

STATE: COMMONWEALTH OF PENNSYLVANIA

Section 803 of the Health Care Facilities Act (35 P.S. § 448.803 and Section 2102(g) of The Administrative Code of 1929 (71 P.S. § 532(g) authorizes the Department of Health to adopt and promulgate regulations as to program standards for the licensure and nursing facilities. These regulations are available for review upon request.

STATE COMMONWEALTH OF PENNSYLVANIA

INTEGRATED ACTION PROGRAM PLAN
GOVERNING VOCATIONAL REHABILITATION SERVICE
TO PUBLIC ASSISTANCE APPLICANTS AND RECIPIENTS

I. PARTIES

The parties of the Integrated action program plan are the Office of Family Services, Pennsylvania Department of Public Welfare and the Bureau of Vocational Rehabilitation, Pennsylvania Department of Labor and Industry.

II. PURPOSE

The purpose of this plan is (1) to signify the intent of both parties to provide effective vocational rehabilitative services to recipients of public assistance directed toward rehabilitation and self-sufficiency, (2) to establish objectives for the program and (3) to develop operational procedures to be implemented through the local offices of both parties.

III. PROVISIONS

A. The program of services developed and all matters pertaining to program operation shall be in accordance with Public Law 565, 83rd Congress (The Vocational Rehabilitation Law of the United States): Act 345 (May 22, 1945) Vocational Rehabilitation Act of Pennsylvania as amended; and the regulations, rules, policies and procedures of the Office of Family Services, Department of Public Welfare.

B. Both parties will provide qualified staff in sufficient number to carry out satisfactorily the vocational rehabilitation functions as outlined. The establishments of positions shall be determined jointly by both parties and shall be based upon an analysis of needs in each county throughout the state. The selection, assignment and supervision of vocational rehabilitation personnel shall be the responsibility of the Bureau of Vocational Rehabilitation. The selection, assignment and supervision of Public Assistance personnel shall be the responsibility of the Office of Family Services.

C. The certification of eligibility of public assistance recipients for vocational rehabilitation services shall be the responsibility of the vocational rehabilitation counselor. He shall also be responsible for authorizing rehabilitation services in accordance with the state plan. In this way, the final approval of the rehabilitation plan for the client will be the decision of the Bureau of Vocational Rehabilitation in accordance with the regulations of the Rehabilitation Services Administration. The Office of Family Services shall be responsible for providing social and related services to the client and his family, necessary for the successful rehabilitation of the client.

D. Each party shall recognize the importance of respecting the primary field of operation of the other.

E. The parties shall jointly plan and conduct appropriate programs of orientation and training. Goals shall be to (1) orient all staff to the program concept and (2) prepare staff to identify prospective recipients for vocational rehabilitation. Training shall be on a continuous basis to promote a high quality of social and rehabilitation services to increasing number of welfare recipients.

F. Both parties shall make a concerted effort directed toward (1) maximum use of community resources available within the locale of operation, (2) informing and educating the public about the social and rehabilitation resources available, the assets and potentials of rehabilitated public welfare recipients and the roles of the communities in the rehabilitation program.

G. Periodic reports shall be made jointly and submitted to both parties and such reports shall be used as a means of evaluating the effectiveness of the joint agreement.

H. This plan may be modified at any time by mutual consent of both parties to meet changing conditions.

IV. PLAN OF ACTION

A. Introduction. A close working agreement between the Bureau of Vocational Rehabilitation and the Office of Family Services has existed in Pennsylvania for several years. In 1963 an even closer arrangement was entered into with the launching of an entirely new concept called Project Independence. This project had as its goal the moving of assistance recipients from Public Assistance rolls to payrolls, restoring individuals and families to self-support. This in itself is not a new concept, but the methods employed were a drastic departure from those previously used. These methods have been tried over a period of six years and have proven successful. This program has produced results and the methods are basically the same as those suggested in the guide lines.

The present plan, Project Independence, has been in effect for some time. Future planning will follow this concept. To substantiate this decision, the following statistics are provided:

Project Independence began in eighteen (18) counties. It has been expanded and now is in effect in twenty (20) of the State's sixty-seven (67) counties with twenty-six (26) counselors assigned.

During the first year the project was in effect, referrals increased in the project counties one hundred forty-four (144) percent; but in the other counties, the increase was only eight (8) percent.

Cases rehabilitated show an increase of thirty-one (31) percent in the project counties and only sixteen (16) percent in the other counties.

Since the project started in July 1963, some 6,000 assistance recipients have been rehabilitated in these twenty (20) selected counties.

The Department of Public Welfare, Office of Family Services' latest report indicates there are 7,532 handicapped employables receiving assistance. This is 1.8 percent of the total assistance recipients in the state. The greater number of these 5,761 (77 percent) are located in the selected project counties. These twenty (20) counties are the most densely populated.

The handicapped employables are receiving assistance as follows:

Aid to Dependent Children	3,582
General Assistance	3,280

The remainder were receiving either Old Age Assistance or Aid to the Disabled.

The average number of assistance recipients receiving some kind of service under this special project is 3,350 per year. This includes clients referred by other sources but receiving assistance. Last fiscal year 1,635 of the clients successfully rehabilitated were receiving public assistance at acceptance.

B. Priorities for Services. Priorities will be established as follows. These priorities will be followed when circumstances make it impossible to provide services to all eligible persons.

1. Unemployed fathers
2. Unemployed out-of-school teenagers
3. Unemployed single males
4. Unemployed single females
5. Unemployed mothers with older children
6. Unemployed mothers with young children wishing to work, provided there are adequate plans to care for the children during the mother's absence.

An exception to these priorities will be made when it is determined that physical restoration services are needed in any particular case whereas the deferment of such services would be harmful to the health of the individual.

C. Selection of Public Assistance Recipients to be Referred for Vocational Rehabilitation Services.

1. Individuals who are handicapped for employment due to physical, mental or behavioral disorders.
2. Individuals who had recent work experience prior to the onset of disability.
3. Individuals who have potential for a substantial work period following vocational rehabilitation.

D. Services to be Provided by the Bureau of Vocational Rehabilitation. The Bureau of Vocational Rehabilitation will be responsible for evaluating the rehabilitation potential of selected recipients. For those recipients accepted for service, it will be responsible for providing all rehabilitation services required and directed toward achieving the vocational objective. Services available are:

1. Individual counseling and guidance to develop a rehabilitation plan with an employment objective compatible with the recipient's physical and mental capacities, interests and abilities.
2. Necessary medical, surgical psychological and psychiatric services needed for diagnostic services.
3. Treatment as needed to correct or reduce a stable impairment which is a substantial employment handicap to the recipient.
4. Physical, occupational, speech and hearing therapy as part of treatment when needed.
5. Personal adjustment training to meet the needs of daily living necessary for employment, such as travel to and from work; to develop proper work habits; and to change personal attitudes which interfere with vocational and social adjustment.
6. Training for suitable jobs in college or vocational schools certified by the Department of Public Instruction.
7. Room and board, maintenance and transportation allowances incidental to the rehabilitation service.
8. Occupational tools, equipment, licenses as necessary to utilize or apply a skill.

9. Selective placement in a suitable job.
10. Follow-up after placement to assure that the rehabilitated worker has adjusted to his job to his own satisfaction and that of his employer.

E. Services to be Provided by the Office of Family Services. The Office of Family Services will bring to bear from its own resources or through arrangements with other agencies those financial, social and medical services that stimulate and support the recipient's vocational rehabilitation program. These services will consist of:

1. Early identification of applicants and recipients in need of vocational rehabilitation services. This will include those applicants who may be found ineligible for public assistance yet be in need of vocational rehabilitation services.
2. An appropriate social evaluation of the recipient and his family with particular reference to appraising the meaning of disability to the client, his particular reference to appraising the meaning of disability to the client, his adaptation to his disability and assessing social factors that impede functioning.
3. An assessment of family resources which would be considered in developing a suitable vocational rehabilitation plan.
4. Help to the client in securing and utilizing such services as childcare, homemaker services, housing assistance, educational services, legal aid and family planning services.
5. Adopt and develop policies for provision of continuing financial support during vocational rehabilitation to include special living costs related to training and employment not otherwise covered by the Bureau of Vocational Rehabilitation.
6. Policies to serve as financial motivation to the recipient during his vocational rehabilitation. This will include a disregard of certain percentages of income earned during employment in payment of financial assistance to the recipient.
7. Financial assistance to the recipient and his family in all areas where such assistance is not duplicated by the Bureau of Vocational Rehabilitation or other agencies during vocational rehabilitation.
8. All other casework services normally provided recipients of Public Assistance by the Office of Family Services.

F. Joint Housing. In those counties where a counselor of the Bureau of Vocational Rehabilitation is assigned full time to the local county assistance office, provision will be made by the county assistance office for desk, space and telephone. Such space will be designated as belonging to the vocational rehabilitation counselor. Where feasible this space allocated to the vocational rehabilitation counselor will be near the offices where the application process for public assistance takes place. The joint housing of staff within the county assistance office is a prerequisite to an increased cooperative counselor-caseworker effort. It should allow for early intervention of rehabilitation services by virtue of the counselor's availability at point of client application and increased communication.

G. Case Planning and Management. In initiating this program vocational rehabilitation counselors will be assigned full time to county assistance offices where a concentrated effort of rehabilitation services is needed. The county assistance offices will assign appropriate case service staff to work and coordinate their activities with the vocational rehabilitation counselor. Through this arrangement a team approach will evolve. The involved personnel from each agency will be constantly aware of services being provided by the other agency. The development of a plan for the recipient will be contributed to by each agency working as a team. The plan for rehabilitation will be included in the case file of each agency. Each agency will be involved in:

1. Plan development
2. Progress reports – verbal and written reports are made periodically to determine success of the plan, changes to be made, etc.
3. Case review
4. Closure – Services are completed or discontinued only when agreed upon by the representative from each agency.

H. Supportive Service from Other Agencies. When available supportive services from other public and private agencies will be obtained when such services will benefit the recipient's rehabilitation program. A joint effort will be made to utilize services from:

1. Pennsylvania State Employment Offices
2. Crippled Children's Associations
3. Manpower Resources
4. MDTA Training Resources
5. Day Care Service Centers
6. Neighborhood Service Centers

I. Target Coverage Areas. These areas have already been identified and will be served. There are six (6) full time counselors providing vocational rehabilitation services in cooperation with the County Assistance Office in Pittsburgh and four (4) in Philadelphia. Eighteen (18) other counties have been designated as target coverage areas as well. Concentrated services to the remaining forty-seven (47) counties will be expanded as needed. Based upon the populace of these counties there is no need for full time vocational rehabilitation staff currently.

SIGNED

Office of Family Services
Department of Public Welfare

Bureau of Vocational Rehabilitation
Department of Labor and Industry

Department of Public Welfare

Department of Labor and Industry