retarded.

Source of Clients: Referrals come from a variety of sources, including private physicians, parents, the Delaware Association for Retarded Children and schools which furnish the bulk of the referrals.

Staffing and Organization: All of the Daytime Care Centers are under the supervision of the Director of Community Mental Retardation Programs.

Cost: The funding requirements for FY 1975 are estimated at \$510,000 of which \$415,000 is to come from General Fund revenues with the remainder being made up by Federal Funds. Current costs are included in the overall budget for Community Mental Retardation Programs and cannot be isolated.

Nature of Treatment: Development of self-help skills. There are 10 centers throughout the state--in Georgetown, Seaford, Milford, Dover, Middletown, Wilmington, Newark/New Castle, Hillcrest and the Kirkwood Highway.

Client Egress: Children who leave the daytime care centers are placed at HMR, in trainable schools, in foster homes or in adult activity centers depending on their age and the particular nature of their condition.

Program Title: Hospital for the Mentally Retarded

Client Group: Those retarded persons who require full-time residential services. The present recorded population of HMR numbers approximately 700. This includes those on leave, residing in foster homes and in community residence. The average daily census at HMR numbers about 570.

Program Objective: To develop the physical, intellectual and social capabilities necessary for the mentally retarded person to acquire the skills, habits and attitudes which will enable him to return to society. Every effort is made to foster an atmosphere of warmth and affection in the residential environment.

Source of Clients: Referrals come mainly from physicians and parents.

Staffing and Organization: See staffing chart attached. In addition to the positions shown on the chart, there are a number of medical dental and psychiatric consultants who provide services on a fee for service basis.

Cost: The total HMR budget for FY 1974 is approximately \$3.9 million with the lion's share of this amount being composed of General Fund revenue.

Nature of Treatment: HMR utilizes the skills and a variety of disciplines to bring about the development of retarded children. Included in the program are medicine, social work, psychology, physiotherapy, education and recreation.

Client Egress: The Superintendent of HMR may at his discretion, discharge to parents or guardian, or place in a community setting, any resident who, in the Discharge/Staff Committee's professional opinion has completed the prescribed program of services and training at HMR.

Program Title: Respite Care

Client Group: Retarded youngsters who live at home. There were 62 respite admissions in FY 72.

Program Objective: Respite Care admissions are made for families in two categories. The first involves children who need Short Term Behavior Modifications. This category is concerned with eliminating undesirable behavior or shaping a deficient behavior repertoire. The second type of respite admissions is aimed at providing families with the opportunity to take a vacation or tend to an emergency.

Source of Clients: Referrals from parents.

Staffing and Organization: Respite care services are provided by the regular staff of HMR. Therefore, a separate staffing and organization chart is neither available nor applicable in this case.

Cost: The costs of this program cannot be identified, since the services provided are part of the HMR residential treatment modality.

Nature of Treatment: Parents and HMR staff work together in a jointly planned behavior modification program during the child's stay at HMR and after his return to his home and community program. Increasing emphasis is being put on parent education.

Client Egress: Admissions are made for pre-determined periods. Length of stay varies and is dependent on family needs and the availability of vacancies. At the end of the stay the children are returned to their homes from which they can participate in a community program.

Program Title: Foster Home Program

Client Group: Mentally retarded children under 18 years of age who are unable to continue or resume living in the homes of their parents or relatives. There are presently 34 children placed in 15 foster homes.

Program Objective: To provide a stable foster home environment for retarded children as an alternative to institutionalization.

Source of Client: Children are placed in this program through the Division of Social Services which has custody based on an unmanageable situation in the child's home.

Staffing Organization: The program is administered by the Social Service Department of HMR. Medical and nursing care also come from HMR.

Cost: Total FY 73 foster care payments by the Division were \$4,720. These payments were made at a rate of \$209 per child per month. However, it should be noted that most foster care payments are made directly by the Division of Social Services.

Nature of Treatment: Retarded foster care children receive the same type of developmental services provided to residents of HMR. These services are provided on a parental and familial level, but the welfare and well-being of the children continues to be the responsibility of HMR. In the event of illness or inability to adjust to the foster home, the child is returned to HMR. Medical care is provided by HMR.

Client Egress: Since this is essentially a long-term program, children usually remain in the foster homes until they reach 18 or are unable to function in the foster home setting. Responsibility for determining when children leave the foster homes rests with HMR. About 85 - 90 percent are direct discharges while the remainder go either to HMR or to their natural homes.

DIVISION OF MENTAL HEALTH

PROGRAM TITLE: Delaware State Hospital
Adolescent Program

CLIENT GROUP: Adolescent patients (ages 15-21) who are:

1. Psychotic
 - a. Functional
 - b. Organic
2. Severely depressed (actively suicidal)
3. Drug users who are psychotic or severely depressed.
4. Behavior problems who are psychotic or severely depressed.

During 1972, approximately 81 adolescent patients received treatment at Delaware State Hospital. Since that time the official Adolescent Program was inaugurated. The average daily adolescent population is now about 65 adolescents.

PROGRAM OBJECTIVE: To provide diagnosis and treatment for the above described adolescents so that they can be returned to the community and eventually become self-supporting.

SOURCE OF CLIENT: Courts, schools, clinics, hospitals, private physicians, Division of Social Services, and other community agencies.

STAFFING AND ORGANIZATION: (See attached chart.)

COST: Fiscal 1973 - \$145,016.23 (Title IV-A monies)

NATURE OF TREATMENT: 1. Evaluation, which includes:

- A. Psychiatric
- B. Psychological
- C. Social work and history
- D. Additional Evaluations; e.g. medical, neurological, endocrine studies, etc.

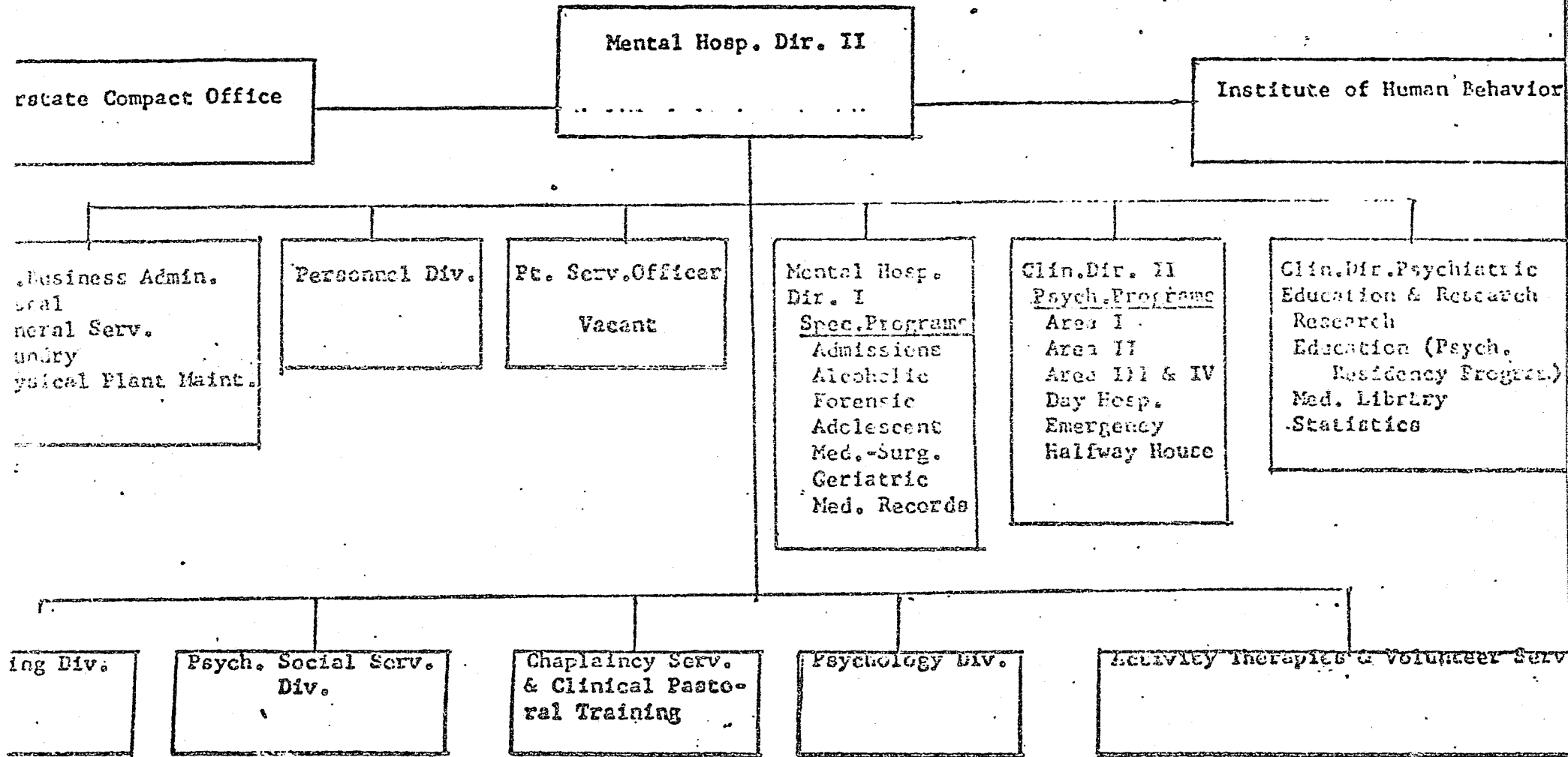
2. Treatment

- A. Chemotherapy
- B. Psychotherapy (individual, group and family)
- C. Adjunct therapy (OT, RT, music, self-image feedback, non-verbal and education)
- D. Nursing care

CLIENT EGRESS:

The Mental Health team responsible for treatment of an individual adolescent determines when an adolescent leaves the program and what referral is made. (This is the model-reality in the form of court orders or other factors extraneous to the mental health team often pre-empt the team's decision-making function.)

DEPARTMENT OF HEALTH & SOCIAL SERVICES
DIVISION OF MENTAL HEALTH
DELAWARE STATE HOSPITAL



PROGRAM TITLE: Consultation and Education

CLIENT GROUP:

Administrators, teachers, guidance counselors, children and their parents in 6 school districts (Conrad, Appoquinimink, New Castle-Gunning Bedford, Marshallton McKean, De La Warr and Stanton). (See attached table.)

PROGRAM OBJECTIVE:

The purpose of this program is to provide mental health consultation to school personnel and parents of school children. Consultation is provided by a mental health specialist who functions in schools.

Mental Health education is a form of prevention and attempts to provide positive mental health and help people acquire knowledge, attitudes and behavior patterns that will foster and maintain their mental well being.

SOURCE OF CLIENT: (See attached table.)

STAFFING AND ORGANIZATION: (See attached chart.)

COST:

The cost of this program amounts to \$56,013, which does not include supportive services.

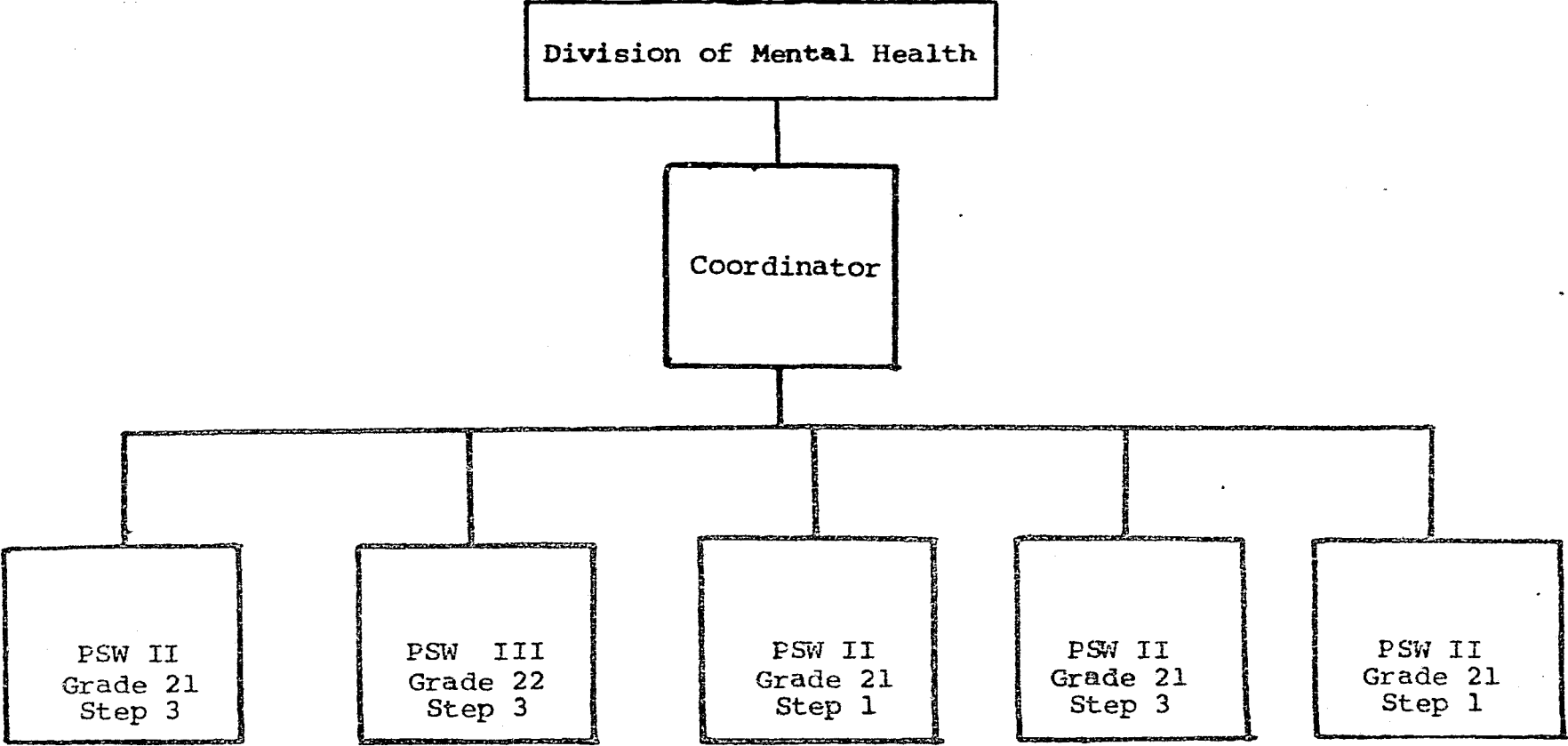
NATURE OF TREATMENT:

This is an indirect mental health program and, as such, does not provide for direct treatment with the exception of dealing with crisis situations.

CLIENT EGRESS:

It is the mental health consultant, with the aid of the supervisor, who makes recommendations for referrals to other facilities or community resources. (See attached table.)

DIVISION OF MENTAL HEALTH
CONSULTATION AND EDUCATION



PROGRAM TITLE: Terry Children's Psychiatric Center

CLIENT GROUP:

Acutely, emotionally disturbed children under 12 years of age, whose intelligence is high enough to enable them to benefit from the program.

Terry Center has a total capacity of 40 beds.

The average length of stay is between six months to a year.

PROGRAM OBJECTIVE:

To provide diagnostic and proper treatment of all emotionally disturbed children in Delaware who have not reached their twelfth birthday.

SOURCE OF CLIENT:

Pediatricians, psychiatrists in private practice, Division of Social Services, Family Court, and other community agencies.

STAFFING AND ORGANIZATION:

(See attached chart.)

COST:

The cost of this program is \$628,248, out of which \$471,186, or 75%, comes from a federal staffing grant, (IAWPL 89-105 as amended by PL 91-211, Grant No. 03-H-000-746-05-0).

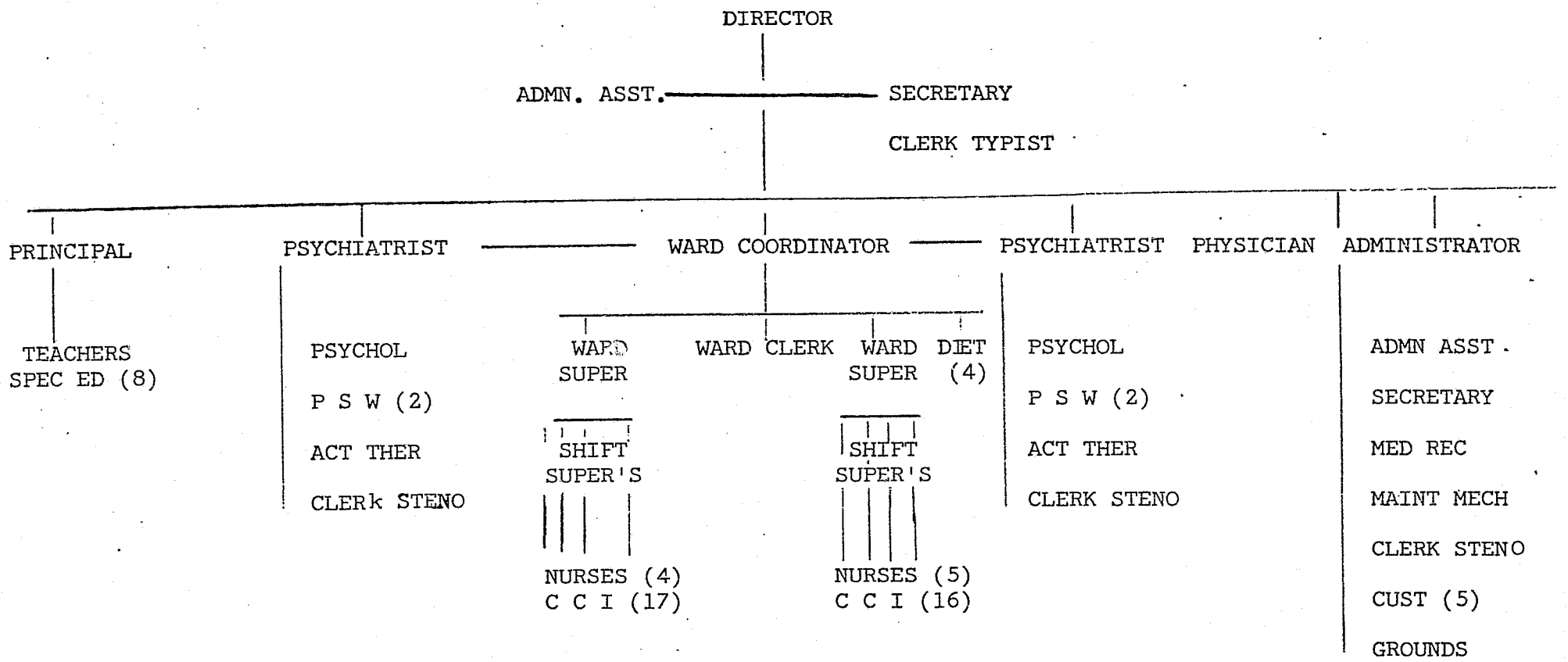
NATURE OF TREATMENT:

This facility provides all forms of psychotherapy, chemotherapy, and special education.

CLIENT EGRESS:

The staff of the Center, in a meeting with the Director, determines when client leaves the program and what referral, if any, is necessary.

IV. ORGANIZATIONAL PATTERN AT TERRY CHILDREN'S CENTER



PROGRAM TITLE: Mental Hygiene Clinic

Main Clinics

Wilmington
Fernhook
Kent
Sussex

Satellite Clinics

Northeast
Center City State Service Center
Westend
Belvedere
Middletown
De La Warr
Newark

Laurel State Service Ctr.
Bridgeville
Laurel Resocialization
Milford
Millsboro
Lewes

CLIENT GROUP:

Eligibility Criteria

All residents of Delaware without regard to age, sex, race, religion or place of origin are eligible.

Capacity

Open

Present Population

During the year 1971 through 1972, total admission to all clinics was 2,915. Out of this number, children under age 5 totaled 1 in Fernhook, 6 in Kent, and 4 in Sussex; ages 5 through 9 totaled 25 in Fernhook, 54 in Wilmington, 44 in Kent, and 44 in Sussex; ages 10 through 14 totaled 79 in Fernhook, 118 in Wilmington, 80 in Kent, and 71 in Sussex; ages 15 through 17 totaled 77 in Fernhook, 91 in Wilmington, 67 in Kent, and 55 in Sussex; ages 18 through 19 totaled 22 in Fernhook, 45 in Wilmington, 30 in Kent and 26 in Sussex, for a total children's admission of 939, or 32% of the total admissions during this year. (See attached table.)

PROGRAM OBJECTIVE:

Purpose

To provide services for the prevention, evaluation and treatment of mental illness and the promotion of individual and community mental health. The programs encompass diagnostic

evaluation, psychotherapy, pre-hospital and post-hospital care, and referral services to other mental health facilities and community resources.

SOURCE OF CLIENT:

(See attached table.)

STAFFING and ORGANIZATION:

(See attached chart.)

COST:

The total cost of the operation of all mental hygiene clinics during the fiscal year 1971-'72 was \$716,994.02. During the same period, clinics collected fees for treatment in the amount of \$22,409.43 and money for drugs in the amount of \$49,077.98.

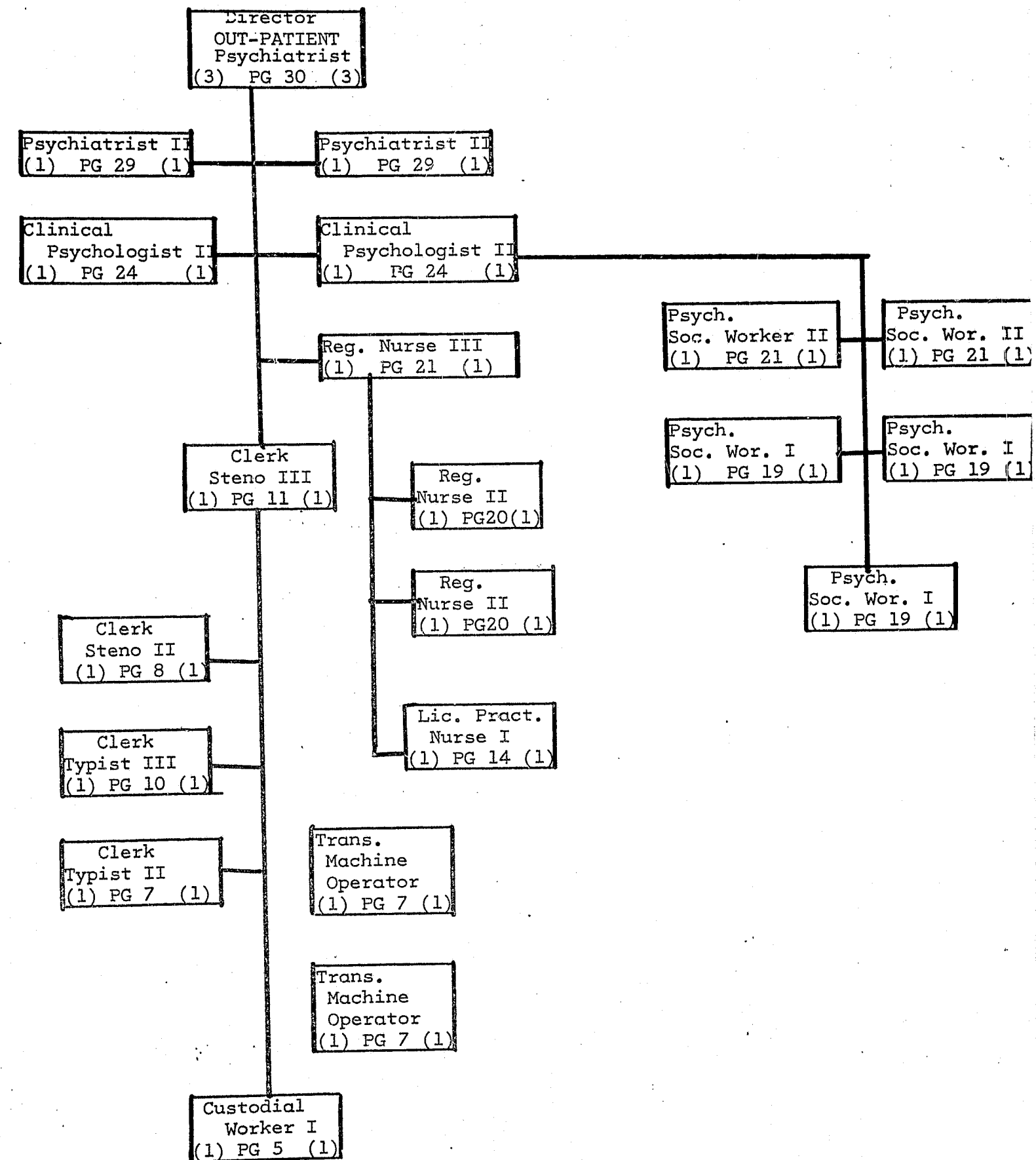
NATURE OF TREATMENT:

The treatment services offered are individual and group therapy, family therapy, play therapy with children, and chemotherapy.

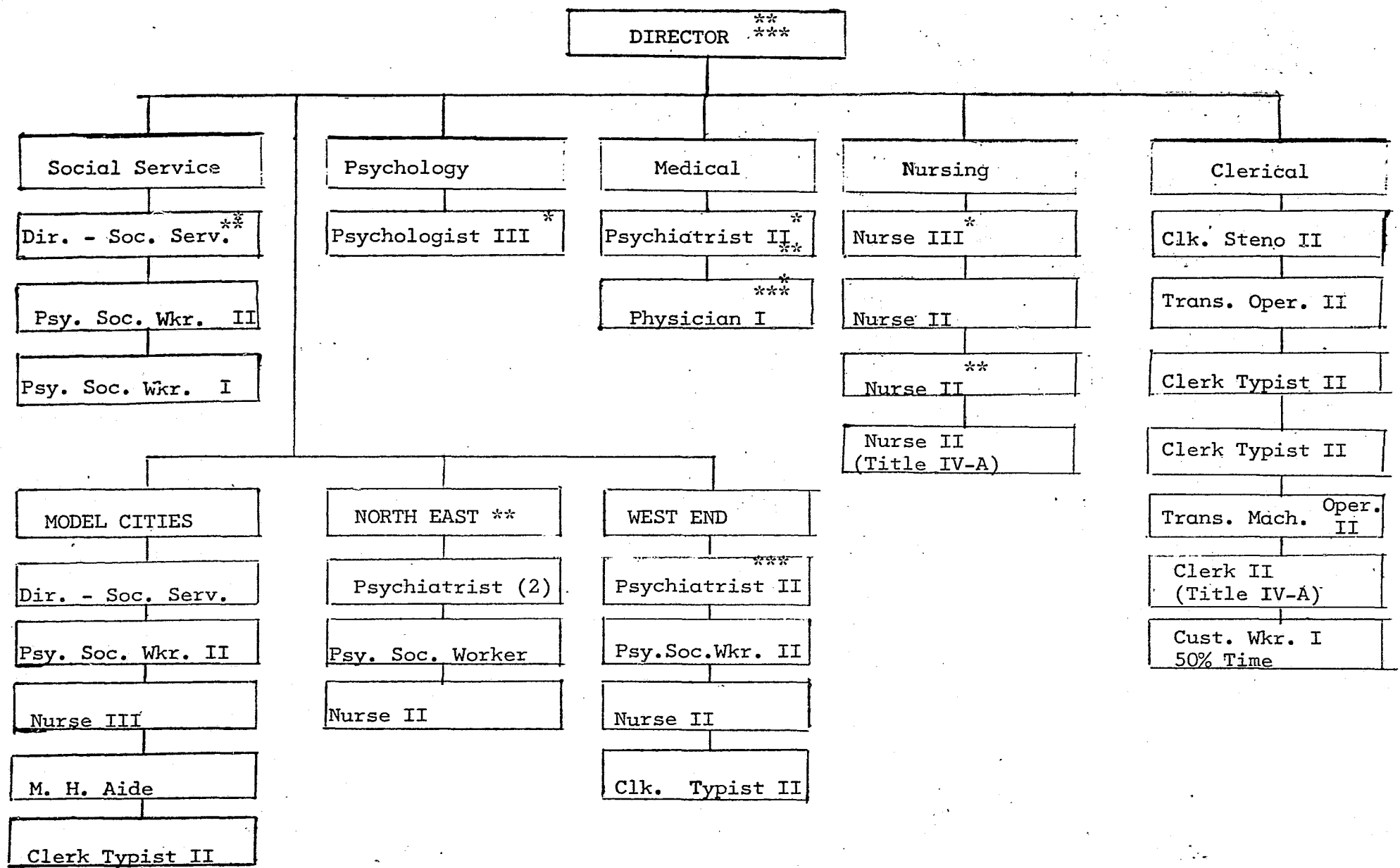
CLIENT EGRESS:

The therapist, with the aid of his supervisor, determines when a client is ready to leave the program and if he or she needs to be referred to another resource. We have no specific data available to draw a flow chart.

FF/vew
9/27/73



WILMINGTON HYGIENE CLINIC

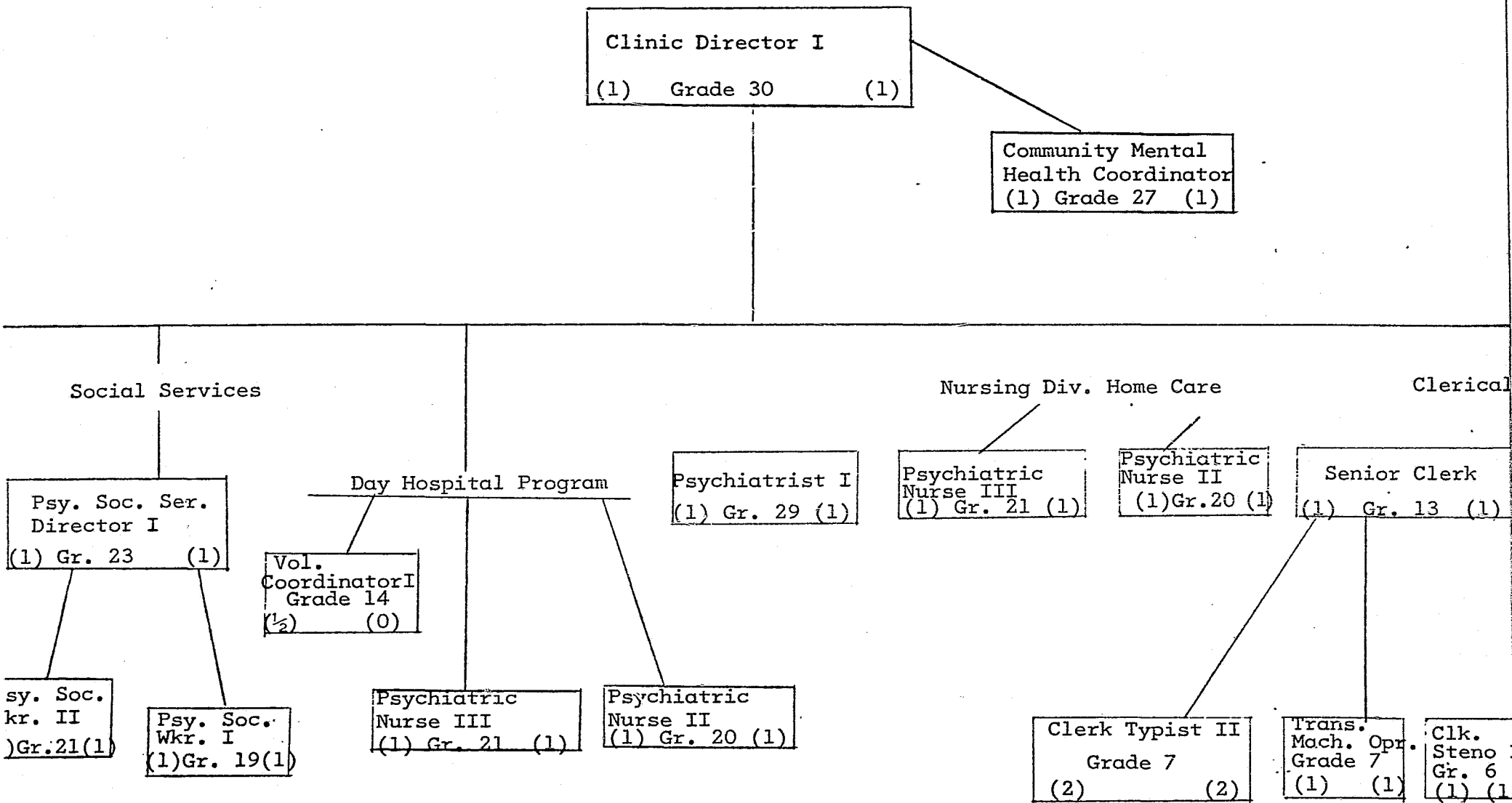


* Part-time at West End

** Part-time at Northeast (Operated on Thursdays only)

*** Part-time at Model Cities (All Model Cities permanent employees are Title IV-A).

KENT COUNTY MENTAL HYGIENE CLINIC

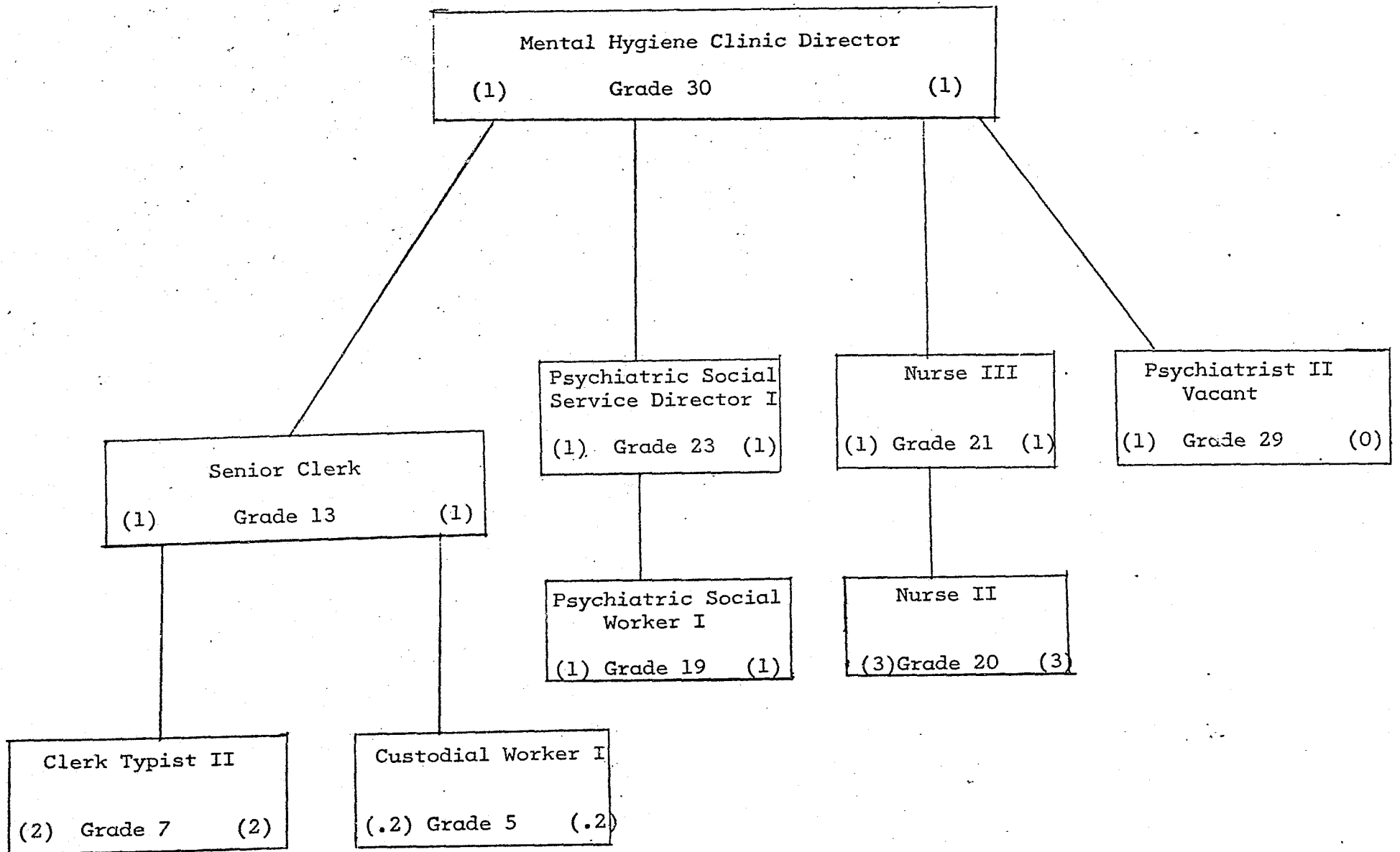


CONTINUED

1 OF 3

SUSSEX COUNTY MENTAL HYGIENE CLINIC

STAFFING CHART



ADMINISTRATIVE COSTS

Mental Hygiene Clinic	\$143,142.00
Terry Children's Psychiatric Center	220,652.00
Consultation & Education	Administrative cost cannot be computed.

PROGRAM TITLE: Governor Bacon Health Center
Children's Section

CLIENT GROUP: Emotionally handicapped children; ages 5 to 16;
whose intelligence is high enough to enable
them to benefit from the program; (i.e. children
whose I.Q. is at or above cut-off point for Home
for the Mentally Retarded).

The average daily population for Governor Bacon
Health Center during 1972 was 63 children. New
cottages for the children have been opened
(summer 1973). There are 10 new cottages; with
a total capacity of 100 children. Two of the
unfinished cottages are presently being held for
future use as diagnostic cottages; one other
cottage is not ready for occupancy; 7 cottages
are open (October, 1973).

PROGRAM OBJECTIVE: Provide care and treatment of emotionally
handicapped children with the objective of
stabilizing them to return to society.

SOURCE OF CLIENT: Family Court, Terry Children's Psychiatric
Center, Division of Social Services, Catholic
Social Services, Delaware State Hospital, and
other community agencies.

STAFFING & ORGANIZATION: (See chart.)

COST: Fiscal 1972 - \$2,085,112 (Unable to compute accurately due
to nature of program)

NATURE OF TREATMENT: This facility provides all forms of psycho-
therapy and special education.

CLIENT EGRESS: The staff of the Center, in a meeting with the
Director, determines when client leaves the
program and what referral, if any, is necessary.

Superintendent (1.00)

Secretary (7.00)

Medical Director* (3.50)

Medical Records
Stenographic PoolResearch
In-Service Training
Volunteer Services
Chaplains(94.10)
Hospital Administrator(77.00)
Director(14.00)
Director*(71.90)
DirectorAdministrative DivisionAdministrative Services
Accounting
Inventory and Control
Canteen
Switchboard

Personnel

Building and Grounds
Security
Maintenance
Motor Vehicles

General Services

Dietary
Housekeeping
Laundry
Warehousing
ClothingChildren's DivisionPsychiatric and
Medical Staff

Psychological Staff

School

Activity Therapists

Child Counselors

Social Service

Adult Division

Medical Staff

Dental

Laboratory

Pharmacy

Occupational Therapy

Activity Therapy

Physical Therapy

Nursing Division

Nursing Service

*The Medical Director is
also the Director of the
Adult Division.

DIVISIONS OF JUVENILE CORRECTIONS

INSTITUTIONAL PROGRAMS

I. Bridge House

A. Client Group -

- Children up to 18 years held by Family Court direction
- Capacity: Ideal - 22; Maximum - 44
- Average Daily Population - 27.6
- Average Monthly New Detainees - 90

B. Program Objective - To provide secure custody until youth are removed by court order, with individually planned services, including diagnosis and evaluation, counseling, education, medical, and vocational.

C. Source of Client -

- Source: Family Court of New Castle County
- Number: 1.096 in FY 1973

D. Staffing & Organization - See attached.

E. Cost - \$250,218 - FY 1974 - State Funds

F. Nature of Treatment -

1. Secure custody.
2. Evaluations as needed; psychological, educational, vocational, and medical.
3. Counseling, both individual and group, as available.
4. Diagnostic evaluations provided to other agencies as appropriate.

G. Client Egress - Family Court determines when child leaves Bridge House to the Family Court.

II. Stevenson House

A. Client Group -

- Children up to 18 years held by Family Court direction
- Capacity: Ideal - 22; Maximum - 44
- Average Daily Population - 12
- Average Monthly New Detainees - 41

B. Program Objective - Providing secure custody for the short period of time which is necessary, with services planned individually for each youth which would: provide diagnostic, evaluation and counseling services; assist the school-attending youth to keep up with his classroom work; and meet medical and vocational problems as needed.

C. Source of Client -

- Source: Family Court of Kent County and of Sussex County
- Number: Kent County - 270 (estimate); Sussex County - 242 (estimate)
Total - FY 1973 - 512

D. Staffing & Organization - See attached.

E. Cost - \$238,688 - FY 1974, - State Funds

F. Nature of Treatment -

1. Secure custody.
2. Psychological, educational, vocational, and medical evaluation of all youth received.
3. Individual and group work counseling available.
4. Observe and study needs and progress of each child.
5. Diagnostic evaluations provided to other agencies as appropriate, but especially to the Family Court.

G. Client Egress - Family Court determines when a child leaves Stevenson House to the Court.

III. Ferris School for Boys

A. Client Group -

- Boys committed up to 18 years who can be held until 21 years.
- Capacity: Ideal - 104; Maximum - 174
- Average Daily Population - 95.8
- Average Monthly Commitments - 16

B. Program Objective - To assist boys with negative and socially inappropriate behavior to develop more appropriate behavior as part of getting ready to return to the community through the Aftercare Program.

C. Source of Client -

- Source: Family Courts of New Castle, Kent and Sussex Counties
- Number: FY 1973:

<u>Commitments</u>	
New Castle County	- 84
Kent County	- 10
Sussex County	- 12
Out of State	- <u>3</u>
Total	109

Cumulative Admissions - 194

D. Staffing & Organization - See attached.

E. Cost - \$971,751 - FY 1974 - State Funds
322,684 - FY 1974 - Special State Funds
56,346 - FY 1974 - Special Funds - Federal - for
Special Education

F. Nature of Treatment -

1. Medical, dental, psychological, sociological, educational, and vocational evaluation of all boys.
2. Individual, group and family counseling - - with crisis intervention when needed.
3. Involve families in their boy's treatment program.
4. Meet psychological and/or psychiatric problems when indicated.
5. Provide a controlled group living experience designed to encourage a boy to learn how to live with others.

- 6. Conduct recreational and social activities.
- 7. Provide educational and vocational experiences as part of the effort to prepare boys for return to the community.
- G. Client Egress - The length of stay for a boy is dependent upon his own adjustment of attitude and behavior in taking more responsibility for his own actions and self-direction and understanding himself better in relation to the world about him. The period of time averages about eight months.

IV. Woods Haven-Kruse School for Girls

A. Client Group -

- Girls committed up to eighteen years who can be held until twenty-one years
- Capacity: Ideal - 75; Maximum - 135
- Average Daily Population - 56.6
- Average Monthly Commitments - 8

B. Program Objective - To work with girls whose socially inappropriate behavior has resulted in an offense against the community, and to prepare them for placement in the Aftercare program for eventual re-integration into the community.

C. Source of Client -

- Source: Family Courts of New Castle, Kent, and Sussex Counties

- Number: FY 1973:

	<u>Commitments</u>
New Castle County	- 65
Kent County	- 3
Sussex County	- 7
Out of State	- <u>1</u>

Total 76

Cumulative Admissions - 95

D. Staffing and Organization - See attached.

E. Cost - \$632,096 - FY 1974 - State Funds
146,184 - FY 1974 - Special Funds
38,448 - FY 1974 - Federal Funds - Special Ed.

F. Nature of Treatment -

- 1. Diagnosis and evaluation -- psychological, educational, vocational, and medical and dental examination.
- 2. Counseling, both individual and group.

3. Psychological and/or psychiatric services when indicated.
 4. Behavior modification treatment program.
 5. Counsel families as part of individual girl treatment program.
 6. Social and recreational activities.
 7. Educational and vocational services as part of the treatment program.
 8. Utilize the controlled environment to help girls relate more responsibility to peers and staff.
- G. Client Egress - The length of stay for a girl is dependent upon her own adjustment of attitude and behavior in taking more responsibility for her own actions and self-direction and understanding herself better in relation to the world about her. The period of time averages about eight months.

V. Delaware Youth Center

A. Client Group -

- Older youth committed up to eighteen years who can be held until twenty-one years.
- Capacity: Ideal - 30; Maximum - 38
- Average Daily Population - 33.1
- Average Monthly Commitments - 4

B. Program Objective - To protect society from young aggressive males who physically act out their anger, to make it possible for Ferris School to remain an open campus, to provide intensive treatment services for youth with multiple failures and close to being placed in the adult correctional system, and to meet all basic physical needs of youth at the Center.

C. Source of Client -

Source: Family Courts of New Castle, Kent, and Sussex Counties; the Superior Court; and the Division of Juvenile Corrections

Number: FY 1973 - Three month caseload sample

New Castle County	-	28
Kent County	-	8
Sussex County	-	4
Out of State	-	2

Total 42

Cumulative Admissions - 48

- D. Staffing and Organization - See attached.
- E. Cost - \$ 419,784 - FY 1974 State Funds
1,332,392 - FY 1974 Special State Funds
33,496 - FY 1974 Special Federal Funds - Special Ed.
- F. Nature of Treatment
1. Secure Custody
 2. Classification System
 3. Group Treatment
 4. Psychiatric Casework
 5. Recreation
 6. Academic and Shop Program
 7. Education and Library
 8. Oral Learning Skills
 9. Behavior Modification in Educational Classrooms
- G. Client Egress - Usually determined as the result of term commitments of the Superior Court, plus responsible adjustments in attitude and behavior in accord with a "contract" developed by the youth and DYC staff jointly. For Family Court commitments or transfers from other Division institutions, a responsible adjustment in accord with a "contract" with each youth governs the timing and decision for release.

COMMUNITY BASED PROGRAMS

I. Aftercare Bureau

A. Client Group -

- Children committed up to eighteen years who can be held until twenty-one years.
- Capacity: Does not apply.
- Average Daily Population - 343.4
- Average Monthly Transfers from Institutions - 18

- B. Program Objective - The satisfactory reintegration of youth into the community, and the lowest possible recidivism rate.
- C. Source of Client -
- Source: Division of Juvenile Corrections' Institutions
 - Number: Cumulative Admissions - 210
- D. Staffing and Organization - See attached.
- E. Cost - \$222,661 - FY 1974 - State Funds
97,849 - FY 1974 - Special State Funds
88,904 - FY 1974 - Special Federal Funds
- F. Nature of Treatment
1. Counselor involvement in pre-release conference at institution
 2. Counsel with child for two months prior to release
 3. Counsel family of child on plans for return home and treatment plans
 4. Develop or find special education programs
 5. Develop or find employment or special training programs
 6. Provide psychological and/or psychiatric services as needed
 7. Provide intensive therapeutic counseling as needed during stay on Aftercare
 8. Provide assistance on problems such as transportation
 9. Find and utilize as many community resources as possible to resolve the specific problems of the child.
- G. Client Egress - Youth are terminated from Aftercare after having demonstrated an ending of delinquent behavior, a satisfactory school or job record, and a responsible relation with family and peers.

II. Group Homes

A. Client Group

- Children committed up to eighteen years who can be held to twenty-one years.
- Capacity: ideal, 24; maximum, 30.
- Average daily population, 12.3
- Average monthly transfers for other Division programs, 2.

B. Program Objective: to re-establish a less stressful family relationship as preparation for eventual return to the family, to obtain a public school education, and to prepare for self-supporting employment.

C. Source of Client

- Source: Other Division of Juvenile Corrections programs
- Number: Cumulative admissions, 22

D. Staffing and Organization - See attached

E. Cost - \$128,830 - FY 1974 - State Funds
49,414 - FY 1974 - Special State Funds
44,825 - FY 1974 - Special Federal Funds
3,000 - FY 1974 - Special Private Funds

F. Nature of Treatment

1. Regular school attendance required to sixteen years and encouraged after sixteen years.
2. Help in getting into work-study programs as indicated
3. Help in obtaining employment as indicated
4. Remedial tutoring as needed
5. Individual and group counseling
6. Weekly home council meetings
7. Counseling with parents where possible
8. Arts and crafts classes
9. A "big sister" program
10. Clothing, medical and other physical care as needed

11. Organized recreation by relying heavily on community resources
12. Community cultural events
13. Discussion - seminar series on various subjects, i.e., drug abuse
14. Involvement in neighborhood advisory committees
15. Usage of library materials at the homes
16. Heavy usage of community resources, i.e., Vocational Rehabilitation, State Service Centers, YM-YWCA, etc.

G. Client Egress - Youth are terminated from a group home after having demonstrated an ending of delinquent behavior; a satisfactory school or job record; a satisfactory living situation which is available; and a responsible relationship with peers, group parents, and natural parents.

III. Delinquency Prevention

A. Client Group

- Groups and/or communities who are operating or trying to develop programs to prevent or reduce delinquency.
- Capacity: Does not apply.
- Average daily population; Does not apply.
- Average monthly population: Does not apply. A program objective for FY 1973 was to assist at least ten communities, ten community groups, and ten community agencies to develop plans or programs in the area of juvenile delinquency prevention.

B. Program Objective: to reduce the rate of juvenile delinquency in all areas of the State; and to assist in developing services on a local level where every parent and/or agency can find a source of referral for help, and where youth can come for guidance and direction.

C. Source of Clients

- Source: referrals and/or requests for assistance from any source or part of the State.
- Number of admissions -- does not apply.

D. Staffing and Organization - See attached

E. Cost - \$101,342 - FY 1974 - State Funds

F. Nature of Treatment (Source)

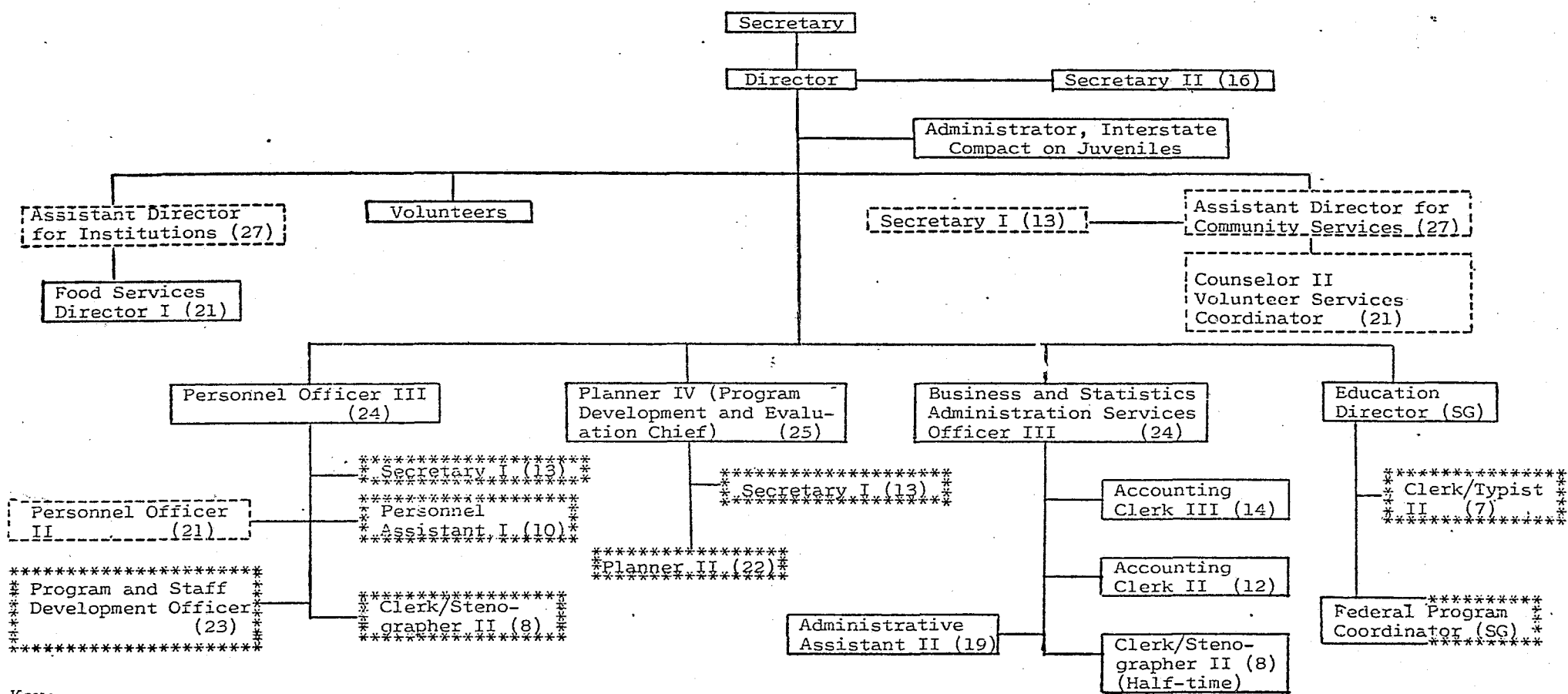
1. Assist communities to look at and evaluate youth plans and decide what to do in corporate action.
2. Assist community groups to plan organize and implement programs that meet children and youth problems that would foster juvenile delinquency incidents.
3. Assist community agencies to coordinate services to children and youth.
4. Develop overall policy for effective reduction of juvenile delinquency through use of local resources.
5. Be available as a referral agent for all agencies and individuals who request help.
6. Provide counseling, when necessary, to youth with problems, and to their parents.

G. Client Egress: contact with communities, groups, or agencies end by mutual agreement since use of the service is voluntary.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

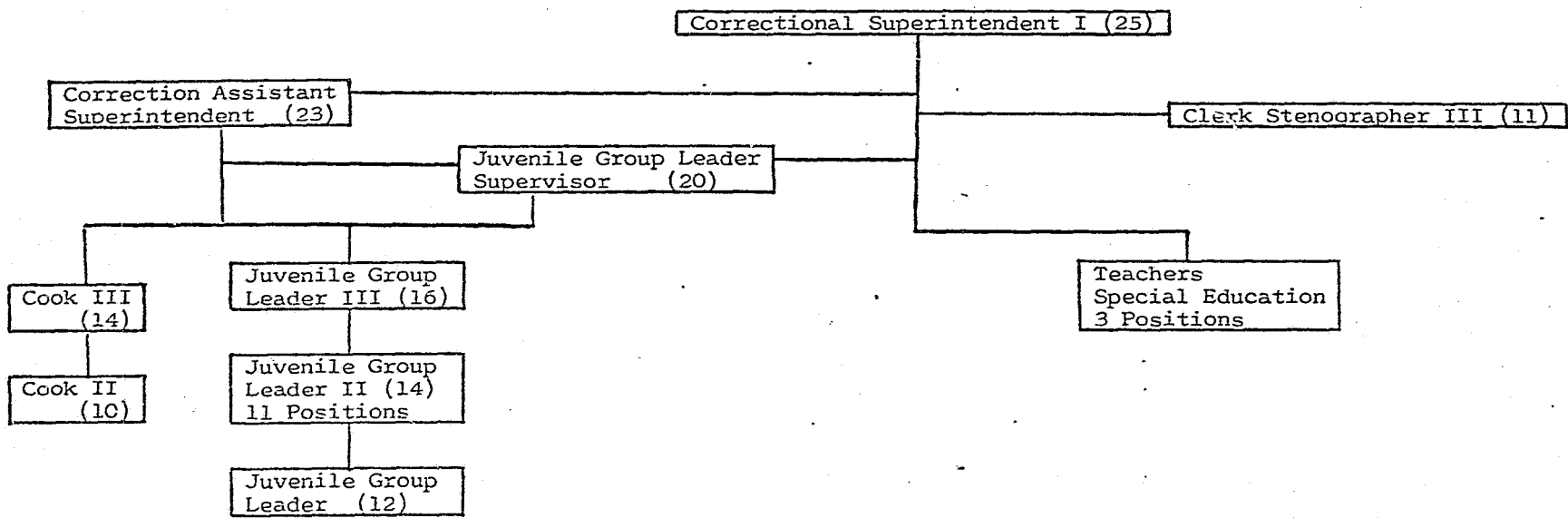
DIVISION OF JUVENILE CORRECTIONS

CENTRAL OFFICE



DIVISION OF JUVENILE CORRECTIONS

BRIDGE HOUSE



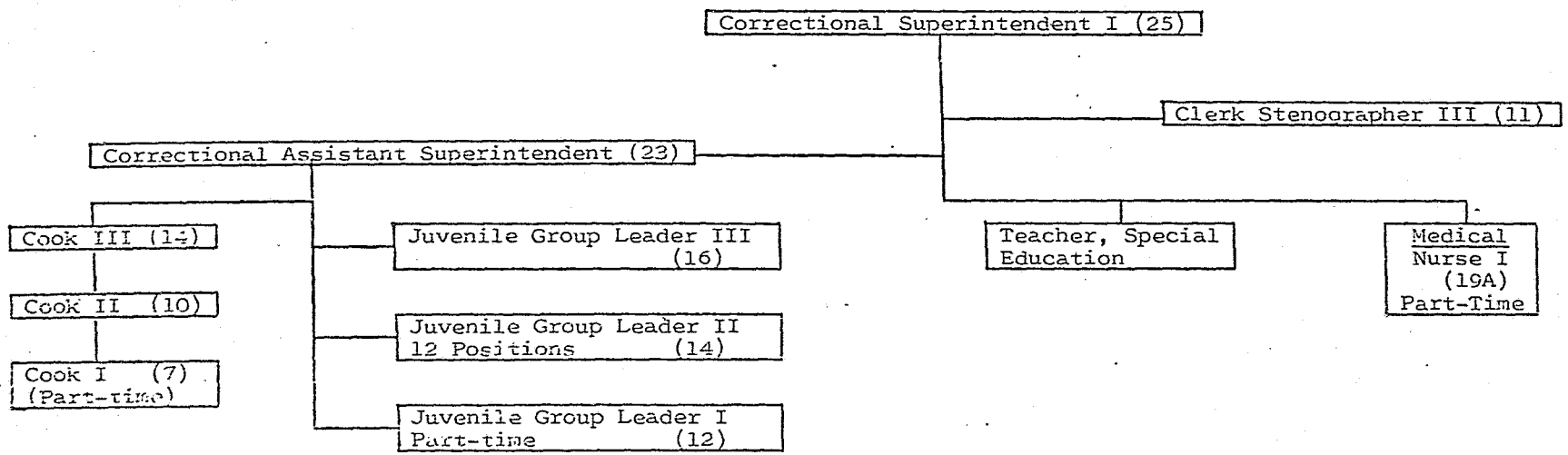
Key:

- _____ State Personnel, June 30, 1973
- ***** Federally Funded Personnel, all terminate by 6/30/74, with some 6 to 9 months earlier
- Privately Funded Personnel
- Eliminated Positions, September 30, 1973

Note: Where more than one symbol appears, funds are divided

DIVISION OF JUVENILE CORRECTIONS

STEVENSON HOUSE



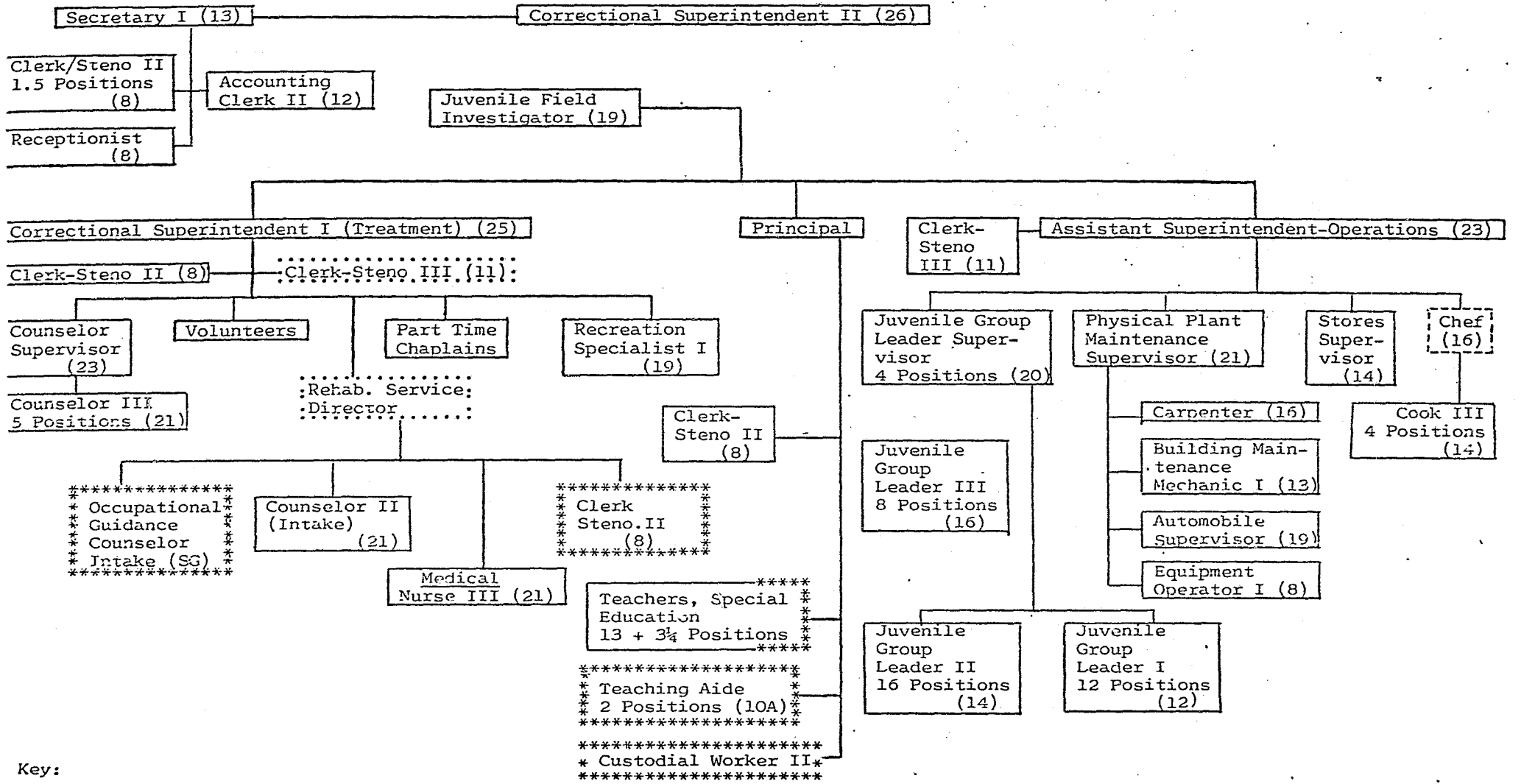
Key:

- _____ State Personnel, June 30, 1973
- ***** Federally Funded Personnel, all terminate by 6/30/74, with some 6 to 9 months earlier
- Privately Funded Personnel
- Eliminated Positions, September 30, 1973

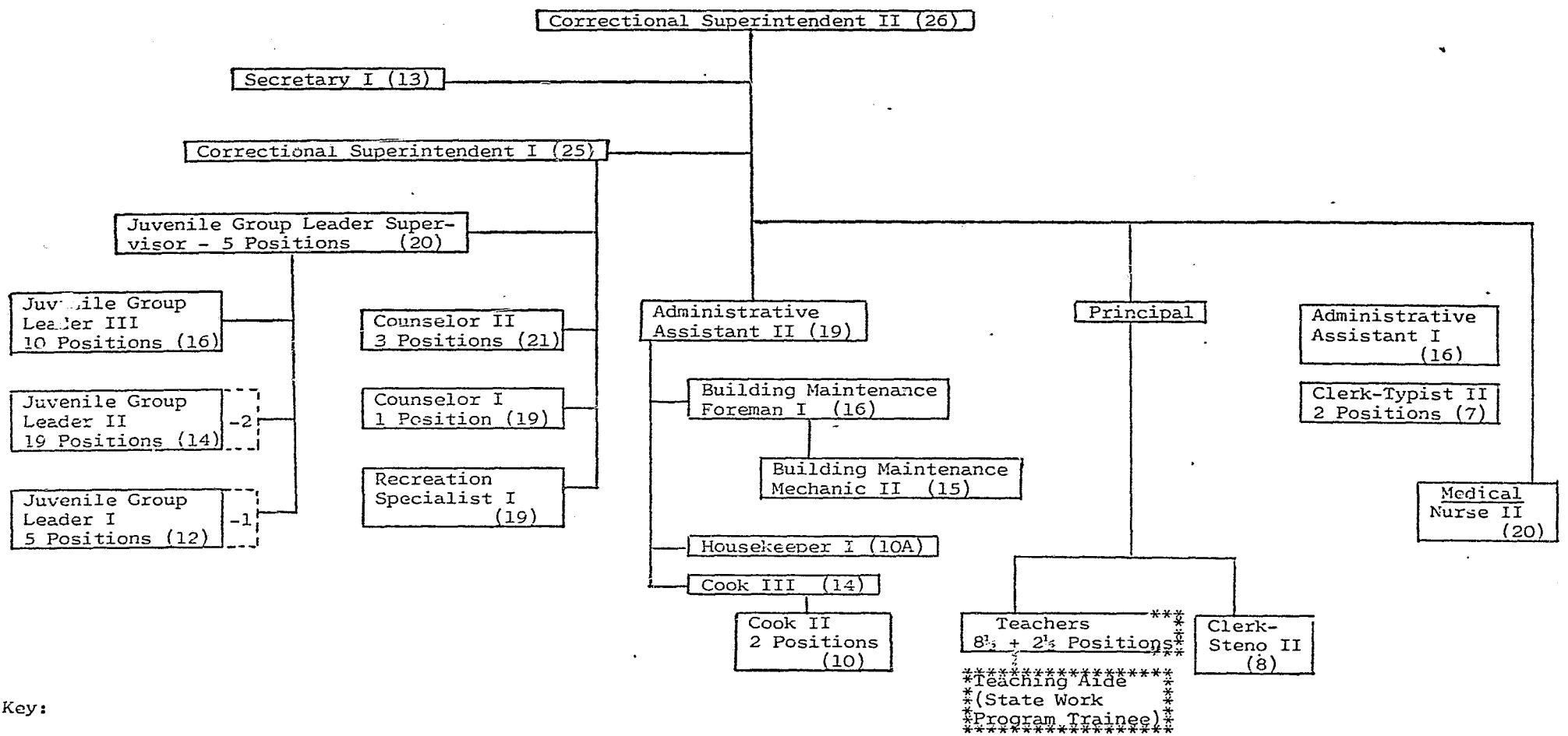
Note: Where more than one symbol appears, funds are divided

DIVISION OF JUVENILE CORRECTIONS

FERRIS SCHOOL FOR BOYS



DIVISION OF JUVENILE CORRECTIONS
WOODS HAVEN--KRUSE SCHOOL FOR GIRLS

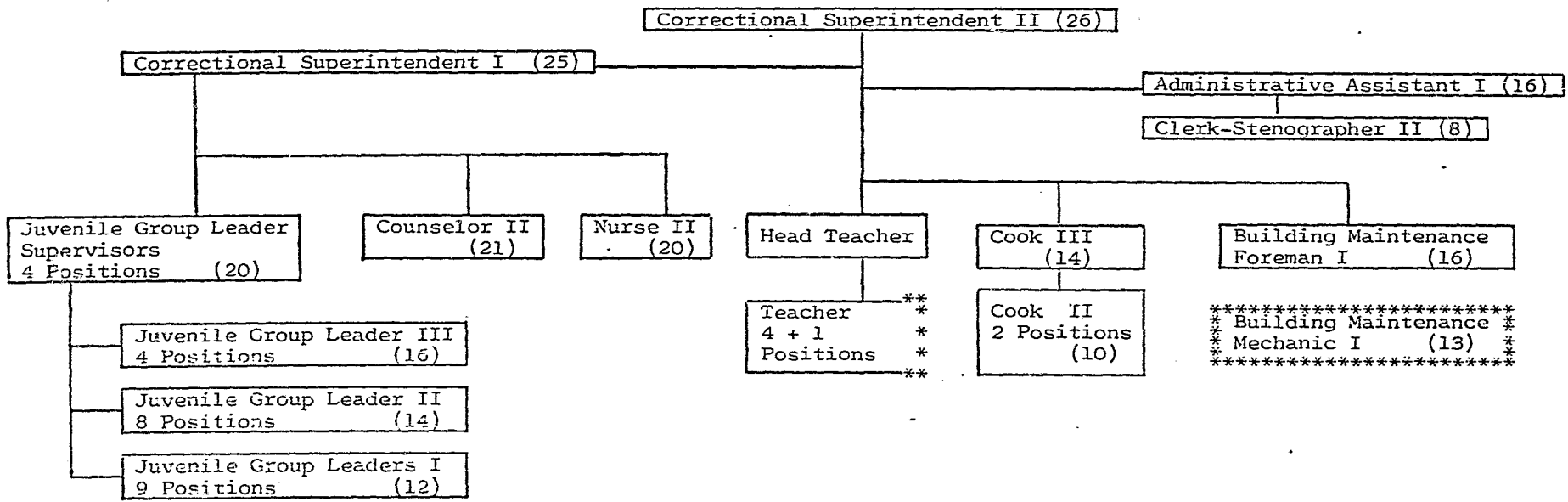


Key:

- _____ State Personnel, June 30, 1973
- ***** Federally Funded Personnel, all terminate by 6/30/74, with some 6 to 9 months earlier
- Privately Funded Personnel
- Eliminated Positions, September 30, 1973

Note: Where more than one symbol appears, funds are divided

DIVISION OF JUVENILE CORRECTIONS
DELAWARE YOUTH CENTER



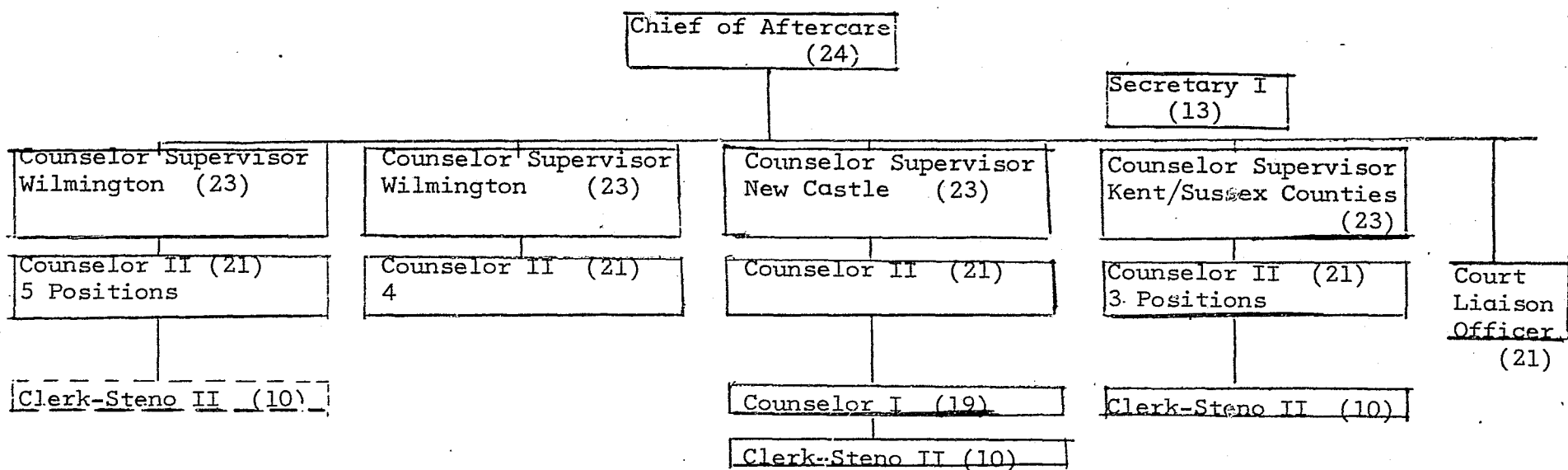
Key:

- _____ State Personnel, June 30, 1973
- ***** Federally Funded Personnel, all terminate by 6/30/74, with some 6 to 9 months earlier
- Privately Funded Personnel
- Eliminated Positions, September 30, 1973

Note: Where more than one symbol appears, funds are divided

DIVISION OF JUVENILE CORRECTIONS

AFTERCARE



Key:

_____ State Personnel, June 30, 1973

***** Federally Funded Personnel, all terminate by
6/30/74, with some 6 to 9 months earlier

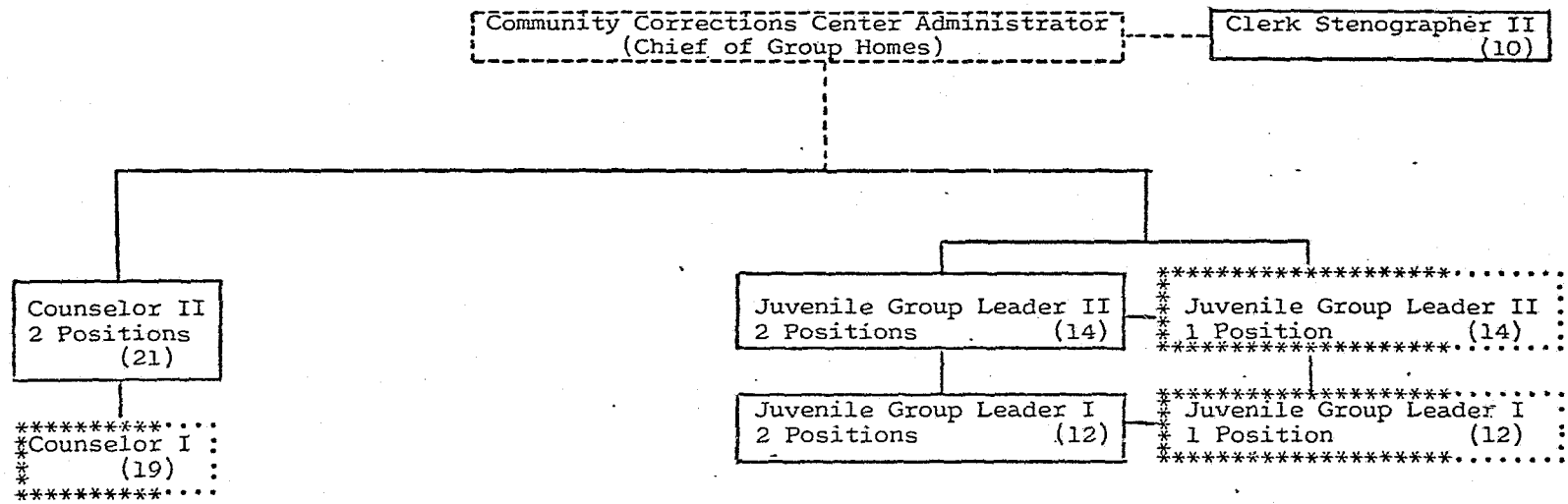
..... Privately Funded Personnel

----- Eliminated Positions, September 30, 1973

Note: Where more than one symbol appears, funds are divided

DIVISION OF JUVENILE CORRECTIONS

GROUP HOMES

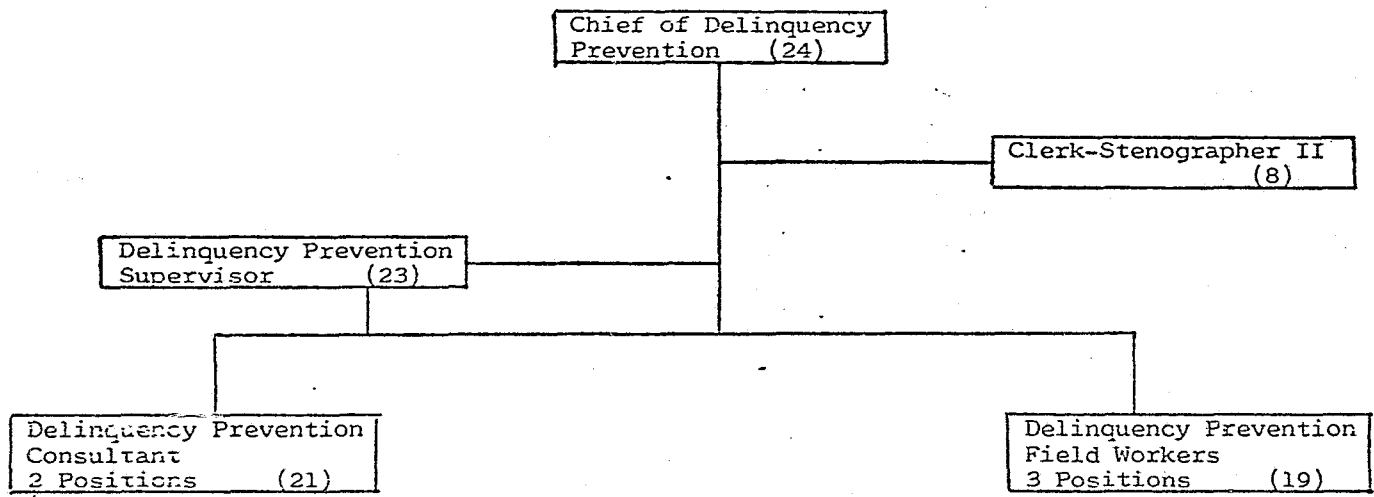


Key:

- _____ State Personnel, June 30, 1973
- ***** Federally Funded Personnel, all terminate by
6/30/74, with some 6 to 9 months earlier
- Privately Funded Personnel
- Eliminated Positions, September 30, 1973

Note: Where more than one symbol appears, funds are divided

DIVISION OF JUVENILE CORRECTIONS
JUVENILE DELINQUENCY PREVENTION



Key:

- _____ State Personnel, June 30, 1973
- ***** Federally Funded Personnel, all terminate by 6/30/74, with some 6 to 9 months earlier
- Privately Funded Personnel
- Eliminated Positions, September 30, 1973

Note: Where more than one symbol appears, funds are divided

DIVISION OF DRUG ABUSE CONTROL

DIVISION OF DRUG ABUSE CONTROL

Program Title: Detoxification - Intake

Client Group: All individuals found to be under the influence of drugs. Static capacity is 15 with a yearly turnover of 270.

Program Objective: To provide the initial step in the treatment and rehabilitation of drug abusers.

Source of Client: Most clients enter the system voluntarily through walk in visits to drug clinics, calls to DIAL and referral from all segments of the criminal justice system-- courts, police, correctional centers, parole boards, etc.

Staffing and Organization: Staff of 13

Cost: Costs of the Intake unit are combined with those of DARE House, Holly House and Crittendon Rehabilitation Center. See attachment under Treatment Centers.

Nature of Treatment: Residential detoxification, individual counseling, group therapy and referral service.

Client Egress: Recommendations for further treatment and counseling are made by the Detoxification Evaluation Team. This unit makes the treatment recommendations for all drug abusers in the state who seek help. In FY 72 a total of 156 applicants were screened by the evaluation team. Referrals were made to DARE House, Crittendon Rehabilitation Center, Holly House, and medical services at the Wilmington Medical Center and the NARA program in Lexington, Kentucky.

Program Title: Detoxification Orientation

Client Group: All individuals who have gone through the Intake Unit. This unit has a 16-bed capacity (10 for males, 6 for females). FY 1972 saw 185 persons pass through the orientation unit.

Program Objective: To continue the treatment begun in the intake unit through a residential program at Bissell Hospital and to design the post-discharge follow-up program.

Source of Client: Clients are referred from the Detoxification-Intake unit and by the police and courts. Police referrals come largely from Wilmington through the treatment alternatives to Street Crime (TASC) program.

Staffing and Organization: This unit has a staff of 13. See client flow chart.

Cost: Cost of this unit is included in the figures given by the Division for treatment centers.

Nature of Treatment: Residential medical observation, psychological and sociological service, individual and group counseling and modality referral. This treatment usually lasts for ten days and is geared toward helping drug abusers gain a measure of stability following immediate withdrawal from drugs.

Client Egress: Based on decision reached by the treatment staff in the intake and orientation units, individuals are referred to residential treatment programs, medical services (methadone clinics) and outpatient clinics. The Division assumes responsibility for clients for a five-year period or until they are rehabilitated.

Program Title: Methadone Maintenance Clinic

Client Group: Those drug abusers who are evaluated as being in need of a methadone program in order to withdraw from their drug dependency. The clinic has a static capacity of 125 and a dynamic (yearly) capacity of 250.

Program Objective:

Source of Client: Referrals are made by the Medical Entry Service at the Wilmington Medical Center.

Staffing and Organization: This clinic has a staff of five.

Cost:

Nature of Treatment: Outpatient methadone maintenance, individual counseling, referral services and analysis.

Client Egress:

Program Title: DARE House

Client Group: Male hard drug abusers. Capacity is 35.

Program Objective: To provide rehabilitation services which will enable the clients to cease their dependency on hard drugs and return to society as stable individuals.

Source of Clients: Most clients are referred by the Drug Evaluation Team following the intake and orientation phases or received from the medical entry service. However, clients may be accepted from any source providing the individual is processed through the intake mechanism and becomes part of the official Division records.

Staffing and Organization: DARE House has a staff of six.

Cost: Separate figures were not immediately available for DARE House. Instead, it is combined with other programs under the category of Treatment Centers. See funding attachment.

Nature of Treatment: Long term counseling, group therapy, community education, work therapy, job placement and referral services. The residential stay lasts for one year.

Client Egress: Clients leave DARE House upon completion of the one-year residential treatment program.

Program Title: Holly House

Client Group: Female hard and soft drug users. Capacity is 19.

Program Objective: To provide rehabilitation services which will enable the clients to cease their dependency on drugs and return to society as stable individuals.

Staffing and Organization: Holly House has a staff of four.

Cost: Separate figures were not immediately available for Holly House. Instead, it is combined with other programs under the category of Treatment Centers. See funding attachment.

Nature of Treatment: Long-term counseling, group therapy, community education, work therapy, job placement, and referral services. The stay at Holly House has a duration of one year.

Client Egress: Clients leave Holly House upon completion of the one-year residential treatment program.

Program Title: Crittendon Rehabilitation Center

Client Group: Male soft drug abusers. Capacity

Program Objective: To provide rehabilitative services which will enable clients to remove themselves from the drug culture and return to the community as a rehabilitated individual.

Source of Client: Most clients are referred by the Drug Evaluation Team following the intake and orientation phases or received from the medical entry service. However, clients may be accepted from any source providing the individual is processed through the intake mechanism and becomes part of the official Division records.

Staffing and Organization: Crittendon Center has a staff of six.

Cost: Fiscal Year 1973 Budget:

162,579	NIMH
71,564	LEAA
21,438	General Fund
207,108	Title IV-A
462,689	Total

Nature of Treatment: Long-Term counseling, group therapy, community education, work therapy, job placement and referral services. The length of stay is one year.

Client Egress: Clients leave Crittendon Center upon completion of one year residential treatment program.

Program Title: Clinic Counseling

Client Group: Any person meeting the broad criteria of drug user or abuser as defined within the responsibility of the Division. The five clinics have a static capacity of 425 and a dynamic (yearly) capacity of about 800.

Program Objective: The purpose of these clinics is to provide crisis intervention, individual counseling, referral services, family counseling, NARA aftercare, urine surveillance, viable court assistance, and drug information. In addition, three of the five clinics provide counseling for those who have completed the methadone maintenance program.

Source of Clients: Four of the five clinics receive clients from any source. Only one clinic provides service only as a follow-up of the methadone maintenance patients.

Staffing and Organization: For administrative purposes, all of these clinics are part of a grouping called County Urban Coordination. They are the responsibility of three deputy directors, one responsible for Wilmington, one for New Castle County, and one for the counties of Kent and Sussex.

DIVISION OF DRUG ABUSE CONTROL

PROGRAM TITLE: ADMINISTRATION OF CRIMINAL JUSTICE - CORRECTIONS
COUNSELING PROGRAM

Client Group:

Includes those incarcerated at the three adult correctional institutions and the institutions of the Division of Juvenile Corrections.

Program Objective:

To provide treatment for those incarcerated and motivation to better equip these individuals to cope with their drug problem following release.

Source of Client:

Commitment by the courts of the State.

Staffing and Organization:

The Corrections Counseling Program is one of three programs managed by a single Criminal Justice Coordinator. The remaining staff of this program is as follows:

<u>Title</u>	<u>Pay Grade</u>
Criminal Justice Coordinator	24
Adult Corrections	
Counselor Supervisor	20
Counselors II (3)	16
Counselor I (1)	13

DIVISION OF DRUG ABUSE CONTROL

Juvenile Corrections

Counselor Supervisor	20
Counselor II (1)	16
Counselor I (1)	13

Cost:

Budgeted for fiscal 1974 is the following:

General Fund	\$ 12,982.
DARC/LEAA Requested & Pending	<u>58,846.</u>
TOTAL	<u>\$ 71,828.</u>

Nature of Treatment:

Delaware Correctional Center: Individual counseling, evaluations for treatment alternatives, viable court assistance, referral and aftercare services, NARCONON supervision and monitoring

Sussex Correctional Center: Individual counseling, evaluations for treatment alternatives, viable court assistance, referral and aftercare services

Women's Correctional Center: Individual counseling, evaluations for treatment alternatives, viable court assistance, referral services, aftercare services

Juvenile Correctional Institutions: Same as Sussex and Women's Correctional Centers

Client Egress:

Following release from the institutions, the individuals are eligible for participation in any of the other Division managed or contracted programs in the community.

DIVISION OF DRUG ABUSE CONTROL

PROGRAM TITLE: ADMINISTRATION OF CRIMINAL JUSTICE - FAMILY COURT
COUNSELING PROGRAM

Client Group:

Those coming within the jurisdiction of Family Court.

Program Objective:

To identify those in the court setting with a drug problem and to bring to that individual at the earliest possible time all the resources of the Division and the community to bear on the problem.

Source of Client:

See above

Staffing and Organization:

Under the Criminal Justice Coordinator, the following staff functions in the Family Court:

<u>Title</u>	<u>Pay Grade</u>
Counselor Supervisor	20
Counselors II (2)	16

Cost:

Budgeted for fiscal year 1974 is the following:

General Fund	\$ 14,651.
DARC	<u>15,000.</u>
TOTAL	<u>\$ 29,651.</u>

Nature of Treatment:

See program objective above

DIVISION OF DRUG ABUSE CONTROL

PROGRAM TITLE: ADMINISTRATION OF CRIMINAL JUSTICE - TASC (Treatment Alternatives to Street Crime)

Client Group:

These are those individuals arrested by the Wilmington City Police Department and detained in the police lock-up in the Public Building.

Program Objective:

To study at the arrest level the drug problem among those who are arrested and to make available to them at the earliest possible time all the resources of the Division and the community to combat the problem.

Source of Client:

Those arrested by the Wilmington Police Department and lodged in the city lock-up.

Staffing and Organization:

Functioning under the Criminal Justice Coordinator is the following TASC staff:

<u>Title</u>	<u>Pay Grade</u>
TASC Supervisor	22
Counselors II (4)	16
Counselors I (3)	13

Cost:

Budgeted for fiscal 1974 the TASC Unit is financed as follows:

DARC	\$ 5,833.
LEAA	<u>126,829.</u>
TOTAL	<u>\$132,662.</u>

DIVISION OF DRUG ABUSE CONTROL

Nature of Treatment:

Urinalysis surveillance, counseling for arrestees, viable court assistance, referral service.

Client Egress:

Participation of the arrestee in the screening process is voluntary and therefore may be rejected when offered. If accepted and a urinalysis is conducted, the individual may or may not participate in any of the Division or community drug treatment programs.

DIVISION OF DRUG ABUSE CONTROL

The staffing of the clinics is as follows:

Deputy Director for Wilmington 22

Methadone Counseling Clinic, 1220 Washington
Street, Wilmington

<u>Title</u>	<u>Pay Grade</u>
Methadone Supervisor	20
Counselors II (2)	16
Counselors I (2)	13

Wilmington Counseling Service, 2401 Monroe
Street, Wilmington

<u>Title</u>	<u>Pay Grade</u>
Counselor Supervisor (2)	20
Counselors II (5)	16
Counselors I (5)	13

Deputy for New Castle County 22

County and Newark Clinic

<u>Title</u>	<u>Pay Grade</u>
Counselor Supervisors (2)	20
Counselors II (4)	16
Counselors I (4)	13

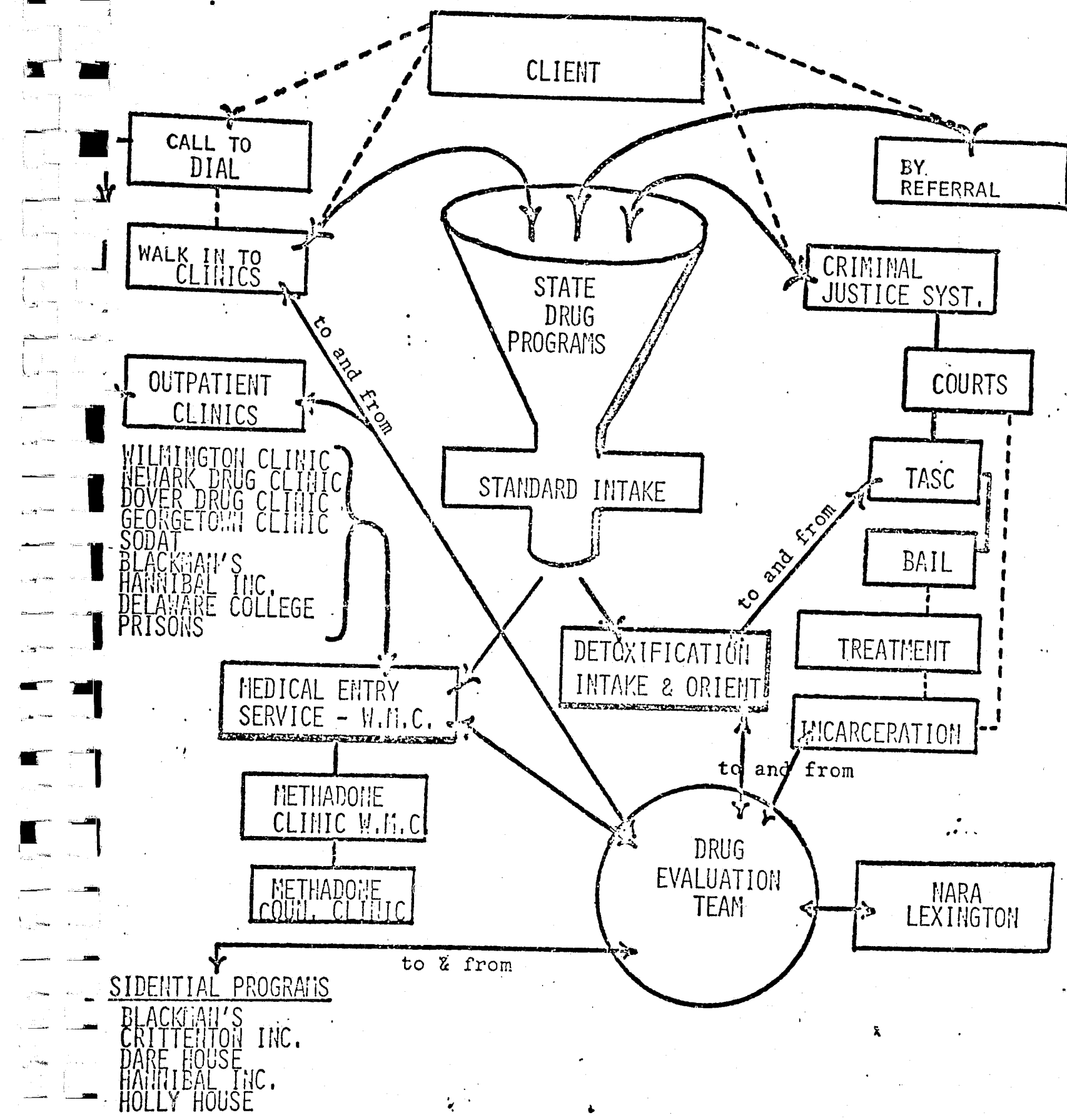
Deputy for Kent and Sussex Counties 22

Dover Drug Counseling Clinic, 1001 S. Bradford
Street, Dover

<u>Title</u>	<u>Pay Grade</u>
Counselor Supervisor	20
Counselors II (3)	16
Counselor I (1)	13

Georgetown Counseling Clinic, 137 N. Railroad
Avenue, Georgetown

<u>Title</u>	<u>Pay Grade</u>
Counselor Supervisor	20
Counselor II (1)	16
Counselors I (3)	13



DIVISION OF PUBLIC HEALTH

DIVISION OF PUBLIC HEALTH
BUREAU OF PERSONAL HEALTH SERVICES
OFFICE OF MEDICAL SOCIAL
SERVICES FOR THE OFFICE
OF CRIPPLED CHILDREN'S SERVICES

Program Title

Office of Medical Social Services

Client Group

Medical Social Services for crippled children is a major part of the Medical Social Service program that includes service to other programs outside of Crippled Children.

Capacity: Unable to state
1973 population: 1181 Crippled Children
New per month: 50 (average)

Program objective

To provide social services to crippled children and their families relating to the child's handicapping condition and family problems that may expect the handicapped child

Source of clients

<u>Source</u>	<u>Clients per month</u>
Audiology & Otology	20
Crippled Children's Clinics	13
Cleft Palate	3
Neurology & Genetics	5
Hearing aids	3
All other sources	6

Staffing and organization

1. See attachment A for staff positions, organization, pay grade, function and duties.
2. See flow chart for relationships to other organizations.

Cost

Salaries

State	\$ 22,400
Federal Crippled Children	21,300
Federal 314d	<u>9,800</u>
Total for Childrens Programs	\$ 53,500
Salaries for other programs	<u>8,000</u>
	\$ 61,500

Nature of treatment

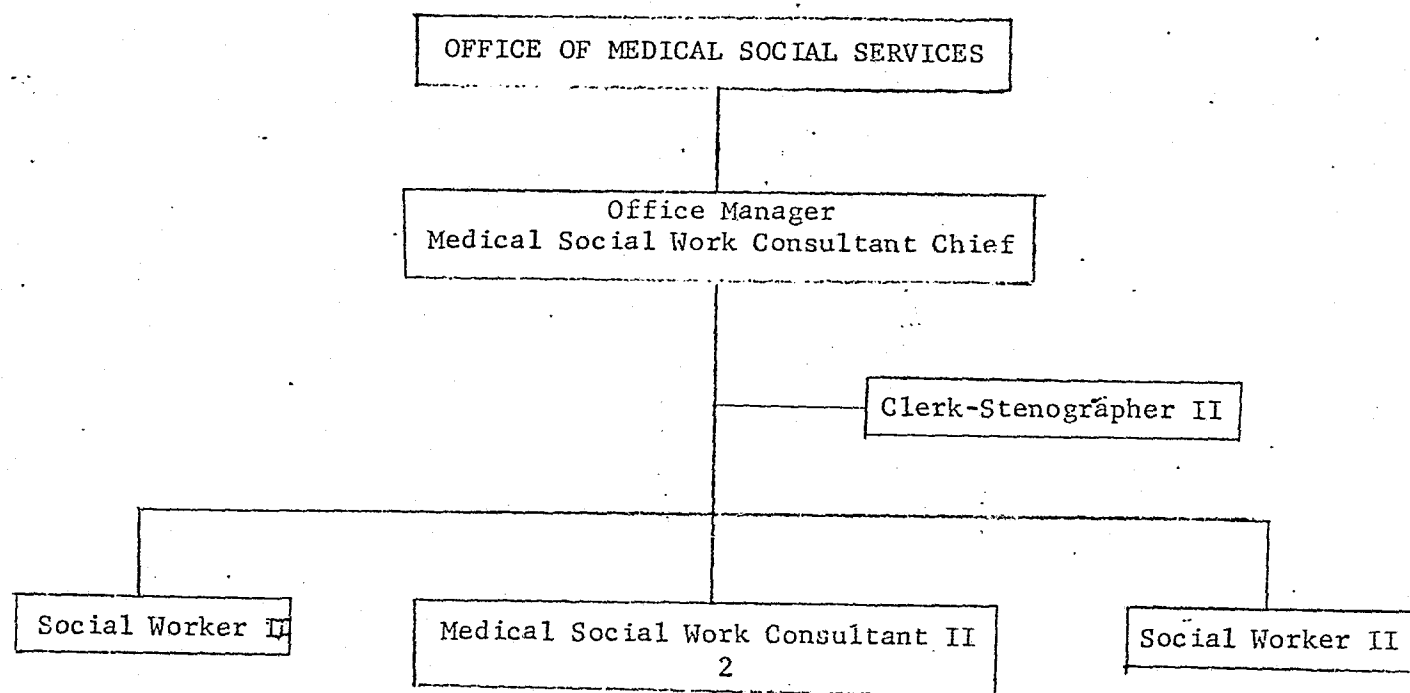
See detailed organization chart

Client Egress

Death

Leave state

When social service needs are met



DIVISION OF PUBLIC HEALTH
BUREAU OF PERSONAL HEALTH SERVICES
CRIPPLED CHILDRENS SERVICES
OPERATED BY THE OFFICE OF
MEDICAL SOCIAL SERVICES

I. Program Title

Regional Heart Program

II. Client Group

Medically Indigent
Capacity 55 children
Present population 55 children
New children per month - 2 chiefly from Kent & Sussex Counties

III. Program objective

Medical diagnosis, evaluation, and treatment of children with malformations of the heart and great vessels. Support services for this objective as required.

IV. Source of clients

Cardiac Clinics, Division of Public Health	32
Private Pediatricians	15
Wilmington Medical Center	5
Childrens Bureau of Delaware	3

V. Staffing and organization (see attached flow chart)

VI. Cost

<u>Item</u>	<u>Source</u>	<u>Amount</u>
Staff Time	State Crippled Children	\$ 3,500
Patient travel	Federal Crippled Children	500
Patient Medical Treatment	Maryland Crippled Children funded by Federal Crippled Children's funds	<u>25,000</u>
	Total	\$29,000

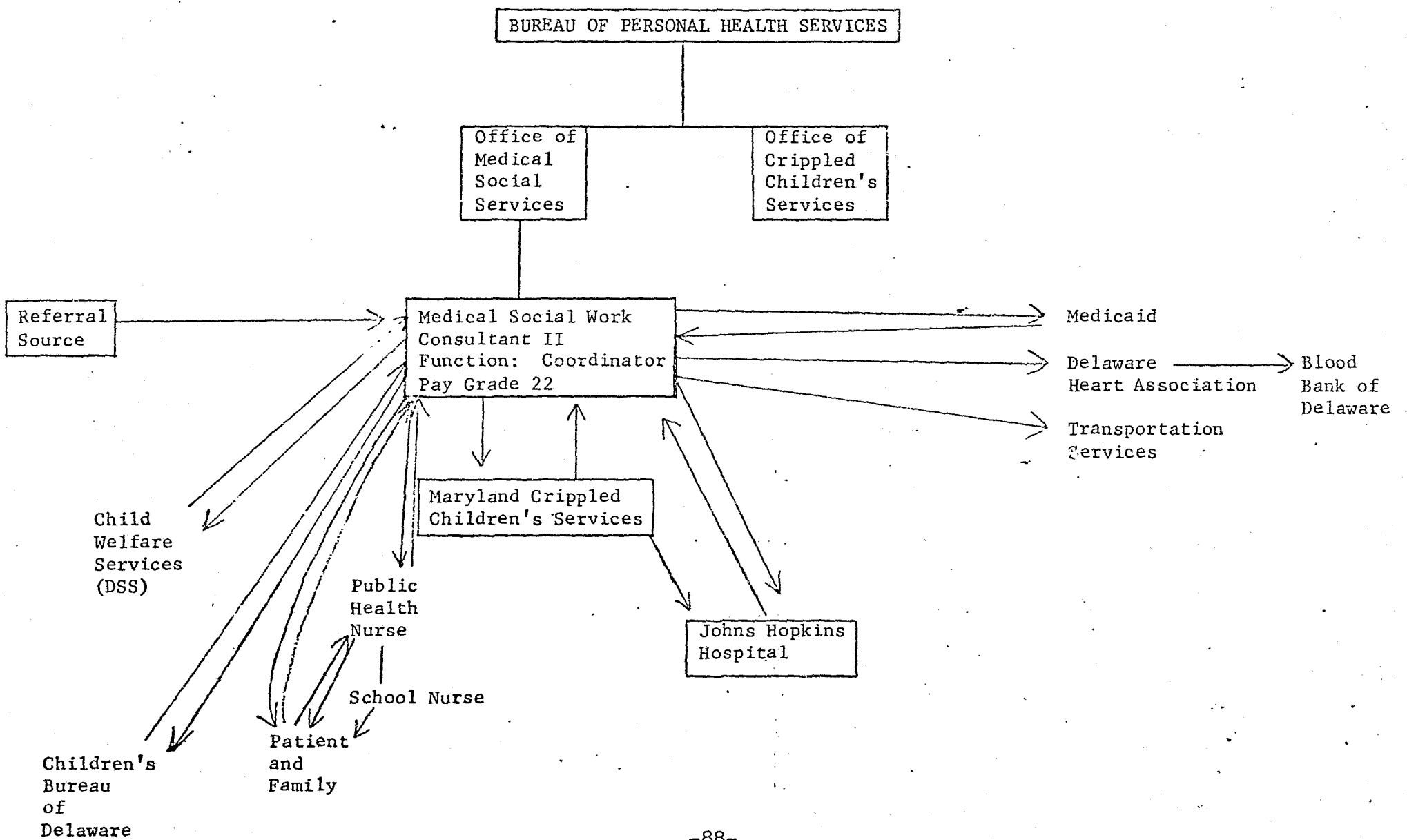
VII. Nature of treatment

Medical evaluation and periodic re-evaluation diagnosis
Surgical correction of cardiac and great vessel defects

VIII. Client egress

1. Successful correction of defects
2. Reach age 21 years
3. Death

REGIONAL HEART PROGRAM
V. STAFFING & ORGANIZATION



DIVISION OF PUBLIC HEALTH
BUREAU OF PERSONAL HEALTH SERVICES
CRIPPLED CHILDRENS SERVICES
OPERATED BY THE OFFICE OF
MEDICAL SOCIAL SERVICES

I. Program Title

Cystic Fibrosis

II. Client Group--Children under 21 years of age

Eligibility Criteria--medically indigent but not eligible for Medicaid
Capacity--14 children
Present Population--14 children
How many new per month--about 4 per year

III. Program objective

Provide a setting where total needs of children with this diagnosis can be provided--out-patient clinic pediatric exam; x-rays; therapy; assist families with cost of clinic visits; prescriptions filled at the hospital.

IV. Source of clients

Clinic physician, Delaware Division	8
Family physician	2
Public Health Nurse	2
Delaware Hospital Social Work	2

V. Staffing and organization (see attached flow chart)

VI. Cost

Item	source	Amount
Staff time	State Crippled Children	\$ 750.00
Patient Medical Treatment	State Crippled Children	<u>4,000.00</u>
		\$4,750.00

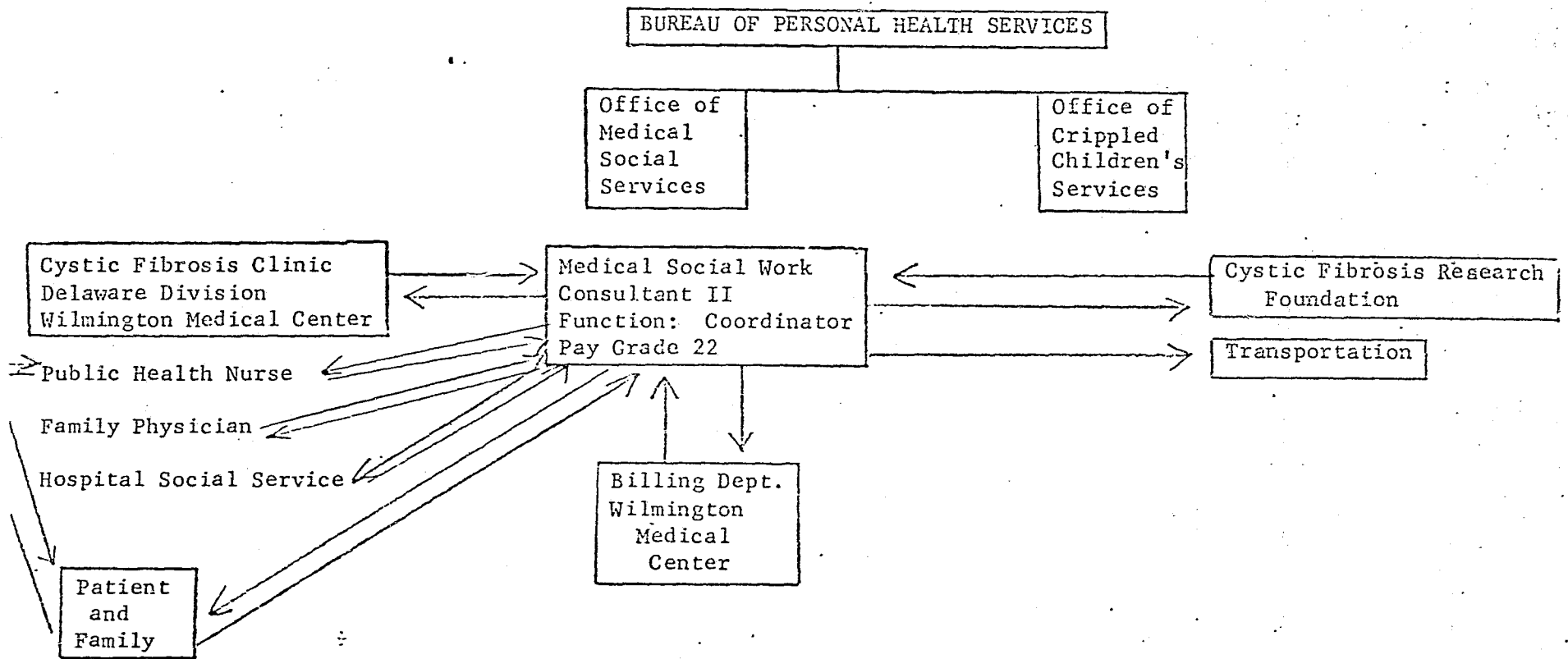
VII. Nature of treatment

Medical examination including x-ray and physical therapy instruction as indicated
Medication to help maintain health status

VIII. Client egress

1. Reach age 21 years
2. Death
3. Move out of state

CYSTIC FIBROSIS
V. STAFFING & ORGANIZATION



PROGRAM TITLE: Physical and Occupational Therapy

CLIENT GROUP:

Eligibility criteria - all children seen through Crippled Children's Service Clinics and through the Alfred I. duPont Institute.

Capacity - 300 children at any one point in time.

PRESENT POPULATION:

321 - (Almost all patients are in long term chronic category.)

PROGRAM OBJECTIVES:

- a. To provide medically prescribed therapeutic services to handicapped children on an equal basis state wide.
- b. To find children with potential handicapping conditions through Orthopedic screening activities in public schools, Head Start, Day Care Centers, and migrant programs.
- c. To provide consultative services to other state agencies, private agencies, and volunteer agencies for programs for handicapped children.

SOURCE OF CLIENTS:

- a. Crippled Children's Service Clinics
- b. Alfred I. duPont Institute Clinics

STAFF AND ORGANIZATION:

See attached chart.

COST:

State Funds	84,000
Federal Funds - Title V	48,309
Social Security Act	
TOTAL	132,309

NATURE OF TREATMENT:

1. Physical Therapy - (medically prescribed)
2. Occupational Therapy - (medically prescribed)

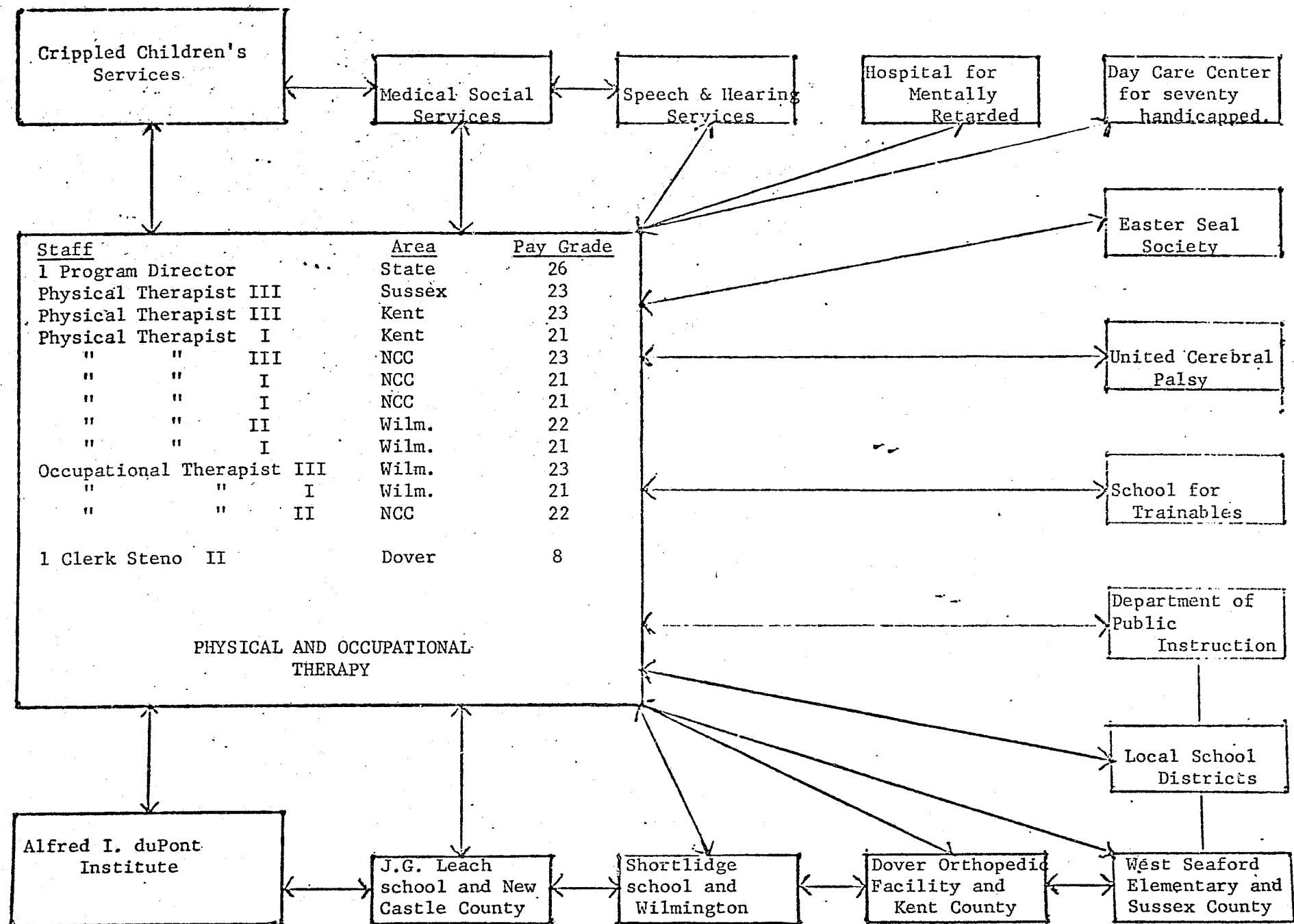
CLIENT EGRESS:

Therapeutic team (physician, Medical Social Service Consultant, and therapists,) determine when a client leaves the program. Some of the reasons are as follows:

1. Condition is no longer a problem.
2. Patient has plateaued and no further improvement is anticipated.
3. Patient has been referred to Vocational Rehabilitation.
4. Patient has been rehabilitated.
5. Patient has reached 21 years of age and referred to another service. (It would be very rare.)

CONTINUED

2 OF 3



PROGRAM TITLE: Crippled Children's Services

CLIENT GROUP:

Eligibility criteria - (see attachment)

Capacity - 5,150 Present population - 5,121 New per month - 125

PROGRAM OBJECTIVE:

The objective of Crippled Children's Services is to provide complete diagnosis, treatment, and follow-up state-wide of all physical handicapped children who need these services.

SOURCE OF CLIENT:

- | | | |
|------------------|--------------------------------|---------------------|
| 1) Self referral | 4) Public Health Nurses | 7) Voluntary agency |
| 2) Family doctor | 5) Division of Social Services | 8) Institution |
| 3) School nurse | 6) Well Child Clinics | 9) Social Agencies |

STAFFING AND ORGANIZATION:

See chart 1 and 1A

COSTS:

State Funds	20,364
Federal Funds - Title V	113,846
Social Security Act	
TOTAL	134,210

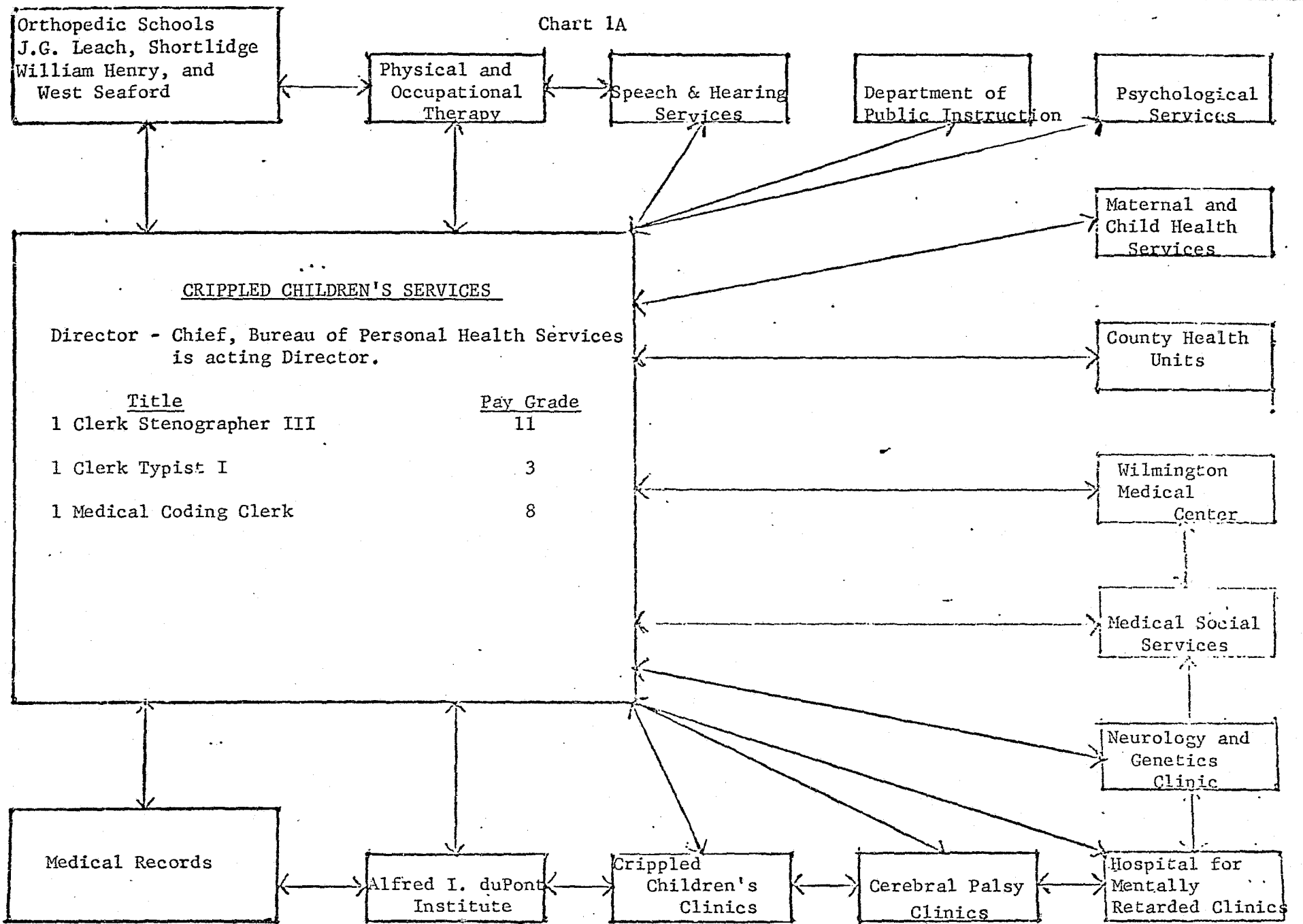
NATURE OF TREATMENT:

Speech therapy, hearing therapy, physical therapy, occupational therapy, orthopedic surgery-(Alfred I. duPont Institute), drug therapy-(Cystic Fybrois), family counseling, plastic surgery, and surgery to conserve hearing.

CLIENT EGRESS: (See chart II)

- 1) Successful correction of abnormality.
- 2) Patient has reached 21 years of age.
- 3) Patient has been referred to Vocational Rehab.
- 4) No further improvement in patients condition is anticipated.

Chart 1A



OFFICE OF MATERNAL AND CHILD HEALTH SERVICES

Program Title: Child Health Conferences

Client Group: Age 21 and under. Capacity - 15,000. Present population - 13,332+.
New per month - 3,315+.

Program Objective: To promote and provide preventive measures in the areas of immunization, physical care and education and counseling for parents.

Priorities:

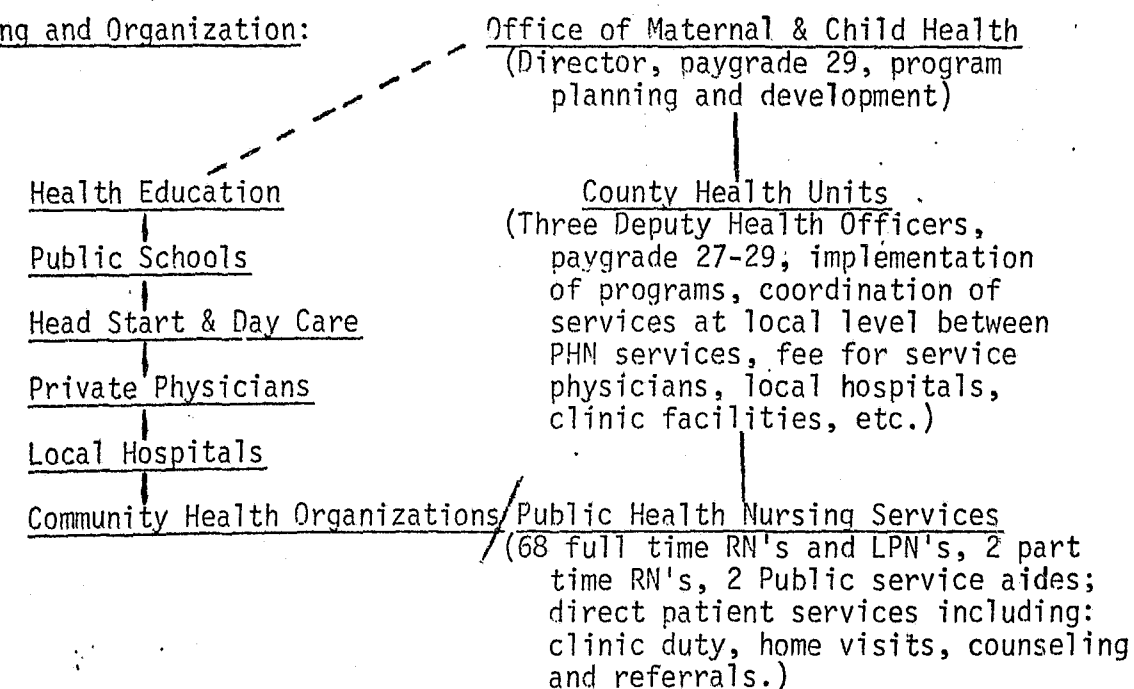
1. Infants
2. Pre-school children
3. School aged children

Source of Client:

1. Self referral
2. Division of Social Services
3. Physicians
4. Head Start, Day Care Centers and Schools
5. Public Health Nurses

Number of referrals from each source listed above are unavailable.

Staffing and Organization:



Cost: Federal formula grant - MCH services, Fund A and Fund B. State funds - dollar for dollar match for Federal Fund A grant. (Federal Fund A = \$143,300. FY '73)

Nature of Treatment:

1. Regular medical screening examination schedule
2. Immunizations
3. Referral for necessary corrective care including private medical facilities, Crippled Children's Services and optometric services.

Client Egress: Patient's leave program at will or when past eligible age. Referral for further surveillance is made to other agencies, private physicians, clinics, etc.

OFFICE MATERNAL AND CHILD HEALTH SERVICES

Program Title: Maternity Clinics

Client Group: Eligibility depends on requirements of local hospitals.
Our capacity is around 2,500.
Our present population is 3,144.
New patients annually 670.

Program Objective: To provide ante partum and post partum care for pregnant women who would not otherwise have access to such medical services.

Priorities:

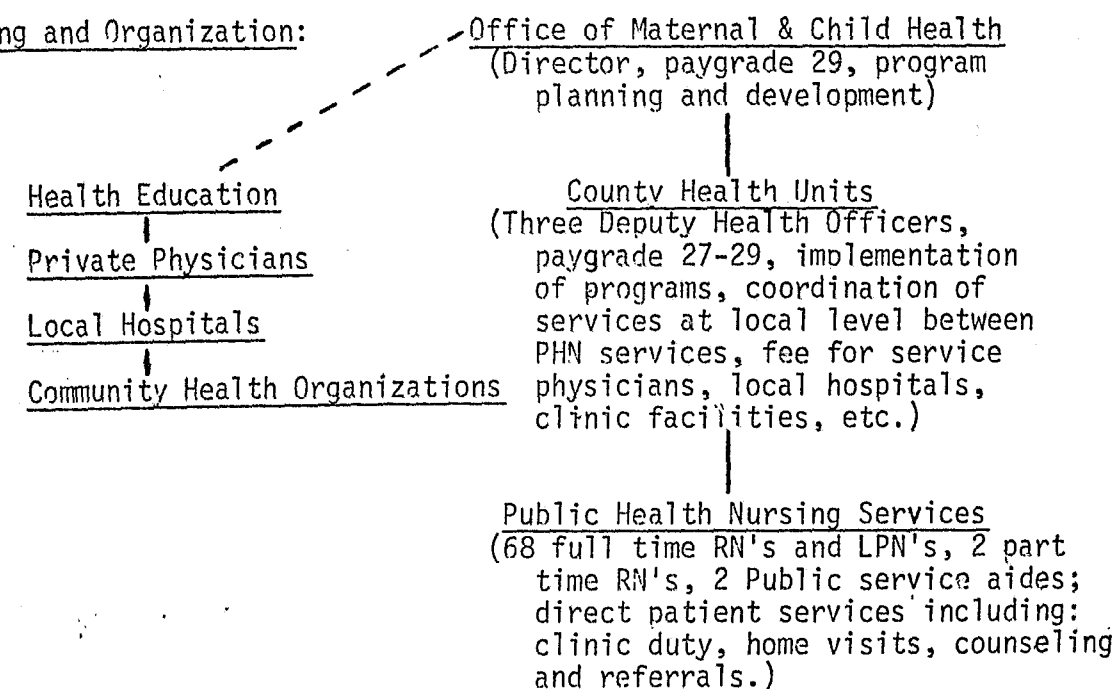
1. Teenage mothers
2. Mothers of any age "at risk" for health reasons during pregnancy.

Source of Client: Our clients come from the following sources:

1. Self referral
2. Division of Social Services
3. Physicians

Number of referrals from each source listed above are unavailable.

Staffing and Organization:



Cost: Federal formula grant - MCH services, Fund A and Fund B. State funds - dollar for dollar match for Federal Fund A grant. (Federal Fund A = \$143,300. FY '73)

Nature of Treatment: Ante partum and post partum care with appropriate referrals for related conditions.

Client Egress: Patient leaves program for labor and delivery. Goes to hospital. Returns to program for post partum care. Discharged after six weeks post partum. If there are complications, appropriate referrals to other medical resources for follow-up.

DIVISION OF PUBLIC HEALTH
BUREAU OF PERSONAL HEALTH SERVICES
OFFICE OF SPEECH AND HEARING

Program Title: Office of Speech and Hearing Services --

- Speech Diagnostic and Therapeutic Program
- State Hearing Conservation Program
- Cleft Palate-Orthodontic Clinic Program
- Speech and Hearing Screening Program
- Preschool Diagnostic and Developmental Nursery Program

Client Group: 1) Eligibility Criteria: Children under 21 years of age with communication disorders and/or hearing impairments. Primary emphasis is on preschool children or children up to 21 years of age whose communication disorder is related to a physical disability (e.g., cleft palate, cerebral palsy, minimal cerebral dysfunction, hearing loss, etc.

Therapy and other rehabilitation services are available to any child whose parents cannot afford the cost of long-term services. Medical treatment, surgery, special dentistry, and hearing aids are provided to the medically indigent as determined by the Bureau's Medical Social Service staff.

2) Client Capacity:

<u>Program</u>	<u>Capacity Per Mo.</u>	<u>Present Population (August 1973) ¹</u>	<u>Average No. New Cases Per Mo.</u>
Speech Diagnostic & Therapeutic	280	200	45
Hearing Conservation Program	300	294	85
Cleft Palate-Orthodontic Clinic	10 ²	150	2
Speech & Hearing Screening	1,000	1,000	N.A.

Program Objectives:

- 1) Speech Diagnostic and Therapeutic Program: To provide early identification, diagnosis, therapy, and parent counseling to speech and language handicapped children with primary emphasis on preschool and physically handicapped children up to 21 years of age, within the limits of staff and facilities.
- 2) Hearing Conservation Program: To provide early identification, audiologic and otologic diagnosis, otologic treatment and aural rehabilitation inclusive of hearing aids to resident children up to 21 years of age who have hearing impairments or medical conditions predisposing or causing loss of hearing acuity.

¹ Two speech pathologist vacancies.
² Clinic sees children once a month for team evaluation. Not all children (150) enrolled in the program are seen every year.

- 3) Cleft Palate-Orthodontic Clinic: To provide team evaluation and follow-up of children from birth to 21 years who are born with congenital cleft lips and palates, or other serious orofacial abnormalities.
- 4) Speech and Hearing Screening Program: To provide speech and hearing screening to all children enrolled in Head Start, Day Care Centers, Daytime Care Centers for the Retarded, and parochial schools -- grades kindergarten, first and third.
- 5) Preschool Diagnostic and Developmental Nursery: Federally funded pilot project which provides a diagnostic nursery setting for preschool children with severe developmental delay for which the cause is undiagnosed or is related to mental retardation, convulsive disorders, or motor deficits.

Program Referral Source:

Speech Diagnostic & Therapeutic Program	(See Chart 1)
Hearing Conservation Program	(See Chart 2)
Cleft Palate-Orthodontic Clinic Program	(See Chart 3)
Preschool Diagnostic & Developmental Nursery	(See Chart 4)

Staffing and Organization: See Chart 5 for staff structure, organization, and relationship to other programs and agencies. See Table 1 for staff (as of October 1, 1973), classification, pay grades, and program function.

Program Cost (FY 1973):

<u>State</u>	<u>Federal - Title V</u>	<u>Total</u>
\$165,444	\$ 88,212	\$253,656

Nature of Treatment (Kinds of Direct Treatment):

- Diagnostic Speech and Language Services
- Speech and Language Therapy
- Parent Counseling - Speech and Language Disorders
- Diagnostic Audiologic Services
- Diagnostic Otologic Services
- Otologic Surgery and Hospitalization
- Aural Rehabilitation
- Hearing Aids
- Plastic Surgery
- Orthodontic Diagnostis and Treatment
- Summer Speech Camp Services
- Developmental Diagnostic and Stimulation Services
- Speech and Hearing Screening Services

Client Egress:

There are a number of reasons for patient discharge from Speech and Hearing Service programs which may vary for each program. For example, most patients in the Hearing Conservation Program are treated for acute conditions which, following short-term medical treatment,

are discharged as cured. There are a small percentage of hearing impaired who need habilitation or rehabilitation service. These are referred either to the Speech Diagnostic and Therapeutic Program for follow-up or to special schools (Sterck), classes or school speech programs for follow-up, and to Vocational Rehabilitation for those beyond 21 years. The otologist and audiologist jointly decide on discharge and referral to appropriate follow-up service, if needed. Patients ineligible for clinic care are referred to private services.

The Cleft Palate-Orthodontic Clinic Program usually maintains the patient until treatment is complete. Patients who reach 21 years are referred to Vocational Rehabilitation if additional service or treatment is required. Patients ineligible for clinic care are referred to private sources. The clinic team determines discharge. This team consists of 3 plastic surgeons, 5 orthodontists, 1 pediatrician, 1 pedodontist, staff speech pathologists, and medical social consultants.

Speech Diagnostic and Therapeutic Program discharges children when treatment is complete or maximum remediation of the communication disorder has been achieved. Preschool children who reach school age may continue in the program but in most cases they are transferred to the school program, if adequate and appropriate services are available. There are a considerable number of referrals from this program to public health and other agency programs (e.g., psychological, neurology, pediatrics, public health nursing, orthopedic, mental health, hearing conservation, social service, etc.). The speech pathologist determines when the patient is discharged or referred elsewhere.

The Preschool Diagnostic and Developmental Nursery is primarily designed to provide in depth observation and diagnosis of preschool children with severe developmental delay. Nearly all children following a four month stay in the program are referred to other appropriate agencies and services for follow-up necessary to accelerate development. Referrals are made to nurseries, day care centers, schools and classes for handicapped, mental health, and specialty clinics -- speech, hearing, orthopedic, etc. The social worker II, teacher, teacher aide, and selected program specialists constitute an admission/discharge committee which decides on disposition of the patient.

All program staff are instructed and orientated to insure appropriate and adequate follow-up of patients discharged from any specific service.

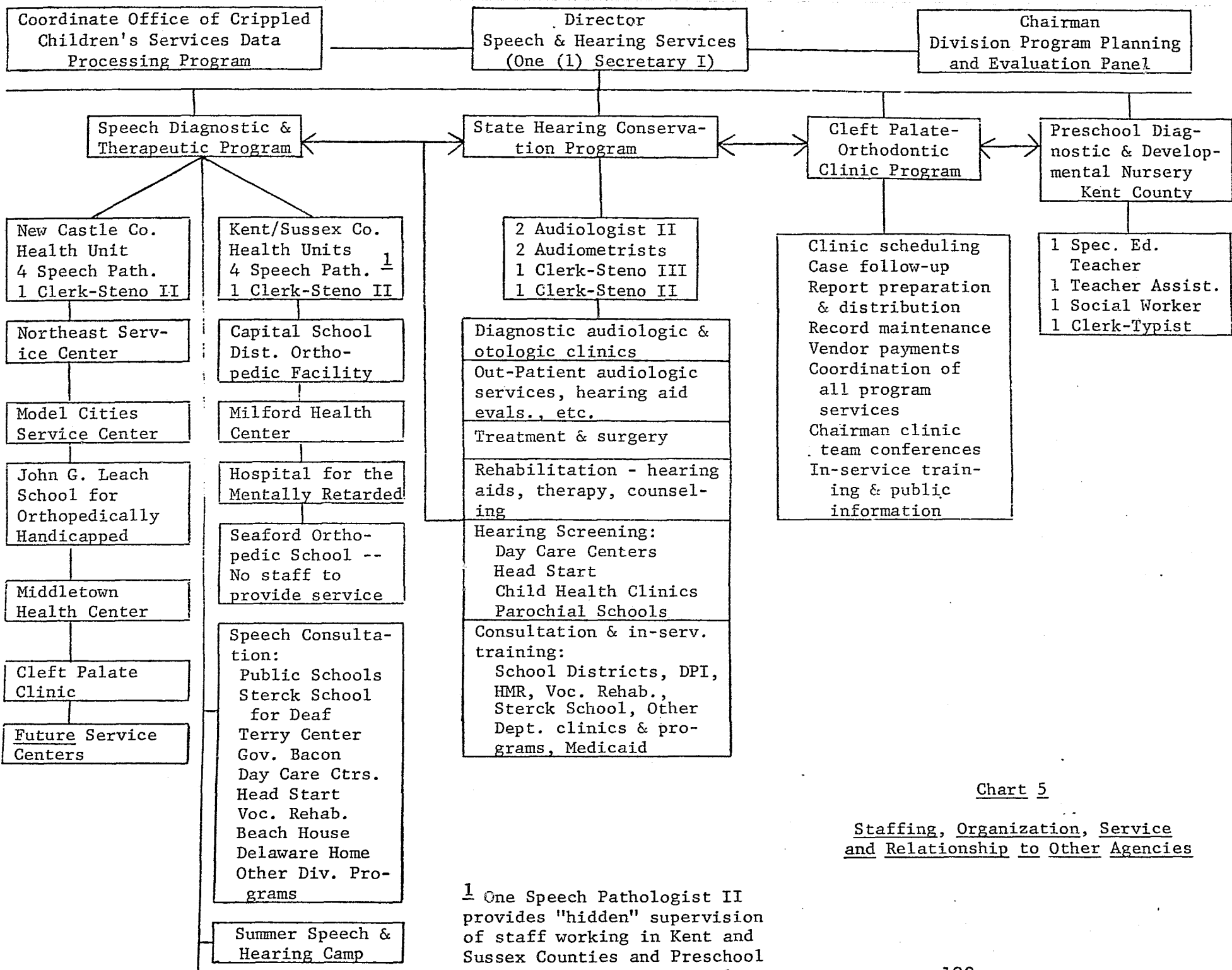


Chart 5

Staffing, Organization, Service and Relationship to Other Agencies

VENEREAL DISEASE PROGRAM

CLIENT GROUP:

Eligibility Criteria - None
Capacity - Open
Present Population - 0-20 - 267,372

PROGRAM OBJECTIVES:

To reduce the prevalence of venereal disease in Delaware.

SOURCE OF CLIENT:

Public Sector - Children accepted from all sources.

STAFFING AND ORGANIZATION:

Staff

- A. Coordinator - Federal
- B. Investigators (2)
 - Public Health Advisor - Federal
 - Health Program Representative - State
 - Performs VD epidemiology, conducts screening and educational programs, etc.
- C. Secretaries - (2)
 - Tabulate VD data and morbidity data; and maintains VD Central Register.

COST:

Federal \$78,781/yr. Federal project grant 03-H-000-038-05-1
State \$58,006/yr.

NATURE OF TREATMENT:

Treatment and prophylactic treatment for venereal disease.

CLIENT EGRESS:

Upon completion of treatment patients' name is placed in the VD Central Register, also patient is followed periodically for test of cure.

IMMUNIZATION PROGRAM

CLIENT GROUP

Eligibility criteria: None.
Capacity: Open.
Present population: Under 5 years - 51,817
5-12 years - 73,641
New: 800 new births/month.

PROGRAM OBJECTIVE: Eradication of immunizable childhood diseases through the full immunization of 95% of all children in Delaware by two years of age.

SOURCE OF CLIENT

Public Sector - Children accepted from all sources.

STAFFING AND ORGANIZATION

Program itself does not provide services.

Staff

1. Coordinator - Federal.
2. Health Program Representatives - State: Conducts immunization surveys and immunization programs.
3. Secretaries - Tabulate immunization data and morbidity data; and control vaccine distribution system.

COST

Federal	\$45,000/yr.	Federal project grant II 03-H-000,081-03-0.
State	\$35,000/yr.	

NATURE OF TREATMENT

None. Immunizations only.

CLIENT EGRESS

Ideally, children leave program upon completion of basic series of immunizations, plus boosters at age of school entry.

I. PROGRAM TITLE:

Dental Health Program

II. CLIENT GROUP:

Eligibility Criteria -- The present clinic capacity is approximately 8,000 children per year.

Priority is given to the approximately 24,000 AFDC Children and the 1,400 Foster Children. Any clinic time remaining is utilized by other indigent children.

III. PROGRAM OBJECTIVE:

- A. Relief of pain and infection.
- B. Prevention
- C. Restorative dentistry.

IV. SOURCE OF CLIENT:

School children. (See Client Group above.)

V. STAFFING AND ORGANIZATION:

A. Georgetown Dental Clinic		
Dentist I (1)		\$12,096
Dental Assistant I (1)		6,046
B. Milford Dental Clinic		
Dentist I (1)		\$12,726
Dental Assistant I (1)		6,046
C. Dover Dental Clinic		
Dentist I (2)		\$12,726
Dental Assistant I (2)		11,466
		5,465
Dental Assistant III (1)		4,963
Dental Hygienist (1)		6,345
		8,501
D. Middletown Dental Clinic		
Dentist I (1)		\$12,096
Dental Assistant I (2)		5,742
		4,963
E. Belvedere Dental Trailer		
Dentist I (1)		\$12,096
Dental Assistant I (1)		4,963
F. Model Cities Dental Clinic		
Dentist I (1)		\$12,726
Dental Assistant I (1)		4,963
G. Delawarr State Service Center Dental Clinic		
Dentist I (1)		\$13,356
Dental Assistant I (1)		5,465
TOTAL SALARIES		\$262,750

VI. COSTS:

Cost of this specific program:

Salaries	\$262,750
Disposable Supplies	25,000 (approximate)
TOTAL COST	\$287,750

VII. NATURE OF TREATMENT:

Complete pedodontic are.

VIII. CLIENT EGRESS:

Child is discharged from the clinic upon completion of his dental care.

nar

Program Title: Delaware Family Planning Project # 03-H-000,031-06-0

Client Group:

Eligibility: No limitations of geographical location in Delaware, income, or sex. Age eligibility is limited by state law with a requirement of signed parental consent for patients under 18.

	<u>Target Population</u>	<u>Patients Served 1973</u>	<u>Patients Goal 1974</u>
New Castle County	63,373	6,866	10,625
Kent County	13,385	1,497	2,000
Sussex County	11,903	860	1,200

Program Objective: Comprehensive voluntary family planning services and counselling available to all citizens of Delaware. Medical services will be provided within the regulations of HEW and DPH.

Source of Client: (taken from CY 1972 data)

	<u>Age</u>	<u>New Patients</u>
	under 18	742
	18-19	1,753
	20-24	1,541
	25-29	325
	30-34	117
	35 & above	94
Color/Ethnic -	White	3,048
	Black	1,432
	American Indian	2
	Other (Latin American)	81
	Unknown	9
<u>Highest Grade of School Completed -</u>		
	None	3
	Elementary (1-8)	305
	High School	2,953
	College	1,282
	Unknown	29
Referral to clinic-	Outreach worker	192
	Other FP clinics	636
	Hospital or other	
	Health agency	488
	Private MD or RN	126
	Welfare Agency	28
	Another clinic patient	2,719
	TV, Radio, Newspaper	117
	Other	230
	Unknown	36

Staffing and Organization

- I. Department of Health and Social Services
Division of Public Health (Grantee Agency)
- II. Delaware League for Planned Parenthood (Contract Agency)
- III. Family Planning Joint Committee consisting of:
 - 3 staff of DPH - Deputy Director - DPH
Bureau Chief - Personal Services
Director of Public Health Nurses
 - 3 board members of Delaware League for Planned Parenthood
 - 2 consumers
 - staff consultants: Executive Director - DIPP
Family Planning Project Coordinator
- IV. Family Planning Project Coordinator
- V. Division of Public Health staff

- * (21) FP Nursing Supervisor - Kent & Sussex Counties
- (20) Administrative Service Officer I - Dover based

Kent County (under Nursing Supervisor - Kent Co. Health Unit)

- (20) RN II - acts as FP head nurse
- (19) RN I - FP staff nurse
- (21) PHN I - (open)
- (7) Clerk typist II - FP clerk
- (7) PSA I - half time - outreach worker

Sussex County (under Nursing Supervisor - Sussex Co. Health Unit)

- (20) RN II - acts as FP head nurse
- (19) 3 RN I - FP staff nurses
- (7) Clerk typist II - FP clerk
- (7) PSA I - Outreach worker

Middletown Sub Health Unit (2 1/3-20% time) (under Nursing Supervisor of NCC)

- (21) PHN II Asst. Nursing Supervisor
- (20) 2 RNs
- (12) 1 LPN
- (8) Receptionist
- (9) Clerk III
- (.5) Custodian

New Castle County

- (20) 2 PHN Is - FP staff nurses (open)
- (7) 2 Clerk typist II - FP clerks

- * Merit ratings

VI. Delaware League for Planned Parenthood Staff

Full Time

Project Coordinator (to be transferred to DPH)
 Physician - full time clinician
 3 RNs
 4 LPNs
 1 Social worker
 2 special service coordinators - mobile clinics, outreach workers
 2 clinic receptionists
 2 neighborhood aides
 2 clerk typists
 1 switchboard operator
 1 laboratory worker
 1 Information and Education staff - educational resource

Part Time

3 RNs
 3 Clinic receptionists
 2 accounting clerks

Cost:

<u>Budget Items:</u>	Total Amount Required	State and Local Funds	Requested from HSMHA
Personal Services	\$171,757	\$ 15,124	\$156,633
Patient Care	324,749	131,382	193,367
Equipment	1,000	1,000	0
Construction	0	0	0
Other	11,364	11,364	0
Trainee Costs	2,500	2,500	0
Total Direct Costs	511,370	161,370	350,000

Source of Funds:

\$350,000	HSMHA
116,000	State funds
30,646	Estimated Title 19 Income
14,724	Estimated Income from fees
<hr/>	
\$511,370	Total applicant funds

* Based on the CY 1972 age statistics for new patients, 54% of patients are under age 20, representing \$276,140.

Nature of Treatment: Direct Services

Contraceptive services
contraceptive counselling
pelvic exam
pap smear
urinalysis
breast examination
hematocrit
VD testing
blood pressure
weight check
pregnancy testing
infertility counselling
sterilization counselling
referral to other health and social agencies
treatment for vaginal infections

Patient Egress:

Patient goes to "inactive" status after 15 months without clinic contact. She may temporarily leave the program for a pregnancy or permanently, following a sterilization procedure.

Patients are referred for medical followup as needed to her private physician or an out patient facility.

Additional Information:

Each year there is a 6% portion of the total MCH budget allotted to additional family planning costs.

TITLE XIX

1. Program Title

Title XIX Screening Program

2. Client Group

Fiscal year 1973 - All children 0-6 years of age on Medicaid program (about 18,000)

Fiscal year 1974 - All children 0-21 years of age on Medicaid program, with emphasis on 0-12 years of age (24,000+)

3. Program Objectives

To provide screening services for the eligible group; to include physical assessment, vision and hearing screening, certain lab studies, review and updating of immunizations, and referral to appropriate source for follow-up of problems uncovered.

Treatment of those conditions which can be treated with available facilities.

4. Sources of Clients

Schools, existing clinics, parents, public health nurses

5. Staffing

- a) Sites:
- Sussex County Health Unit
South Bedford Street Extended
Georgetown, Delaware
 - Kent County Health Unit
Jesse S. Cooper Memorial Building
Capital Square
Dover, Delaware
 - Middletown Health Unit
214 North Broad Street
Middletown, Delaware
 - Northeast State Service Center
2600 Northeast Boulevard
Wilmington, Delaware
 - Model Cities State Service Center
10th and Monroe Streets
Wilmington, Delaware
 - West End Neighborhood House
710 Lincoln Street
Wilmington, Delaware

Sites (Continued)

Dunleith State Service Center
Talladega and Hastie Drives
Wilmington, Delaware

Belvedere State Service Center
1306 Newport Gap Pike
Wilmington, Delaware

Delaware Adolescent Program, Inc.
14th and Market Streets
Wilmington, Delaware

Delcastle Technical High School (dental only)
1417 Newport Road
Wilmington, Delaware

b) Staff

Administrative Assistant I
Clerk Typist II (2)
Clerk Typist III
Clerk Stenographer II
Clerk Stenographer III (4)
Secretary I
Neighborhood Worker I
Accounting Clerk II
Attendant
Licensed Practical Nurse I (2)
Licensed Practical Nurse II
Dentist (7)
Dental Assistant I (5)
Dental Assistant III
Audiometrist
Health Program Representative I (2)
Public Health Nurse I (2)
Public Health Nurse II (2)
Public Health Physician I (2)
Public Health Physician II (1 full-time,
2 ½-time, 1 ¼-time)
Physician's Assistant I (2)
Physician's Assistant II
Nurse II (4)
Audiologist I
Health Program Representative Trainee
Public Health Nurse Consultant
Laboratory Technician II (2)

6. Cost of Program

Fiscal year 1973 - \$362,000 including dental

7. Nature of Treatment

Medical and dental care which can be provided within the limitation of facilities

8. Client Egress

A patient would be discharged upon attaining the age of 21, going off Medicaid, or completion of treatment. They can return upon need of treatment if still age and program eligible. After initial screening, they will be recalled periodically for re-screening.

Program Title: Psychological Services
Mental Retardation Program

Client Group:

Eligibility criteria - Children from birth to twenty-one but
generally limited by policy to children
from birth to six years of age.

Capacity - 300 cases per year

Present Population - Whole state tentatively

How many new per month - approximately 25

Program Objective: To have psychological services available in health
centers to deal with problems of delay in development
and behavioral difficulties.

Source of Client: New Castle County which includes City of Wilmington...
50%

Kent County...30% Sussex County...20%

Private Physicians	1%
Public Health (Nurses, Well Baby, Well Child Clinics)	20%
Crippled Children's Clinics - (includes Speech, Hearing, CP-OC, PT-OT, MSS)	29%
Mental Health	1%
Hospitals	8%
Division of Social Services (Welfare)	9%
Schools	7%
Other Community Agencies	9%
Others not specified above... Parents	16%
	100%

Staffing and Organization:

	<u>Classification</u>	<u>Pay Grade</u>
Malvin Gelof, Ph.D., Director Psychological Services	Clinical Psychologist III	top of 26
Martha Gillespie	Clerk-Steno III	top of 11
Barbara D. Widder, M.A.	Contract Psychologist	
Grace Brandon, M. Ed.	Contract Psychologist	
Esther Ridley	Contract Clerk-Steno	

<u>Functions - Employee</u>	<u>Functions</u>
Malvin Gelof, Ph.D.	Administers program
Martha Gillespie	Assumes responsibility of all secretarial duties for service
Barbara D. Widder, M.A.	Evaluations
Grace Brandon, M.Ed.	Evaluations
Esther Ridley	Part-time (1½ days per week) Clerk-Steno

Relationship to other programs/agencies: Responsible to Chief,
Bureau of Personal Health Services,
Division of Public Health...
Dr. Nicholas P. Haritos

<u>Cost: (Psychological Services)</u>	<u>Funds</u>
Malvin Gelof, Ph.D.	\$22,000. ½ Federal MCH; ½ State
Martha Gillespie	7,245. State MCH
Barbara D. Widder, M.A.	3,500. Federal MCH
Grace Brandon, M.Ed.	3,000. Federal Developmental Disabilities Grant No. 5G73-45 - Psychological Evaluations
Esther Ridley	1,500. Federal Developmental Disabilities Grant No. 5G73-45 - Psychological Evaluations
TOTAL	\$37,245.

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Esther Ridley	1,500. Federal Developmental Disabilities Grant No. 5G73-45 - Psychological Evaluations
TOTAL	\$37,245.

Nature of Treatment:

Psychological evaluation, family counseling,
referrals and recommendations to other disciplines.

Client Egress:

Usually after evaluation unless counseling and/or reevaluation
is needed.

END