

SENATE FINANCE COMMITTEE  
MINUTES OF MEETING  
FEBRUARY 22, 1977

The meeting was called to order at 8:00 A.M.

Senator Floyd R. Lamb was in the chair.

PRESENT: Senator Floyd R. Lamb, Chairman  
Senator James I. Gibson, Vice-Chairman  
Senator Eugene V. Echols  
Senator Norman D. Glaser  
Senator Norman Ty Hilbrecht  
Senator Thomas R. C. Wilson  
Senator C. Clifton Young

OTHERS: Ronald W. Sparks, Chief Deputy, Fiscal Analysis  
Howard Barrett, Budget Division  
Bob Guernsey, Budget  
Roger Trounday, Director, Human Resources  
Dr. Charles Dickson, Administrator Mental Hygiene & Retardation  
Thomas Piepmeyer, Director, Mental Health Institute  
Robert Keiffer, Reno Mental Health Center  
Dr. Jack Mayville, Program Dir. Children's Behavioral Services  
Joe Burnett, Children's Behavioral Services, Las Vegas  
Sally Alderson Green, County Assoc. For Retarded Children, Elko  
Susan Haase, Exec. Director, N.A.R.C.  
Dr. Lynn Rugemar, Coordinator of Services, Mental Retardation  
Marilyn Orr, Washoe Association for the Retarded  
Frank Gross, Nevada Association for the Handicapped Children  
Dr. William Edwards, Governor's Developmental Disability Council  
Dr. Larry Miller, Las Vegas Mental Health Center  
Dr. David Luke, Henderson Mental Health Center  
Jack Middleton, Administrator for Mental Retardation  
Dr. Barney Salzberg, Director Mental Retardation, Las Vegas

PURCHASE OF SOCIAL SERVICES: This budget was covered by Mr. Trounday. It is administered by the Welfare Division, reflects the allocation of federal Title XX Social Services monies among the various programs utilizing this source of funds. Nevada's allotment for the federal fiscal year beginning October 1, 1976, is \$6.775 million. Recent information indicates that the total award for the federal fiscal year, beginning October 1, 1977, will be \$7 million. This money comes to the state for services and federal law requires that \$3.4 million of that must go to Welfare recipients. The balance is given to "Income Eligibles"; these are people who are not eligible for welfare grants, but are just above that cut-off point.

The expenditure categories shown are of two types:

1. Purchase of Service Agreements - these are arrangements made by the Contract Services staff in Welfare with providers of service at the local level. The nonfederal share (10% for family planning, 25% for other services) of the cost of these activities is made available either by the provider of service or by another entity. These matching funds are designated as "third party match" in the revenue section.
2. Transfers to State Budgets - The amounts shown reflect the budgeted levels of Title XX funding for those services to be delivered by state agencies. State funds to match these federal monies are recommended in the appropriate budgets.

Mr. Trounday answered questions from the committee relative to the funding in this program and the distribution of funds to other divisions in the department.

U.S. INDIAN SERVICE: The U.S. Bureau of Indian Affairs contracts with the state's Welfare Division for the provision of services for Indian children needing care outside their homes. To be eligible, a child must have reservation status and have at least 25% Indian Blood. This is an open-ended account under which the State of Nevada is reimbursed 100% by the federal government for program expenditures. There were no questions on this budget and Mr. Trounday introduced Dr. Dickson Administrator for Mental Hygiene.

DIVISION OF MENTAL HYGIENE-MENTAL RETARDATION: Dr. Dickson said until the beginning of this decade this division was very small and consisted of a few people in Las Vegas giving outpatient service and three or four people in Reno seeing clients on an outpatient basis; he and a couple of other clinicians travelled around rural Nevada seeing outpatients and there was an old State Hospital.

There were only minimal services for the citizens of Nevada who were retarded and no services for children. With the help of the Governor and the Legislature, Nevada has now developed model programs for children and the Children's Behavioral Service in Las Vegas is an example.

Comprehensive and progressive programs for retarded persons and the Desert Developmental Center in Las Vegas are models they hope to repeat in the north.

The Institute is now a treatment center. In the budget to be presented they will be asking for resources to continue the trend toward community mental health services and community mental retardation services.

The Legislature is asked to authorize a new facility to provide improved living conditions and services for the mentally retarded in Northern Nevada. This facility will be similar to the Desert Developmental Center now under construction in Las Vegas. The proposed Sierra Developmental Center for northern Nevada will be located on the grounds of the Nevada Mental Health Institute.

The legislature is also asked to approve a reorganization of the division to insure a high quality of all services with greater efficiency of manpower. The approach will result in much more emphasis on training of mental health technicians. This reorganization will place mental health facilities in Northern and Southern Nevada under deputy administrators.

The budget for the central administrative staff is to provide for overall administration and coordination of mental health and mental retardation services throughout the state. This includes program planning and evaluation, community education and consultation.

Two new positions are recommended for the central division office. The new Psychologist V is recommended to function as a research coordinator, with duties including collection and dissemination of recent research findings, providing expertise in research design and analysis, and assisting in the development of research projects. The position will also evaluate current services and recommend changes where necessary.

The senior legal stenographer will provide clerical support to the Deputy Attorney General assigned full-time to the division.

Dr. Dickson answered questions relative to the new positions and explained that the out-of-state travel involved the recruitment for psychiatrists and trips to the San Francisco office that generally concern grants. Two trips to Washington each year generally concern funding.

Other phases of the budget were discussed; the need for data processing in the foreseeable future; the training programs for Mental Health technicians and the professional staff; the need of someone experienced to write grants to Fleischmann and other organizations.

There were no more questions and the Committee moved on to the next budget. Mr. Peipmeyer spoke on the Nevada Mental Health Institute.

NEVADA MENTAL HEALTH INSTITUTE: This Institute is an accredited institution serving the mentally ill of the state. For Fiscal year '75-'76, the Institute received 922 admissions to its program. The services are divided into three programs: Acute General Neuropsychiatric, Geriatric, and Alcohol and Substance Abuse. Approximately 63% of the admissions are voluntary with the remaining 37% being emergency or court committed clients. The Institute has an active inpatient caseload of 217 clients. The client population on January 1, 1975 was 330.

The Institute has made steady progress to change from a long-term custodial care program to a more short-term active community-oriented program. In fiscal year '75-'76 the median length of stay was 14 days. To insure that the clinical activities of the Institute are of the highest nature possible, they have adopted the standards of the Joint Commission on Accreditation of Hospitals. The psychiatric portion of the Institute has maintained accreditation status since 1967 and will strive for continued accreditation in an effort to assure the community that acceptable standards of clinical practice are being maintained. The budget recommends the transfer of control of the Mental Retardation ward to the new Sierra Developmental Center. This will allow the staff to concentrate exclusively on mental health problems. The salaries and the restructuring of existing staff is recommended in order to provide sufficient round-the-clock coverage on the wards. The deletion of the one-half time psychiatrist is a position that was kept vacant in order to pay for officer-of-the-day overtime medical coverage.

The remaining positions support not only the inpatient programs, but the day care program and the outpatient program.

The pharmacist is recommended to provide seven-day a week pharmacy services.

Dr. Dickson said the ratio of patients was on a 1 to 1 basis. This ratio is high because they have to have services around the clock. There are about 220 people there at night, bed count, and there are an additional 100 there in the daytime for day care services, followup treatments and the like. He said there was no way that the one psychologist that they had could provide the evaluations that are needed in a years time, in addition to treatment and training.

Mr. Peipmeyer said that one position covering 24 hours a day, seven days a week requires five employees to cover. Also some of the services are being provided to other agencies, as dietary services, so the help is not just supporting the institute population, but the other populations on that site through support services.

The problems at the hospital, staff, treatment and delivery of services were discussed and questions by the committee were answered.

Senator Gibson questioned the overhead costs.

Mr. Barrett explained how these costs were arrived at. In discussing the medical staff Mr. Peipmeyer explained that there are two general physicians at the Institute and the rest are psychiatrists. A psychiatrist has to be present to admit a patient.

RENO MENTAL HEALTH CENTER: This center provides professional services to the people of Washoe County. Programs include non-residential adult evaluation and treatment; non-residential services to adolescents and their families, including a day treatment program; a 24-hour residential treatment facility for adolescent boys funded by Title XX and a grant from the Max C. Fleischmann Foundation; and a program for runaway youth in Washoe County which is funded by a small federal grant.

Indirect services offered are community mental health consultation, education, training and research.

The Children's Behavioral Service for Washoe County, authorized by the 1975 Legislature, is under the general direction of the Center, but is a separate agency and, therefore, is not involved in this budget. The active caseload at the end of the 1975-76 fiscal year was 735, including 130 between the ages of 13 and 18. New applications for service averaged 92 per month, and services were provided to 2,075 different clients.

The increase in other building rent is due to the expiration of the lease for the adult unit housed at Mill Street. It is planned to move the adult unit to a more appropriate location for outpatient treatment.

Mr. Keiffer, director of this program spoke on this budget. He answered questions from the Committee on the program, listed the breakdown by ages of the people in the program and the length of time they generally stay in the center. Senator Gibson was interested in how a determination was made that a person who had completed his treatment was ready for discharge.

Dr. Dickson said there were multiple measures, one is that he seems able to engage in activities like work, or he seems reasonably happy, or he seems to talk coherently in a reasonable kind of way. He seems motivated; many people who come are very depressed and they literally will not do anything. Sometimes they have to take into consideration the receptivity of the community. Have the differences between the family and the person been worked out. Sometimes there is as much wrong within the family as there is the person; sometimes it is necessary to get some support at home. These are the types of things upon which a judgment is made. He said these presented difficult problems and that is the balance line between releasing people too soon and being overcrowded.

CHILDREN'S BEHAVIORAL SERVICES, WASHOE COUNTY: This is a community-based facility providing mental health services for children in Washoe County. During its initial year of operation, the agency has served over 150 families with treatment alternatives ranging from individual family therapy to family problem-solving groups for parents to social skills acquisition groups of children unable to successfully participate in their present environment.

Based on studies, it has been estimated that there are 3,700 children in Washoe County who are in need of mental health services. Dr. Mayville described the programs in which they treated the children either as patients or outpatients. Those who were seriously disturbed who could not adjust in the classroom, the therapy and the evaluation. He discussed all these services and said they hoped to have a similar kind of workload as in Las Vegas. They were requesting 26 new positions to make this program comparable in service to the one in Las Vegas. This program would serve children up to age 12.

CHILDREN'S BEHAVIORAL SERVICES, LAS VEGAS: This is a program that has been in existence in Las Vegas for children. The agency has an active caseload of 366 clients and served 625 new admissions during '75-'76. Services offered include residential, counseling and assessment, and a preschool program.

There are three residential units now and they are requesting new positions to open up the fourth residential unit. These units are staffed by professionally trained couples who live with four emotionally disturbed children in each unit. Each couple has a one-half time assistant, typically a graduate student from the University of Nevada Las Vegas, who provides relief time and assists the couple in making home visits and working with the child's parents.

The programs were discussed with Joe Burnett, Director of the program. They discussed the recruitment for the difficult-to-fill positions and Mr. Burnett said they try to help the State Personnel in this problem. In answer to a question by Senator Lamb, Mr. Burnett said the salaries paid were somewhat lower than other professional classifications; Dr. Dickson said they were a little lower than other states in the top end of the scale but the entrance level for professional was good. In essence they have trouble keeping people with experience.

COMMUNITY TRAINING CENTER FUND: The purpose of this program is to aid mentally or functionally retarded persons who are not served by existing programs. This is done through a program of subsidizing staffing for qualifying community training centers which provide help to such persons

Each center in the state, providing they are certified, may currently receive up to \$400 per quarter per enrollee. There are currently five centers with sufficient enrollment to receive up to the maximum payment per enrollee (over ten enrollees.)

Susan Haase, Executive Director of N.A.R.C. asked Sally Alderson Green to speak regarding the problems that the rural programs are having.

Sally Alderson Green, representing the Elko County Association for Retarded Children spoke from a prepared speech, copy attached.

Dr. Lynn Rugemar of the staff at UNLV spoke next. She is the coordinator for the Services in Mental Retardation, and also serves on the Board of Directors for Opportunity Village and as such she was present to support and request that the funding be raised from \$400 to \$600. She read from a statement: "We in Clark County have a tremendous opportunity to serve the adult mentally retarded. Currently there are 120 clients at Opportunity Village. This is an all time high. We feel, however, that we are barely scratching the surface. In a rapidly growing area there are certainly several thousand retarded persons whom we are not serving. In addition there are many more individuals leaving the public school system who desperately need further training."

"As the only supplier of varied services to the adult retarded, our responsibilities are great. This past year was a good one for us. We have refined our organization, improved our management and upgraded our services. Financially for the first time we earned through sales to the public more than half of our income. We are aggressively moving ahead in all areas but not without concerns which are serious."

"In the Northern area there are pluses and minuses. We finance our operation largely from sales to the public. Consequently we rely heavily on donations of things to sell in our service stores. At this point the competition is keen. In addition to the Salvation Army and several agencies, Goodwill Industries will soon be going to the same sources for donations. Moreover, the opening of Desert Developmental Center, which we certainly welcome, will pose two additional challenges. The principal one is that we will lose professional members to higher paying state jobs. Last Friday, our evaluator who has been with us for five years joined a state agency at a substantial increase in salary."

"The other Desert Developmental Center - related challenge is that we expect 15 to 20 additional clients who will come to us as they are moved south from Sparks. We must and will find a way to provide quality service and sheltered workshop employment for those people who are coming home."

"However, we do need your help in this. Our task is that of providing services, and as you know, we contract with various state agencies to provide care for the retarded. While the state has the final obligation, we gladly accept the contracts and undertake to raise the necessary funds to provide for those of our citizens who are special. But we need your help to do the job adequately, not ideally, but just adequately."

"As you would expect, our list of needs is infinite but above all we need an increased allotment under the Community Training Center program. While we have been grateful for the per capita increase to \$400 per quarter, the last quarter of 1976, CTC grant left us with a deficit of \$45,000 in salary costs. The proposed 5.5% cost of living increase will not effectively alleviate this deficit. To do what the people of the State expect us to do for our citizens we need a substantial increase as proposed by the Rand Report. Moreover, we believe that the variable funding bill proposed is a must if we are to provide a wide range of quality services."

"I think it can be summed up by simply saying that the mentally retarded have the right to be treated as full fledged citizens. They have the right to be employed and to receive the necessary training so that they can contribute and bring back some of our tight tax dollars. Thank you."

Senator Lamb asked if there was any conflict on this. Are there any other areas that take care of retarded people.

Dr. Rugemar said there were quite a few except that most of them do not take care of the retarded adult. So the retarded individual who leaves school at the age of 18 or 21 becomes lost in the community. A.C.R. for the southern part is the only agency currently involved in job training.

Senator Wilson asked what the Rand recommendations were, generally.

Dr. Rugemar said they recommended that the CTC support be doubled. She gave the Committee a petition from the Hawthorne CTC Group that they had requested be presented at this hearing.

Susan Haase spoke next from a prepared statement, copy attached.

Marilyn Orr, a board member for the Washoe Association for the Retarded, read from a prepared statement, copy attached.

Frank Gross, spoke next. He spoke of his experience in this field particularly with relation to children. Years ago the Community Training Center started the first pre-school in Northern Nevada for these children. Since that time the program has been incorporated into the Washoe County School District and is now a very successful program. He said that most of the children the Association serves are in public schools. When they graduate from school if the vehicle is not present to help them, through CTC, their future will be very clouded and very insecure. They look to CTC for help; for those individuals to pass on into productive employment. There is no other agency at this time that is equipped to handle these individuals. He asked the Committee to buy in at the very highest dollar they could afford.

Dr. Edwards from the State Health Department said he was appearing for the Governor's Developmental Disability Council. He wanted to convey the support of the Council for the effort of the Division of Mental Health and Mental Retardation to upgrade their services and provide more community training centers.

LAS VEGAS MENTAL HEALTH CENTER: This center serves Clark County with a broad range of mental health treatment programs. It provides the total complement of mental health services for Las Vegas, in patient and out patient, day care, emergency service and consultation and educational services. Longterm patients from Clark County are transferred to the Nevada Mental Health Institute for extended care.

The Center is also operating a satellite program in the Westside area of Las Vegas. This program was started due to the problem of accessibility encountered by the residents of the Westside area in acquiring services from the Mental Health Center. The Las Vegas Mental Health Center has an active caseload of 1,040 clients and served 2,213 new admissions during 1975-76.

SENATE FINANCE COMMITTEE  
MINUTES OF MEETING  
FEBRUARY 22, 1977  
PAGE SEVEN

Dr. Miller explained a change in the federal law that amended the requirements of a community mental health center. He described the updated options based on reduced funding. These are covered in detail on page 357 of the Executive Budget.

He answered questions from the floor relative to the choices of continuing federal funding as described in the three options listed in the budget.

HENDERSON MENTAL HEALTH CENTER: This center provides mental health services to Henderson and eastern Las Vegas. During fiscal year 1975-'76, the center provided outpatient treatment to 593 persons. Another 210 were maintained in followup status and an estimated 110 persons received emergency services. Client services have increased by an average of 163 persons per year. 89% of the clients have at least one high risk characteristic.

Treatment is provided through neighborhood offices in Henderson and North Las Vegas. Each office is open for service for 54 hours per week. Part-time satellite services are provided in the unincorporated areas of the county and in Boulder City; 10% of the services are provided on an itinerant basis.

Dr. David Luke detailed the services of the center and listed the positions requested, and the needs, in order to carry forward a more comprehensive program.

DESERT DEVELOPMENTAL CENTER: These new facilities are scheduled for completion during April, 1977, and this budget request reflects the resources necessary to staff, equip, and maintain the facility. Funding to hire recommended staff and open the facility when the construction is completed in April, is requested in a separate supplemental appropriation. When completed the center will be a 56-bed facility operating residential treatment and training programs. In addition the staff will serve an additional 225 to 250 persons a month.

It is recommended that control and operation of the Southern Nevada Mental Retardation Center be unified with the Desert Developmental Center. The new center will provide the additional major programs. Dr. Dickson, Dr. Barney Salzberg and Jack Middleton spoke of the consolidation of the program in Las Vegas which will provide a better patient-staff ratio. He said this was designed to meet the pattern of staffing ratio. He said this was designed to meet the pattern of staffing to fit accreditation standards.

Senator Young asked Dr. Dickson if he could trace the amounts of money that have gone into the Human Resource field since 1970 and project what he saw in the future.

Mr. Trounday said he would get the breakdowns from the other division so it will be a combined figure.

Senator Lamb commented on the number of programs that were in the budget and asked if there were any that they could be combined so the top level administration costs could be cut.

Dr. Dickson said there were some that could be combined without adding costs as the programs grow and he wanted to talk about that during the hearings. Next year when they come to the Legislature, instead of presenting so many budgets, they could present one budget for Southern Nevada Mental Health, one for mental retardation, one for the north in mental health and one for mental retardation. The programs are growing and they had not cut any this year but they are keeping them from growing

SENATE FINANCE COMMITTEE  
MINUTES OF MEETING  
FEBRUARY 22, 1977  
PAGE EIGHT


Senator Hilbrecht referred to the discussion earlier when the various methods for funding from the federal government were discussed. (Page 357, Executive Budget.) He asked if they could determine the number of non-health care people who might be eliminated from that budget if Senator Gibson's suggestion that the state simply abandon the federal match and took the program on themselves was adopted.

This approach was discussed and Dr. Dickson said when a state was in a growing situation, population-wise, he believed the burden of the costs should be shared, not having the state carry it all alone.

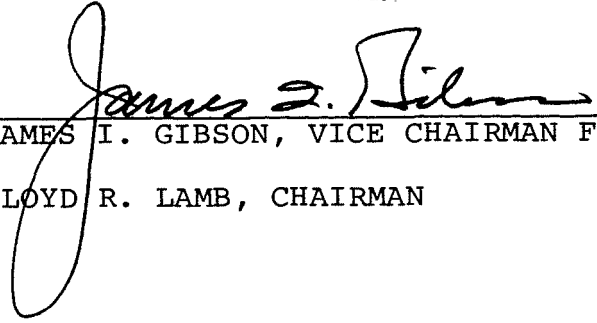
Senator Lamb asked Mr. Trounday to be back in the morning to discuss the Welfare budgets. The mental health programs would continue at 3:30 P.M.

The meeting adjourned at 10:30 A.M.

RESPECTFULLY SUBMITTED:

  
MURIEL P. MOONEY, SECRETARY

APPROVED:

  
JAMES I. GIBSON, VICE CHAIRMAN FOR  
FLOYD R. LAMB, CHAIRMAN



2/22/77

(Please Print)

Name	Organization	Address	Phone
ROBERT KEIFFER	RENO MENTAL HEALTH CTR	4600 Kutzke Lane Reno 89502	784-6276
Jack Middleton	Div. M.H. & M.R	4600 Kutzke Lane 6161 W. Charleston Blvd	784-4071
Larry Miller	Las Vegas Mental Health Ctr	Las Vegas	870-7211
Joe Burnett	Children Beh Dev - LV	6171 W Charleston Blvd State Health Div.	870-9141
Wm Edwards	Gov's Developmental Disabil. Council	DDC Intern 1171 Rocky Mtn. Reno	885-4800
Barbara Guzman	Dev. Disabil. Council	1171 Rocky Mtn. Reno	885-4720
Bob Hiller	Lakes Crossing Ctr	500 Galletti Way Reno	784-4701
David Luke	Henderson M.H. Center	1660 Mead Drive Henderson	7564-2559
Jack Mayville	C.B.S. Washoe Co.	4600 Kutzke	784-6464
Dolly A. Green	Elko Co ARC - Volunteer	P.O. Box 1708 Elko	738-5341
Charles Hinton	Hawthorne new shelter workshop	Box 432	
Bernard Salzberg	Desert Dev. Center	801 Shadow Ln, LV.	385-0446
Tom Piepmeyer	NU. MENTAL HEALTH INST.	480 Galletti, Sparks	322-6861

February 22, 1977

My name is Sally Alderson Green and I represent the Elko County Association for Retarded Children, Inc. in Elko, Nevada.

Elko has two major Community Training Center programs at the present time: the Elko Development School for pre-school and school age children, and the Vocational Activity Center which is presently located in the basement of our Elko Thrift and Variety Store where we sell used items along with items made by our students. We operate according to Community Training Centers' regulations -- with a student/teacher ratio of five to one (5/1) and year around.

We have only two sure sources of funding for our operations which are growing very rapidly. One, the Community Training Center minimum funding of \$16,000 which is for salaries only, and our contract with the Elko County School District to take care of the school age mentally retarded which amounts to \$16,000. A group of friends of the Association sponsor an annual dinner-dance, the Fiesta Mexicana, for our benefit. However, in four years the profits for the ECARC has dwindled from \$3,000 to less than \$1,000 last year. There are many reasons for this decrease, including the economic problems of Elko area residents and many other activities conflicting with the date of the Fiesta. Our two (2) programs are very costly when you stop to think of just heat, utilities, maintenance and rent, let alone qualified personnel.

I would like to say that there is at least one person every week coming to my own front door for donations (in the form of raffles, or other gimmickry) for different organizations in Elko. We are a very youth-oriented area and therefore support all of these different groups financially. The Elko citizens and business community are constantly hard hit for donations. We have reached a point where the people just can't afford to continue donating monies, even though they wholeheartedly support our program.

We must have qualified personnel to teach these special students and also we are required to have a Nevada certified Special Education teacher because of our contract with the School District. However, the School District is our greatest competition - good pay, tenure, excellent insurance, and retirement is very tempting when the Elko County Association for Retarded Children can only afford to pay a minimum wage with no benefits (I can't really call NIC and Social Security benefits). So, what seems to happen to us is that we get a highly motivated young teacher, fresh out of college, with no experience, who we can afford. Then, the teacher gets experience with our programs and because we cannot give him the benefits and the competitive salaries, his own realities and needs overpower his dedication and they leave us to teach at a more financially stable institution.

We desperately need a commitment on the \$600 per client or \$18,000 minimum from this legislature if we are to continue to serve the students in the best ways possible. 54% just can't do the job!

All of Nevada has made giant strides in trying to catch up with neighboring States in the training and education of the retarded. We can't stop mid-stream ---- we have a responsibility to these students. The \$18,000 Center minimum would almost balance our budget -- and might possibly assure us of keeping the two great teachers we have now for two more years.

February 22, '77

It is unfortunate that a problem of this nature has to continually be concerned with obtaining funds to function. I should hope that in the not too distant future it will be recognized that it is something that should be provided for with whatever funds it might take to create a worthwhile and adequate program.

In view of the fact that the retarded are entitled to a life the same as other people, and that it is impossible for them to do it without assistance, or for a parent to create a life for that individual is an impossibility, regardless how capable that person might be, or how wealthy, it takes something more, like training centers or special facilities. Everyone is bogged down with problems for periods of a lifetime, but how many of you are trapped with a problem that embraces a lifetime, as is the case of most instances with the retarded?

I encourage you to provide for the additional funding of \$600.00 per quarter per client on the basis of these very fundamental facts that have been ignored through the years, and with the hope that you will go out of here with an open mind to creative ideas that could lead to better solutions to this endless problem in time.

Thank you!

*Marilyn Orr*  
Marilyn Orr

(Mother of a mentally retarded  
adult and board member of Washoe  
Assn. for the Retarded.)

# Nevada Association for Retarded Citizens

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(702) 322-7255

## N.A.R.C.

SUSAN M. HAASE  
Executive Director



To: Senate Finance Committee

Date: February 22, 1977

Subject: COMMUNITY TRAINING CENTER BUDGET, pp. 390-391.

The Community Training Centers are asking today that you consider funding their programs at a rate of \$600/client/quarter as opposed to the Governor's recommended \$422/client/quarter. This request is based on the Community Training Centers' increased role in serving the retarded citizens of Nevada.

Nevada is now in the process of "deinstitutionalization," a phrase which refers to releasing residents of institutions and returning them to their home counties, and, also, to preventing future admissions through a reliance on alternative community services. Its goal is normalization and it depends upon the Community Training Centers.

The Centers will be expected to provide more than just vocational training because the clients will need more than just job skills. Even the best meat packer or laboratory aide needs to know how to survive in the off-the-job living situation. He must know how to shop for groceries, how to utilize public transportation, how to handle his finances and pay his bills. In other words, he needs Life Skills which most of us take for granted. This is a tremendous task, and it belongs to the Community Training Centers.

COMMUNITY TRAINING CENTER TESTIMONY

p. 2

Where are these centers? There are currently fourteen centers in Nevada. Four are in Reno, three in Las Vegas, and the others are in Babbitt, Carson City, Elko, Ely, Fallon, Panaca, and Yerington. Some are quite sophisticated with several physical plants, and others are located in poorly-lit basements of old buildings. But regardless of size, they are all concerned about the effect of "deinstitutionalization" on Nevada's retarded citizens.

They're worried that the name may be as empty as it is long. That it may mean an end to training services for the retarded unless viable community services are developed at the same time. Their fears seem substantiated when instead of "developmental" funding, a 5.5% increase is suggested. This figure, insufficient to cover cost-of-living and merit increases for staff, will not even sustain present program levels. Nevada's retarded citizens will not have the community services they're being promised, and "deinstitutionalization" will mean nothing more than changing a lot of addresses.

We hope you will help prevent this from happening by approving the \$600/client/quarter which the Community Training Center directors requested of the Division of Mental Hygiene and Mental Retardation last year.

Thank you.