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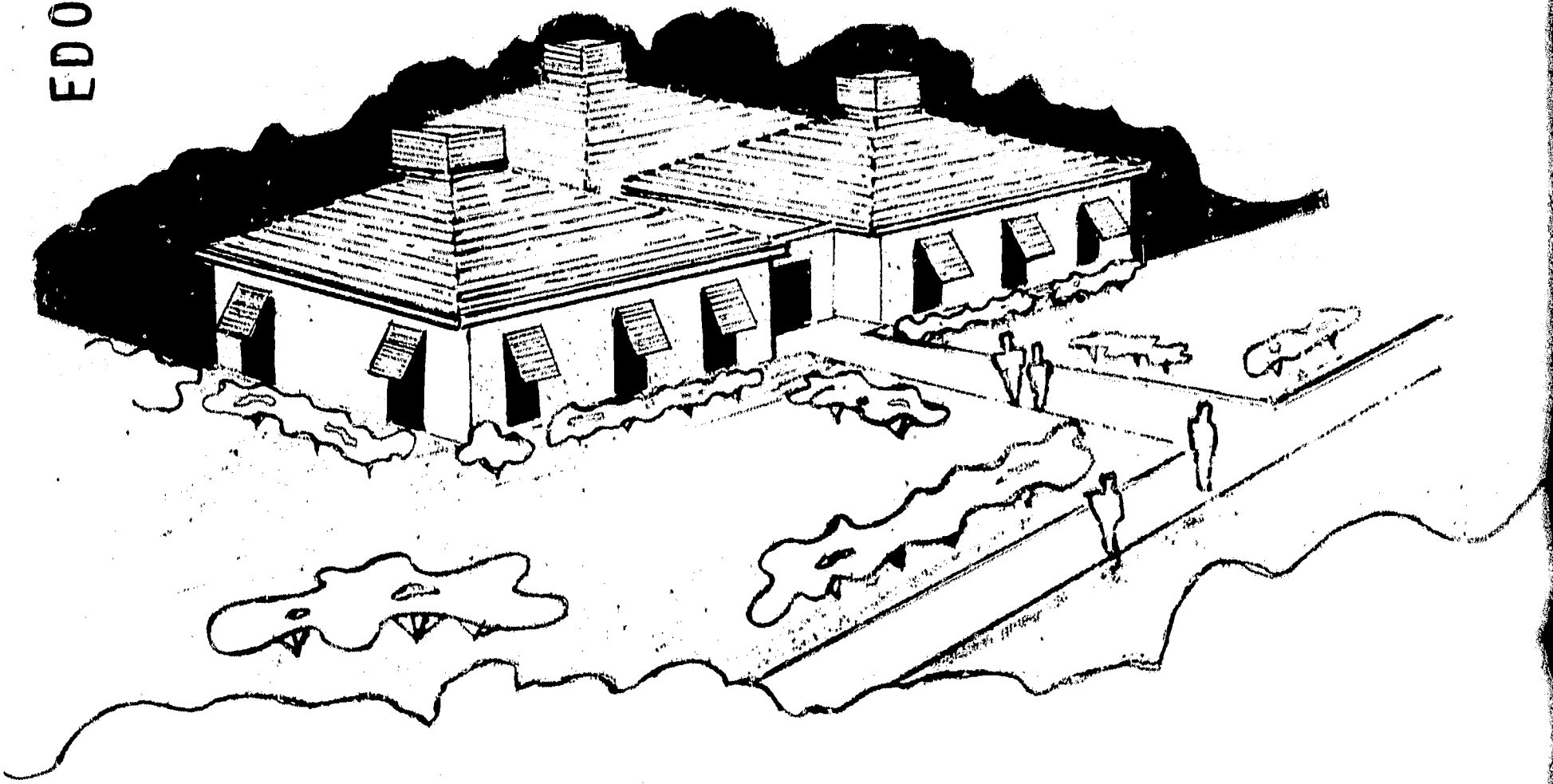
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ABSTRACT

Information is provided concerning Florida's facilities construction plan for the mentally retarded. Aspects covered include the administering state agency, methods of administration, and program development. Also detailed are the following: needs and services for Florida's mentally retarded; inventory, services, and programing; and priorities. Relevant statistics and standards are appended; charts, maps, and tables are provided. (JD)

ED037875



STATE OF FLORIDA
DIVISION OF MENTAL RETARDATION
FACILITIES CONSTRUCTION PLAN
FOR THE
MENTALLY RETARDED

F.Y. 1969

EC005417E

Cover

MacDonald Training Center Foundation
Speech and Hearing Clinic (FLA-MR-3)
Rendering courtesy of the Architects
Eugene Smith and A. Reese Harvey AIA

J. G. Foshee, Ph.D.
Director, Division of Mental Retardation
C. D. Horst
Director, Community Programs
L. H. Reagan
Facilities Coordinator for Federal Construction

ED037875

FLORIDA STATE
CONSTRUCTION PLAN
FOR
MENTAL RETARDATION FACILITIES



Claude R. Kirk, Jr.
Governor



Fiscal Year 1969

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

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P R E F A C E

The inherent dignity and worth of each individual requires that all mentally retarded persons be given the opportunity to realize their fullest intellectual, economic and social potential.

This goal impels the provision of appropriate facilities and services which will help to effectively prevent or reduce the effects of mental retardation.

One purpose of our State program is to encourage and advance this concept with the cooperation and coordinated effort of public and voluntary agencies, professional groups, and interested individuals by the development of a forward reaching facilities construction plan.

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SECTION I

STATE AGENCY

INTRODUCTION

In Florida there is no region, county or community known which has been able to bring sufficient resources to bear to eliminate the need for facilities construction for the mentally retarded. In most instances, less than 50% of those statistically eligible are being accommodated by combinations of special education provisions in the public schools, Sunland Training Centers and hospitals or private settings.

Need therefore, is well established for additional facilities for the mentally retarded within all areas and throughout the state. Naturally the need is greatest, in terms of numbers, in the more populous urban areas. By the same token, more has been and is being continually geared for in the same areas: while in many rural or smaller communities, little signs of progress are noticeable.

Although Florida has been able to utilize all assigned Federal funding, to date practical difficulties in community facilities planning is largely concerned with the many interested local groups who find it difficult to raise matching funds. The Division of Mental Retardation has requested State funding to augment the Federal funds assigned and at such time as such budget request can be met, many of the smaller more rural communities are expected to be able to move more aggressively into needed community facilities construction.

James G. Foshee, Ph.D.
Director
Division of Mental Retardation

ANNUAL REVISION OF STATE PLAN

FLA-MR-1C

A. DESIGNATION OF STATE AGENCY responsible for administering the State Plan:

1. AGENCY NAME

2. Has the organization of the State Agency been changed since the existing State Plan was approved? YES NO

(Attach a chart which shows the organization of the State Agency and the relationship of the unit which is immediately responsible for administering the State Plan to the other units of the State Agency.)

B. AUTHORITY OF THE STATE AGENCY:

Has any change been made in the authority of the State Agency to carry out the provisions of the State Plan? YES NO

(If "yes," attach a copy of the Legislation or Governor's order which accomplished the change.)

C. DESIGNATION STATE ADVISORY COUNCIL:

Has any change been made in the membership of the State Advisory Council or the manner in which consultation services for rehabilitation is to be provided to the State Agency? YES NO

(By appropriate grouping, attach a list of members showing present positions and interests or professions represented by each.)

D. METHODS OF ADMINISTRATION:

Do the methods of administration included in the approved State Plan reflect accurately the current or projected method of administering the State plan? YES NO

E. FEDERAL SHARE

The Federal participation under Title I, Part C of Public Law 88-164 shall be at a uniform rate for all approved projects. The rate for Federal construction assistance for fiscal 1969 shall be at 50 percent Federal and 50 percent non-Federal. This uniform rate shall apply to all projects approved for assistance under Title I, Part C of P.L. 88-164.

F. DATE OF PUBLIC NOTICE:

I hereby certify that the information above and attached statements, charts, maps, and tables are true and correct to the best of my knowledge and belief, and are an accurate presentation of the revised State Plan adopted by the State Agency.

NAME & TITLE (typed)

Effective Date of Revision

J. G. Foshee

J. G. Foshee Ph.D., Director

February 28, 1969

AUTHORITY OF STATE AGENCY

SINGLE STATE AGENCY - established by the 1965 Legislature.

The Division of Mental Retardation is the State agency responsible for the administration of this plan. Chapter 965 establishes this Division by Subsection (4) of Section 965.01, of the Florida Statutes as amended, reading: "Creation of Divisions - The Board of Commissioners of State Institutions shall create and organize the following Divisions with the following jurisdiction, powers, and duties:

(4) DIVISION OF MENTAL RETARDATION

- (a) Lists the present and any future State institutions.
- (b) Duties and Responsibilities - The Division of Mental Retardation shall be responsible for the planning, development and coordination of a complete and comprehensive state-wide program for the mentally retarded, and is designated the state mental retardation authority.
- (c) Director of the Division - The Director of the Division of Mental Retardation shall be responsible for the development and implementation of the program and for the coordination of the efforts of the Division of Mental Retardation with those of other state departments and agencies, county governments, municipal governments, and private agencies concerned with and providing services for the mentally retarded. He shall be responsible for the administration and operation of all State-operated facilities established for the diagnosis, care and training of the mentally retarded and may establish and operate day-care facilities subject to the approval of the Board of Commissioners of State Institutions. He shall be responsible for establishing standards, providing assistance, and exercising the requisite supervision relating to mental retardation programs of all state-supported diagnostic facilities, day care centers, rehabilitation centers, sheltered workshops, boarding homes, and other facilities for the mentally retarded. He shall be responsible for instituting research by public and private agencies, institutions of higher learning and hospitals in the interest of the elimination and amelioration of retardation and care and training of the retarded subject to the approval of the Board of Commissioners of State Institutions.
- (d) Authority of Board of Commissioners - The Board of Commissioners of State Institutions may assign to the Division of Mental Retardation any mental retardation functions not specifically designated by the Florida Statutes as the responsibility of any other state agency. The Board of Commissioners of State Institutions shall, with deliberate speed, consistent with the provisions of this Act, transfer to the Division of Mental Retardation those appropriate mental

AUTHORITY OF STATE AGENCY

retardation functions of any other State agency relating to the supervision of, or responsibility for, all facilities for the care and treatment of the mentally retarded. Upon transfer of such mental retardation function to the Division of Mental Retardation the Budget Commission may transfer any funds available to said agency for such mental retardation function, to the Division of Mental Retardation.

- (e) Exemption - Nothing in this act shall be construed to mean that the Director of the Division of Mental Retardation has any administrative or supervisory responsibility over any phase of the state system of higher education, the public schools, vocational rehabilitation program or other educational institutions as defined in Section 228.041 (1).
- (f) Power to contract - The division of mental retardation may contract for services and facilities in order to carry out its responsibilities under this chapter with any or all of the following: Public and private hospitals; clinics; laboratories; other State agencies, departments; counties; municipalities; towns; townships; or any other governmental unit; any other public or private entity which provides needed facilities or services. The division shall make periodic inspections to assure that the contracted services provided meet the standards of the Division.
- (g) Application for and acceptance of gifts and grants - The Division of Mental Retardation may apply for, subject to Section 216.20, and accept any funds, grants, gifts or services made available to it by any agency or department of the federal government or any other agency or private individual in aid of the present or future mental retardation program undertaken, maintained or proposed. All moneys received under the provisions of this Section shall be deposited in the state treasury and shall be disbursed in the manner provided by law.
- (h) Grants of funds for community retardation programs - The Division of Mental Retardation, when funds are available for such purposes, may make grants to assist community mental retardation programs in the establishment and operation of local facilities and services.

AUTHORITY OF STATE AGENCY

2. DELEGATION OF AUTHORITY

With the authority of the Board of Commissioners of State Institutions, the Division of Mental Retardation has delegated the authority and responsibility for processing construction applications parts 3 and 4 under Public Law 88-164, Title I, Part C. This delegation has been made to the Division of Community Hospitals and Medical Facilities, which has accepted such delegation. The basis for this relationship is the lack of engineering and architectural staffing within the Division of Mental Retardation, and the ability of such professionals, within the Division of Community Hospitals and Medical Facilities, to absorb such assignment without requiring double staffing of state agencies.

The Division of Mental Retardation shall be responsible for the administration of this plan. It will submit an updated planning document biennially, updated revisions and amendments as required and will also prepare annual construction schedules. The Division of Mental Retardation will also assist sponsors in preliminary planning, in the preparation of narrative, and will insure assurances are in order for the submission of construction application parts 1 and 2.

Following the approval of part 2 of a construction application by the Services Rehabilitation Administration the project shall be submitted to the Division of Community Hospitals and Medical Facilities for completion of Application parts 3 and 4, final inspection and final payment.

Documents pertaining to the administration of this program through the construction application parts 1 and 2 shall be approved by the Division of Mental Retardation Director or his designee.

Documents pertaining to parts 3 and 4 of the construction application shall be approved by the Director of the Division of Community Hospitals and Medical Facilities or his designee.

3. TABLE OF ORGANIZATION

The following Tables of Organization graphically depict the activities of the Division of Mental Retardation and its relationship to the Division of Hospital Construction and Medical Facilities.

Since both Divisions are responsible to, and under the coordination of, the Board of Commissioners of State Institutions, effective cooperation between the Divisions is assured.

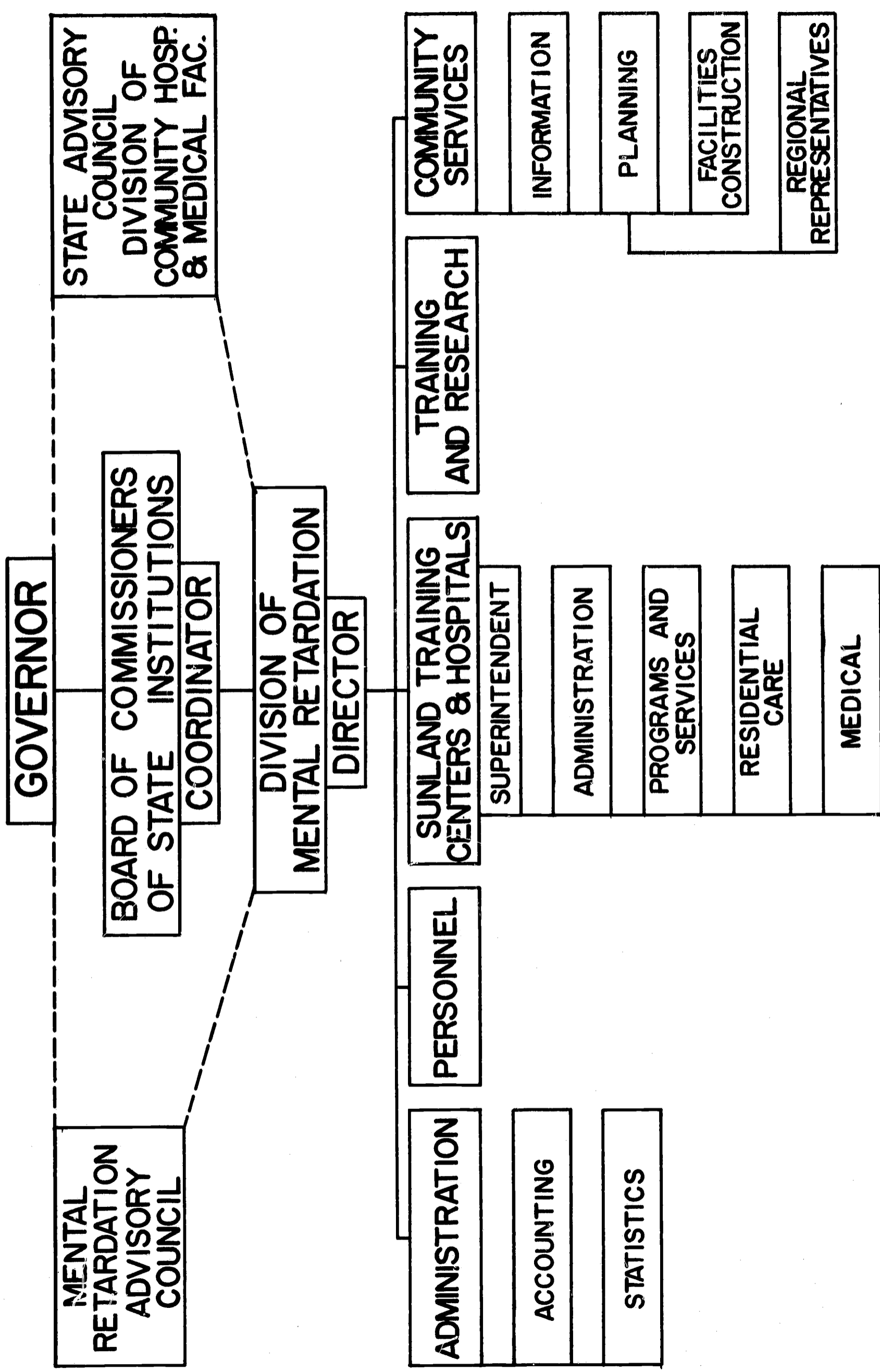
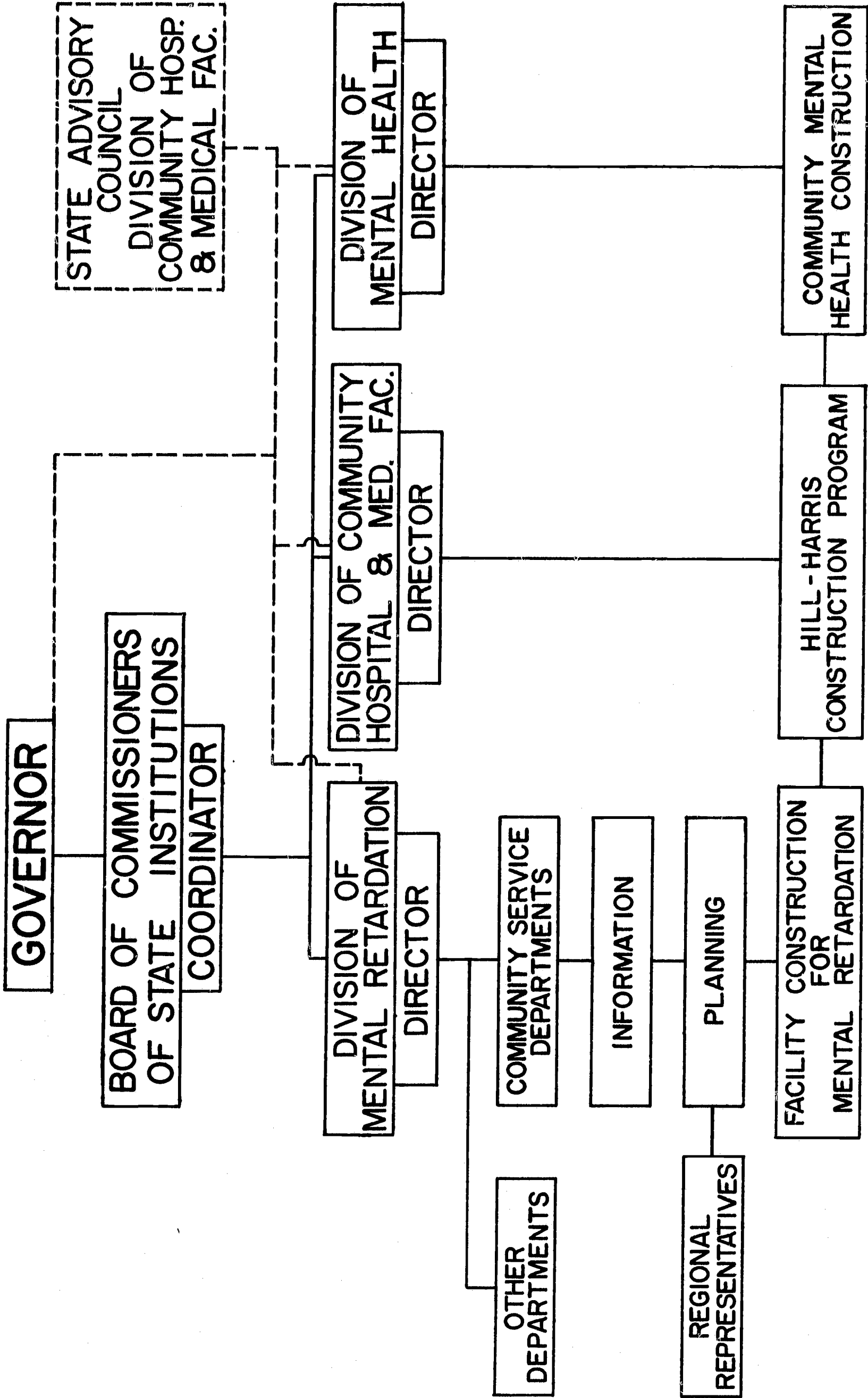


TABLE OF ORGANIZATION
DIVISION OF MENTAL RETARDATION



STATE AGENCY FACILITY CONSTRUCTION RELATIONSHIPS

STATE ADVISORY COUNCIL
DIVISION OF COMMUNITY HOSPITALS AND MEDICAL FACILITIES

Public Law 88-164, Title I, Part C, Section 134, Sub-section 3 is quoted, as follows:

"Provide for the designation of a State advisory council which shall include representatives of State agencies concerned with planning, operation, or utilization of facilities for the mentally retarded and of non-government organizations or groups concerned with education, employment, rehabilitation, welfare, and health, and including representatives of consumers of the services provided by such facilities."

Sub-section (2)(a), Section 380.01, Chapter 380, Florida Statutes authorizes the appointment of a state advisory council, as follows:

"The Governor is authorized to appoint a State Advisory Council which shall consist of twelve (12) members who are residents of Florida plus the Program Director who shall serve as an ex-officio member. Such council shall include representatives of non-governmental organizations or groups, and of public agencies, concerned with the operation, construction or utilization of hospital or other facilities for diagnosis, prevention, or treatment of illness or disease, or for provision of rehabilitation services, and an equal number of representatives of consumers familiar with the need for the services provided by such facilities, to consult with the Board of Commissioners of State Institutions in carrying out the purpose of the Federal Hospital and Medical Facilities Amendments of 1964. If the Council does not include any representatives of non-governmental organizations or groups, or State agencies, concerned with rehabilitation, provisions shall be made for consultation with organizations, groups and state agencies so concerned. The membership shall include at least one (1) representative of the Florida Hospital Association."

Sub-section (3) provides:

"The Governor is authorized to provide for carrying out such purposes in accordance with the standards prescribed by the surgeon general."

The then Governor of Florida, the Honorable Haydon Burns, announced the selection of such a Council, for the implementation of this public law, by letter to the Public Health Service Regional Director, District IV on August 18, 1965. This letter reads in part:

" ... For the purpose of effecting continuity and coordination of planning, I have determined that the thirteen persons who serve on the Advisory Council to the Division of Community Hospitals and Medical Facilities, shall also constitute the Advisory Council to the State's Mental Health Center Construction Agency, in accordance with the provisions of Section 204(a)(3),

STATE ADVISORY COUNCIL

Public Law 88-164, and the Advisory Council to the State's Mental Retardation Facilities Agency in accordance with the provision of Section 134 (a)(3), Public Law 88-164."

It is the purpose of the Advisory Council to consult with the State Agency in carrying out this plan. The responsibilities of the Council include the following:

- (1) Review, criticize and recommend to the State Agency required revisions of the State plan for construction of hospitals and related medical facilities.
- (2) Review, criticize, and recommend to the State Agency an annual construction Schedule.
- (3) Upon the request of the State Agency, conduct hearings as provided under the provisions of this plan, either as the Council or as a committee of the Council designated by its chairman.
- (4) Upon the request of the State Agency, consult with it in the formulation of policies to be followed in planning and in administering the plan.

The Advisory Council will meet not less than once each year to consider the annual revision of the State plan and the Construction Schedule, and will have additional meetings as requested by the State Agency. Members of the Advisory Council are as follows:

State Agency Representatives

Autha W. Forehand
908 South Bronough Street
Tallahassee
(Ex-officio member)

Mr. Forehand is the director of the Division of Community Hospitals and Medical Facilities. He represents state agencies concerned with the planning of hospitals, facilities for the mentally retarded, and facilities for community mental health.

Representatives of Non-Governmental Organizations (Other than Consumer Representation)

Donald P. White, M.D., Chairman
2005 Riverside Avenue
Jacksonville
(Term expires October 7, 1969)

Dr. White is a practicing physician. He represents the health interest.

STATE ADVISORY COUNCIL

Richard L. Thompson
630 Heron Drive
Merritt Island
(Term expires October 12, 1972)
Mr. Thompson works in Environmental Health. He represents
the health interest.

Irving L. Alberts, M.D.
Post Office Box 4575
Miami Beach
(Term expires October 12, 1969)
Dr. Alberts is a practicing physician. He represents the
rehabilitation interest.

Mrs. Marion L. Block
Post Office Box 1387
Vero Beach
(Term expires October 7, 1968)
Mrs. Block is secretary-treasurer of the Indian River
Memorial Hospital Board. She represents the welfare interest.

Laurie Dozier, Jr., M.D.
Medical Arts Building
Tallahassee
(Term expires January 18, 1971)
Dr. Dozier is a practicing physician. He represents the
interests of the medical profession.

Dr. Albert Dale Hagler
4444 Fifth Avenue, North
St. Petersburg
(Term expires September 15, 1969)
Dr. Hagler is pastor of St. Luke's Methodist Church in
St. Petersburg. He represents the education interest.

Scott I. Peek
7211 S.W. 62nd Avenue
South Miami
(Term expires August 26, 1970)
Mr. Peek is president of Scott I. Peek and Associates
(Public Relations) and represents the employment interests.

Ben P. Wilson
Monroe Memorial Hospital
Ocala
(Term expires October 7, 1970)
Mr. Wilson is the administrator of the Monroe Memorial
Hospital. He represents the interests of hospital
administration.

STATE ADVISORY COUNCIL

G. Pierce Wood
Tampa Electric, Post Office Box 111
Tampa
(Term expired September 13, 1968)
Mr. Wood is an executive with the Tampa Electric Company.
He represents the employment interest.

Representatives of Consumers of Services

Herbert T. Gibson
Post Office Box 1629
West Palm Beach
(Term expires August 20, 1971)
Mr. Gibson is an attorney.

Woodward M. Hampton
12880 Griffin Boulevard
North Miami
Reappointed 9-9-66 for 4 years.
(Term expires August 26, 1970)
Mr. Hampton is an attorney.

Donald Heflin Vickery
2107 Lyndell Drive
Kissimmee
(Term expires October 12, 1971)
Mr. Vickery is an insurance executive.

Sub-committee for Mental Retardation

Herbert T. Gibson
Woodward M. Hampton
G. Pierce Wood

NOTES:

1. Advisory Council members whose terms show as expired, retain membership until extended or replaced.
2. This plan approved by the Florida Advisory Council for Construction on February 28, 1969.

SECTION II

SECTION II

METHODS OF ADMINISTRATION

Publication of the State Plan

At least thirty days prior to submission of the annual revision of the Florida Mental Retardation Facilities Plan to the Social and Rehabilitation Service for approval, the State Agency will publicize the revision through utilization of the following methods and media:

- a. Legal notice in several daily newspapers having general circulation throughout the State.
- b. News release to daily and weekly newspapers.
- c. Approved copies of the revision will be available at all times in the office of the Director of the Division of Mental Retardation, Larson Building, Room 460, Tallahassee, Florida 32304, for examination by all interested persons.

Federal Share Determination

The Federal Share shall be at the Uniform Rate and is applied to all projects at such rate. For the Fiscal Year 1969 this shall be 50 percent.

Transfer of Funds to Adjacent States or to Community Mental Health Centers Construction Program (Sect. 54.102 U.S. Pub. Health Regs.)

The State Agency may submit a request in writing to the proper authority that its allotment, or a specific portion thereof, be added to the corresponding allotment of another State; for the purpose of meeting a portion of the Federal share of the cost of a project for the construction of a Mental Retardation Facility in such other State. The State Agency may also request a transfer of funds from another State, to this State, be made with the approval of such other State.

Not less than eighteen (18) months after the date of availability of the Fiscal Year allotment and six (6) months after the date of availability of subsequent allotments, the State may submit a written request to the Rehabilitation Services that all, or a portion, of its allotment for Mental Retardation Facilities be transferred to Community Mental Health Facilities if: (1) there are no applications for Mental Retardation Facilities, and (2) there is a greater need for Community Mental Health Facilities.

Establishment of Project Construction Schedules

Each year the State Agency will develop project construction schedules which will list the projects for which construction can be commenced without delay. These schedules will be developed by soliciting applications from sponsors in areas of greatest unfilled need, and proper order of area priorities as shown in the overall construction program. The number of projects included in the project construction schedule will depend upon the amount of Federal allotment to Florida.

Mental retardation facilities projects will be selected for the construction schedules upon consideration of the following factors:

- (1) The priority of the project as determined in accordance with principles outlined in the State Plan for determination of relative need.
- (2) The intent of sponsors to begin construction within a reasonable length of time.
- (3) The ability of the sponsor to meet the financial requirements for construction, maintenance, and operation of the proposed facility.
- (4) The maintenance of an appropriate balance in the construction of various categories of facilities. The balance between categories of facilities need not be reflected in each project construction schedule. However, construction which is programmed and scheduled over a four year or other extended period will reflect an appropriate balance between the various categories of facilities.

If a project is removed from the project construction schedule by the State Agency, the schedules will be revised to include the next highest priority project which meets the requirements for inclusion.

The fact that any project may have been excluded or dropped from the project construction schedule will not change the project priority rating in most instances. Such omission will only be made if it is indicated that said project is not able and will not be able to meet all requirements of the Act and its Regulations during the course of the schedule period. Such projects, when qualified, will be contained in succeeding project construction schedules.

If a project is in the highest priority group, Part I of the project construction application which is prescribed by the Social Rehabilitation Service may be approved and forwarded prior to the approval of the project construction schedule. If the project is not in the highest priority group, Part I of the project construction application will be submitted with the schedule.

Applications for Federal assistance under Public Law 88-164 will be submitted on the project construction application which is prescribed.

Minimum Standards of Maintenance and Operations

The current status of minimum standards for maintenance and operation of facilities serving the retarded in Florida is described by Appendix B, and by the Supplement Interim Standards.

Standards of Construction and Equipment

Construction and equipping of projects assisted under the program shall comply with the general standards of construction and equipment as indicated in Appendix C and Supplement 2.

Inspection Procedures

When a request for an installment payment is made, the State Agency,* together with representatives of the Division of Community Hospitals and Medical Facilities (Hill-Harris), will make an inspection of the project to determine that services have been rendered and work performed, in such manner that the approved plans and specifications have been completed; and the facility is in all construction details ready to function for the purpose for which matching funds have been provided. Other inspections will be made at required times to justify the request for periodic payments under the grant. In addition, the State Agency will make such additional inspections as are deemed necessary. Reports of each inspection will be retained in the files of the State Agency.

Construction Payments

- a. Requests for construction payments shall be submitted by applicants to the State Agency at the time prescribed by Section 54.115 of the Regulations for Grants Constructing Facilities for the Mentally Retarded.
- b. Federal funds shall be paid to the Treasurer of the State of Florida, as ex-officio Treasurer of the State Agency.
- c. The State will remit or credit all payments of Federal funds received by the State for payment to applicants for approved construction projects.

Personnel Standards Merit System

Personnel employed in the administration of the State Plan are under the coverage of the State Personnel Board, which is an agency that provides for a merit form of public personnel administration, completely free of political or other interference.

The system provides employment through a concrete system of published rules and regulations and includes provision for the administration of a uniform classification and pay plan, an examination program for selection of employees, procedures for advancement, and tenure guarantees for permanent employees.

The classification and pay plan set designed to fulfill the principle of "equal pay for equal work." A written plan of class specifications of jobs is published and a pay plan is established in accordance with accepted pay standards. The pay standards are reviewed bi-annually and recommendations for revisions are presented to the

State Legislature at that time. The class specifications and position allocations are reviewed continually.

The system's examination program is designed to obtain the best possible qualified employees for State jobs. Applicants are certified from written qualification requirements, and upon proof of qualifications, the examinations are administered on an assembled or individual basis. Those applicants who score above 70% are placed on a register of eligibles and if they are among the top five applicants they may be selected for appointments.

Advancement through promotion or through job reclassification are guaranteed all employees, provided they can meet the job requirements and provided effort and initiative are exerted to justify promotion or to satisfactorily evolve a job to the point where it should be reclassified to a higher class.

All employees are guaranteed tenure provided they prove to be worthy employees. An employee may be released with good cause without right of appeal if he is serving during the six months probationary period; however, if he has obtained permanent status, he may appeal any dismissal action to the State Personnel Director, then to the Career Service Council, then to the State Personnel Board.

* All further references to inspection by the State Agency will include any necessary support of other allied State Agency personnel.

Conflict of Interest

It is directed that no full time officer or employee of the State Agency, or any firm, organization, corporation or partnership which such officer or employee owns, controls, or directs, shall receive funds from the applicant, directly or indirectly, in payment for services provided in connection with the planning, design, construction, or equipping of the project.

Fiscal and Accounting Requirements

The state agency will:

comply with the Regulations by maintaining necessary accounting records and controls.

retain on file for a period of at least five years beyond participation in the program, all documents, accounting records and controls related to any expenditure.

make provisions for access to all records and project documents by the Administrator, Social and Rehabilitation Service, or its duly authorized representative.

The state agency will require recipients of Federal funds to:

maintain adequate financial records and controls.

retain, for a period of at least five years after final payment of Federal funds, all financial records and documents related to expenditures for their projects.

make provision for access to all records and project documents by the Comptroller General of the United States or his duly authorized representative.

Assurances from the Applicant - General

In addition to any other requirements imposed by law, each construction grant shall be subject to the condition that the applicant will furnish and comply with the following assurances. (The Surgeon General may, at any time, approve exceptions to these conditions and assurances where he finds that such exceptions are not inconsistent with the Act and the purposes of the program.)

That applicant (or other public or nonprofit agency which is to operate the facility), holds or will hold a fee simple or such other estate or interest in the site including necessary easements and rights-of-way, sufficient to assure for a period of not less than 50 years undisturbed use and possession for the purpose of the construction and operations of the facility.

That the Surgeon General's approval of the final working drawings and specifications, which conform to the general standards of construction and equipment, will be obtained before the project is advertised or placed on the market for bidding;

That applicant will perform actual construction work by the lump sum (fixed price) contract method; employ adequate methods of obtaining competition bidding prior to awarding the construction contract, either by public advertising or circularizing three or more bidders; and award the contract to the responsible bidder submitting the lowest acceptable bid; provided, however, that the purchase and installation of equipment which is unique to the facility, as well as kitchen, laundry, and laboratory equipment need not be considered construction work for the purpose of this section, except that if open competitive bidding is employed to obtain any or all of such equipment, the award shall be made to the responsible bidder submitting the lowest acceptable bid;

That applicant will enter into no construction contract or contracts for the project or a part thereof, the cost of which is in excess of the estimated cost approved in the application for that portion of the work covered by the plans and specifications, without prior approval of the Surgeon General.

That applicant will submit to the Surgeon General for prior approval changes that substantially alter the scope of work, function, utilities or safety of the facility.

That applicant will construct the project, or cause it to be constructed, to final completion in accordance with the application and approved plans and specifications.

That applicant will furnish progress reports and such other information as the Surgeon General may require.

That applicant will provide and maintain competent and adequate architectural or engineering supervision and inspection at the construction site to insure that the completed work conforms with the approved plans and specifications.

That sufficient funds will be available to meet the non-Federal share of the cost of constructing the facility.

That sufficient funds will be available when construction is completed for effective use of the facility for the purposes for which it is being constructed.

Representatives of the Surgeon General and State Agency will have access at all reasonable time to work whenever it is in preparation or progress, and the contractor shall provide proper facilities for such access and inspection.

That the facility will be operated and maintained in accordance with minimum standards prescribed by the State Agency for the maintenance and operation of such facilities.

Services for persons unable to pay are important and before an application for the construction of a facility for the mentally retarded is recommended by a State Agency for approval, the State Agency shall obtain agreements that:

- (1) The facility will furnish a community service;
- (2) The facility will furnish below cost or without charge a reasonable volume of services to persons unable to pay therefore. As used in this paragraph, "persons unable to pay therefore" includes persons who are otherwise self-supporting but are unable to pay the full cost of needed services. Such services may be paid for wholly or partly out of public funds or contributions of individuals and private and charitable organizations such as community chest or may be contributed at the expense of the facility itself. In determining what constitutes a reasonable volume of services to persons unable to pay therefore, there shall be considered conditions in the area to be served by the applicant, including the amount of such services that may be available otherwise than through the applicant. The requirements of assurances from the applicant may be waived if the applicant demonstrates to the satisfaction of the State Agency, subject to subsequent approval by the Surgeon General, that to furnish such services is not feasible financially.

Assurance of Non-Discrimination

The State Agency requires the assurance that all portions and services of the entire facility for the construction of which or in connection with which, aid under the Act is sought will be made available, without discrimination on account of race, creed, color, or national origin with respect to the privilege of professional practice in the facility.

Fair Hearing Procedure

The State Agency does provide an opportunity for an appeal to and a fair hearing before the State Agency, to each applicant for a construction project who is dissatisfied with the action of the State Agency regarding its application.

Actions of the State Agency which entitles applicants to a hearing include the following:

- a. Denial of opportunity to make formal application.
- b. Rejection or disapproval of application for reasons other than requirements included in and covered under the Act or the Regulations.
- c. Refusal to reconsider an application.

The appellant will be notified in writing of the time and place of hearing. The time and place of the hearing, which is determined by the State Agency, will be reasonably convenient for the appellant. He is entitled to be represented by friends or counsel and to examine all evidence and to question opposing witnesses, if he so desires. Persons interested and concerned with the State Agency's decision are entitled to present pertinent evidence, subject to reasonable procedure of admissibility and methods of presentation.

Whenever practicable, the presiding officer will be an official in a responsible position who did not participate in the action for which the appeal is made.

The decision of the State Agency will be made in writing within 30 days from the date of the hearing. Appeals from decisions or actions of the State Agency must be made by applicant, in writing, within 30 days from the date of adverse decision by the State Agency.

Certification To The Surgeon General:

Availability of funds for the non-Federal share of construction costs shall mean: funds immediately available, placed in escrow, or acceptably pledged, or funds or fund sources specifically earmarked in a sum sufficient for that purpose, or other assurances acceptable to the Surgeon General.

To assure the availability of funds for maintenance and operation, the application for the construction of a new project is normally required to include a proposed operating budget for the two-year period immediately following its completion.

NOTE All sections of the Regulation for Grants for Constructing Facilities for the Mentally Retarded (General) are not included in the body of this report. Copies of these Regulations are available, upon request, from the Division of Mental Retardation, Room 460, Larson Building, Tallahassee, Florida, 32304.

Requirement of Regional or Metropolitan Area Approval

Section 204 of the Demonstration Cities and Metropolitan Development Act of 1966 requires that all applications for grants under virtually all Federal assistance programs must be reviewed by a regional or metropolitan planning agency, comprised to the greatest practicable extent of elected officials of areawide government. The objective of this requirement is to assure coordination at the local level of development activities throughout metropolitan areas. This review by an areawide planning agency is now required for all applications under certain Federal assistance programs, including the construction of facilities for the Mentally Retarded.

The Council does not approve or disapprove such applications. The role of the Council is limited solely to the submittal of comments and recommendations, which are advisory only. Its objective is to carry out a continuing program of planning for the orderly development of the region, thereby fully establishing and maintaining local eligibility for all those federal assistance programs for which it has been designated the agency for review and coordination of local development.

The review of applications will be completed as quickly as possible in accordance with these policies and procedures and subject to personnel and budget limitations. In any event, the comments and recommendations of the Council will be submitted within the time limitations established by the responsible federal agency. Section 204 provides that an application need not be accompanied by the comments and recommendations of an areawide planning agency if the applicant certifies that a plan or description of the project has lain before such areawide planning agency for a period of 60 days without action by the planning agency.

Statement of review and comment upon a proposed project will be based upon the following criteria:

- (1) Does the project conform to the Regional Development Plan, or its complementary studies completed or in progress?
- (2) Does the project conform to local development plans, programs or policies as officially adopted by the requesting jurisdiction?

Any application may be withdrawn without prejudice to resubmittal or may be amended at any time after submittal by written request from the applicant. The Council reserves the right to consider an amended application as a new application in cases where the amendment makes substantive changes in content or cost.

In the event of submittal of an incomplete application, the Council will advise the applicant in writing of its deficiencies. If such deficiencies are not remedied, or the application withdrawn, within 60 days of such notification, the Council will transmit to the applicant a statement of review and comment which includes a negative recommendation on the basis of insufficient data.

Recommendations are made by the area authority to the State Agency processing the grant request, for consideration in its decision as to further processing of the requested grant.

Present designation of the Areawide Agencies follows. Where a prospective sponsor's area is not included, decision as to any conflict in area aims will be made by the Division of Mental Retardation.

Name of Areawide Authority

Definition of Area

Fort Lauderdale-Hollywood:

Broward County Area Planning Board
Mr. Valentyne Brennan, Planning
Director
958 Broward County Courthouse
Fort Lauderdale, Florida 33301

Broward County

Jacksonville:

Jacksonville Duval Area Planning
Board
Mr. Marvin C. Hill, Executive Director
712 American Heritage Building
Jacksonville, Florida 32202

Duval County

Miami:

Metropolitan Dade County Planning
Commission
Mr. Reginald Walters, Director
702 Justice Building
1351 N.W. 12th Street
Miami, Florida 33125

Dade County

Orlando:

East Central Florida Regional
Planning Council
Gordon Wagner, Executive Director
2323 South Washington Avenue
Titusville, Florida 32780

Brevard County
Indian River County
Lake County
Orange County
Osceola County
Seminole County
Volusia County

Pensacola:

Escambia-Santa Rosa Regional
Planning Council
Edward Harper, Chairman
P.O. Box 486
Pensacola, Florida 32502

Escambia County
Santa Rosa County

Name of Areawide Agency

Definition of Area

Tallahassee:

Tallahassee-Leon County Planning
Commission
Attn: Philip W. Pitts
City Hall
Tallahassee, Florida

Leon County

Tampa-St. Petersburg:

Tampa Bay Planning Council
Mr. Wilkinson, Executive Director
3151 3rd Avenue North
300 Building West
Suite 540
St. Petersburg, Florida 33713

Hillsborough County
Manatee County
Pinellas County
Sarasota County

West Palm Beach:

Palm Beach County Area Planning
Board
Donald Morgan, Director
P.O. Box 1548
West Palm Beach, Florida 33402

Palm Beach County

Other Project Recommending Authority

Future project recommendations will be requested from regional representatives and a select reading committee, as noted under Section VI - Priorities.

SECTION III

SECTION III

THE CONSTRUCTION PROGRAM DEVELOPMENT

Philosophy

The inherent dignity and worth of each individual requires that all mentally retarded persons be given the opportunity to realize their fullest intellectual, economic and social potential. This goal impels the provision of appropriate facilities and services which will effectively prevent or reduce the effects of mental retardation. The purpose of the State program is to encourage and advance this concept with the cooperation and coordinated effort of public and voluntary agencies, professional groups, and interested individuals in the development of an appropriate plan.

The program for facilities for the mentally retarded recognizes the medical and social implications which arise from this disability and the need to achieve an appropriate balance of services for comprehensive community programs. State institutions for the mentally retarded provide a service to retarded persons by maintaining highly developed treatment, training, and research programs, and to communities in providing care for those retarded persons not served by community programs.

Each locality should make general community services accessible and available to the mentally retarded. Where general services are unable to meet specialized needs, the State program seeks to identify the special services needed. Community oriented programs are encouraged to provide comprehensive services effectively coordinated to assure continuity of care, with services available to all age groups and degrees of retardation and disability.

Use shall be made of the Sunland Training Centers, the Sunland Hospitals, community facilities and services, and all other related and interested agencies to provide those legal processes and services necessary for the benefit of the mentally retarded.

Policies and Principles

In carrying out short and long range goals, the following policies and principles are among the more important to be considered in the construction of facilities for the mentally retarded.

Demands for professional talent ever exceed the supply, therefore automatically bringing some conflict in objectives. Identification of such factors should be part of each facility planning situation and programming. (For example, the development of community Diagnostic and Evaluation facilities almost forces planning to focus upon the large community as the only feasible site, due to competition for professional services. This makes it difficult to assemble a qualified team outside of an urban area.)

Planning and action programs of other allied departments and agencies, such as Vocational Rehabilitation, Special Education, Mental Health, Community Hospitals and Medical Facilities and Comprehensive Health and Areawide Planning, must be recognized and joined in development of goals and objectives. Maximum alignment of common planning areas is most desirable where feasible.

Special efforts must be made to assist the retarded living in disadvantaged or poverty sections of rural and city areas. Cooperation may be extended by such agencies as: Federal Assistance for Neighborhood Facilities, Community Action Housing Assistance, Job Corps, Project Head Start, Aid to Families with Dependent Children, American Indians--Adult Vocational Training, American Indians--Direct Employment Assistance, Assistance for Migrant and Seasonal Farm Workers, Occupational Training in Redevelopment Areas and many others.

To maximize use of community services, and keep the retarded in the forefront of community thought, sponsors for community facilities should be thoroughly exposed to a knowledge of other community services which may complement or supplement those the sponsor may be planning. Likewise, gap needs which the sponsor had not considered, may be included in wise counseling by facility construction consultants.

The Facilities Construction Program for the mentally retarded should provide comprehensive community programs to supplant or dilute the need for additional institutions. It provides the financial help to erect or modify existing structures to provide diagnostic and evaluation, day care and residential facilities.

Objectives must be carefully considered when working with planning for proposed new or additional facilities. Conflicts in objectives will be appraised and continual reappraisal of the programming as noted with the "Tentative Programming Data Report" (SRS FORM-3) will be made.

Community planning seeks to accomplish provision of needed comprehensive services by coordinating and improving what now exists and filling in the gaps, and not by duplication or replacing existing services.

Consideration of levels of retardation and age groupings must be made because needs of the retarded vary accordingly.

Short Range Objectives

Although of immediate urgency, these goals are continuous ones of daily significance.

Work closely with local, district and other mental retardation groups as they are established throughout the State to promote good communications from Division to local levels.

Stimulate the planning of comprehensive services to the lowest practical group level of need, as evidenced by requests of public and private agencies, individuals and by a continuing statistical analysis. This lowest level will vary with demographic, socio-economic and other local factors.

Utilize promotional, educational, informational and other means to inform community leaders and other interested persons of the availability of federal funds to provide facilities (D&E, residential, and day care) and services (diagnosis and evaluation, treatment, training, education and sheltered workshops) under this Facilities Construction Plan - P. L. 88-164, Title I, Part C.

Secure accurate and complete statistical information concerning existing facilities for the mentally retarded, for evaluation of factors which may be used in planning long range needs and justifying immediate programs.

Medium and Long Range Objectives

Join with public and private agencies, groups and individuals concerned with the mentally retarded in delineating more clearly areas of mutual interest and primary responsibility. Involve local groups when considering special programs, in the interest of providing full services without unnecessary duplication.

To foster an awareness of the great need for diagnostic, evaluation and treatment services for the mentally retarded throughout the state, and encourage and solicit the interest of psychiatric clinics and general hospitals where possible in helping to schedule such services, in support of community programs.

Work for balanced programming for prospective facilities construction within the construction plan, keeping in mind the spectrum of services which are considered necessary for comprehensive programs.

To the maximum extend possible program facilities for the mentally retarded to provide service in close proximity to homes and families.

Consistency of comprehensive planning is desired, and the plan should consider and seek desirable parallels with the Mental Health and Hospital plans where feasible.

Wherever possible relate to and involve other agencies, associations or individuals, whose disciplines or interest would be helpful in coordinated effort of planning for the mentally retarded.

Definitions

The following definitions are applicable to existing facilities and services included within the State Plan and inventory are:

Services

Diagnostic Services

Coordinated medical, psychological and social services supplemented where appropriate by nursing, educational or vocational services, and carried out under the supervision of personnel qualified to: (1) diagnose, appraise, and evaluate mental retardation and associated disabilities, and the strengths, skills, abilities and potentials for improvement of the individual; (2) determine the needs of the individual and his family; (3) develop recommendations for a specific plan of services to be provided with necessary counseling to carry out recommendations; and (4) where indicated, periodically reassess progress of the individual.

Treatment Services

Services under medical direction and supervision providing specialized medical, psychiatric, neurological, or surgical treatment, including dental therapy, physical therapy, occupational therapy, speech and hearing therapy, or other related therapies which proved for improvement in the effective physical, psychological or social functioning of the individual.

Educational Services

Services, under the direction and supervision of teachers qualified in special education, which provide a curriculum of instruction for preschool children, for school age children unable to participate in public schools, and for the mentally retarded beyond school age.

Training Services

Services which provide: (1) training in self-help and motor skills; (2) training in activities of daily living; (3) vocational training; (4) opportunities for personality development; and (5) experiences conducive to social development, and which are carried out under the supervision of personnel qualified to direct these services.

Custodial Services (Personal Care)

Services which provide personal care for any part of the day or 24 hours a day, including, where needed, health services supervised by qualified medical or nursing personnel. Personal care covers food, shelter, hygienic attention, and clothing for 24 hours a day or any part thereof.

Under this definition all day and residential facilities for the retarded included in the inventory may be regarded as providing custodial care services. This means that this service should be

recorded as being available on all inventory forms for all day and residential facilities.

Sheltered Workshop Services

Services in a facility which provides or will provide a program of paid work involving: (1) work evaluation; (2) work adjustment training; (3) occupational skill training; (4) transitional or extended employment; and (5) placement; and carried out under the supervision of personnel qualified to direct these activities.

Facilities

Diagnostic and Evaluation Facility

A facility providing only diagnostic services as defined above.

Day Facility

A facility open for care and treatment of the mentally retarded on less than a 24-hour a day basis, providing diagnosis (and evaluation), treatment, education, training, custodial care (personal care) or sheltered workshop services.

Residential Facility

A facility open for care and treatment of the mentally retarded on a 24-hour a day basis, providing diagnosis (and evaluation), treatment, education, training, custodial care (personal care) or sheltered workshop services.

A facility which provides diagnostic and evaluation services as a component of a total program of one or more other services for the clients of a day or residential facility should not be classified as a combination facility (e.g., diagnostic and evaluation-residential or diagnostic and evaluation-day). It should be classified as a day or residential facility.

A diagnostic and evaluation clinic provides diagnostic and evaluation services as its only program and is organized to meet the needs of the general community (as well as the needs of a day or residential facility with which it may be associated).

Other Handicapping Conditions

Hearing impairment - a partial to total loss of hearing leading to a handicap of varying degrees.

Visual impairment - a loss of vision which has any one of the following characteristics:

- (1) Visual acuity is less than 20/70 in the better eye with best correction.
- (2) A visual field restriction which subtends an angle of 30° or less in the better eye.

- (3) An eye condition of a progressive nature which is likely to lead to blindness.

Speech impairment - any difficulty or concern with a person's articulation of sounds, rhythm of speech and/or voice quality.

Language impairment - insufficient development of, or a breakdown in, the ability to use in a meaningful manner either spoken or written words, or other means of receiving and/or expressing words or symbols.

Convulsive disorder - any of a group of symptoms characterized by sudden, involuntary, paroxysmal episodes which tend to recur unexpectedly from time to time. These episodes are also sometimes called epileptic spells, attacks, fits or seizures.

Motor impairment - an interference with the integrated performance of normal body movements.

Behavior disorder - a significant difficulty in adapting mentally, emotionally or socially to one's environment.

DEVELOPMENT OF THE CONSTRUCTION PROGRAMS

Delineation of Counties and Regions

Each of Florida's 67 counties is a basic economic, social and political planning unit. Taxes, school districts, political sub-divisions and other living functions look for direction and purpose planning to this unit building block.

Map 1 delineates the division of Florida areas into counties and regions for purposes of administration and management of the various programs of the Division of Mental Retardation, including the Facilities Construction Program.

Regions follow county lines and also parallel the hospital construction regional divisions. Within regional boundaries are found mutual interests and needs, and in addition the economic, social and political ties of these clusters of counties make for natural working boundaries.

It should be noted that present area planning includes two basic comprehensive institutional arrangements - one (Map 2) for intake of ambulatory patients at the Sunland Training Centers, and the second (Map 3) for intake of non-ambulatory patients at the Sunland hospitals.

It should also be noted that the regional county-group boundaries are considered flexible and will be changed if experience or planning dictates this to be in the best interest of the program.

Table #1 indicates key communities and catchment areas for each region.

Development of the Regional Program

Any State program providing a comprehensive approach to problems of the mentally retarded, must include provisions for joint planning between state, local government, and federal planners as well as representatives of communities and areas for which planning is being considered.

In Florida, a regional plan using groups of counties having mutual interests and problems has proven to be effective.

The basic operational structure being developed is one whereby a regional representative is planned for each region. This person working through and with each regional council will reflect administrative policies to his region, and local needs and recommendations to the Division of Mental Retardation office.

Regional committees exist in all regions and regional representatives have been assigned at this time to 10 of the 12 regions. (Map 4)

At local levels, it has proven feasible to enlist the direct support of the county commissioners in appointing a county committee to act for them in matters requiring their action for assistance and support in matters concerning the mentally retarded. (Map 4)

One of the important responsibilities of the regional committees in FY 1969 will be the development of recommendations as to need for facility construction, and priority assignment recommendations for their regions.

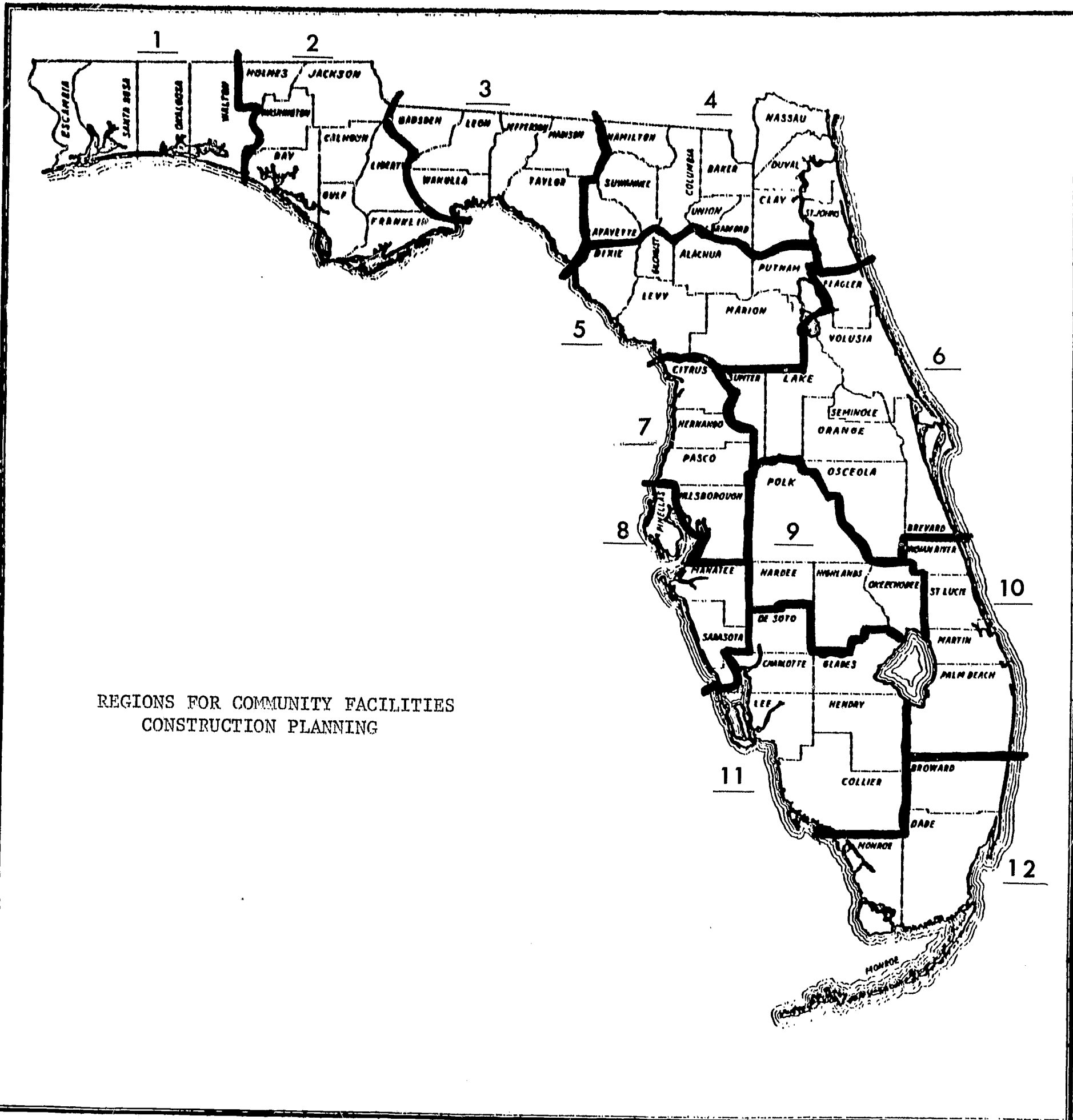
Delineation of Planning or Service Areas

The Regional Areas (as planning areas), are utilized as the basis for Diagnostic and Evaluation Clinics and Residential Facilities. The counties within these regions are individually utilized as planning areas for priority assignments for Day Facilities.

The discussion and detail concerning this delineation is found within Section VI and Appendix A, which deal with priorities.

COMMUNITY MENTAL RETARDATION

MAP 1



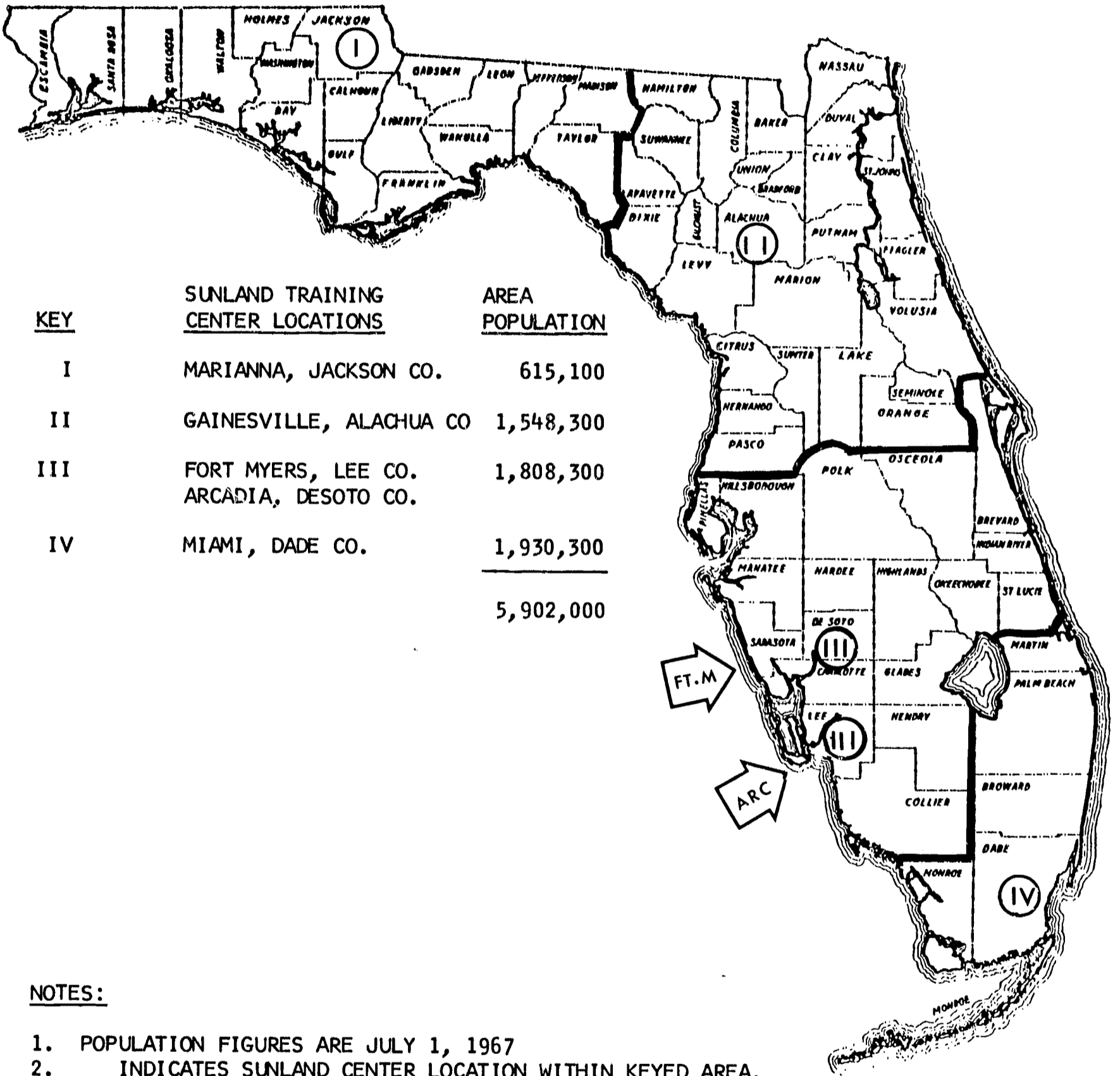
REGIONS FOR COMMUNITY FACILITIES
CONSTRUCTION PLANNING

COMMUNITY MENTAL RETARDATION

AMBULATORY INSTITUTIONAL

PATIENT INTAKE AREAS

MAP 2



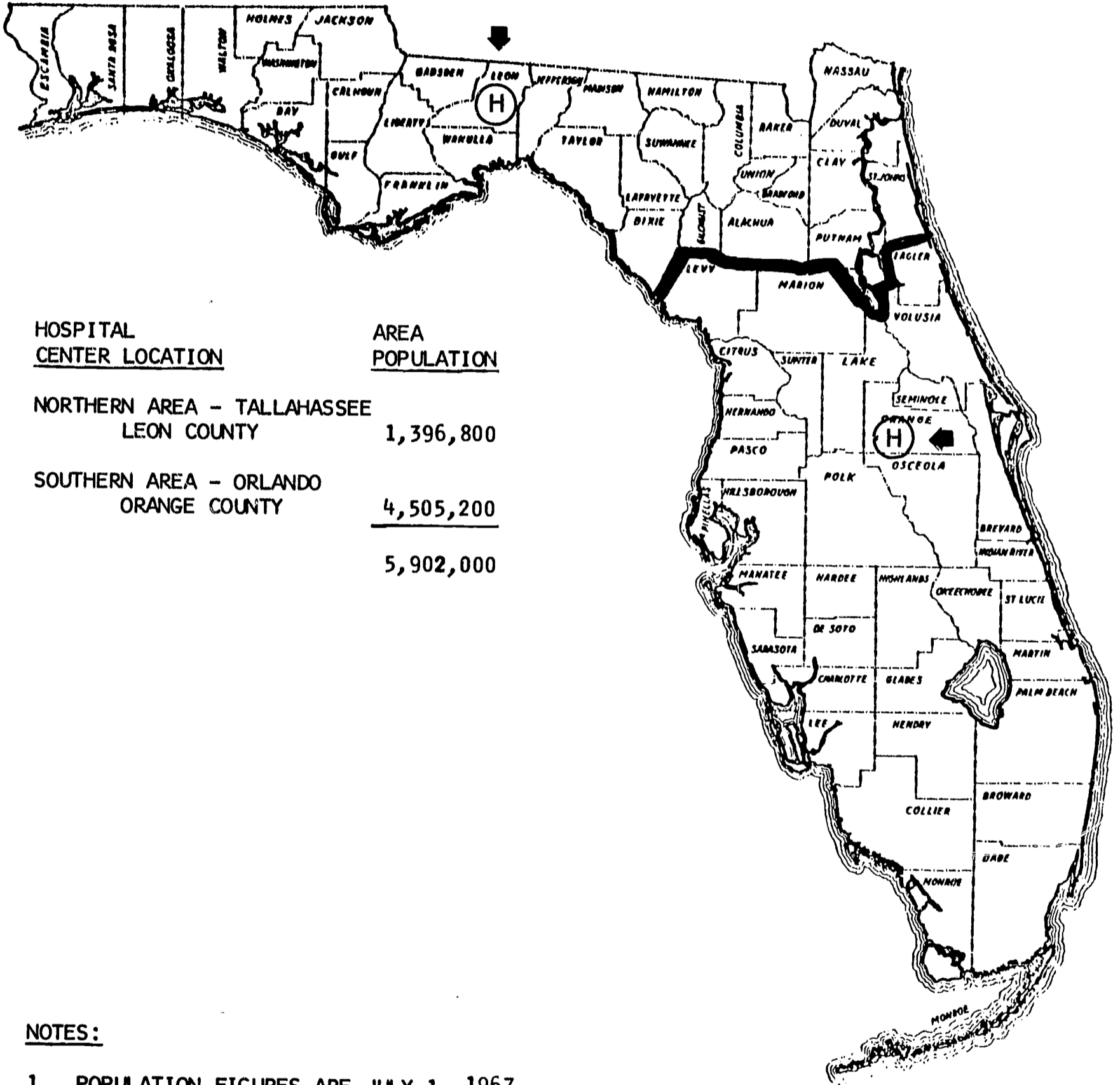
NOTES:

1. POPULATION FIGURES ARE JULY 1, 1967
2. INDICATES SUNLAND CENTER LOCATION WITHIN KEYED AREA.

COMMUNITY MENTAL RETARDATION

NON-AMBULATORY INSTITUTIONAL INTAKE AREAS

MAP 3



NOTES:

1. POPULATION FIGURES ARE JULY 1, 1967
2. (H) INDICATES HOSPITAL CENTER LOCATION WITHIN KEYED AREA.

REGIONAL DEMOGRAPHIC CONCENTRATIONS

Table No. 1

Principal City Region	Other Cities*	Counties	1967 Population By Counties Regions	
1/Pensacola		Escambia	179,400	
	Milton	Santa Rosa	30,900	
	Ft. Walton-Crestview	Okaloosa	63,900	
	DeFuniak Springs	Walton	15,800	
		TOTAL FOR REGION I		290,000
2/Marianna		Jackson	35,900	
	Panama City	Bay	63,200	
	Bonifay	Holmes	11,300	
	Chipley	Washington	11,900	
	Blountstown	Calhoun	7,700	
	Apalachicola-Bristol	Franklin-Liber- ty	10,200	
	Port St. Joe-Wewa- hitchka	Gulf	9,400	
	TOTAL FOR REGION II		149,600	
3/Tallahassee		Leon-Jefferson and Wakulla	103,400	
	Quincy-Chattahoochee	Gadsden	44,100	
	Madison	Madison	14,800	
	Perry	Taylor	13,200	
		TOTAL FOR REGION III		175,500
4/Jacksonville		Duval	494,400	
	Jasper	Hamilton	8,000	
	Lake City	Columbia	24,600	
	Maccleddy	Baker	8,300	
	Fernandina Beach	Nassau	19,200	
	Live Oak-Mayo	Suwannee-La- fayette	19,700	
	Lake Butler	Union	6,700	
	Starke	Bradford	12,900	
	Green Cove Springs	Clay	24,200	
	St. Augustine	St. Johns	32,300	
		TOTAL FOR REGION IV		650,300
5/Gainesville		Alachua	90,500	
	Cross City-Trenton & Chiefland	Dixie-Gilchrist and Levy	20,900	
	Palatka	Putnam	32,500	
	Ocala	Marion	63,900	
		TOTAL FOR REGION V		207,800

REGIONAL DEMOGRAPHIC CONCENTRATIONS

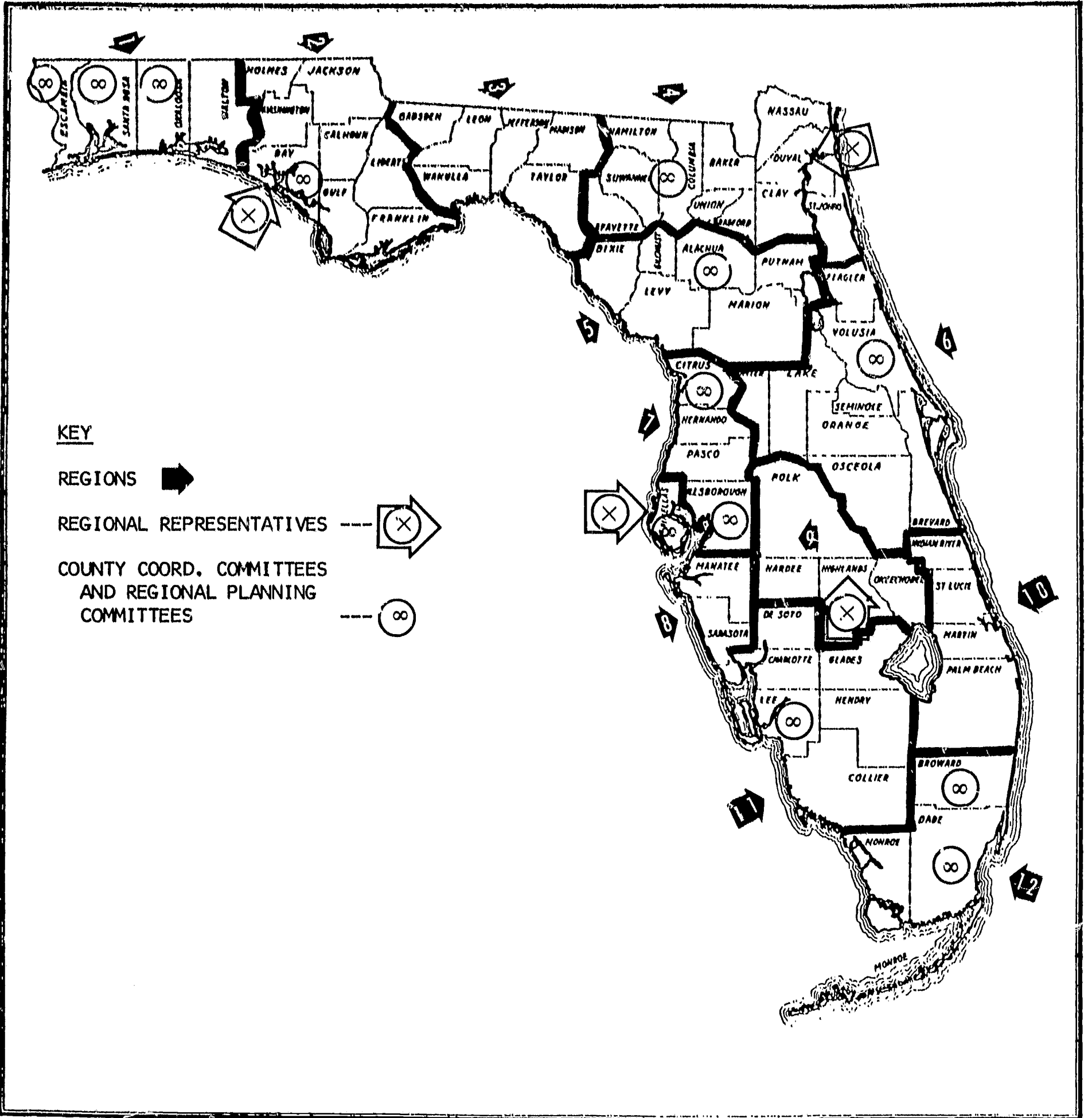
Table No. 1 Cont'd

Principal City Region	Other Cities*	Counties	1967 Population Counties Regions		
6/Orlando	Daytona Beach- Bunnell Bushnell Leesburg-Tavares Sanford Titusville-Cocoa and Melbourne Kissimmee	Orange	302,200		
		Volusia-Flagler	168,500		
		Sumter	13,200		
		Lake	63,400		
		Seminole	68,300		
		Brevard	210,700		
		Osceola	21,200		
		TOTAL FOR REGION VI	847,500		
		7/Tampa	Plant City Inverness Brooksville Dade City	Hillsborough	437,900
				Citrus	13,300
Hernando	13,200				
Pasco	48,100				
TOTAL FOR REGION VII	512,500				
8/St. Petersburg	Clearwater Bradenton Sarasota			Pinellas	437,900
		Manatee	80,700		
		Sarasota	95,900		
		TOTAL FOR REGION VIII	614,500		
9/Lakeland	Winter Haven- Bartow Wauchula Sebring-Okeechobee	Polk	235,600		
		Hardee	14,800		
		Highlands-Okeechobee	34,500		
		TOTAL FOR REGION IX	284,900		
		10/West Palm Beach	Vero Beach Ft. Pierce Stuart		293,600
Palm Beach	32,900				
Indian River	48,700				
St. Lucie	23,200				
Martin	398,400				
TOTAL FOR REGION X					
11/Ft. Myers	Arcadia Punta Gorda LaBelle-Moore Haven Naples-Everglades			Lee	79,100
		DeSoto	13,200		
		Charlotte	19,900		
		Hendry-Glades	15,900		
		Collier	29,400		
		TOTAL FOR REGION XI	157,500		
12/Miami	Hialeah-Miami Bch. Fort Lauderdale Key West	Dade	1,095,500		
		Broward	465,500		
		Monroe	52,500		
		TOTAL FOR REGION XII	1,613,500		
		State Population	<u>5,902,000</u>		

COMMUNITY MENTAL RETARDATION

REGIONAL REPRESENTATIVES AND COMMITTEES

MAP 4



KEY

REGIONS



REGIONAL REPRESENTATIVES



COUNTY COORD. COMMITTEES
AND REGIONAL PLANNING
COMMITTEES



CURRENT REPORT

ON

FACILITIES CONSTRUCTION PROGRAM IN FLORIDA

Florida began its facilities construction program with a variable grant formula in anticipation of similarities in operating experience to that of the Division of Community Hospitals and Medical Facilities. In that program Hill-Burton funds have been so sought after that a variable grant is necessary to assure that good cross section representation would be forthcoming from all areas of the state, including the rural counties.

Following a year's operation it was found that the community sponsors for mental retardation projects were more hard pressed to raise funds to meet the Federal share than the hospital type sponsors. The rural low income areas did not raise funds for new facilities for the retarded and the more affluent areas were discouraged because of their low Federal share assigned for construction cost. For these reasons the Division of Mental Retardation went to an across-the-board 50 per cent grant in fiscal year 1967. This did stimulate more planning requests and it is planned to continue this equal grant participation for fiscal year 1968.

The Division of Mental Retardation has emphasized the community facilities approach with encouragement to local groups such as Associations for Retarded Children.

To date few sponsors or groups have been affluent enough to make application for providing across the board comprehensive services. This is understandable since such facilities as could provide diagnostic and treatment services for example, are tremendously costly in themselves. It appears that the future may offer State assistance to provide matching amounts to supplement community assets for federal matching, and to establish community mental retardation centers in areas where concentrated unfilled needs exist.

Close working relationships with the Divisions of Mental Health and Vocational Rehabilitation are expected to develop jointly funded projects wherein equally important services to each agency may be accomplished without duplication.

Recognition should be given to the State of Florida in its far-sightedness in making state grant-in-aid funds available for operating expenses of non-profit groups on an annual basis. Most projects participating in the facilities construction program are also benefiting from participation in this state program.

The future also holds out promise of federal staffing grants which will then allow more wide ranging, comprehensive services within one planning package.

With this overview of Florida's approach, the amounts allotted to Florida to date; projects now participating, and planned for participation in the immediate future, are identified in location by MAP 5 and by brief descriptive material.

FEDERAL FUNDING TO FLORIDA UNDER FACILITIES CONSTRUCTION
FOR THE MENTALLY RETARDED
PUBLIC LAW 88-164 - TITLE I, PART C

First funding became available in Fiscal Year 1965. Increased allotments have been received annually on the following schedule:

	<u>Annual Allotment</u>	<u>Running Total</u>
F.Y. 1965 (Firm)	\$268,860.00	\$
F.Y. 1966 (Firm)	353,113.00	621,973.00
F.Y. 1967 (Firm)	435,550.00	1,057,523.00
F.Y. 1966 (Special)*	208,880.00	1,266,403.00
F.Y. 1968 (Firm)	341,712.00	1,608,115.00
F.Y. 1969 (Firm)	343,335.00	1,951,450.00

PROGRESS REPORT ON CONSTRUCTION APPROVALS

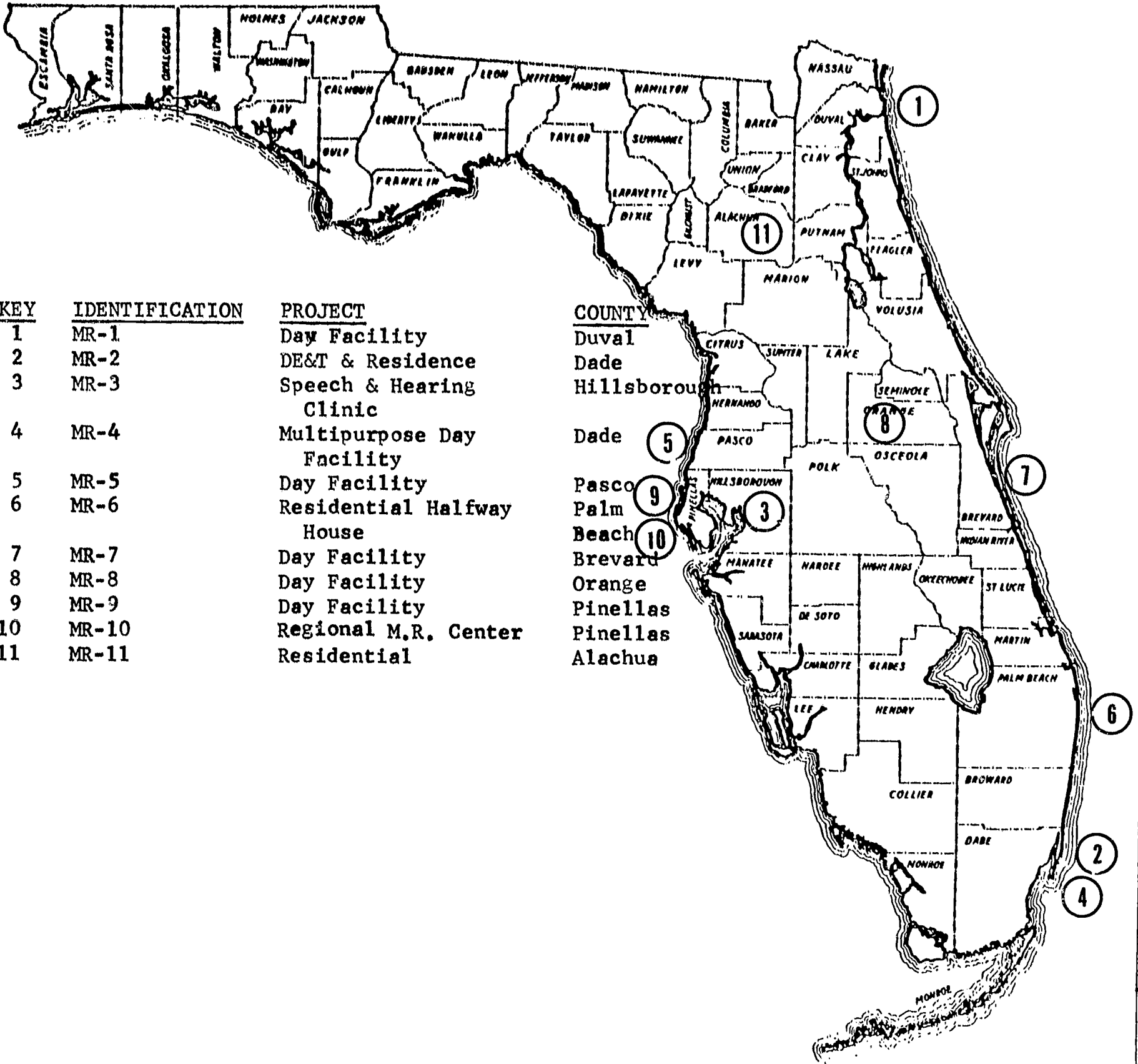
- MR-1 Morning Star School, Jacksonville. A project adding three classrooms and recreation area day facilities to already existing mentally retarded classroom spaces. Present classes and the additions are for pre-school and school age. New addition provides additional training, treatment, therapy and educational services.
Sponsor - Catholic Diocese of St. Augustine
Status - Project completed
- MR-2 Sunland Training Center, Miami. A project adding a day training center, D E & T and a resident service center (3 buildings.) The addition of these buildings will assist the overall comprehensive services offered by Sunland Miami. The buildings are utilized by the entire Sunland population.
Sponsor - Division of Mental Retardation
Status - Project completed.
- MR-3 MacDonald Training Center, Tampa. A project adding a Speech and Hearing Facility to already existing services. Presently serves all degrees of retardation for all ages. Services are proposed to serve 400 annually within a short period of time.
Sponsor - Non-profit corporation.
Status - Project completed
- MR-4 Marian Center, Miami. This is a project to provide a multi-purpose building to be used initially for both feeding and classes. It is a part of an already existing MR complex at the Marian Center. The building will serve 83 new mentally retarded students and provide pre-school and school age children with space for education and training services.
Sponsor - Catholic Diocese of Miami
Status - Project completed

* Transfer of Grant Funds from Mississippi

- MR-5 Open Door School, New Port Richey, Pasco County. The project is to provide education and training day services for pre-school and school age children.
Sponsors - Business and Professional Woman's Club, O. P. Morgenthaler
 Non-profit
Status - Project completed
- MR-6 Palm Beach Habilitation Center, Palm Beach County. A half-way house to house 20 boys and 10 girls with suitable attendant parents. The turnover is anticipated to be from 6 to 18 months. Some social training, feeding and recreation will be part of the facility. This building will be one of several already existing in an ongoing program.
Sponsor - Palm Beach Association for Retarded Children.
Status - Project Completed
- MR-7 Brevard County Training Center Day Facility, Brevard County. To be constructed at Eau Gallie. This day facility is needed to prevent excessive travel of students from the north part of the county to the south.
Sponsor - See Status
Status - The Brevard County Association for Retarded Children has had to abandon sponsorship of this project for financial reasons at the bid stage following completion and approval of final plans. (An alternate sponsor is being considered to continue with previously approved plans at this time.)
- MR-8 Morning Star Day Facility, Orlando, Orange County. A day facility is now the setting of an ongoing program. The facility will allow expansion of the program and absorption of part of a large waiting list.
Sponsor - Catholic Diocese of Orlando
Status - Project was bid in January 1969. Completion of construction estimated as May 1969.
- MR-9 Morning Star Day Facility, Pinellas Park, Pinellas County. A day facility for which the input already exists.
Sponsor - Catholic Diocese of St. Petersburg
Status - Application parts 3 and 4 are in work and final plans are anticipated to be completed early in 1969.
- MR-10 Regional Community Center at St. Petersburg, Pinellas County. This project envisions Central Point of Referral, D & E and residential services to serve a 75 mile radius encompassing some 9 of Florida's 67 counties.
Sponsor - Division of Mental Retardation
Status - Application parts 1 and 2 are obligated. Division and Regional planning continuing
- MR-11 Sunland Training Center, Gainesville, Alachua County. This project provides renovation and additions to two cottages to house moderate to mild retardates. Renovation provides more homelike atmosphere.
Sponsor - Division of Mental Retardation
Status - Application parts 1 and 2 obligated. Architect working on parts 3 and 4

COMMUNITY MENTAL RETARDATION PROJECTS APPROVED FOR CONSTRUCTION P.L. 88-164 Part C, Title I

MAP 5



KEY	IDENTIFICATION	PROJECT	COUNTY
1	MR-1	Day Facility	Duval
2	MR-2	DE&T & Residence	Dade
3	MR-3	Speech & Hearing Clinic	Hillsborough
4	MR-4	Multipurpose Day Facility	Dade
5	MR-5	Day Facility	Pasco
6	MR-6	Residential Halfway House	Palm Beach
7	MR-7	Day Facility	Brevard
8	MR-8	Day Facility	Orange
9	MR-9	Day Facility	Pinellas
10	MR-10	Regional M.R. Center	Pinellas
11	MR-11	Residential	Alachua

OTHER PROJECTS WORKING TOWARD CONSTRUCTION APPROVAL
Construction Conferences Not Held to Date

1. Mental Retardation Regional Community Center - State
Duval County
Sponsor - Division of Mental Retardation
2. Marian Center - Diocese of Miami
2 Residential Facilities
Dade County
3. Haven School - Private Non-Profit
Residential Facility
Dade County
4. Upper Pinellas Association For Retarded Children
Habilitation Center
Pinellas County
5. Pinellas County Association for Retarded Children
Dormitory
Pinellas County
6. Sarasota-Manatee ARC
Day Care/Day Camp
Sarasota County
7. Pioneer Center for Handicapped
D & E/Job Training
Port Salerno
Martin County
8. North Dade Children's Center
Day Care and Residential
Dade County

SECTION IV

SECTION IV

Needs and Services for Florida's Mentally Retarded

Florida's Retardation Problem--Incidence Grouping -- By State--Region--County Planning Areas

It is generally accepted by planners, that at some time in their lives about 3 per cent of the population may be classified as retarded. Planning is complicated, however, by studies indicating a much higher incidence within poverty pockets or circumscribed socio-economic areas; and lower incidences by the lack of recognition at pre-school levels, or by the less exacting social and occupational demands of adult living, as opposed to the academic atmosphere.

Reference to Section IV -The Public School analysis (pg. 63) supports the higher incidence in a positive manner by reporting public school enrollment in special education classes for the mentally retarded to exceed the estimated 3 per cent numbers of retardates in this age group in 13 of Florida's 67 counties.

One approach to services planning is that 3 per cent of school age persons are categorized as retarded by recognized professional assessment, and that this 3 per cent did not just become retarded upon assessment, but were merely identified as such at this time. Simply by passing across a date line into school age or later into adult status does not erase the need of this 3 per cent for certain special services which should be available to all retarded.

This approach to need planning is the basis for the following state, regional, and county tables. It estimates state and county retarded numbers for area services planning.

STATE RETARDED TOTALS

Age Groups	0 - 5	6 - 18	19 +	Totals
Adult	---	---	114,881	114,881
Pre-School	23,019	---	---	23,019
School Age				
Educable	-----	32,636	-----	-----
Trainable	-----	5,218	-----	-----
Dependent	-----	1,306	-----	-----
				39,160
GRAND TOTAL				177,060

Development of Needs by Category of Services Provided (H.E.W. Considerations in Planning)

In the development of calculations for specific specialized services, needs are shown in units rather than in facilities. A facility may range from a portion of a unit on up to multiple units in any given service. This may even be true of diagnosis and evaluation and in treatment when these services are considered on a part-time or individual basis. During limited periods of operation the full basic services, or service team, should be available to those mentally retarded who are to receive the service.

The basic units used are taken from various developments which have shown merit in the size of unit chosen. Further experience may warrant a change in the size of the various units for future planning. These units are intended as additional guidelines in the development of what is currently needed in service facilities.

It must be further noted that all requirements provided for in the Act and the Regulations must be met in development of proposed units needed in the formation of a facility.

Further development of this unit concept can become a useful tool in future planning. It can serve now as one yardstick in the development of a program. Comprehensive service to all mentally retarded is the ultimate goal of this and all future planning.

The table on the following page shows the indicated need for the various services based on estimated prevalence and adjusted totals of mentally retarded not receiving the services indicated. Many different factors were taken into consideration in the development of this table, not only in the number of mentally retarded not being served but also in the estimated number of persons requiring each specific service, some of whom may now be receiving other services.

Custodial services which are called out as one of the six basic categorical services within the Regulations for Grants for Constructing Facilities for the Mentally Retarded must be considered within the whole operation and purpose of the facility, so that units are meaningless to derive in terms of a generic facility. The presently understood meaning of custodial services in terms of this program is really personal care, so that almost all situations other than Diagnostic and Evaluation would be considered to provide such to the retarded child.

DIAGNOSTIC AND EVALUATION SERVICE

With full time work and concentration on diagnosis and evaluation, each unit or service team (Note 1) should be able to handle between 150 and 300 cases per year. After currently unseen cases have been diagnosed, increased attention to consultation may be further developed.

Early diagnosis and evaluation is essential:

1. For development of the best possible individual programs based upon needs of our mentally retarded.
2. To determine the actual case load.
3. To determine educational and training needs.

Comprehensive diagnosis and evaluation services are in very short supply nationwide. As examples, each of the separate services listed below do limited work in relation to the total estimated case load.

- a. County Mental Health Clinics (Note 2)
- b. Leon County, Tallahassee, Florida State University, Human Development Center.
- c. Alachua County, J. Hillis Miller Health Center with the University of Florida Medical School at Gainesville, is in the process of expanding their services.
- d. Dade County, University of Miami Medical School at Miami. The Medical School in Gainesville and Miami are in a position to take difficult cases that require a team of highly skilled specialists for the best possible diagnosis.
- e. Dade County, Miami, Development Evaluation Clinic.
- f. Broward County, Fort Lauderdale, Pediatrics Care Center.
- g. Psychological and testing evaluation is done by the county school system in many of the 67 counties in Florida.
- h. Some General Purpose Hospitals (Note 3).
- i. Florida's Institutional Settings.

Although it is realized that the diagnostic team is the preferred method for doing diagnosis, evaluation and counseling, it is realistic to recognize that identification and initial diagnostic service will, in practice, have to be supplied in a variety of settings. All of the mentally retarded, including all types, can not be channeled through one type of diagnostic gateway.

NOTES

1. A basic "Service Team" may be interpreted to be: The Physician Director (a pediatrician or pediatric neurologist), Clinical Psychologist, Clinical Social Worker, and Public Health Nurse, with necessary clerical aides. Other specialists may be involved on a consultive basis.
2. Mental Health Clinics and other Mental Health Facilities such as clinics for the mentally retarded may be found in the latest Community Mental Health Centers Construction Plan.
3. See State Plan for Construction of Hospitals and Related Medical Facilities for lists of General Purpose Hospitals, Nursing Homes and Rehab. Facilities.

TREATMENT SERVICES

Estimates of the extent of need for treatment services can be made only through an analysis of the caseload of such facilities as described below to determine the extent to which treatment for the mentally retarded is or can be made a feasible part of their programs.

Facilities for treatment, including surgical procedures, remediation of sensory defects, speech therapy, physical therapy, dental therapy, psychiatric treatment, and other appropriate therapies are likely to be provided for the retarded in settings where other activities are also provided. Among these settings are:

- a. Specialized diagnostic clinic, following diagnosis and evaluation.
- b. General or special purpose community hospital.
- c. Rehabilitation Center.
- d. Residential Center for the retarded.
- e. Day program providing education, training, or personal care services.
- f. Community mental health center or hospital.
- g. Crippled Children's Clinics.

This is probably the most difficult area in which to obtain specific factors to base needs. Certainly a majority of our mentally retarded are like normal children in respect to medical care. They are subject to the same children's diseases and other hazards. Those who have additional disabilities just as certainly do need added treatment services.

Treatment services are given through many different available individuals, agencies and facilities. The data gathered is not conclusive for this service nor does it cover the many elements that should enter into this programming.

A large portion of the need for treatment services will stem from the fact that many of the retarded, especially the severely and profoundly retarded, have multiple handicaps, including motor dysfunction and sensory impairments which may be amenable to proper treatment.

For this writing we must remind all communities, counties, and regions, and their professional people, that since they have retarded persons going without treatment, a specific effort must be made by each to see that appropriate treatment is made available. Immediate plans are necessary to utilize all available treatment services in all parts of the State and to develop new services where necessary.

EDUCATIONAL SERVICES

A unit of fifteen (15) mildly (educable) mentally retarded persons to one (1) teacher qualified in special education is the most accepted ration at this time. Teacher aides and volunteers are valuable adjuncts in the more difficult classes and particularly where close supervision gives added learning ability. Where programs are extended to the high school level, the ratio of teacher to pupils may be extended to 1 to 18 or 20.

Special education exists in almost all of the 67 counties in Florida's county school systems, where legally the special education program can provide for children from 3 to 21 years of age. This mildly retarded group, usually rated between 50 and 70 I.Q., are estimated to make up approximately 80% of all mentally retarded. Some county schools rate their educable retarded between 65 and 80 or even 85 I.Q.

A majority of mildly retarded children are not identified until they start school. More pre-school programs would identify these children at an earlier age which is essential to good programming. Operations such as "Head Start" provide excellent sources of initial identification in pre-school programs indicating a need for special education services.

Policies need to be developed in communities for:

1. Pre-School mentally retarded children.
2. Children of school age ineligible for public school programs.
3. The mentally retarded beyond school age (in most counties now set at age 17) for whom evaluation continues to reveal an ability for learning advancement.

It is important that each community understand and support the establishment of the number of teaching units necessary to serve their estimated unserved educable retarded children.

As the county school systems are persuaded to widen their acceptable I.Q. levels, more retarded children will be eligible for public school education.

TRAINING SERVICES

In Florida, training programs for moderately retarded (trainable) children are increasing in public school programs. The traditional plan indicates that a common unit may consist of ten (10) mentally retarded persons to one (1) teacher qualified in special education. With the shortage of trained personnel, some school programs have increased the teacher pupil ratio and assigned teaching assistants or aides to the class to perform many of the non-professional duties for the teacher.

The moderately or trainable retarded, (I.Q. usually considered between 35 - 50, make up about 15% of the mentally retarded group. New methods and procedures are proving that this group and many of the lower I.Q. levels are capable of considerably more advancement than was believed possible a few years ago.

Even when county school systems enlarge programs the number of these retarded who will need services beyond school age will be significant. A variety of day care and adult activities will be necessary throughout life. Programs for the trainable must also be further developed for vocational or habilitation training to prepare retardates for the best possible degree of independence they are capable of achieving in adult life. (See Community Sheltered Workshop also.)

The Regulations stipulate the following essential training services:

1. Training in self-help and motor skills.
2. Training in activities of daily living.
3. Vocational training.
4. Opportunities for personality development.
5. Experience conducive to social development, and which is carried out under the supervision of personnel qualified to direct these services.

It is also noted that training services should be available to the pre-school age child and ones who are beyond normal school age. Even when this extended program is realized on the part of our school system, there still remains a community problem to provide training for those children, who because of multiple handicaps may not qualify for public school instruction.

The number of persons beyond school age in need of educational services will relate directly to the quality of the school program to which they have been exposed. Most students in continuous educational programs will find employment opportunities. Some, however, can benefit from vocational education programs or extended educational programs tied in closely with occupational related experiences.

It appears that when public education is able to absorb responsibilities in this area, the major need for other community based educational services will be largely at the pre and post school and adult level.

RESIDENTIAL SERVICES

Since community residential care is a factor on which there is little experience in the United States, real factors of need can not be specifically stated until added experience is gained in this field. A unit of from 10 to 20 is believed to be the most desirable size to give a homelike atmosphere for the residents.

Three (3) basic purposes for community residential services particularly as related to opening phases of the Federal assistance program are:

1. To enable more mentally retarded to make use of other available services and to reduce long commutation problems.
2. To provide half-way housing for those starting to work in regular jobs and give assistance during a period of adjustment to community living.
3. To provide continued residence for working persons who continue to need minimal care and guidance.

Residential service is a facet to comprehensive care if communities are to reach their full potential in the best possible service to their retarded. Additional services regions need to consider are provisions for those without homes and the elderly retarded.

Adult activities and independent living centers for those incapable of productive work, competitive or sheltered, are essential in the community. Day care or day activity centers may be organized with training, treatment or recreational components.

Residential services should include a 5 day week program for those who can spend their week-ends with their families. They should also provide a place where retardates may be cared for on a short period basis during times of family crisis. 7 day services for those who are better off away from their own homes and for those for whom good foster home care is indicated but may not be available are also needed.

SHELTERED WORKSHOPS

The actual number of retardates constituting a unit will vary with the program and the ability of the recipients of the program. However, for the average program 15 retarded persons with one (1) trained instructor and one (1) instructor aide is recommended for a basic unit. Other make-up of a unit may be justified based on the groups to be served and the planned program.

For the purpose of this plan, a sheltered workshop has two basic functions in comprehensive service.

1. To provide for the interlude between school years and work years in an individual's life. To provide suitable work training, work habits, and good social behavior under fully developed evaluation and training programs.
2. To provide extended employment under sheltered conditions with appropriate training for those individuals who are unable to meet work competition in the work-a-day world.

The above two functions should include programs of paid work which provides: a) work evaluation, b) work adjustment training, c) occupational training, and d) transitional or extended employment.

The grouping for the number of units needed per region is based on 1 per 1,000 mentally retarded adults.

Wherever possible sheltered workshops should be an integral part of a complex of services available to the mentally retarded. In fact, to participate in Federal Grants for facility construction, the sheltered workshop must be a part of a fully comprehensive program of services.

NEED FOR SPECIALIZED SERVICES BY REGION

This table lays out present considered total regional needs in manageable units of various services. These units commonly require one (1) or more trained supervisors within that unit setting. Each service is to be considered exclusive and based upon estimated numbers of retarded by age groups as noted. Some percentage of need has already been met as noted by Tables 5 and 6. Used in conjunction these two tables should aid community planners in setting program goals.

Regions	Diagnostic & Evaluation (1) (150-200 cases annually)		Educational Services (2) School Age Pre-School (Units=10)		Training Services (3) School Age Pre-School (Units=10)		Sheltered Workshop (4) (Units=15)		Residential (5) (Units=20)	
	Est. MR	Units	Est. MR	/Units	Est. MR	/Units	Est. MR	/Units	Est. MR	Units
1	200	1	1,850/123	375/38	300/30	60/6	170	11	290	16
2	100	*1	1,020/69	190/19	160/10	30/3	90	6	150	8
3	100	*1	1,150/77	190/19	180/18	30/3	100	7	180	9
4	400	2	4,050/270	810/81	650/65	130/13	390	26	650	33
5	150	*1	1,330/89	250/25	210/21	40/4	130	9	210	10
6	550	3	4,700/313	1,000/100	750/75	160/16	540	36	850	43
7	300	2	2,900/193	560/56	420/42	90/9	330	22	510	26
8	400	2	2,670/178	500/50	430/43	80/8	450	30	610	31
9	200	1	1,740/116	375/38	280/28	60/6	180	12	280	14
10	250	1-2	2,100/140	440/44	340/34	70/7	260	17	400	20
11	100	*1	850/57	190/19	140/14	30/3	100	7	160	8
12	1,000	5-6	8,290/553	1,625/163	1,330/133	260/26	1,090	73	1,610	81

NOTES: All but Pre-School estimates are taken from planning considerations within Public Health Pub. No. 1181-b-1 "Planning of Facilities for the Mentally Retarded" Pre-School estimates of 2 and 3 are by Division Facilities Section

1. Based upon 625/10 population (Estimated to closest 50)
2. Based upon 2.5% School age population (Estimated to closest 10)
2.5% Pre-School -- Ages 4 & 5 (Estimated to closest 5)
3. Based upon 0.4% School age (Estimated to closest 10)
0.4% Pre-School -- Ages 4 & 5 (Estimated to closest 10)
4. Based upon 0.1% Adults (Estimated to closest 10)
5. Based upon 0.1% All ages (Estimated to closest 10)

* = Less than full clinic operation required.

TABLE 3
ESTIMATED INCIDENCE OF RETARDATION IN FLORIDA BY COUNTY
1967

COUNTIES	Total Population (Non-Retarded)	0-5		6-18		DEP.*	19 + (3% MR)	TOTAL -- All Ages (3% Retarded)
		(3% MR)	ED.	IR.	ED.			
Alachua	90,500	374	563	90	23	1,665	2,715	
Baker	8,300	40	57	9	2	141	249	
Bay	63,200	315	395	63	16	1,107	1,896	
Bradford	12,900	55	89	14	4	225	387	
Brevard	210,700	1,057	1,203	192	48	3,821	6,321	
Broward	465,500	1,755	2,428	388	97	9,297	13,965	
Calhoun	7,700	31	58	9	2	131	231	
Charlotte	19,900	54	86	14	3	440	597	
Citrus	13,300	46	73	12	3	265	399	
Clay	24,200	115	155	25	6	425	726	
Collier	29,400	120	174	28	7	553	882	
Columbia	24,600	105	169	27	7	430	738	
Dade	1,095,500	3,924	5,593	895	224	22,229	32,865	
DeSoto	13,200	44	69	11	3	269	396	
Dixie	5,000	23	33	5	1	88	150	
Duval	494,400	2,240	3,012	482	120	8,978	14,832	
Escambia	179,400	878	1,162	186	47	3,109	5,382	
Flagler	5,100	24	31	5	1	92	153	
Franklin	7,200	30	43	7	2	134	216	
Gadsden	44,100	192	286	46	11	788	1,323	
Gilchrist	3,400	14	23	4	1	60	102	
Glades	4,000	17	23	4	1	75	120	
Gulf	9,400	46	64	10	3	159	282	
Hamilton	8,000	34	60	10	2	134	240	
Hardee	14,800	57	96	15	4	272	444	
Hendry	11,900	55	76	12	3	211	357	
Hernando	13,200	46	84	13	3	250	396	
Highlands	25,100	99	141	23	6	484	753	
Hillsborough	437,900	1,751	2,499	400	100	8,387	13,137	
Holmes	11,300	36	80	13	3	207	339	
Indian River	32,900	130	185	30	7	635	987	
Jackson	35,900	137	271	43	11	615	1,077	
Jefferson	9,300	46	68	11	3	151	279	
Lafayette	2,800	11	18	3	1	51	84	

TABLE 3 (CONT'D)
1967

COUNTIES	Total		6 - 18		DEP.*	19 +		TOTAL All Ages
	Population	0-5 (3% MR)	ED.	T.R.		(3% MR)		
Lake	63,400	222	347	56	14	1,263	1,902	
Lee	79,100	295	422	68	17	1,571	2,373	
Leon	88,500	376	550	88	22	1,619	2,655	
Levy	12,500	49	83	13	3	227	375	
Liberty	3,000	14	20	3	1	52	90	
Madison	14,800	62	114	18	5	245	444	
Manatee	80,700	246	392	63	16	1,704	2,421	
Marion	63,900	262	414	66	17	1,158	1,917	
Martin	23,200	87	119	19	5	466	696	
Monroe	52,500	218	272	43	11	1,031	1,575	
Nassau	19,200	95	135	22	5	319	576	
Okaloosa	63,900	364	386	62	15	1,090	1,917	
Okeechobee	9,400	43	69	11	3	156	282	
Orange	302,200	1,293	1,722	275	69	5,707	9,066	
Osceola	21,200	70	105	17	4	440	636	
Palm Beach	293,600	1,081	1,505	241	60	5,921	8,808	
Pasco	48,100	150	247	40	10	996	1,443	
Pinellas	437,900	1,168	1,823	292	73	9,781	13,137	
Polk	235,600	949	1,436	230	57	4,396	7,068	
Putnam	32,500	150	211	34	8	572	975	
St. Johns	32,300	123	200	32	8	606	969	
St. Lucie	48,700	204	286	46	12	913	1,461	
Santa Rosa	30,900	149	195	31	8	544	927	
Sarasota	95,900	291	451	72	18	2,045	2,877	
Seminole	68,300	317	421	67	17	1,227	2,049	
Sumter	13,200	54	86	14	3	239	396	
Suwannee	16,900	65	118	19	5	300	507	
Taylor	13,200	64	90	14	4	224	396	
Union	6,700	22	35	6	1	137	201	
Volusia	163,400	504	781	125	31	3,461	4,902	
Wakulla	5,600	24	40	6	2	96	168	
Walton	15,800	60	108	17	4	285	474	
Washington	11,900	47	86	9	3	212	357	

TABLE 4
ESTIMATED INCIDENCE OF RETARDATION IN FLORIDA - BY REGION

Counties	R E G I O N S	Total Population 1967	AGE GROUPS				19 +
			0-5	ED.	6-18 TR.	DEP.	
Escambia	1	179,400	878	1,162	186	47	3,109
Santa Rosa		30,900	149	195	31	8	544
Okaloosa		63,900	364	386	62	15	1,090
Walton		15,800	60	108	17	4	285
Region 1		290,000	1,451	1,851	296	74	5,028
Holmes	2	11,300	36	80	13	3	207
Washington		11,900	47	86	9	3	212
Bay		63,200	315	395	63	16	1,107
Jackson		35,900	137	271	43	11	615
Calhoun		7,700	31	58	9	2	131
Gulf		9,400	46	64	10	3	159
Liberty		3,000	14	20	3	1	52
Franklin		7,200	30	43	7	2	134
Region 2		149,600	656	1,017	157	41	2,617
Gadsden	3	44,100	192	286	46	11	788
Leon		88,500	376	550	88	22	1,619
Wakulla		5,600	24	40	6	2	96
Jefferson		9,300	46	68	11	3	151
Madison		14,800	62	114	18	5	245
Taylor		13,200	64	90	14	4	224
Region 3		175,500	764	1,148	183	47	3,123
Hamilton	4	8,000	34	60	10	2	134
Suwannee		16,900	65	118	19	5	300
Lafayette		2,800	11	18	3	1	51
Columbia		24,600	105	169	27	7	430
Baker		8,300	40	57	9	2	141
Union		6,700	22	35	6	1	137
Bradford		12,900	55	89	14	4	225
Nassau		19,200	95	135	22	5	319
Duval		494,400	2,240	3,012	482	120	8,978
Clay		24,200	115	155	25	6	425
St. Johns		32,300	123	200	32	8	606
Region 4		650,300	2,905	4,048	649	161	11,746
Dixie	5	5,000	23	33	5	1	88
Gilchrist		3,400	14	23	4	1	60
Levy		12,500	49	83	13	3	227
Alachua		90,500	374	563	90	23	1,665
Marion		63,900	262	414	66	17	1,158
Putnam		32,500	150	211	34	8	572
Region 5		207,800	872	1,327	212	53	3,770

Note: ED= Educable/ TR= Trainable/ DEP.= Department

TABLE 4 (CONT'D)

Counties	R E G I O N S	Total Population 1967	AGE GROUPS				19 +
			0-5	ED.	6-18 TR.	DEP.	
Flagler	6	5,100	24	31	5	1	92
Volusia		163,400	504	781	125	31	3,461
Sumter		13,200	54	81	14	3	239
Lake		63,400	222	347	56	14	1,263
Orange		302,200	1,293	1,722	275	19	5,707
Seminole		68,300	317	421	67	17	1,227
Osceola		21,200	70	105	17	4	440
Brevard		210,700	1,057	1,203	192	48	3,821
Region 6		847,500	3,541	4,696	751	187	16,250
Citrus	7	13,300	46	73	12	3	265
Hernando		13,200	46	84	13	3	250
Pasco		48,100	150	247	40	10	996
Hillsborough		437,900	1,751	2,499	400	100	8,387
Region 7		512,500	1,993	2,903	465	116	9,898
Pinellas	8	437,900	1,168	1,823	292	73	9,781
Manatee		80,700	246	392	63	16	1,704
Sarasota		95,900	291	451	72	18	2,045
Region 8		614,500	1,705	2,666	427	107	13,530
Polk	9	235,600	949	1,436	230	57	4,396
Hardee		14,800	57	96	15	4	272
Highlands		25,100	99	141	23	6	484
Okeechobee		9,400	43	69	11	3	156
Region 9		284,900	1,148	1,742	279	70	5,308
Indian River	10	32,900	130	185	30	7	635
St. Lucie		48,700	204	286	46	12	913
Martin		23,200	87	119	19	5	466
Palm Beach		293,600	1,081	1,505	241	60	5,921
Region 10		398,400	1,502	2,095	336	84	7,935
DeSoto	11	13,200	44	69	11	3	269
Charlotte		19,900	54	86	14	3	440
Lee		79,100	295	422	68	17	1,571
Collier		29,400	120	174	28	7	553
Glades		4,000	17	23	4	1	75
Hendry		11,900	55	76	12	3	211
Region 11		157,500	585	850	137	34	3,119
Broward	12	465,500	1,755	2,428	388	97	9,297
Dade		1,095,500	3,924	5,593	895	224	22,229
Monroe		52,500	218	272	43	11	1,031
Region 12		1,613,500	5,897	8,293	1,326	332	32,557
STATE TOTALS		5,902,000	23,019	32,636	5,218	1,306	114,881

TABLE 5
NUMBERS OF SERVED AND UNSERVED MENTALLY RETARDED
BY COUNTY

COUNTY	SERVICES						NEED	
	ESTIMATED RETARDED	INSTITUTIONALIZED	PUBLIC SCHOOL	COMMUNITY	TOTAL	UNSERVED	COUNTY RANK	
Alachua	2,715	171	440	24	655	2,060	13	
Baker	249	19	107	0	128	121	60	
Bay	1,896	119	583	37	746	1,150	21	
Bradford	387	32	85	0	122	265	47	
Brevard	6,321	156	544	35	757	5,564	8	
Broward	13,965	406	691	324	1,484	12,481	3	
Calhoun	231	24	100	-	124	107	62	
Charlotte	597	19	71	-	92	505	35	
Citrus	399	26	124	9	162	237	50	
Clay	726	30	-	-	36	690	32	
Collier	882	39	71	-	114	768	31	
Columbia	738	69	88	-	162	576	33	
Dade	32,865	1,069	1,849	973	4,087	28,778	1	
DeSoto	396	32	231	-	263	133	59	
Dixie	150	13	18	-	34	116	61	
Duval	14,832	883	1,074	140	2,272	12,560	2	
Escambia	5,382	277	287	300	880	4,502	10	

TABLE 5 (CONT'D)

COUNTY	ESTIMATED RETARDED	SERVICES					NEED		COUNTY RANK
		INSTITUTIONALIZED	PUBLIC SCHOOL	COMMUNITY	TOTAL	UNSERVED			
Flagler	153	16	-	-	17	136	58		
Franklin	216	16	9	-	25	191	53		
Gadsden	1,323	91	365	-	459	864	25		
Gilchrist	102	8	-	-	9	93	64		
Glades	120	3	95	-	98	22	67		
Gulf	282	25	20	-	45	237	50		
Hamilton	240	17	43	-	64	176	54		
Hardee	444	36	101	-	138	306	45		
Hendry	357	18	27	-	45	312	44		
Hernando	396	22	52	-	79	317	42		
Highlands	753	31	398	6	437	316	43		
Hillsborough	13,137	670	633	566	1,920	11,217	4		
Holmes	339	30	112	-	144	195	52		
Indian River	987	37	102	-	147	840	27		
Jackson	1,077	85	190	-	280	797	28		

TABLE 5 (CONT'D)

COUNTY	ESTIMATED RETAIRED	SERVICES					NEED		COUNTY RANK
		INSTITUTIONALIZED	PUBLIC SCHOOL	COMMUNITY	TOTAL	UNSERVED			
Jefferson	279	27	95	-	124	155	55		
Lafayette	84	5	-	-	5	79	65		
Lake	1,902	115	256	14	398	1,504	20		
Lee	2,373	116	239	104	475	1,898	15		
Leon	2,655	162	368	223	759	1,896	16		
Levy	375	28	-	-	33	342	41		
Liberty	90	8	41	-	50	40	66		
Madison	444	27	49	11	88	356	40		
Manatee	2,421	105	366	3	480	1,941	14		
Marion	1,917	102	147	36	308	1,609	18		
Martin	696	28	70	41	145	551	34		
Monroe	1,575	62	67	12	146	1,429	22		
Nassau	576	32	108	-	147	429	37		
Okaloosa	1,917	65	283	-	352	1,565	19		
Okeechobee	282	16	24	-	44	238	48		
Orange	9,066	427	835	234	1,574	7,492	7		
Osceola	636	33	122	-	163	473	36		

TABLE 5 (CONT'D)

COUNTY	ESTIMATED RETAIRED	SERVICES					NEED			COUNTY RANK
		INSTITUTIONALIZED	PUBLIC SCHOOL	COMMUNITY	TOTAL	UNSERVED				
Palm Beach	8,808	283	832	145	1,302	7,506	6			
Pasco	1,443	73	55	17	156	1,287	23			
Pineellas	13,137	411	1,563	291	2,303	10,834	5			
Polk	7,068	399	1,436	136	2,009	5,059	9			
Putnam	975	79	33	-	123	852	26			
St. Johns	969	64	107	-	184	785	30			
St. Lucie	1,461	85	67	24	185	1,276	24			
Santa Rosa	927	46	76	14	136	791	29			
Sarasota	2,877	101	251	86	450	2,427	12			
Seminole	2,049	108	151	12	301	1,748	17			
Sumter	396	34	71	-	109	287	46			
Suwannee	507	46	71	-	119	388	39			
Taylor	396	27	159	-	187	209	51			
Union	201	26	25	-	52	149	56			
Volusia	4,902	178	380	232	818	4,084	11			
Wakulla	168	18	46	=	64	104	63			
Walton	474	37	11	-	50	424	38			
Washington	357	30	189	-	221	136	58			
	177,060	7,892	17,103	4,049	30,085	146,975				

TABLE 6
NUMBERS OF SERVED AND UNSERVED MENTALLY RETARDED
BY REGION

REGIONS	1967 POPULATION	CALCULATED NEEDS						SERVICES PROVIDED						Total Services
		Pre School	School Age			Adult	Total Needs	Institutional	Public School	Day	Community		Diag/Eval	
			Ed	Tr	Lep						Residential			
1	290,000	1,451	1,851	296	74	5,028	8,700	425	657	130	0	0	184	1,396
2	149,600	656	1,017	157	41	2,617	4,488	337	1,244	37	0	0	0	1,618
3	175,500	764	1,148	183	47	3,123	5,265	352	1,082	40	0	0	194	1,668
4	650,300	2,905	4,048	649	161	11,746	19,509	1,223	1,708	140	0	0	0	3,071
5	207,800	872	1,327	212	53	3,770	6,234	401	638	60	0	0	0	1,099
6	847,500	3,541	4,696	751	187	16,250	25,425	1,067	2,359	333	194	0	0	3,953
7	512,500	1,993	2,903	465	116	9,898	15,375	791	864	434	45	0	113	2,247
8	614,500	1,705	2,666	427	107	13,530	18,435	617	2,180	275	29	0	76	3,177
9	284,900	1,148	1,742	279	70	5,308	8,547	482	1,959	142	0	0	0	2,583
10	398,400	1,502	2,095	336	84	7,935	11,952	433	1,071	195	15	0	0	1,714
11	157,500	582	850	137	34	3,119	4,725	227	734	104	0	0	0	1,065
12	1,613,500	5,897	8,293	1,326	332	32,557	48,405	1,537	2,607	643	397	0	269	5,453
<u>Sub-Totals</u>			32,636	5,218	1,306					2,533	680		836	
<u>TOTALS</u>		5,902,000	23,019	39,160	114,881	177,060	7,892	17,103	4,049	29,044				29,044

THE PUBLIC SCHOOLS AND SPECIAL EDUCATION

FOR THE MENTALLY RETARDED

The following charts delineate the concern and aggressive progress of the Florida State Department of Education in education for the retarded children of Florida.

Despite increasing numbers of exceptional child units authorized by each legislature since 1961, the numbers still lag the units needed by the State Department of Education to satisfy the need due to Florida's phenomenal increase in population, and to absorb the already existing backlog of waiting list.

A five-year plan for Exceptional Child Education now provides a comprehensive statewide program, and if accomplished will insure a program of quality. This is a phase-in plan to absorb accumulated unmet needs and to provide for a 3 per cent growth factor. The 1967 Legislature met requests with understanding, and authorized 20 per cent more new exceptional education units than had been proposed in the first increment. With such continued support, and presuming the professional personnel can be trained and attracted to work in Florida, the special education needs for Florida would be largely accomplished.

Most classes for the educable mentally retarded are housed in regular public school buildings. Those for most trainable mentally retarded are housed in special schools and centers, some of which are in facilities owned by a local Association for Retarded Children or other parent-stimulated interest group. In some cases one or more special education units may be assigned for such classes.

Many of Florida's 67 counties are showing a keen sensitivity in public school planning for the retarded. For example, in returns for the school year 1967-1968 from county school reports, 47 counties indicate identification of and placement on a waiting list within the public school system of 5,995 educable retarded - and a waiting list of 432 trainable in 20 counties.

In the following comparative table on the estimated numbers of mentally retarded served by the public school special education program, several counties show more retarded being served than would be anticipated by estimated population percentages. This accounts for some regional figures and state totals from coinciding in numbers served and not served when compared with estimated retarded totals. Conversely, there are some few counties with no public school needs reported as being served, and these are of course shown as needing 100 per cent services.

The county population statistics are based upon estimated population figures for Florida furnished by the Public Health Service. This estimate is 180,000 less than published by Florida Development Commission figures, also estimated from basic census sources. The lower public health figures are the ones upon which our share of grant monies are calculated and would tend to ensure our estimates of numbers of retarded are conservative, rather than overestimated.

TABLE 7
 FLORIDA COUNTY DATA
 1967-1968 SCHOOL YEAR
 PUBLIC SCHOOL SPECIAL EDUCATION CLASSES FOR MENTALLY RETARDED (1)

COUNTY	PUPILS	COUNTY	PUPILS
Alachua (2)	440	Lake	256
Baker	107	Lee (2)	239
Bay (2)	583	Leon (2)	368
Bradford (2)	85	Levy	-----
Brevard (2)	544	Liberty	41
Broward (2)	691	Madison (2)	49
Calhoun (2)	100	Manatee (2)	366
Charlotte	71	Marion	147
Citrus	124	Martin	70
Clay	-----	Monroe (2)	67
Collier	71	Nassau	108
Columbia (2)	88	Okaloosa (2)	283
Dade (2)	1,849	Okeechobee (2)	24
DeSoto	231	Orange (2)	835
Dixie	18	Osceola	122
Duval (2)	1,074	Palm Beach (2)	832
Escambia (2)	287	Pasco	55
Flagler	-----	Pinellas (2)	1,563
Franklin (2)	9	Polk (2)	1,436
Gadsden (2)	365	Putnam	33
Gilchrist	-----	St. Johns	107
Glades (2)	95	St. Lucie	67
Gulf	20	Santa Rosa (2)	76
Hamilton (2)	43	Sarasota (2)	251
Hardee (2)	101	Seminole	151
Hendry (2)	27	Sumter	71
Hernando	52	Suwannee	71
Highlands (2)	398	Taylor (2)	159
Hillsborough (2)	633	Union	25
Holmes (2)	112	Volusia	380
Indian River	102	Wakulla (2)	46
Jackson (2)	190	Walton	11
Jefferson	95	Washington	189
Lafayette	-----		<u>17,103</u>

<u>CLASSES FOR RETARDED</u>	<u>TEACHERS</u>	<u>PUPILS</u>
Educable	866	15,246
Trainable	141	<u>1,857</u>
	TOTAL	<u>17,103</u>

NOTES:

- (1) Source - Department of Education, 1967-68 Annual Report
- (2) These Counties have established trainable level classes as well as educable.

TABLE 8

Comparative Table on Estimated Mentally Retarded
Served by Public Schools Special Education Program, 1967-68

COUNTIES	R E G I O N S	(A) Estimated No. of School Age Children by Counties Ages 6-18	(B) Estimated Retarded (3% School Age Group)	(C) M. R. in Special Education Classes	(D) Waiting List for Special Education Classes For Retarded	(E) Estimated Age Children Not Served By Special Education Classes*
Escambia	1	46,500	1,395	287	344	1,108
Santa Rosa		7,802	234	76	45	158
Okaloosa		15,433	463	283	95	180
Walton		4,306	129	11	0	118
Region 1		74,041	2,221	657	484	1,564
Holmes	2	3,183	96	112	0	0
Washington		3,267	98	189	7	7
Bay		15,794	474	583	303	303
Jackson		10,849	325	190	45	135
Calhoun		2,300	69	100	0	0
Gulf		2,578	77	20	35	57
Liberty		800	24	41	0	0
Franklin		1,731	52	9	0	43
Region 2		40,502	1,215	1,244	390	545
Gadsden	3	11,440	343	365	0	0
Leon		21,983	660	368	161	292
Wakulla		1,597	48	46	0	2
Jefferson		2,737	82	95	143	143
Madison		4,545	137	49	0	88
Taylor		3,588	108	159	70	70
Region 3		45,890	1,280	1,082	374	595
Hamilton	4	2,387	72	43	0	29
Suwannee		4,725	142	71	47	71
Lafayette		738	22	0	0	22
Columbia		6,758	203	88	45	115
Baker		2,269	68	107	75	75
Union		1,409	42	25	29	29
Bradford		3,551	107	85	124	124
Nassau		5,401	162	108	15	54
Duval		120,485	3,614	1,074	659	2,540
Clay		6,207	186	0	0	186
St. Johns		8,014	240	107	51	133
Region 4		161,944	4,858	1,708	1,045	3,378
Dixie	5	1,307	39	18	40	40
Gilchrist		937	28	0	0	28
Levy		3,322	99	0	0	99
Alachua		22,538	676	440	109	236
Marion		16,576	497	147	63	350
Putnam		8,421	253	33	50	220
Region 5		53,101	1,592	638	262	973

* Includes waiting list.

TABLE 8 (CONT'D)

COUNTIES	R E G I O N S	(A) Est. School Age 6 - 18	(B) 3% of School Age	(C) M. R. in Spec. Ed.	(D) Waiting List for Retarded	(E) Estimated M.R. not served in Spec. Ed.
Flagler	6	1,230	37	0	0	37
Volusia		31,242	937	380	307	557
Sumter		3,452	103	71	75	75
Lake		13,897	417	256	182	182
Orange		68,871	2,066	835	289	1,231
Seminole		16,822	505	151	140	354
Osceola		4,185	126	122	15	15
Brevard		48,103	1,443	544	5	899
Region 6		187,802	5,634	2,359	1,013	3,350
Citrus	7	2,938	88	124	0	0
Hernando		3,361	100	52	150	150
Pasco		9,897	297	55	51	242
Hillsborough		99,973	2,999	633	0	2,366
Region 7		116,169	3,484	864	201	2,758
Pinellas	8	72,934	2,188	1,563	178	625
Manatee		15,700	471	366	316	316
Sarasota		18,048	541	251	122	290
Region 8		106,682	3,200	2,180	616	1,231
Polk	9	57,439	1,723	1,436	0	287
Hardee		3,836	115	101	268	268
Highlands		5,653	170	398	66	66
Okeechobee		2,767	83	24	9	59
Region 9		69,695	2,091	1,959	343	680
Indian River	10	7,389	222	102	100	120
St. Lucie		11,445	344	67	45	277
Martin		4,777	143	70	42	73
Palm Beach		60,188	1,806	832	610	974
Region 10		83,799	2,515	1,071	797	1,444
DeSoto	11	2,752	83	231	40	40
Charlotte		3,431	103	71	4	32
Lee		16,880	507	239	45	268
Collier		6,968	209	71	55	138
Glades		939	28	95	0	0
Hendry		3,032	91	27	0	64
Region 11		34,002	1,021	734	144	542
Broward	12	97,103	2,913	691	208	2,222
Dade		233,733	6,712	1,849	75	4,863
Monroe		10,868	326	67	475	475
Region 12		331,704	9,951	2,607	758	7,560
STATE TOTALS		1,305,331	39,160	17,103	6,427	23,056

OTHER AGENCY AND GROUP INTEREST IN AND SERVICES

TO THE MENTALLY RETARDED

Although this construction plan is primarily concerned with the physical structures to house community activity in diagnosis and evaluation, day care and residential facilities, the multi-service interest that exists in other agencies and groups should be a part of the background of the informed planner.

For this reason, a brief outline of the activity of some of the more active groups, providing services of one kind or another for retarded, is included here. Other group work and programs of interest remain to be documented in future plans. (For example - the noteworthy work of such clubs as Civitan, Lions, Altrusa; Federal employment progress; outstanding individual programs in recreation; United Fund support)

GOODWILL INDUSTRIES, INC.

In Florida, there are 4 autonomous Goodwill Industries located in St. Petersburg, Orlando, Jacksonville, and Miami. Of course, each may have several outlet or branch stores and offices. Goodwill Industries provide employment and/or personal and work evaluation, personal and work adjustment and trade training for persons with a wide variety of physical disabilities, mental and emotional problems and social work inadequacies.

They all have a constantly changing group of employees and trainees working to prepare as many as possible to move from sheltered workshop to work opportunities in the community.

Those served are generally between 15-65 years of age. Of those retarded most are classified as being mildly retarded; as many as 15 per cent moderately retarded and perhaps not more than 5 per cent severely retarded.

As of June 1968, the St. Petersburg group had some 70 employees and 22 of 37 evaluatees who were classified as retarded. This was slightly over 25 per cent of the total numbers in the Special Rehabilitation Services Program.

The Orlando operation had 24 employees classified as retarded, and placed 2 of these in competitive employment during the past year.

Latest figures for the Jacksonville group was that they had 153 retarded clients working in areas of sorting, custodian, truck helpers, and dock hands. Others were assigned to bicycle repair, cafeteria, furniture and shoe repair, painting, ironing, mending, shipping, and sales.

Miami last reported 141 (or over 15 per cent) as being retarded.

FLORIDA STATE BOARD OF HEALTH

Florida's general public health program is administered by the State Board of Health (SBH) through 67 affiliated county health departments. These local departments provide health services to all citizens, including the mentally retarded. However, some services rendered are specifically related to mental retardation, primarily in the area of prevention and in case finding.

The phenylketonuria (PKU) screening program is carried on in all health departments, with the laboratory work being done by private laboratories as well as those of the SBH. In 1967 the SBH laboratories performed approximately 60,000 screening tests. While private laboratory reports are known to be extremely incomplete, it is estimated that over 100,000 tests were performed in the state. Some of these were repeats. There were 99,998 births during the year, so it is assumed that at least 80 per cent of infants were tested. Three new cases were confirmed. All known cases are followed by public health nutritionists, who distribute the Lofenalac provided those who cannot afford to buy it, and assist the physician to explain the necessity for a carefully supervised diet for these children.

The distribution of "A Phenylketonuria Guide for Citizenship Conservation" to professionals and technical workers concerned with the detection and management of the disease continues.

There are now two Evaluation Clinics in the state where children suspected of being retarded can be thoroughly studied in order to make recommendations for management to the attending physician. They are located in Tampa and Miami. In Miami there is an extensive research program in mental retardation in connection with the clinic. A third such center is thought to be needed.

Certain communicable diseases are responsible for cases of mental retardation. Chief among these are measles and mumps. Syphilis and encephalitis contribute a small number. Control programs for all these are carried on by the SBH and the county health departments. A measles eradication program is gaining momentum in the state, 29 counties already having completed mass immunization drives in which nearly 100,000 children received the vaccine. Similar programs for the control of mumps and German measles will be possible within a few years.

There is a positive correlation between uncontrolled fertility and mentally retarded infants. Providing child spacing services to Florida's estimated 250,000 medically indigent women of child bearing age may reduce by more than one-half the number of mentally retarded infants born to this group of women. This objective is now being vigorously pursued. Federal funds for the expansion of this program are now available.

FLORIDA DEPARTMENT OF PUBLIC WELFARE

The wide responsibility of this department is generally understood by persons concerned with community problems and resources. Like the Health Agency, Public Welfare has offices available to Florida's 67 counties. The number of retarded served by the Department is not available since statistical records are not kept in such a category by most units.

Nevertheless on a statewide basis some 128,541 children were being served by the Department as of February 1968. Numbers of mentally retarded children with varying degrees of such exceptionality are of course included. One child welfare unit in Miami is devoted exclusively to servicing the mentally retarded child and his family. Excellent diagnostic and evaluation services are available for use by the staff as well as excellent medical resources. Similar units may be established in other population centers.

In the District Office serving West Palm Beach, the Department, in cooperation with the Florida State University Graduate School of Social Work, has a small student unit on services to the mentally retarded casework services for children in their own homes, foster home care and homemaker service.

Each year the Department of Public Welfare and the Florida Group Care Association sponsor a workshop for house parents and child care staff at Stetson University. A section of this workshop is specifically for child care staff of Florida's residential facilities for retarded children.

FLORIDA INDUSTRIAL COMMISSION

The local employment offices place many people in jobs who are technically mentally retarded although they are able to perform satisfactorily in the labor market. Employment counselors also counsel a considerable number of retarded persons and help them to decide on a field of work in which they can hope for success. Most of these people are not severely retarded and while they were not able to advance far in formal schooling, are fully able to perform work of a simple nature.

Since separate records of mentally retarded applicants are not kept there are no statistics as to the number of persons served. Records of handicapped persons served which include those persons recognized as mentally retarded show that during 1967 the offices provide counseling service to 5,265 individuals having some type of physical, mental, or emotional handicap and placed 7,607 in jobs.

Of the 3,619 persons placed in Institutional Manpower Development and Training Program training in Florida during the past twelve months, 289 were identified as handicapped. One interesting activity during the past two years is an on-the-job MDTA training program in Dade County for mentally retarded persons. The Dade County Association for Retarded Children serves as project contractor and trains these retarded youth in meat cutting. Many have been placed in competitive employment following this training.

FLORIDA ASSOCIATION FOR RETARDED CHILDREN

The Florida Association for Retarded Children, with an active membership of around 5,000 families in 35 local member units, is dedicated to the improvement of the general welfare of all retarded children and adults regardless of their handicap; whether they are at home or in an institution. FARC is a state member unit of the National Association for Retarded Children, which is composed of 1,000 state and local member units with a paid membership of more than 100,000 families.

Founded in 1953, the Florida Association for Retarded Children sponsors and operates many community facilities and services for retarded children and adults. These services include pre-school and day-care centers, sheltered workshops, adult activity centers, diagnostic and evaluation services, transportation programs, and others. FARC cooperates with many governmental and volunteer agencies to develop programs and services for the retarded.

ARC units at local, state and national levels operate under policies set by boards of directors elected by their memberships. Units are administered by officers or executive committees also elected. Many local units, as well as FARC and NARC, employ full-time executive directors and other professional staff members to initiate, stimulate and implement projects and activities within the policy framework established by their boards of directors.

The opening of Camp Challenge near Orlando in 1967 marked the first phase, of a state wide effort by the association, to expand camping and other recreational opportunities for retarded children and adults. Camp Challenge was made possible by cooperative agreement between FARC and Florida Society for Crippled Children and Adults.

The Association also plays an important role by furnishing statewide membership to the Florida ARC - Sunland Training Center Advisory Committee. These groups serve to improve communications and to resolve problems which arise relating to the Division's residential care programs. The Committee as formed offers a mechanism for identifying and resolving, rather than stifling, complaints.

DIVISION OF VOCATIONAL REHABILITATION

This Division works with individual clients and provides the indicated services to meet his needs. Diagnostic services are purchased or obtained for all clients without regard to economic need. The cost of training is provided and obtained for those clients who can benefit from this service without regard to economic need. Counseling and guidance and placement assistance is provided by the Division of Vocational Rehabilitation counselor to all clients without regard to economic need. Other services purchased for clients when indicated and based on economic need and treatment (medical, surgical, psychiatric and dental), prosthetic appliances, hospitalization, convalescent care, nursing services, training materials, maintenance, transportation, tools, initial stock, equipment, supplies, etc.

One of the highlights of the Division's work is a cooperative school program in which special education teachers and vocational rehabilitation counselors work hand in hand in evaluating and placing those with rehabilitation potential to take their places within the community as wage earners upon graduation. There are presently 17 counties involved in this cooperative program.

Many work-oriented facilities serving the mentally retarded, as well as other disabilities, have been given grants by the Division. These grants have helped these facilities to establish new services and improve existing services. The Division began the 1967-68 Fiscal Year with 5,110 mentally retarded clients in its caseload. During the year, 2,921 new cases were added to the caseload, giving a total of 8,031 for the year. Of this total, 2,277 were removed from the Division's caseload for various reasons. Where the major disability was mental retardation, 745 cases were closed rehabilitated. Mental retardation was considered a secondary disability for an additional 79 clients rehabilitated. Of these, 666 were white, 157 Negro, and one Indian, with 273 females and 551 males. This rehabilitated group of 824 mentally retarded persons, at acceptance for services, represented a weekly earning of \$3,045. At closure, this same group represented an earning power of \$37,185 weekly.

FLORIDA COUNCIL FOR THE BLIND

The Florida Council For The Blind is responsible for providing services to all blind people in the state. Professional counseling services are provided for blind children through the responsible family group, local and State organizations and local professional individuals. The Florida Council For The Blind extends its services to any organizations responsible for providing services to blind children, such as the Florida State School For The Deaf And Blind, Sunland Training Centers, etc.

The latest information available indicates that there are over fifty mentally retarded children known to the Florida Council For The Blind not identified with institutional care. For the work with the Ft. Myers Sunland Training Center, the records indicate that over forty persons are severely visually impaired. In addition to the professional counseling services provided at Sunland Training Center for the professional staff, this agency demonstrates and provides educational and recreational materials.

In addition to professional counseling services this Agency is responsible for providing sight restoration and the prevention of blindness services, when the individual or family is not in a position to meet the costs involved.

FLORIDA CRIPPLED CHILDREN'S COMMISSION

During the fiscal year ending June 30, 1968, a patient load of 15,393 was treated. Of this number about 1,601 or 10 per cent were mentally retarded or considered they would have become mentally retarded without treatment as a result of their particular disease or condition. (For example, a shunt operation to relieve destructive pressure on the brain of hydrocephalus victims is necessary to prevent varying degrees of mental retardation. The age of the patient and nature of the condition will govern in such cases of course.)

Other conditions such as epilepsy or convulsive seizures if unabated will impair or destroy the mind. There is every reason to think that most patients having such concomittant conditions will show less indication of mental retardation, or will show no increase in severity as a result of treatments provided by the Commission.

The 1965 Legislature eliminated a clause which had required the Commission to treat patients with normal mentality, thus allowing the treatment of the mentally retarded as well as other mental status cases.

A list of expenditures by diagnosis of codes which the Florida Crippled Children's Commission considers to fall under mental retardation shows \$340,882.66 spent for the period from July 1, 1967 through June 30, 1968.

SECTION V

SECTION V

Inventory, Services and Programming Data

Summary of Inventory and Programming - General

The General Data indicates what is available, where it is located, and the numbers receiving various services. The services data expands on the services being offered.

In Section III under Delineation of Regions and Service Areas, there is an analysis of the region and the reasons why the counties were grouped as they are shown on MAP #1. Needed services, in relation to existing services, are shown in TABLES 5 and 6, Section IV, and in the Summary and Programming Data Reports.

The programmed facilities for specific specialized services were planned against basic units. There purposefully is no expression of the number of units (or actual) to be contained in any given proposed facility. This is left flexible so that any community, county, or region can decide, on its own, how large, how encompassing, and where a unit should be located to do the most good for retarded persons needing service.

The data in the inventory sections indicates what is available and what may be planned in the near future. Flexibility is also maintained to allow for small, medium size or large facilities to be planned for development in neighborhoods where the retarded reside. Where this is not possible, due to thinly populated areas, it is recommended the residential facilities be placed adjacent to existing or planned day facilities so the greatest number of retarded may be served without extensive and expensive commutation problems.

Programming should be coordinated with other groups in a community, county or region to prevent unnecessary overlap of services. Allied groups, agencies, organizations or individuals giving aid, or having the potential to give aid to the retarded should be included in all planning of new services and in the operation of existing services.

INVENTORY DATA FOREWORD

Recent receipt of revised draft instructions for the FY 1969 State Plan for Construction of Facilities for the Mentally Retarded makes it necessary to utilize statistical information gathered under the guideline of previous Public Health Service forms in the compilation of this plan, in time for approval by the State Advisory Council for Construction, and by Federal Authority.

Past instructions under which information was gathered, while parallel in content, involved fewer breakdown categories of ages and levels of retardation, and had no requirement for detailing other handicaps.

Inventories including this detail will be effective the next revision of the plan, by which time community programs will have an opportunity to gather the more precise categories requested.

NOTES RELATING TO INVENTORY DATA FORM INFORMATION - INCLUDING DEVIATIONS IN DATA COLLECTION OR DISPLAY AS RELATED TO DRAFT INSTRUCTIONS OF AUGUST 1968

1. Public school settings maintaining special education classes for the retarded have been compiled and are listed as a major program category with totals for each region and state.

The delineation of each school by name and location, along with age, number of retarded and range of retardation, is issued as a separate supplement to, but as a part of, the FY 1969 Plan for Construction of Facilities for the Mentally Retarded.

This method of issuance is due to the large number of Florida public schools involved. If listed on Forms 1 and 2, the information would triple the size of the basic plan, make it awkward in handling and interpreting the data forms and triple printing costs.

Section IV of this plan includes a summary of Florida Public School programs for special education for the mentally retarded (pages 63 - 66). This section gives an individual focus to this facet of interest.

2. Institutional figures are not as yet machine-coded to the extent required to provide county and regional resident breakdowns by category codes 7a-9 of Form 1 and 5a-5g of Form 2.

Categorical breakdowns elicited by Forms 1 and 2 are included in a separate state summary totals for the Sunland Training Centers and Sunland Hospitals (mental retardation institutional settings) by individual center.

Remaining institutional types (State Hospitals, Youth Services and Correctional Institutions) are included in institutional totals furnished. They hope to be able to provide a state breakdown (as given in state totals for the Sunland Centers) for the next plan revision.

INSTRUCTIONS - FORM 1

INVENTORY - GENERAL DATA

Form Column Number

1. Enter name or number of planning or service area.
2. Enter the city or town, county, and name of facility, listing all facilities in each city or town consecutively in alphabetical order.
3. Enter type of facility. Since in many instances more than one type of facility may be operated in the same building(s) or site by the same owner, the following code is to be used (See Section IX, C-2 for definitions of types of facility).
 - A - D&E Clinic, Day Facility, Residential Facility
 - B - D&E Clinic, Day Facility
 - C - D&E Clinic, Residential Facility
 - D - Day Facility, Residential Facility
 - E - Diagnostic and Evaluation Clinic Only
 - F - Day Facility Only
 - G - Residential Facility Only
4. Enter type of ownership of facility, using the following codes:
 - A - nonprofit
 - B - public
 - C - proprietary
5. Enter total number of all individuals served by the facility during the last 12 months for which data are available.
6. Enter total of mentally retarded individuals served by the facility during the last 12 months for which data are available.
7. a-e Enter the number of mentally retarded individuals served by the facilities during the last 12 months by level of retardation. The total of columns 7a-e must equal column 6.
8. a-f Enter the number of mentally retarded individuals served by the facility during the last 12 months for each specified age group. The total of columns 8a-f must equal column 6.

INSTRUCTIONS - FORM 2

INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

Form Column Number

1. Enter name or number of planning or service area.
2. Enter the city or town, county, and name of facility listing all facilities in each city or town consecutively in alphabetical order.

General: In terms of the definitions applicable to the mental retardation construction program under Title I, Part C of P.L. 88-164, as amended, a mental retardation facility may include three types of facilities which may exist independently or in any combination of these types; i.e., diagnosis and evaluation clinic only; day facility; residential facility. It is important that information on each of these types be recorded separately if they exist; (a) within the same building, or (b) on the same contiguous campus.
3. Enter the total number of mentally retarded individuals served by the diagnostic and evaluation clinic portion of the total facility during

the last 12 months for which data are available.

4. In column 4a, enter the total number of mentally retarded individuals in the day facility portion of the total facility during the last 12 months for which data are available.

For columns 4b through 4g enter the average daily case load for each of the specified services in the day facility portion of the total facility during the last 12 months for which data are available. The total of columns 4b through 4g may differ from column 4a since individuals may be receiving more than one service. It is assumed that Custodial Care is inherent to all Day Facility services. Therefore, the figure recorded in column 4f should be the same as that recorded in column 4a.

5. In column 5a, enter the total number of mentally retarded individuals in the residential facility portion of the total facility during the last 12 months for which data are available.

For columns 5b through 5g, enter the average daily case load in the residential portion of the total facility during the last 12 months for which data are available. The total of columns 5b through 5g may differ from column 5a. It is assumed that Custodial Care is inherent to all Residential Facility Services. Therefore, the figure recorded in column 5f should be the same as that recorded in column 5a.

Summaries

Totals for each planning area or region must be recorded for columns 3 through 5g.

A State total for columns 3 through 5 should be recorded at the end of the inventory for this form.

CHARACTERISTICS OF AREAS

Regional and County Area Maps

Descriptive Material

Inventory of Existing Services and Facilities
(Forms CR-1 and CR-2)

REGION I - DESCRIPTIVE

The ninety miles of Gulf of Mexico coastline forming the southern boundary of these four counties provide Florida with some of her most beautiful white sand beaches and clear water. Two major highways transit this area from east to west -- one U.S. 90 is a through highway from Mobile to Jacksonville, and U.S. 98 follows the Gulf from Pensacola to West Palm Beach on the Southeast coast. Interstate 10 (now building) will parallel U.S. 90. Commercial flights also are available into Pensacola.

Agriculture, commercial fishing and timber resources are the bases of the area economy, while large permanent military establishments in Escambia and Okaloosa county assist in providing a stable economy. Both of these counties rank well above average in per capita income.

Santa Rosa county is developing industrially and has built eight new or expanded plant facilities in the past few years, but the most populous and dominant county is Escambia. The economy and social and cultural life in the area vibrate around Florida's first incorporated city - Pensacola (1821). This city is the hub of trade and distribution for Northwest Florida and Southern Alabama.

Pensacola boasts its own symphony hall and orchestra and has a large 3,000 seat municipal auditorium to fit its function as a convention center, and to provide other congregate community needs. A Junior College and new University of West Florida meet the higher education needs of the area and are a source of professionals and para-professionals.

Walton County is the least highly populated and one of the lower per capita income areas. It is rural, however it blends naturally into the area, and area harmony of ideas and assistance prevail.

The non-white area population is below state average in all but Escambia County. In Escambia it is slightly above the average.

Generic services include general hospitals in each county. Escambia also offers D & T, Rehabilitation and long term care facilities. Physical and occupational therapy and neurological services are available. Mental Health facilities provide medical, psychiatric, psychological and social services. A Speech and Hearing facility and a cerebral palsy clinic complement the community mental retardation services in Pensacola.

Public School special education classes serve thirty percent of estimated retarded in the area, but the percent of those so served varies from nine percent in Walton County to sixty percent in Okaloosa County. It is anticipated, the Special Education Legislation "five year plan" (see Section of Public School Writings) will meet the challenge of the school year retarded needs in Florida by 1973.

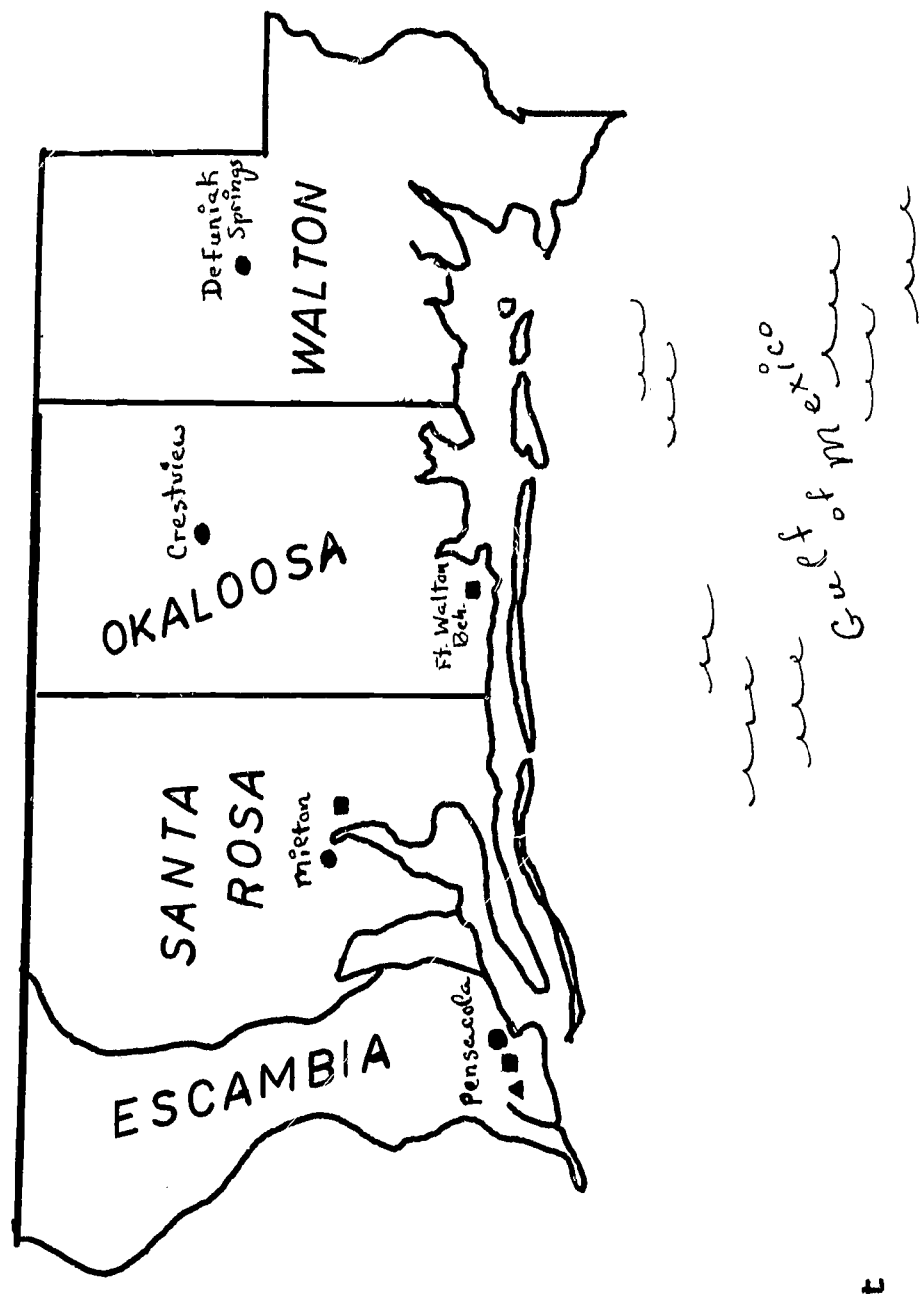
Private and non-profit community MR programs are presently centered in Escambia and Santa Rosa County. The latter involvement is a joint county-community program of a day facility nature. D & E facility support for retarded programs is carried on by the Mental Health Center in Pensacola.

The population of this area makes the development of at least one day facility in each county desirable. The greatest need is seen for a residence in Escambia and Okaloosa County. A comprehensive M.R. Regional Center would augment D & E facilities and provide services not now available, particularly to the rural areas.

REGION I

Population

1967 - 290,000
 1973 - 371,400



MAP 6

Legend

- -County Seat
- ▲ -Private or Non-profit M.R. Facilities
- -Association for Retarded Children

EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - GENERAL DATA

SRS:RSA:DMR:CR
TENTATIVE FORM 1

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility						Total	Persons Served	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served		
	City or Town								2a	2b	2c	3	4	5						6	Level of Retardation
									7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
									Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	Services for Retarded with other Handicapping Conditions (Code)	
R-1	Pensacola	Escambia	Peter Pan Kindergarten	F	A			56	--	4	32	20	--	13	43	--	--	--	--	--	--
"	"	"	Petree Memorial Craft School	F	A		60	60	--	15	22	23	--	--	--	--	60	--	--	--	--
"	"	"	Community Mental Health Center of Escambia County	E	A		1090	184	(See Note Below)	--	--	--	--	9	160	15	--	--	--	G	
	Milton	Santa Rosa	Pied Piper School	F	A		14	14	--	--	9	4	1	--	14	--	--	--	--	--	
	COMMUNITY FACILITY TOTALS						1,220	314	--	19	63	47	1	22	217	75	--	--	--	G	

NOTE: Breakdown not available for levels.

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility											
	City or Town							Level of Retardation					Age Groupings						
1	2a	2b	2c	3	4	5	Total	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-1					B	---	657	---	517	140	---	---	---	472	185	---	---	---	---
	PUBLIC SCHOOLS TOTALS (Note 1)																		
	INSTITUTIONAL																		
	SUB-TOTALS																		
							293												
							93												
							14												
					B		25												
							425												

(See Inventory Foreword Section and Note 2)

NOTES:
 1. Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.
 2. Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.



EXHIBIT II
STATE PLAN

SRA:RSA:DMR:CR
TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

1968
Date
Page 1 of 1 pages

Florida
State

Location		Name of Facility	Diagnosis & Total Number Served	Day Facility						Residential Facility								
Area	City or Town			County	2a	2b	2c	Average Daily Case Load in Services			Average Daily Case Load in Services			Average Daily Case Load in Services				
				4a	4b	4c	4d	4e	4f	4g	48	5a	5b	5c	5d	5e	5f	5g
R-1	Pensacola	Escambia	Peter Pan Kindergarten	56	--	-	48	48	56	--	--	--	--	--	--	--	--	--
"	"	"	Petree Memorial Craft Shop	60	--	-	50	50	60	31	--	--	--	--	--	--	--	--
"	"	"	Community M.H. Center of Escambia Co.	--	184	--	--	--	--	--	--	--	--	--	--	--	--	--
	Milton	Santa Rosa	Pied Piper School	14	--	-	4	10	14	--	--	--	--	--	--	--	--	--
COMMUNITY FACILITY TOTALS				130	--	--	102	108	130	31	--	--	--	--	--	--	--	--
PUBLIC SCHOOL TOTALS				657	--	--	517	190	657	--	--	--	--	--	--	--	--	--
INSTITUTIONAL TOTALS																		
NOTE: See Notes 1 and 2 on Form 1.												425					425	



REGION II - DESCRIPTIVE

The eight counties in this region are part of the north western "Panhandle of Florida." The three counties along the south coast, extend the lovely white sand beaches of West Florida which began in Pensacola, for about 120 miles to the end of Franklin County.

This is predominately an agricultural, timber, livestock belt inland, and has commercial fishing and tourist interest along the gulf coast.

The income levels in all but Gulf and Bay counties is very low. In addition only Bay County exceeds the state average in school years completed. The non-white population is average in all but Holmes County, where it is the lowest in the state.

Only Franklin County exceeds the state average of those 65 years and over. The remaining counties have very low percentages of senior citizens.

This area is interesting historically since it was a thriving part of Florida before and after the turn of the century. Railroad problems, northern area citrus crop failures, and the natural incination of new settlers to push on to South Florida, caused some of these counties to stand still and even regress in population during the past few decades. Holmes, Jackson, Washington, Liberty and Calhoun reached a crest of population between 1910-1915, then a period of loss of population until the 30's. Calhoun lost population even in the last decade. Most now show modest gains again in the present decade.

There are two Junior Colleges within this area: Chipola Junior College at Marianna in Jackson County and Gulf Coast Junior College in Bay County.

Panama City, the County seat of Bay County, is the center of area population, with chemical, paper and fabric, concrete and publishing payrolls. Permanent air force and naval installations, as well as the tourist industry, make for a stable well ordered economy for this county.

The second largest city Marianna, in Jackson County, has also gained a manufacturing base with furniture, undergarment, aircraft overhaul and specialty machinery interests represented.

Generic Services include hospitals and nursing facilities in each county except Liberty. D. and T. and rehabilitation service assistance is available for the area in Panama City. Psychiatric assistance is planned. Medical oriented services available in Panama City area are physical and occupational therapy, speech and hearing, psychological. No services for blind or other special services developed at this time.

Public School special education classes are well developed. This may be noted by the fact that five counties have 100% of the estimated school age retardates involved in classes. The prevalence of retardation in this area is higher than the estimated 3% of school age. This may be shown in Bay County where 474 school age retardates might be anticipated while in fact 583 were enrolled in special classes, with a waiting list of 303 students. This would indicate a 6% incidence of retardation in Bay County and a need for special services.

Three counties - Liberty, Franklin and Jackson vary from 17% to 60% in additional special education needs.

A Sunland Training Center (1,000 bed) for ambulatory retardates is located in Marianna (Jackson County).

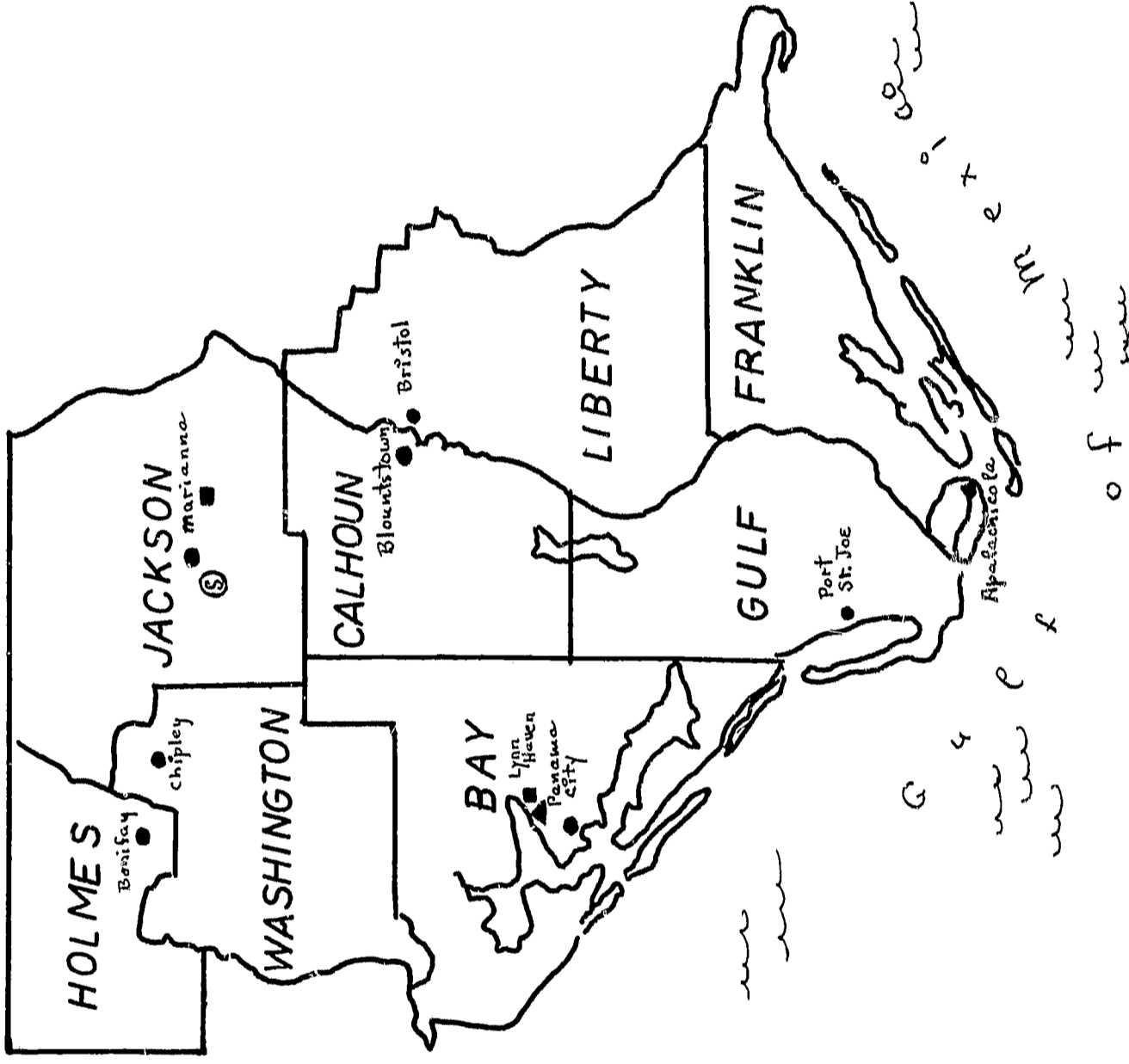
Development of a residential facility and a day-activity center in Panama City and Marianna are needed. The development of a D & E or extended services from the Mental Health Clinic is also desired. These projects would be attainable in a four year period with unlimited funds.

REGION II

Population

1967 - 149,600

1973 - 174,900



MAP 7

Legend

- - County Seat
- ▲ - Private or Non-profit M.R. Facilities
- - Association for Retarded Children
- Ⓢ - Sunland Facility (MR Institutional)

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town							Level of Retardation				Age Groupings								
	2a		2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-2					F	B	--	1,244	--	1172	72	--	--	213	703	328	--	--	--	--
	PUBLIC SCHOOLS TOTALS (ndt 1)																			
	INSTITUTIONAL																			
	SUB-TOTALS																			
	Mental retardation																			
	State Hospitals																			
	Youth Services																			
	Florida Division of Corrections																			
	TOTAL (Note 2)																			
								228												
								86												
								8												
								23												
								337												
	(See inventory foreword section and Note 2)																			
NOTES:																				
1	Supplement #1 provides names, locations, age groups and levels of retardation; for all these public schools in Florida which are providing special education classes for the mentally retarded.																			
2	Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.																			



SRS:RSA:DMR:CR
 TENTATIVE FORM 1
 INVENTORY - GENERAL DATA
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Total	Mentally Retarded Persons Served in Facility						Services for Retarded with other Handicapping Conditions (Code)				
	City or Town	County							Level of Retardation			Age Groupings							
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-2	Lynn Haven	Bay	St. Andrews Bay Center for Retarded Children (Mary Mac-kin School)	F	A	37	37	--	4	16	17	--	4	33		--	--	--	--
COMMUNITY FACILITY TOTALS																			
				F-1	A-1	37	37	--	4	16	17	--	4	33		--	--	--	--



Location		Name of Facility	Diagnosis & Total Number Served	Day Facility						Residential Facility								
Area	City or Town			County	Average Daily Case Load in Services						Average Daily Case Load in Services							
					4a	4b	4c	4d	4e	4f	4g	4h	5a	5b	5c	5d	5e	5f
R-2	Lynn Haven	Bay	3	37	--	30	30	30	37	--	--	--	--	--	--	--	--	--
		St. Andrews Bay Center for Retarded Children (Mary Mackin School)	--	37	--	30	30	30	37	--	--	--	--	--	--	--	--	--
		COMMUNITY FACILITY TOTALS	--	37	--	30	30	30	37	--	--	--	--	--	--	--	--	--
		PUBLIC SCHOOL TOTALS	--	1244	--	1172	72	1244	--	--	--	--	--	--	--	--	--	--
		INSTITUTIONAL TOTALS																
				337														

NOTE: See Notes 1 and 2 on Form 1.



REGION III - DESCRIPTIVE

This 4,000 square mile area is largely devoted to agriculture, timber, pulp and paper manufacturing. The Appalachian National Forest extends into Wakulla and Leon areas, which also have beautiful state parks. Wakulla Springs is a tourist attraction and commercial fishing is a pursuit in this area. Many of the paper companies allow camping, fishing and hunting on their lands.

It is a youthful population area, with no county equaling the state average of senior citizens. All counties also have a greater-than-state average of non-white population. Only Leon County exceeds the state average in resident education level. Leon County is also slightly above the state per-capita income level, and Taylor County income is equal to state income.

The main marketing and population center is at the site of Florida's Capital City - Tallahassee in Leon County. Here state government in the economic base, along with the business and activity involved in the presence of two major universities - Florida State University and Florida A & M University. Much of the cultural aura of the area centers about university and community concerts, appearance of celebrities, art and music festivals and other scheduled activity. Tallahassee shares Junior College interest also with Madison County's North Florida Junior College.

All counties except Wakulla and Jefferson have hospitals and all but Wakulla and Taylor nursing home services. Leon County serves the entire area for diagnosis and treatment and rehabilitation services. The Mental Health Association is quite active and provides psychiatric, psychological and social services to the area. Medically oriented facilities have physical and occupational therapy and speech services available. Mental Health facilities are planned for Jefferson County. Gadsden County has a County Health Center and is the site of one of Florida's Mental Hospitals.

Tallahassee (Leon County) is the site of one of seven Florida institutional settings for retarded. The Sunland Hospital for non-ambulatory North Florida retardates.

Public School special education classes in this region, are serving the needs of 85% of the estimated retarded; from 36% in Madison County to 100% in Gadsden County. Jefferson County indicates an 8-9% retarded incidence in the school age group, in having identified 238 retarded (143 on waiting list for classes). Only 82 retarded were estimated on the bases of a 3% incidence in Jefferson.

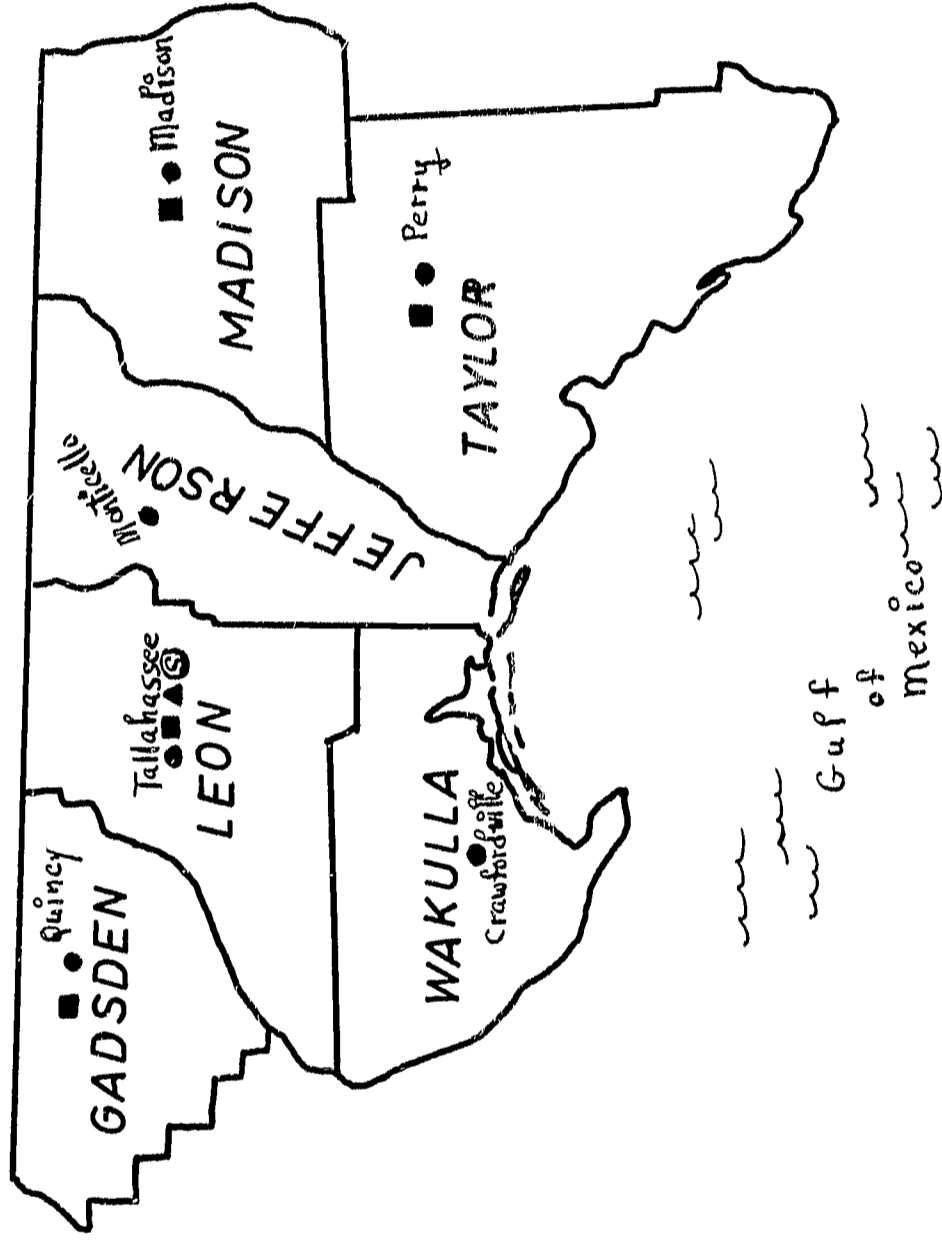
Leon County and Madison County support the only Community non-profit programs for retarded. In Leon County a private day facility provides a trainable setting, while the second setting is also a day facility for trainable and is operated by the Psychology Department of the Florida State University. It is a research oriented class developing new teaching techniques for retarded. A Madison County day facility is a joint County School System Association for Trainable Retarded Children activity.

A residential setting in Leon County, and day facilities in Gadsden, Leon, Madison and Jefferson are needed. A D&E facility, or development of financial expansion assistance to the present Mental Health Association, is needed.

REGION III

Population

1967 - 175,500
1973 - 202,200



MAP 8

Legend

- - County Seat
- ▲ - Private or Non-profit M.R. Facilities
- - Association for Retarded Children
- ⊗ - Sunland Facility (M.R. Institutional)

Area	Location		Type of Facility (Code)	Name of Facility	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town	County						Level of Retardation			Age Groupings									
	2a	2b	2c	3	4	5	6	7a (68-83 IQ) Borderline	7b (50-67 IQ) Mild	7c (35-49 IQ) Moderate	7d (20-34 IQ) Severe	7e (Below 20 IQ) Profound	8a 0-5 years	8b 6-12 years	8c 13-20 years	8d 21-44 years	8e 45-64 years	8f 65 years and over	9 Services for Retarded With other Handicapping Conditions (Code)	
R-3				F	B	--	1,082		1024	58			387	381	314					
PUBLIC SCHOOLS TOTALS																				
INSTITUTIONAL																				
SUB-TOTALS																				
Mental Retardation																				
State Hospitals																				
Youth Services																				
Florida Division of Corrections																				
TOTALS																				
								226												
								83												
								6												
								37												
								352												

(See Inventory Foreword section and Note 2)

NOTES:

- Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.
- Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163-165.



Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility											
	City or Town	2a						2b	2c	Level of Retardation					Age Groupings				
										7a	7b	7c	7d	7e	8a	8b	8c	8d	8e
1							6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	Services for Retarded with other Handicapping Conditions (Code)
R-3	Tallahassee	Leon		Candle of Hope School	F	A	15	--	--	5	10	--	5	10	10	--	--	--	--
"	"	"		Psychology Research Class	F	B	14	--	--	7	7	--	--	14	14	--	--	--	A/C/D/E/F/G
"	"	"		Leon Co. M.H. Clinic	E	A	1060	--	155	29	10	--	10	164	164	20	--	--	G
Madison		Madison		Sp. Ed. Center of Madison Co.	F	B	11	--	--	6	5	--	--	11	11	--	--	--	--
COMMUNITY FACILITY TOTALS					3-F 1-E	2-A 2-B	1100	234	--	155	47	32	--	15	199	20	--	--	1-A, 1-C, 1-D, 1-E, 1-F, 1-G



EXHIBIT II
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SRA:RSA:DMR:CR
TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Location		Name of Facility	Diagnosis & Total Number Served	Day Facility						Residential Facility							
City or Town	County			4a	4b	4c	4d	4e	4f	4g	48	5a	5b	5c	5d	5e	5f
2a	2b	2c		Diagnosis & Total Number Served	Average Daily Case Load in Services						Average Daily Case Load in Services						
R-3	Tallahassee	Leon															
	"	"															
	"	"															
	Madison	Madison															
COMMUNITY FACILITY TOTALS			194	40	14	14	8	40	40	40							
PUBLIC SCHOOL TOTALS				1082	---	---	1024	58	1082	---	---	---	---	---	---	---	---
INSTITUTIONAL TOTALS																	
NOTE: See Notes 1 and 2 on Form 1.																	



REGION IV - DESCRIPTIVE

In this northeast region of Florida, Nassau, Duval and St. Johns County adjoin the Atlantic Ocean and Clay County is bounded to the east by the St. Johns River. It is the largest river in Florida, carrying worldwide shipping traffic to the deepwater port of Jacksonville.

Counties to the West are rural with agriculture, farming, timber, poultry and livestock the main source of revenue. Even in these more western counties industry is gaining a foothold however, for example: Columbia County is involved in mobile home construction and auto trim fabricating; Bradford with a clothing industry and mineral mining and Suwannee with rock products.

The seaboard counties primary source of income is in tourist services - which furnish year round clean dollar income to Florida. Nassau County has also developed fishing and naval stores; St. Johns County - marine supplies and commercial fishing; Clay County - frozen fish packaging and chemicals. These industries have a stabilizing influence on county economies.

The hub of activity and the cultural center of the area is the city of Jacksonville, Duval County. This is the insurance center for the Southeastern United States, as well as a focus of military interest with its deep sea port, its ship building and ship repair and major Naval Air Facilities.

Among other assets, Jacksonville boasts a choral society, symphony orchestra, art museum, childrens museum, ballet guild, opera company and a huge civic auditorium, as well as many fine large hotels for conventions and civic and tourist services. Jacksonville University and Florida Junior College at Jacksonville provide a source for professional and para-professional staffing to the entire area; and in the arts - the Edward Walters College. Columbia County is the site of the Lake City Junior College and Forest Ranger School while St. Johns County is the setting for the St. Johns River Junior College.

With the exception of Lafayette and Clay Counties all counties in this area exceed the state average in non-white population and of course, there are pockets of low socio-economic groups. Duval County is the only county having an average income greater than the state average.

The senior citizen is moving gradually into this area with five counties equaling the state average for the sixty-five and over group. The remaining five county population including Duval, is below the state average for this age group.

Historical interest is served in Nassau County by old Spanish forts and breastments at Fernandina Beach while St. Augustine in St. Johns County is known as the first permanent white settlement in the United States.

Half of the counties in this area lost population during the early period of this century but now have halted the downward trend and are showing a healthy growth pattern. Some reasons for this fluctuation is the development of the interstate highway systems which in many sections of our country are further isolating smaller rural areas.

Special education classes in the public schools are progressing at an average rate in this region. The counties vary from no services at the present time in two counties to 100% being served in Baker County. Duval County, with its large population, is meeting 30% of its estimated needs at the present time. In the 1967-68 school year, there were over 1,000 school age children on the waiting list for special education classes.

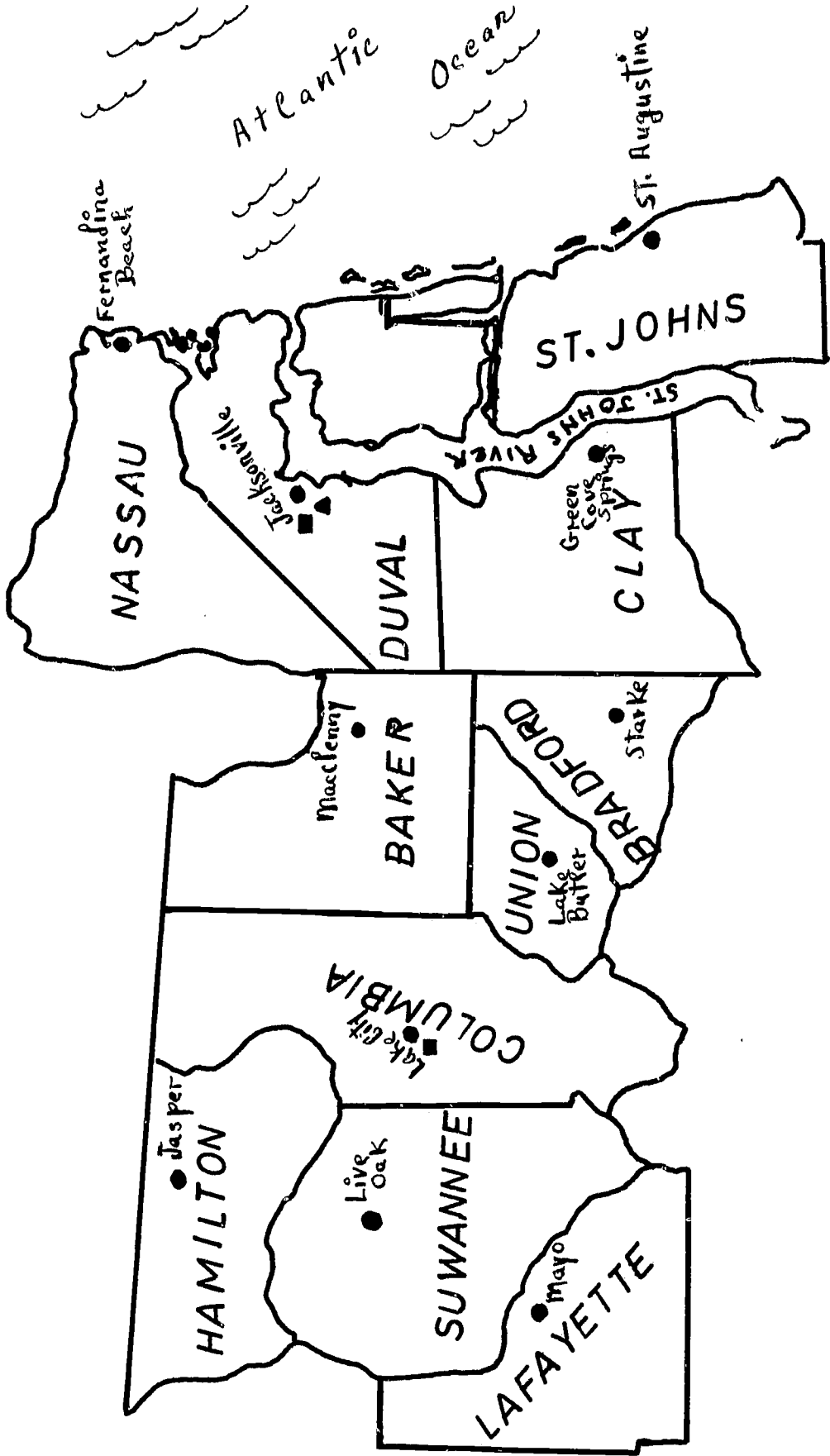
Despite the large population of this area, there are few community programs. Duval County has a pre-school and workshop and a Catholic special education day facility setting.

The larger population of this area makes the development of community services imperative. A comprehensive Regional Mental Retardation Center is planned, and other residential and day activity center services are presently needed. It would seem reasonable to establish two residences in Duval and one in Columbia County - while two day activity facilities in Duval and 1 in St. Johns and 1 in Columbia County would be considered minimum development under an unlimited fund arrangement. D&E need is not firm at this time due to incompleting planning for a mental retardation center. It remains to be seen how much D&E activity can be absorbed at the center when established. Certainly, 1 D&E center should be planned for the next 4 year period.

REGION IV

Population

1967 - 650,300
1973 - 778,900



MAP 9

Legend

- -County Seat
- ▲ -Private or Non-Profit M.R. Facilities
- -Association for Retarded Children

EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - GENERAL DATA

SRS:RSA:DMR:CR
TENTATIVE FORM 1

Florida
State

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility													
	City or Town								Level of Retardation				Age Groupings						Services for Retarded with other Handicapping Conditions (Code)			
1	2a	2b	2c	3	3a	3b	3c	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d		8e	8f	9
R-4	Jacksonville	Duval	Morning Star School	F	A	F	A	58	58	-	42	10	6	--	10	48	--	--	--	--	--	--
	"	"	Pine Castle School	F	A	F	A	7	7	--	--	7	--	--	7	--	--	--	--	--	--	--
	"	"	Pine Castle Work Activities Center	F	A	F	A	75	75	--	--	75	--	--	--	64	11	--	--	--	--	--
COMMUNITY FACILITY TOTALS									140	140	--	42	92	6	--	17	112	11	--	--	--	--



Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served of Facility (Code)	Mentally Retarded Persons Served in Facility												
	City or Town	2a						2b	2c	Level of Retardation			Age Groupings							
										7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f
1					3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-4					F	B	---	1708	--	1538	170	---	---	90	1006	612	---	---	---	---
PUBLIC SCHOOLS TOTALS (Note 1)																				

INSTITUTIONAL																				
SUB-TOTALS																				
Mental Retardation																				
State Hospitals																				
Youth Services																				
Florida Division of Corrections																				
TOTALS (Note 2)																				

908																				
195																				
23																				
97																				
1223																				

(See Inventory Foreword section and Note 2)																				

Services for Retarded with other Handicapping Conditions (Code)																				

9																				

Total																				

NOTES:
 1 Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.
 2 Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.



EXHIBIT II
STATE PLAN
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Date _____ State _____
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TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Location		Name of Facility	Diagnosis & Total Number Served	Day Facility								Residential Facility							
City or Town	County			Average Daily Case Load in Services				Total Number Served	Average Daily Case Load in Services				Total Number Served	Average Daily Case Load in Services					
2a	2b			4a	4b	4c	4d		4e	4f	4g	4h		5a	5b	5c	5d	5e	5f
R-4 Jacksonville	Duval	Morning Star School	58	---	---	58	58	---	---	---	---	---	---	---	---	---	---	---	
"	"	Pine Castle School	7	---	---	7	7	---	---	---	---	---	---	---	---	---	---	---	
"	"	Pine Castle Work Activities Center	75	---	---	75	75	---	---	---	---	---	---	---	---	---	---	---	
COMMUNITY FACILITY TOTALS			140	---	---	58	65	140	75	---	---	---	---	---	---	---	---	---	
PUBLIC SCHOOL TOTALS			1708	---	---	1538	1701	708	---	---	---	---	---	---	---	---	---	---	
INSTITUTIONAL TOTALS			---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	

NOTE: See Notes 1 and 2 on Form 1.



REGION V - DESCRIPTIVE

Much of this region provides a pastoral agricultural setting. This area of this country is renowned for its beautiful rolling hills, its verdant pasture land and its prize breed cattle and horses.

Agriculture and timber are the economic base for these counties, with the State University in Alachua County providing an additional stability to the latter's economy, together with a service industry tending to the needs of large numbers of people. Marion County is a famous horse breeding county. In this region we also have the beginning of the citrus belt for the middle Florida citrus areas.

Industrial interest is found in lime rock and corn meal processing in Levy County, commercial fish packing, manufacture of paper sacks in Putnam County and veneer furniture in Dixie County.

All counties are showing an increase in population at the present time, with Levy, Gilchrist and Dixie having most population for a number of years and now having regained a healthy growth curve. Only Gilchrist County is below average in non-white population, however the over sixty-five year age group has not sought this area in any large numbers, and predominately it is a younger culture. The entire area is below average in formal schooling and income, with the exception of Alachua County (perhaps because of the State University at Gainesville).

Alachua County is the center of activity because of the University of Florida located in Gainesville and the SantaFe Junior College also located within this county. Marion County boasts the Central Florida Junior College and a "second largest" area population figure.

All counties except Dixie and Gilchrist have a county hospital and all except Putnam and Gilchrist have nursing homes. Diagnosis and treatment facilities are available in Alachua County, as are rehabilitation facilities at the hospitals in Gainesville. The University Medical School is internationally known - the J. Hillis Miller Health Center. It provides services for the area in rehabilitation. Marion County Hospital in Ocala offers physical therapy for surrounding residents.

In the public schools special education services we find a spread of services from none in Gilchrist and Levy County to 65% of school age children served in special education classes in Alachua County. Still, over 260 children remain on identified waiting lists at the end of the 1967-68 school year.

The Division of Mental Retardation's oldest Sunland Training Center is located at Gainesville, Alachua County. This is a 2,000 bed institutional arrangement, under modern administrative and educational development. It primarily serves the needs of northeast and northcentral Florida although its intake is in fact statewide.

Community non-profit facilities are available in 2 counties. Alachua has a day facility and Marion County a day and workshop for trainable level children.

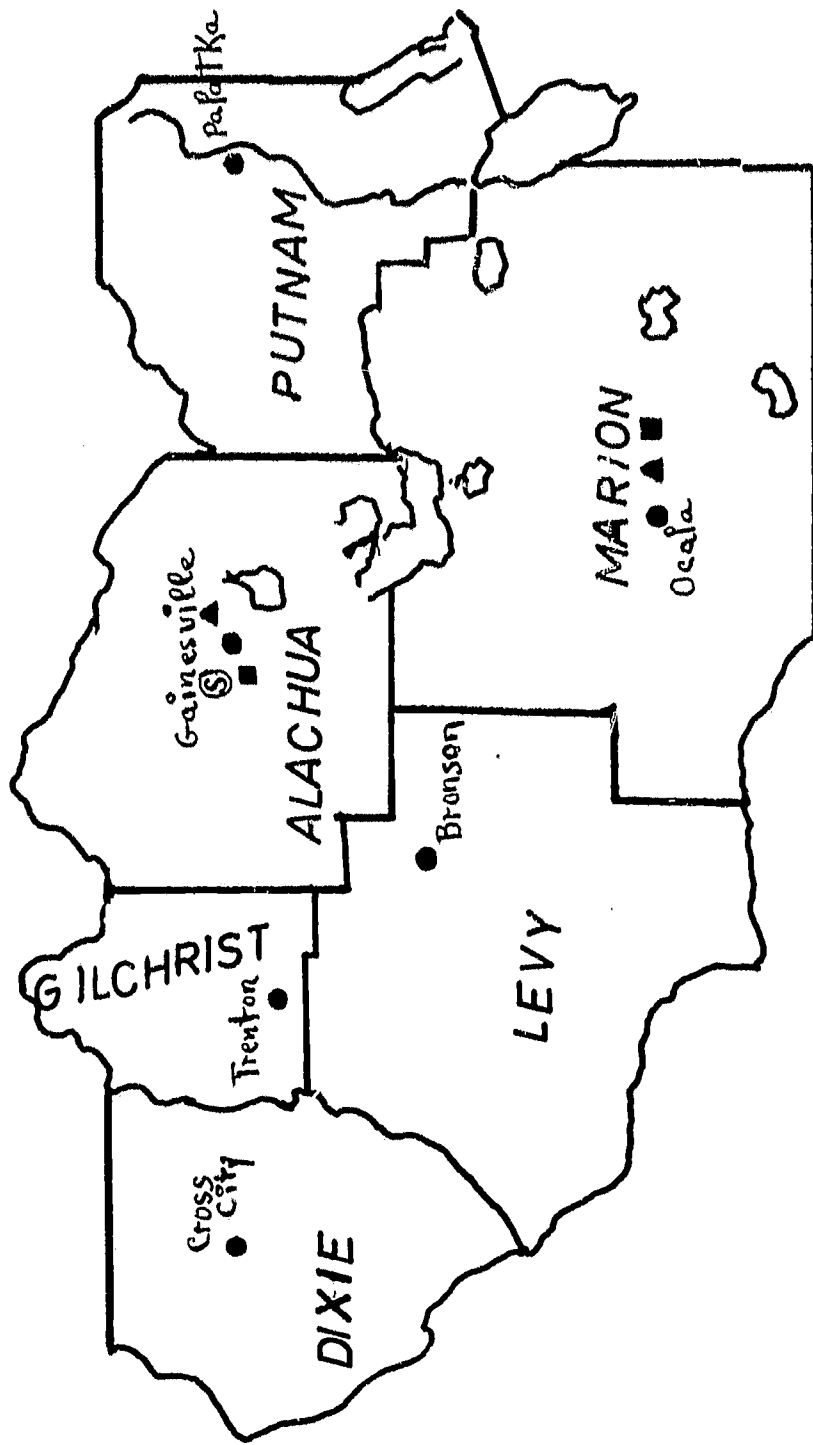
The needs for additional services in this area are also evident. A residential facility in Alachua and Marion Counties would be reasonable. The addition of another day facility in Alachua County and a day facility should be planned in Putnam County. There is presently activity in Marion County to provide a diagnostic and evaluation facility. Expansion of D&E Services on an "outpatient" basis from the Sunland Training Center is also planned.

REGION V

Population

1967 - 207,800

1973 - 247,800



MAP 10

Legend

- - County Seat
- ▲ - Private or Non-profit M. R. Facilities
- - Association for Retarded Children
- Ⓢ - Sunland Facility (M.R. Institutional)

EXHIBIT II
 STATE PLAN
 SRS:RSA:DMR:CR
 TENTATIVE FORM 1
 INVENTORY - GENERAL DATA
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	6	Mentally Retarded Persons Served in Facility										9
	City or Town									Level of Retardation										
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	Services for Retarded with other Handicapping Conditions (Code)	
									Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over		
R-5	Gainesville	Alachua	Sunshine School	F	A	24	24	--	3	10	11	--	8	16		--		--	--	--
	Ocala	Marion	New Hope School	F	A	17	17	--	--	7	10	--	--	17		--		--	--	--
	Ocala	Marion	Opportunity Workshop	F	A	19	19	16	2	1	--	--	--	--	--	19		--	--	--
COMMUNITY FACILITY TOTALS				3-F	3-A	60	60	16	5	18	21	---	8	33		19				---



EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - GENERAL DATA

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town	County					Level of Retardation			Age Groupings									
	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-5							638	--	618	20	--	--	416	222					
PUBLIC SCHOOLS TOTALS (Note 1)																			
INSTITUTIONAL																			
SUB-TOTALS																			
Mental Retardation																			
State Hospitals																			
Youth Services																			
Florida Division of Corrections																			
TOTALS (Note 2)																			
							288												
							69												
							15												
							29												
							401												

NOTES:

- Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.
- Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.



EXHIBIT II
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TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Location			Name of Facility	Diagnosis & Total Number Served	Day Facility							Residential Facility															
Area	City or Town	County			Average Daily Case Load in Services							Average Daily Case Load in Services															
					4a	4b	4c	4d	4e	4f	4g	48	5a	5b	5c	5d	5e	5f	5g								
			2c	3																							
R-5	Gainesville	Alachua	Sunshine School	--	24	--	--		24	24	24	24	24														
	Ocala	Marion	New Hope School	--	17	--	--		15	15	17	17															
	Ocala	Marion	Opportunity Workshop	--	19	--	--			19	19	19	19														
COMMUNITY FACILITY TOTALS				--	60	--	--		39	58	60	60	60														
PUBLIC SCHOOL TOTALS				--	638	--	--		618	20	638	638	638														
INSTITUTIONAL TOTALS																											

NOTE: See Notes 1 and 2 on Form 1.



REGION VI - DESCRIPTIVE

This group of counties is an interesting one in the diversity of activity within its boundaries. The 140 odd miles between the north end of Flagler County through Volusia to the south end of Brevard extend along scenic oceanside Atlantic Ocean beach drives. The middle counties of Seminole, Orange and Osceola form an inland group centered about the activity center of Orange County. Lake and Sumter Counties to the west are more closely aligned in interests.

This is a rapidly growing area, as may be seen by the projected population growth by 1973 and includes the county, which showed the most rapid growth between 1960 and 67 and Orange County which has the largest area population.

While this area is of increasing interest to retirement age persons, the populations of Brevard, Orange, Seminole, and Flagler Counties are below the state average for senior citizens. Orange, Osceola, and Brevard lag state average in non-white population, while Orange and Brevard Counties exceed the state average income level. In average school levels attained by their populations, Orange, Seminole and Brevard are above the average.

In this area we change our focus from the northern agricultural based economy, to the citrus, cattle, tourist and electronic industries. Osceola County is known as the "Cow Capital" of Florida. Of course, Brevard County is the site of the "Moon Port At Cape Kennedy", with all the related industry, research and educational achievement that goes with such advancements. Volusia County is growing rapidly, with Daytona Beach the center of activity. Daytona Beach has been "home" for millions of tourists annually and bear testimony to the popularity of the famous beaches and entertainment to be found in Volusia County. The county is the home of Stetson University at Deland and Daytona Beach Junior College. Orange County provides site for the home of Rollins College at Winter Park, Florida Technological University and Valencia Junior College, while Lake County provides educational opportunity at Lake-Sumter Junior College. Brevard County has its junior college in Cocoa and Sanford is proud to advertise and recognize its Seminole Junior College.

Orlando of course is the focus of population and culture, with its Central Florida museum planetarium, 2 Florida symphony orchestras, Locke Haven art center, ballet royal concert group and a ballet workshop, play houses, music associations and barber shop quartet groups.

With the exception of Sumter, each county has at least one hospital (Orlando having as many as 7), and each county except Flagler having at least one nursing home. Lake County has rehabilitation services available and is adding diagnostic and treatment services. Seminole, Osceola and Brevard County depend upon Orange County for rehabilitation services. Psychiatric services are planned for areas where they do not exist.

With the exception of Flagler, which had no special education classes during the 1967-68 school season, remaining counties made this region among those better prepared to furnish services to the retarded. The average numbers of percentages of those served by special education in the school year group was 42%. Over 1,000 school age youngsters were still on identified waiting lists for retarded services.

Brevard, Seminole, Lake, Orange and Volusia County provide community non-profit or private programs for various age groups. Volusia County and Orange County particularly have numerous community services (as noted in the CR Form 1 following).

The Division of Mental Retardation maintains and administers a non-ambulatory retarded Sunland Hospital at Orlando. This is a 1,000 bed facility, and serves the southern part of Florida.

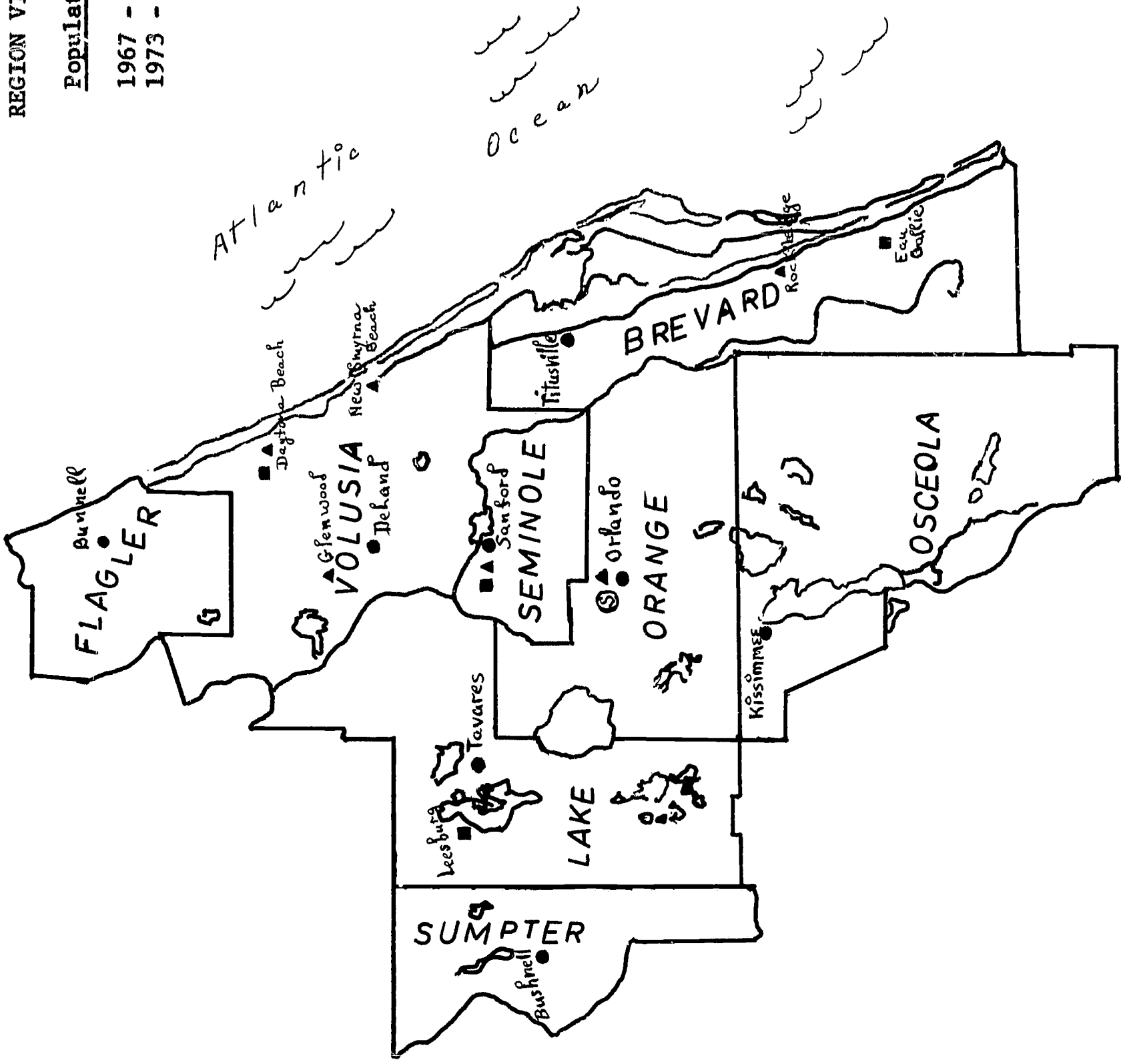
The need for a D&E facilities is seen as needed in Orange, Volusia and Brevard County. Day activity centers are needed in Seminole, Lake, Volusia, Orange and Brevard and Osceola Counties, while a residential facility is seen as a need for Orange, Volusia and Brevard Counties. A comprehensive mental retardation center should be made available to this area as funds permit.

REGION VI

Population

1967 - 847,500

1973 - 1,072,400



MAP 11

Legend

- - County Seat
- ▲ - Private or Non-Profit M.R. Facilities
- - Association for Retarded Children
- Ⓢ - Sunland Facility (M.R. Institutional)

EXHIBIT II
STATE PLAN
SRS:RSA:DMR:CR
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - GENERAL DATA

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town							Level of Retardation					Age Groupings					Services for Retarded with other Handicapping Conditions (Code)		
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e		8f	9
R-6	Glenwood	Volusia		United Presby. Special Services Inc. (Duval Home)	G	A	146	146	--	16	25	48	57	10	94	42				
	Deland	Volusia		Van Hook School for Retarded Children	G	C	22	22	--	12	10	--	--	10	10	12				
	"	"		Peter Pan School	F	A	9	9	--	2	5	2	--	5	4	--				
	Daytona Beach	"		Happy Corners School	F	A	24	24	--	--	12	9	3	4	6	14				
	New Smyrna Beach	"		Pathway School	F	A	6	6	--	--	5	1	--	--	2	4				
	Ormond Beach	"		Rainbow School	F	A	9	9	--	3	6	--	5	4	4				A/B	
	Orange City	"		Green Valley School	G	C	80	16	--	--	--	--	--	--	16					



Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility										Services for Retarded With other Handicapping Conditions (Code)						
	City or Town	2a						2b	2c	3	4	5	6	Level of Retardation										
														7a	7b	7c	7d		7e	8a	8b	8c	8d	8e
								Total	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over					
R-6	Orlando	Orange		Morning Star School	F	A	35	35	--	7	28	--	--	--	--	35	--	--	--	--				
"	"	"		Primrose School Central Fla.	F	A	41	41	--	8	12	17	4	13	20	20	8	--	--	--				
"	"	"		Sheltered Work-shop, Inc.	F	A	105	97	--	76	21	--	--	--	19	78	--	--	--	--				
"	"	"		Open Door School	F	A	28	28	--	--	24	4	--	--	28	--	--	--	--	--				
"	"	"		Russell Home for Atypical Children	G	A	23	23	--	--	9	14	--	10	9	4	--	--	--	--				



EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

SRS:RSA:DMR:CR
TENTATIVE FORM 1
INVENTORY - GENERAL DATA

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Total	Mentally Retarded Persons Served in Facility														
	City or Town	2a								Level of Retardation					Age Groupings					9				
										7a	7b	7c	7d	7e	8a	8b	8c	8d	8e		8f			
										Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	Services for Retarded with other Handicapping Conditions (Code)			
R-6	Maitland	Orange		Kradle Kare, Inc.	G	C		12	10	--	2	1	7	--	6	4								
	Leesburg	Lake		Sunrise Workshop, Inc.	F	B		16	14	--	4	8	2	--	--	4			10					
	Sanford	Seminole		Little Red Schoolhouse	F	A		12	12	--	6	6	--	--	12									
	Rockledge	Brevard		Brevard Training Center	F	A		35	35	--	--	17	18	--	6	8			21					
COMMUNITY FACILITY TOTALS								603	527		16	136	189	122	64	59	275	193					1-A, 1-B	



COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility													
	City or Town	County					Level of Retardation			Age Groupings										
							7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9		
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
R-6	PUBLIC SCHOOLS TOTAL (Note 1)			F	B	---	2,359	---	210	254	---	1519	840	---	---	---	---	---	---	
INSTITUTIONAL																				
SUB-TOTAL																				
Mental Retardation																				
State Hospitals																				
Youth Services																				
Florida Division of Corrections																				
TOTAL (Note 2)																				
							830													
							101													
							35													
							101													
							1,067													
NOTES: Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded. Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.																				



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SRA: RSA: DMR: CR
TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Location		County	Name of Facility	Diagnosis & Total Number Served	Day Facility						Total Number Served	Residential Facility							
City or Town	2a				2b	2c	4a	4b	4c	4d		4e	4f	4g	48	5a	5b	5c	5d
		Volusia	Presby. Special Services, Inc. (Duval Home)	3															
Glenwood																			
Deland		"	Van Hook School										146						
"		"	Peter Pan School	9				7	9	9									
Daytona Bch.		"	Happy Corners Sch.	24				19	5	24									
N. Smyrna Bch.		"	Pathway School	6				5	6	6									
Ormond Bch.		"	Rainbow School	9				9	9	9									
Orange City		"	Green Valley Sch.													16			16
Orlando		Orange	Morning Star Sch.	35				35		35									
"		"	Primrose School	41				8	23	41									
"		"	Central Fla. Sheltered Workshop, Inc.	97					58	97	58								
"		"	Open Door School	28					28	28									

EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

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TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

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Location		Name of Facility	Diagnosis & Total Number Served	Day Facility							Residential Facility								
City or Town	County			Average Daily Case Load in Services							Average Daily Case Load in Services								
Area	2a	2b	2c	4a	4b	4c	4d	4e	4f	4g	4h	5a	5b	5c	5d	5e	5f	5g	
R-6	Orlando	Orange	Russell Home for Atypical Children	23	--	--	--	--	23	--	--	--	--	--	--	--	--	--	
"	"	"	United Cerebral Palsy Med. Assn. of Orlando	DATA NOT RECEIVED	--	--	--	--	--	--	--	--	--	--	--	--	--	10	
	Maitland	"	Kradle Kare, Inc.	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	
	Leesburg	Lake	Sunrise Workshop, Inc.	14	--	--	--	5	14	10	--	--	--	--	--	--	--	--	
	Sanford	Seminole	Little Red Schoolhouse	12	--	--	4	8	12	--	--	--	--	--	--	--	--	--	
	Rockledge	Brevard	Brevard Training Center	35	--	--	--	35	35	21	--	--	--	--	--	--	--	--	
COMMUNITY FACILITY TOTALS				333			87	186	333	89		194			28	134	194		
PUBLIC SCHOOL TOTALS				2359			2105	254	2359			1067							
INSTITUTIONAL TOTALS																			

NOTE: See Notes 1 and 2 on Form 1.



REGION VII - DESCRIPTIVE

Of Florida's 67 counties, Citrus County ranked seventh and Pasco County eleventh in population increase during the period 1960-67. In addition Hillsborough was the 4th largest city in Florida in 1967. In the counties adjacent to the Gulf of Mexico there is little beach development activity, although there are fishing and hunting areas throughout these counties.

Generally, until one reaches Hillsborough County the counties have agricultural, lumber and commercial fishing interests. Citrus, Hernando, and Pasco are also being sought as home settings by retirees, and they have better than the state average in 65 plus age group at this time. Hillsborough County, being primarily industrial and a deep water port, has a younger average age population. Income and schooling is also below average in counties other than Hillsborough.

Fishing, hunting and natural attractions of such places as the Withlachochee State Forest, and tourist attractions such as Homosassa Springs, Weekiwachee and Crystal River, provide much of the income to the northern 3 counties in this area.

The center of culture and activity, of course, is the deep water port city of Tampa in Hillsborough County. This is a major industrial area and there is hardly an industry that is not represented either by a business office or by an industrial plant. Hillsborough County offers educational opportunities at Florida Christian College, the University of Tampa and the University of South Florida. The entire area also is interested in the cultural activity of the city: Tampa civic ballet groups, the modern dance theater, the community concert association, the philharmonic association and orchestra and symphonette. There is also a large latin speaking cultural group in Hillsborough County and they offer Spanish Little Theater as well as gourmet, old world styled restaurants. A museum of science, of natural history and a municipal museum, in addition to year round legitimate theater activities, round out area offerings.

With reference to generic services, Tampa offers a large range of services to the disabled. It does not however include personal adjustment training, vocational or epileptic programs. Mental Health facilities are primarily those furnishing medical, psychiatric and psychological social services, as well as some occupational therapy and counseling. There are hospitals in all counties and nursing homes in all but Citrus County. Hillsborough furnishes rehabilitation services for the area.

The special education exceptional child classes in public schools are active in each of the 4 counties. Citrus County has taken care of its estimated needs whereas Hillsborough with its huge population is only satisfying 21% large in Hernando County.

Communities in Pasco, Citrus and Hillsborough County offer community non-profit day facility programs for the retarded. Hillsborough County also offers residential and workshop community programs diagnosis and evaluation and a speech and hearing clinic.

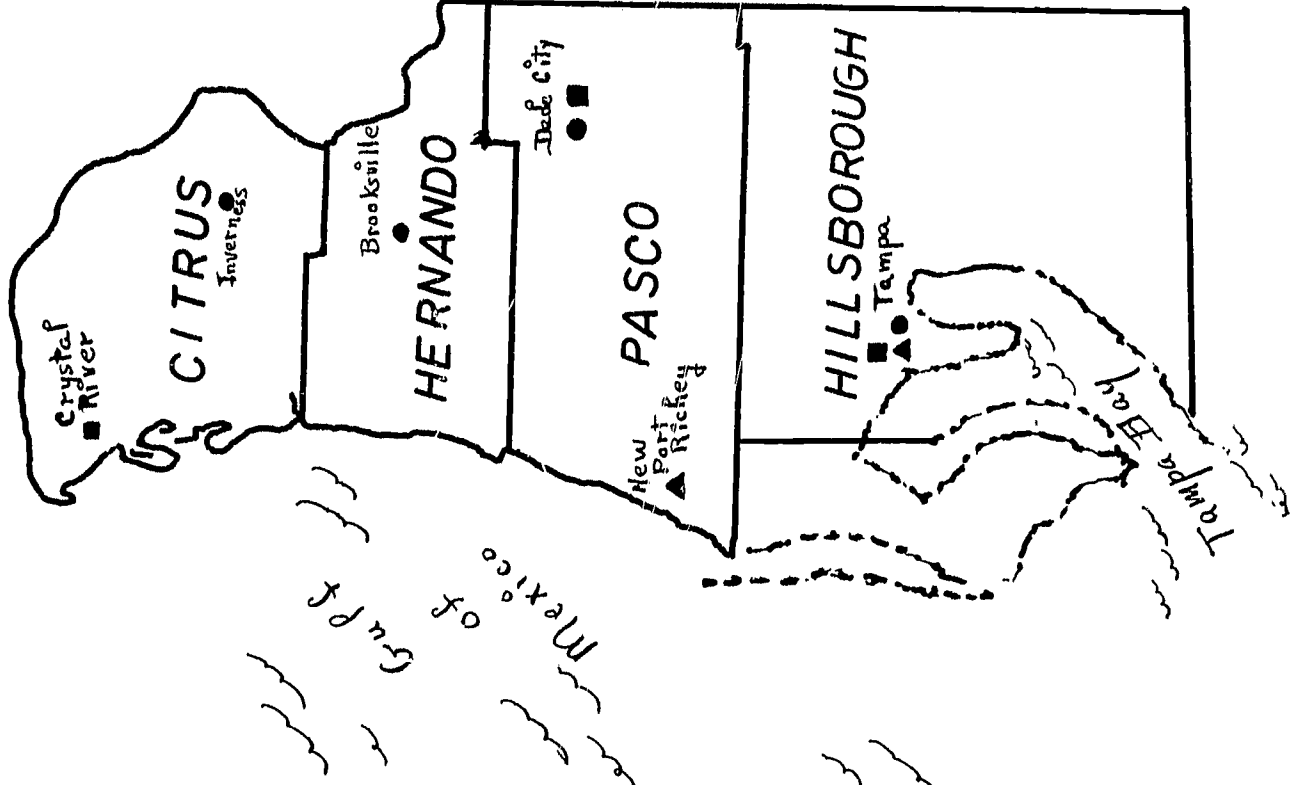
A mental retardation comprehensive community center is presently approved for the St. Petersburg area, and will serve this region also. Additional day training centers are seen as needed in Hillsborough County, and in each of the counties except Citrus County which has just completed a day facility for the retarded. West Pasco County has also completed a new day facility under P.L. 88-164 Construction Grant, however a day facility is needed in East Pasco County. A day facility is needed in Hernando, and several in Hillsborough County. A new residential facility is seen as feasible for Hillsborough County. These building programs would help to meet some of the urgent needs of this region and should be accomplished on unlimited funds within the next four years.

REGION VII

Population

1967 - 512,500

1973 - 604,600



MAP 12

Legend

- - County Seat
- ▲ - Private or Non-profit M.R. Facilities
- - Association for Retarded Children

SRS:RSA:DMR:CR
 TENTATIVE FORM 1
 INVENTORY - GENERAL DATA

COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility										65 Years and over Services for Retarded With other Handicapping Conditions (Code)		
	City or Town							2a	2b	2c	3	4	5	6	Level of Retardation					Age Groupings
								7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
R-7	New Port Richey	Pasco		Open Door School	F	A	17	---	3	12	2	---	---	---	17	---	---	---	---	---
	Lecanto	Citrus		Key Training Ctr.	F	A	9	---	---	9	---	---	---	---	2	7	---	---	---	---
	Plant City	Hillsborough		Golden Hours Center	F	A	10	1	---	6	3	---	4	4	4	2	---	---	---	---
	Ruskin	"		Ruskin Happiness Ctr.	F	A	7	---	---	5	2	---	5	2	2	---	---	---	---	---
	Tampa	"		HARC Day Trn. Center	F	A	22	1	---	11	9	1	8	5	5	9	---	---	---	---
	"	"		Morning Star School	F	A	28	---	7	17	4	---	5	23	---	---	---	---	---	---
	"	"		MacDonald Trn. Ctr. Foun., Inc.	A	A	386	---	105	197	84	---	76	81	229	---	---	---	---	A/C/D
							386	---	386	---	---	---	---	---	---	---	---	---	---	---



EXHIBIT II
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TENTATIVE FORM 1
INVENTORY - GENERAL DATA
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town	County					Level of Retardation			Age Groupings									
							Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over			
1							7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
R-7	Tampa	Hillsborough	Tampa D&E Clinic	E	A	182	28	28	35	16	6	59	54						
COMMUNITY FACILITY TOTALS							592	143	292	120	7	157	188	247					1-A 1-C 1-D



Area	Location			Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility													
	City or Town	County	Name of Facility				Level of Retardation						Age Groupings							
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
							Total	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	Services for Retarded with other Handicapping Conditions (Code)	
R-7	PUBLIC SCHOOL TOTALS (Note 1)			F	B	864	864	---	685	179	---	---	124	523	217	---	---	---	---	---
	INSTITUTIONAL SUB-TOTAL						543													
	Mental Retardation						143													
	State Hospitals						21													
	Youth Services						84													
	Florida Division of Corrections (Note 2)						791													
	TOTAL																			

(See Inventory Foreword Section and Note 2)

NOTES:

1. Supplement #1 provides names, location, age groups and level of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.
2. Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.



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COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

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Location		Name of Facility	Diagnosis & Evaluation Total Number Served	Day Facility						Residential Facility											
Area	City or Town			County	2a	4a	4b	4c	4d	4e	4f	4g	48	5a	5b	5c	5d	5e	5f	5g	5h
R-7	New Port Richey	Pasco	Open Door School	17					17												
	Lecanto	Citrus	Key Training Ctr.	9				4	9												
	Plant City	Hillsborough	Golden Hours Ctr.	10					10												
	Ruskin	"	Ruskin Happiness Ctr.	7					7												
	Tampa	"	HARC Day Trn Ctr.	22					22												
	"	"	Morning Star Sch.	28				24	6	28											
	"	"	MacDonald Trn Ctr. Foundation, Inc.	341	160				84	341	157		45				45	45	25		
	"	"	Tampa D&E Clinic																		
COMMUNITY FACILITY TOTALS				434	16028	155	434	157	45	45	25										
PUBLIC SCHOOL TOTALS				864	685	179	864														
INSTITUTIONAL TOTALS																					
NOTE: See Notes 1 and 2 on Form 1.																					

REGION VIII - DESCRIPTIVE

This is the heart of the Gulf Coast vacation area lying between Pinellas and Sarasota Counties. This strip is a continuous one with clusters of modern hotels, motels and settings ranging from reasonable mobile home parks to luxurious individual residences, on the off-shore islands which are off Pinellas County. Connecting Pinellas County with Manatee and Sarasota County is a famous tourist attraction - the fifteen mile scenic drive over the Sunshine Skyway. Manatee is the name of a county and a river, while its namesake is a sea animal that used to provide fresh meat to the area.

Sarasota has always been a haven for the wealthy class of visitors. The name most closely associated with Sarasota being that of John Ringling, the flamboyant circus king. It is also the site of Myakka River State Park - Florida's largest.

Pinellas County, besides being most widely known as the "Capital City for Retirees", shares a general area interest in citrus and commercial fishing. Light industry and services for people also forms a solid economic base for the city.

It is one of the smallest land area counties but is quite densely populated, with over 1680 persons per square mile. This is almost three times the number of persons per square mile as Dade County - Florida's largest populated county, which at last census had 544 persons per square mile.

St. Petersburg provides for educational opportunities at St. Petersburg Junior College, Gibbs Junior College and Florida Presbyterian College, while Bradenton's Manatee Junior College and the Ringling School of Art in Sarasota also attract a large student population. St. Petersburg shares honors with Sarasota as the center of culture. Traditionally Sarasota has been center of art, ballet, and theater, but St. Petersburg is not to be outdone with its legitimate theater facilities, philharmonic orchestra and museum of art.

All of the counties are heavily populated and all have above the state average of retirement age residents. With the exception of Manatee, they also equal or exceed the state average in years of schooling and income.

Generic health services available include hospitals and nursing homes in all areas. In addition diagnosis and treatment as well as rehabilitation services are available in Pinellas and Sarasota Counties and rehabilitation is available in Manatee. Expansion of psychiatric facilities and other facets of comprehensive mental health care are planned for each of these areas.

Public school programs provide special education classes in all counties, and 70% of the estimated need of school age retardates are presently being served.

Community services are also available in all counties. The service in Manatee is a private day facility, while those in Sarasota also include residential availability. Pinellas community facilities provide residential and day activities, and the county offers D&E clinic facilities and a branch Institute for Achievement of Human Potential.

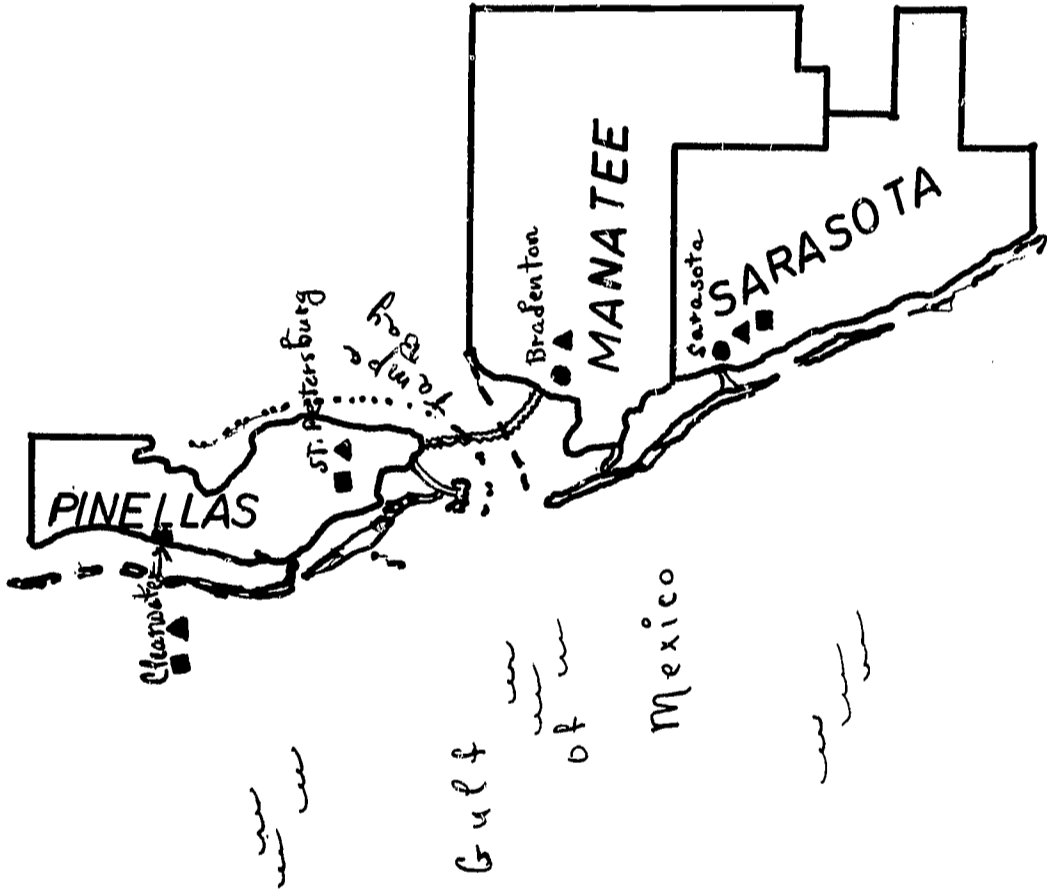
A regional community mental retardation facility has been approved for a construction grant under P. L. 88-164. In Pinellas County, future developed needs will depend upon the services established by this retardation center, since D&E and other social services, as well as residential and day activities, will be provided at this setting. A residential facility need is seen in Manatee County, as well as additional day facilities in each of the three counties, and a D&E facility in Sarasota County.

REGION VIII

Population

1967 - 614,500

1973 - 756,100



MAP 13

Legend

- - County Seat
- ▲ - Private or Non-profit M.R. Facilities
- - Association for Retarded Children

SRS:RSA:DMR:CR
 TENTATIVE FORM 1 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
 INVENTORY - GENERAL DATA

Area	Location		Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility														
	City or Town	County				Name of Facility	Level of Retardation					Age Groupings					Services for Retarded with other Handicapping Conditions (Code)			
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d		8e	8f	9
R-8	Braden-ton	Manatee	Fairhaven	G	C	3	3	---	---	---	3	---	---	---	3	---	---	---	---	---
	Venice	Sarasota	Loveland Sch.	F	A	16	16	---	1	11	4	---	---	---	13	3	---	---	---	---
	Sarasota	Sarasota	Children's Haven Ctr.	D	A	70	70	---	15	47	8	---	8	39	23	---	---	---	---	---
	Clear-water	Pinellas	Play Parc Sch.	F	A	31	31	---	6	8	14	3	17	14	---	---	---	---	---	---
	"	"	UPARC Habilita-tion Center	F	A	11	11	---	1	6	4	---	---	2	---	---	---	---	---	---
	St. Pet-ersburg	"	Pinellas Assoc. for Retarded Childre	D	A	108	108	---	---	49	16	8	30	46	---	---	---	---	---	32
							Total													



SRS:RSA:DMR:CR
 TENTATIVE FORM 1
 INVENTORY - GENERAL DATA
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility											
	City or Town	County						Level of Retardation											
								7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-8	St. Petersburg	Pinellas	D&E Clinic	E	A	97	76	-	29	29	12	6	5	69	2	-	-	-	-
	"	"	Institute for Achievement of Human Potential	B	A	65	65	-	13	29	19	4	15	46	4	-	-	-	H (Note 1)
Note 1: This Institute specializes in patterning procedures. 1-H 7-A 2-D 1-C 401 1-E 3-F 1-G																			
COMMUNITY FACILITY TOTALS							380	---	100	179	80	21	75	232	73	---	---	---	1-H



Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town	County					Level of Retardation						Age Groupings				Services for Retarded With other Handicapping Conditions (Code)		
							7a Borderline (68-83 IQ)	7b Mild (50-67 IQ)	7c Moderate (35-49 IQ)	7d Severe (20-34 IQ)	7e Profound (Below 20 IQ)	8a 0-5 years	8b 6-12 years	8c 13-20 years	8d 21-44 years	8e 45-64 years		8f 65 years and over	
I	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-8				F	B	---	2180	---	1990	190	---	---	13	1272/895	---	---	---	---	---
PUBLIC SCHOOL TOTALS																			

INSTITUTIONAL																			
SUB-TOTAL																			
							443												
							72												
							34												
							68												
							617												
TOTAL (Note 2)																			

NOTES:																			
1. Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.																			
2. Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings, and services, are listed on pages 163 - 165																			



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TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

Location		Name of Facility	Diagnosis & Total Number Served	Day Facility						Residential Facility								
City or Town	County			Diagnosis & Total Number Served	4a	4b	4c	4d	4e	4f	4g	4h	5a	5b	5c	5d	5e	5f
			3															
R-8 Bradenton	Manatee	Fairhaven														3	3	
Venice	Sarasota	Loveland School		16			16	16										
Sarasota	"	Children's Haven		60			15	26	60	20					6	10	10	2
Clearwater	Pinellas	Play Parc School		31			8	24	31									
"	"	UPARC Habilitation Center		11						8	11	8						
St. Petersburg	"	Pinellas Assoc. for Retarded Children		92			19	53	92	12							16	
"	"	D&E Clinic	76															
"	"	Institute for Achievement of Human Potential		65	5	13		13	65									
COMMUNITY FACILITY TOTALS			76	275	5	13	58	140	275	40				6	13	29	2	
PUBLIC SCHOOL TOTALS				2180			1990	1902	180									
INSTITUTIONAL TOTALS																617	617	

NOTE: See Notes 1 and 2 on Form 1.



REGION IX - DESCRIPTIVE

Central Florida has the majority of the state's estimated 30,000 lakes. Okeechobee County borders on the second largest fresh water lake entirely within the United States - Lake Okeechobee. In the boom land years of the twenties it was said you bought land by the gallon - not by the acre, and this area was also involved in speculative profits. Now however, along with its other regional neighbors, it is more well known for its citrus and cattle. Its regional partners, Highlands and Polk, are heavily involved with tourism also - Cypress Gardens in Polk County perhaps being one of the best known visitor's attractions. Highlands and Hardee Counties are largely rural, quiet living areas except for the annual Sebring (Highlands) twelve hour sports car grind, which brings sport car lovers from all over the country each year.

Okeechobee is the only one of the three counties with less than the state average of retirement age citizens. Polk County has an average income level; however, the remainder of the counties are somewhat below average, and all of the counties lag the state average in the number of years of schooling attained by its residents.

Polk County is the host to Polk Junior College at Winter Haven and to Florida Southern College at Lakeland. Many of the buildings at Florida Southern were designed by Franklin Lloyd Wright and it is sometimes called the "Wright Campus". Highlands County has South Florida Junior College to offer educational advantages for its residents.

Generic health services are represented in each county by at least 1 hospital, and nursing homes in Polk and Highlands Counties. Population is increasing in each county with Polk County being one of the ten most populous counties in Florida, and Okeechobee being one of the 10 most rapidly growing counties in Florida.

Exceptional children's classes for the mentally retarded are well provided for in all but Okeechobee County. In fact, the average for this area is 94% satisfaction of estimated need. Okeechobee is at the 30% mark but will be considerably improved within the next few years. Despite this excellent record the waiting list for retarded exceeds 300 persons, and in Hardee County a waiting list of 268 persons indicates that the incidence of retardation in this county is closer to 8% than 3% within the school age group.

Community programs are available in Highlands and Polk County at this time. All programs are provided in facilities and one in Polk County is largely a terminal workshop program.

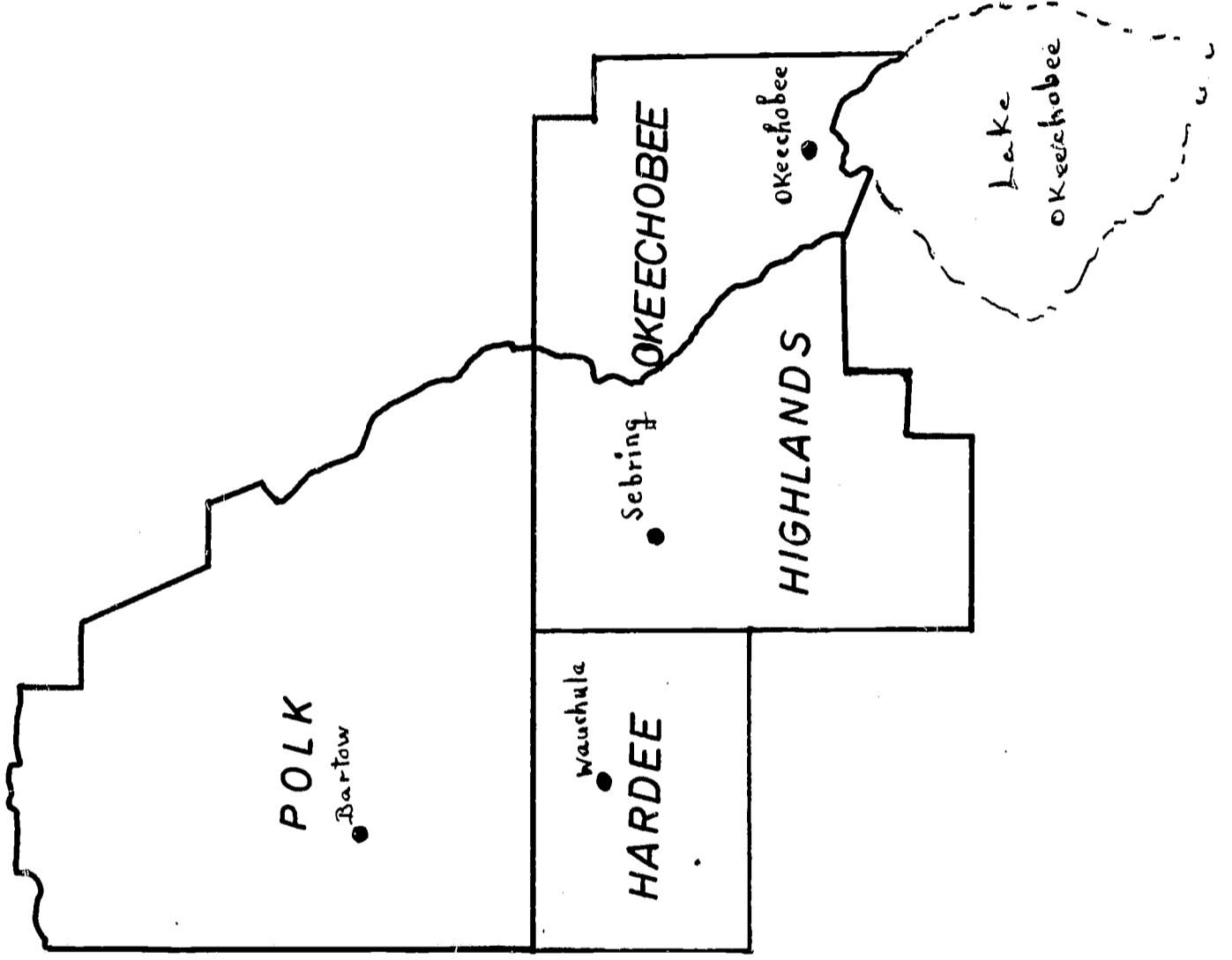
The nature of the geography of the area would indicate a day facility is required in Hardee and in Highlands County; as well as a day activity in Polk County. A residential facility for Polk County is recommended, as is an area D&E facility in Polk County.

REGION IX

Population

1967 - 284,900

1973 - 324,900



MAP 14

Legend

- - County Seat
- ▲ - Private or Non-profit M.R. Facilities
- - Association for Retarded Children

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town							Level of Retardation					Age Groupings					Services for Retarded with other Handicapping Conditions (Code)		
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e		8f	9
R-9	Lake Placid	Highlands	Ridge Area Day School	F	A	6	6													
	Lakeland	Polk	Marion Lea Trn. School	F	A	43	43							6	43					
	"	"	Polk ARC Sheltered Workshop for the Handicapped	F	A	93	93								45	48				
COMMUNITY FACILITY TOTALS				3-B3-A		142	142		64	61	17			94		48				



EXHIBIT II
 STATE PLAN
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
 INVENTORY - GENERAL DATA

SRS:RSA:DMR:CR
 TENTATIVE FORM 1

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility													
	City or Town	County					Level of Retardation			Age Groupings										
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
R-9	PUBLIC SCHOOL TOTALS		(Note 1)	F	B	1959	6	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	Services for Retarded with other Handicapping Conditions (Code)	
	INSTITUTIONAL SUB-TOTAL																			
	Mental Retardation					328														
	State Hospitals					92														
	Youth Services					7														
	Florida Division of Corrections					55														
	TOTAL (note 2)					482														

(See Inventory Foreword Section and Note 2)

NOTES:

- Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.
- Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.



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 STATE PLAN
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
 INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

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Location			Name of Facility	Diagnosis & Total Number Served 4a	Day Facility								Residential Facility																			
Area	City or Town	County			Average Daily Case Load in Services								Total Number Served	Average Daily Case Load in Services																		
					4b	4c	4d	4e	4f	4g	4h	4i		5a	5b	5c	5d	5e	5f	5g												
R-9	Lake Placid	Highlands	Ridge Area Day School	6	---	---	5	1	6	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
	Lakeland	Polk	Marion Lea Trn. School	43	---	---	36	7	43	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
	Lakeland	Polk	Polk ARC Sheltered Workshop for the Handicapped	93	---	---	20	58	93	93	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
COMMUNITY FACILITY TOTALS				142	---	---	61	66	142	93	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
PUBLIC SCHOOL TOTALS				1959	---	---	1790	169	1959	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
INSTITUTIONAL TOTALS				---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
				482	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

NOTE: See Notes 1 and 2 on Form 1.

REGION X - DESCRIPTIVE

Counties making up this region begin the most famous strip in the world. This is South Florida's "Gold Coast", beginning in the vicinity of Vero Beach and running south through Dade County. Are you interested in the fact that the Indian River is not really a river (but a lagoon over 130 miles long), or looking for the "Sailfish Capital" of the world (which one may find in Stewart Martin County), or on the trail of an attractive retirement development, or are you interested in exploring the area that reflects the glamour of high society opulence of the wealthy and famous (which one may find in Palm Beach)?

Whatever the interest, it probably may be satisfied somewhere in this exciting area.

The orange and grapefruit region of the Indian River is world famous and needs no further description. Each county is attractive to the retiree and is becoming ever more so. This may be noted by the fact that the 65 and over group are present in large numbers in all of these counties. In addition, these counties attract above state average numbers of non-white residents. Palm Beach County ranks above-average in schooling and in income of its residents. The remainder of the counties are average in schooling while St. Lucie and Martin County have a lower standard of income when compared with the rest of the state.

Indian River County offers higher education opportunities at Indian River Junior College, while Palm Beach is able to offer educational interest situations as: Florida Atlantic College at Boca Raton, Seminary of St. Vincent De Paul at Boynton Beach, Mary Mount College at Boca Raton, Palm Beach Junior College and Roosevelt Junior College. In addition Palm Beach County offers other cultural interests in a junior museum planetarium, art and ballet guilds, civic opera and opera lyrica, as well as the Palm Beach symphony orchestra.

Palm Beach is one of the ten largest counties in Florida, and Martin County one of the ten fastest growing counties.

Each county offers hospital and nursing home services. Palm Beach serves the rehabilitation needs of the area at the present time, while Indian River and Palm Beach serve area needs in diagnosis and treatment. There are no psychiatric facilities in Indian River, St. Lucie or Martin County; however, a psychiatric facility is to be constructed in either St. Lucie or Indian River County on a high priority basis. Palm Beach does have psychiatric services at the present time and plans additional extensions of these services. There is rehabilitation service in Vero Beach and a tumor clinic in Fort Pierce. Palm Beach has psychiatric and guidance clinics and presently serves the area for these needs.

With reference to special education services for exceptional children who are retarded, each county in this area has made progress, but the overall percentage of exceptional child services for the mentally retarded is only 42%. Services met vary from 20% in St. Lucie County to 50% in Martin County.

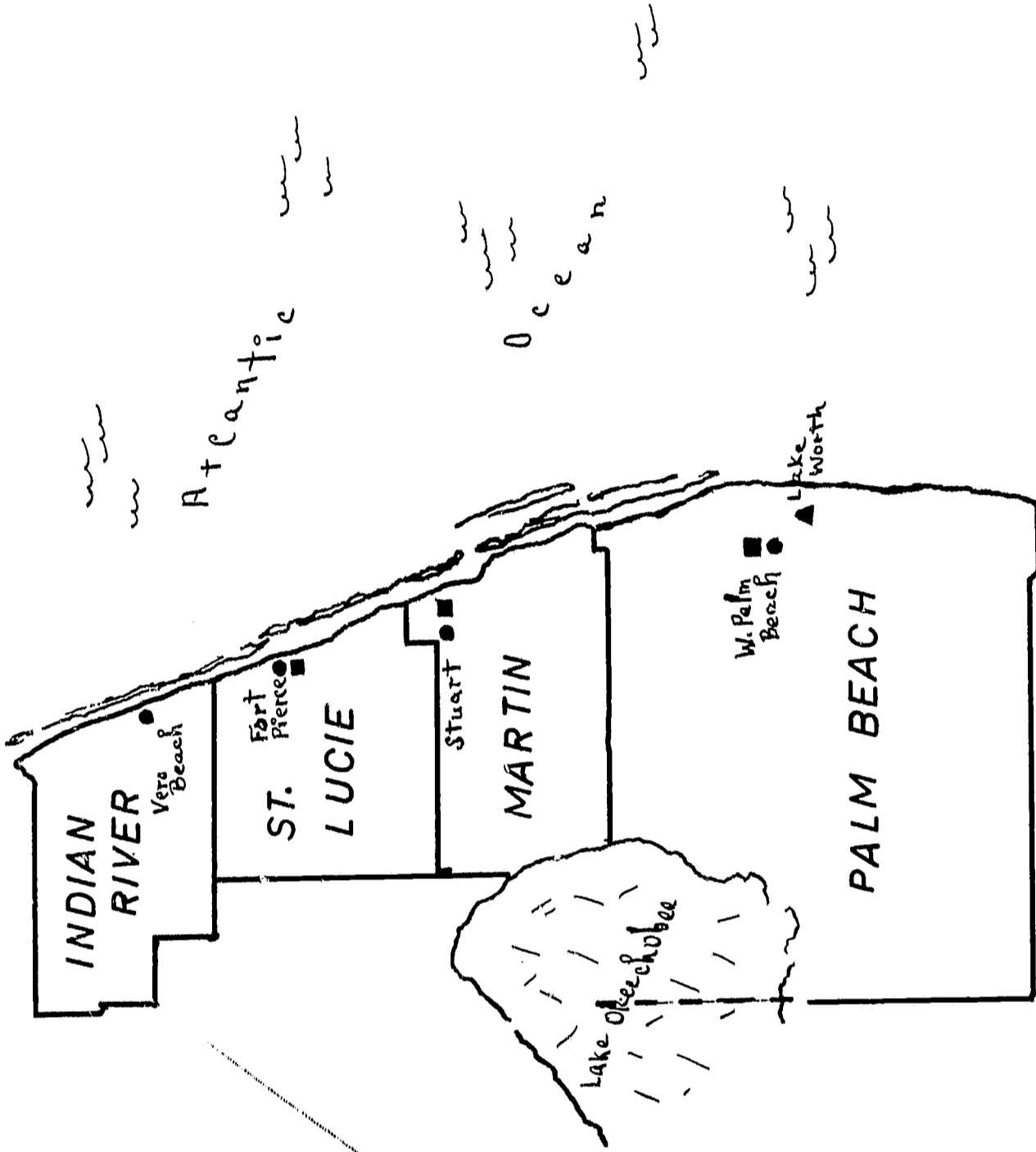
Community non-profit and private facilities for mentally retarded are represented by facilities in St. Lucie, Martin, and Palm Beach Counties. These range from day facilities in each of the three counties, to a recent new residential facility in Palm Beach County.

The population of each of these counties requires additional day services. One day facility should be planned in Indian River, another in St. Lucie and two in Palm Beach. One residential facility could serve the northern counties, if planned for St. Lucie County and another residential facility for Palm Beach. The future planning for Palm Beach includes a comprehensive regional mental retardation center.

REGION X

Population

1967 - 398,400
 1973 - 644,700



MAP 15

Legend

- - County Seat
- ▲ - Private or Non-profit M.R. Facilities
- - Association for Retarded Children

EXHIBIT II
 SRS:RSA:DMR:CR TENTATIVE FORM 1 INVENTORY - GENERAL DATA
 STATE PLAN
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility											
	City or Town								Level of Retardation					Age Groupings					Total	65 years and over
	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f		
R-10	Ft. Pierce	St. Lucie		Civitan Child Training Ctr.	F	A	24	24	---	1	4	18	1	7	17	---	---	---	---	---
	Stuart	Martin		Pioneer Occupational Ctr. for the Handicapped, Inc.	B	A	84	41	---	12	14	6	9	---	33	8	---	---	---	---
	Lake Worth	Palm Bch.		Palm Bch. Habitatio Center	A	A	104	104	---	66	27	9	2	---	25	79	---	---	---	---
	W. Palm Beach	Palm Beach		Marian Day Sch.	F	A	11	11	---	3	4	4	---	11	---	---	---	---	---	---
	"	"		Developmental Trn. Class	F	A	13	13	---	---	8	5	---	---	---	---	---	---	---	---

EXHIBIT II
 SRS:RSA:DMR:CR
 TENTATIVE FORM 1
 INVENTORY - GENERAL DATA
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town	County						2c	3	4	5	6	Level of Retardation					Age Groupings		
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
R-10	Delray Beach	Palm Beach	Developmental Trn. Class	F	A	8	8						4	4						
	Palm Beach Gardens	Palm Beach	Developmental Trn. Class	F	A	9	9			5	4		7	2						

COMMUNITY FACILITY TOTALS																				
				5-F	7-A	210	210	82	68	48	12	31	92	87						
				1-B																
				1-A																

Services for Retarded with other Handicapping Conditions (Code)



EXHIBIT II
 STATE PLAN
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
 INVENTORY - GENERAL DATA

SRS:RSA:DMR:CR
 TENTATIVE FORM 1
 INVENTORY - GENERAL DATA

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town	County					Level of Retardation			Age Groupings									
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-10	PUBLIC SCHOOL TOTALS (Note 1)			F	B	1071		1050	21				13	670/388					
	INSTITUTIONAL SUB-TOTAL																		
			Mental Retardation			306													
			State Hospitals			33													
			Youth Services			28													
			Florida Division of Corrections			66													
			TOTAL (Note 2)			433													
	NOTES:																		
	1. Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.																		
	2. Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation; age groupings and services, are listed on pages 163 - 165.																		

Services for Retarded
 With other Handicapping
 Conditions (Code)



SRA:RSA:DMR:CR
 TENTATIVE FORM 2
 INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

EXHIBIT II
 STATE PLAN

1968 Date
 Florida State
 Page 1 of 1 pages

COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Location		Name of Facility	Diagnosis & Evaluation Total Number Served	Day Facility						Residential Facility										
City or Town	County			4a	Average Daily Case Load in Services					Total Number Served	Average Daily Case Load in Services									
					4b	4c	4d	4e	4f		4g	4h	5a	5b	5c	5d	5e	5f	5g	
R-10 Ft. Pierce	St. Lucie	Lucie Civitan Child Trn. Center	24		5	19	24													
Stuart	Martin	Pioneer Occupational Ctr. for the Handicapped, Inc.	41	41	6	30	41	5												
Lake Worth	Palm Bch.	Palm Bch. Habilitation Center	89	27	19	65	89	25												
W. Palm Bch.	"	Marian Day School	11		11	11	11													
"	"	Developmental Trn. Class	13			13	13													
Palm Bch. Gardens	"	"	9			9	9													
Delray Bch.	"	"	8			8	8													
COMMUNITY FACILITY TOTALS			195	68	41	145	195	30												
PUBLIC SCHOOL TOTALS			1071	1050	21	1071	1071													
INSTITUTIONAL TOTALS																				
			433																	

NOTE: See Notes 1 and 2 on Form 1.



REGION XI - DESCRIPTIVE

This huge 6,000 square mile region has many uninhabited areas consisting of glades and marshy areas. Much of the region is devoted to wild life refuge and game reserve. This accounts for the second lowest populated region.

DeSoto County has a main focus of economic interest in citrus, cattle, agriculture and the tourist; Charlotte County in commercial fishing, agriculture and the tourist; Glades County in agriculture and cattle raising. Hendry County is known as the "Sugar Capital" because of the large amounts of sugar cane grown; Collier's economic base is sport fishing, the tourist and here we find the first oil ranching development in Florida.

Of the 6 counties, Charlotte, Lee, Hendry and Collier were among the first ten most rapidly growing counties in Florida, during the period 1960-1967.

Charlotte County and Lee County are particularly devoted to the attraction of retirees and have been successful in this. Charlotte has one of the first successful large (92,000 acres) retirement settlements (Port Charlotte), as well as other retirement areas in Cape Coral and in Punta Gorda. Lee County has developed a large retirement settlement at Lehigh Acres. In addition, Lee County is famous for its white sand, shell strewn beaches; for a homesite and laboratory of Thomas Edison and homes of his friends--Henry Ford and Henry Firestone; Sannibel Island is known worldwide as the "Sea Shell Capital". Collier County's only city development of population planning concern at this time is Naples. This city began as a rather exclusive retreat for the wealthy, but has attracted rather large growth and is famous for its "Swamp Buggie Days", held annually in November.

Charlotte, Lee and Collier Counties have less than state average non-white populations; while Glades, Hendry and Collier have less than state average numbers of retirement aged persons. Glades, Hendry and Collier Counties are above state average in income, although in each case the schooling level of the residents is somewhat less than average.

Lee county offers the educational advantages of its Edison Junior College, while Charlotte County has developed a landmark adult education program involving their senior citizen retirement population in all subject areas from arts and crafts to Sanskrit. This is still a developing area and public cultural activity outside the larger cities such as Ft. Myers and Naples is restricted.

With reference to generic health services, only Glades County is without a county hospital while DeSoto, Glades, Collier and Hendry lack nursing home facilities. Diagnosis and treatment and rehabilitation services are planned for Lee County, Collier County has a diagnosis and treatment facility available for area residents. Lee County has psychological services, vocational counselling, evaluation, social services and adjustment training, but lacks speech and hearing occupational therapy and epileptic clinic programs. There are no psychiatric facilities in this area, but such a facility will be constructed in Ft. Myers (Lee County).

The Division of Mental Retardation maintains Sunland Institutions in this area. One is an adult Sunland Training Center at Arcadia (DeSoto County); the second, a progressive pleasant, 1,000 bed Sunland Training Center at Fort Myers (Lee County).

Despite the aggressive growth, most counties are attempting to keep up with public school special education needs. Some 72% of estimated needs for mental retardation special education classes were filled in this region.

Lee County is the only county providing non-profit community facilities for the retarded. Services are all day type at the present time, and include some sheltered workshop case load.

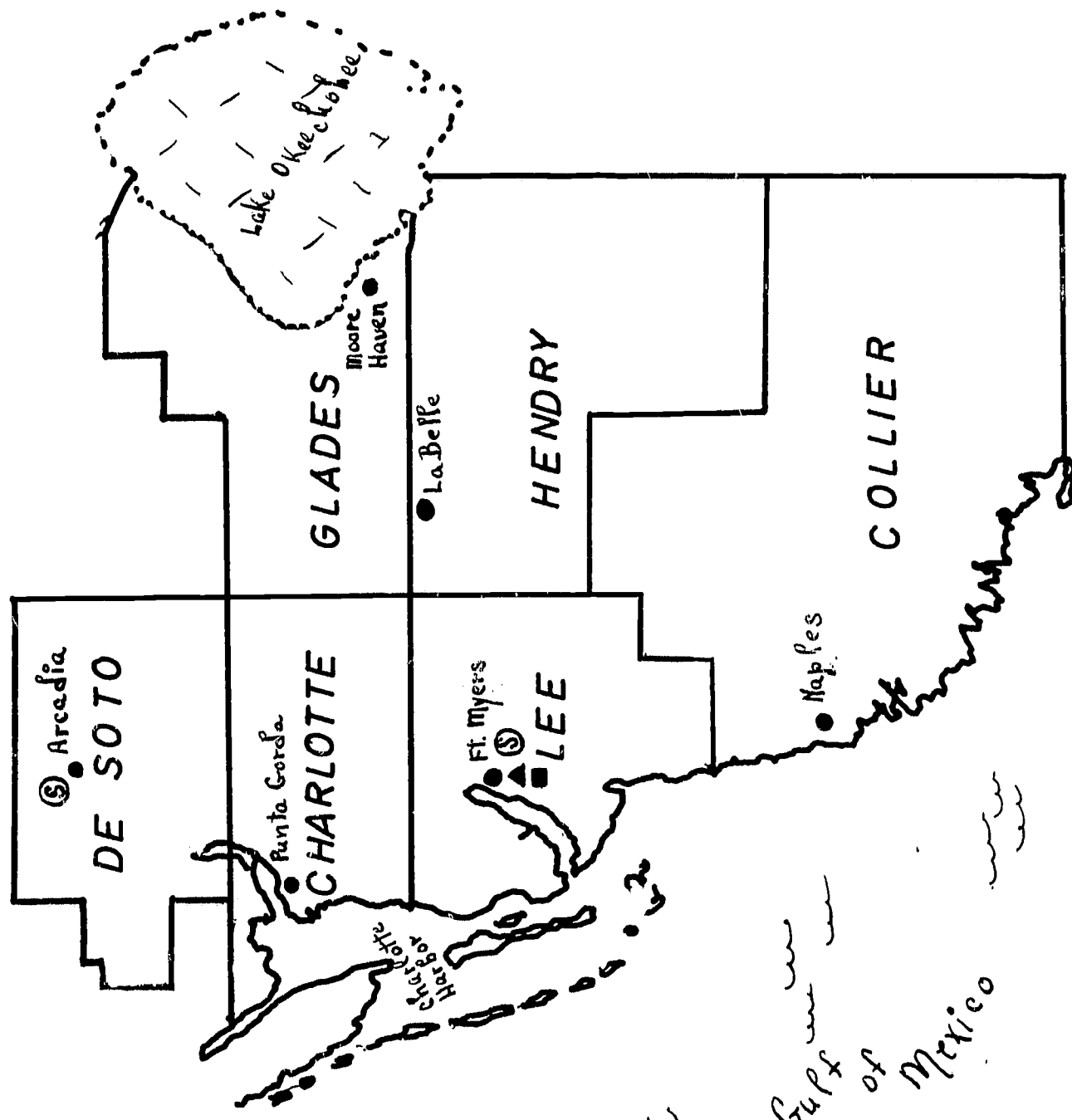
Need for a residence in Lee County is planned, also two additional day facilities and a D&E facility. One residence for Collier County and two day facilities is needed, as well as day facility for Charlotte County. This is a reasonable building program to be accomplished over the next four years, with unlimited funding available.

REGION XI

Population

1967 - 157,500

1973 - 201,600



MAP 16

Legend

- - County Seat
- ▲ - Private or Non-profit M.R. Facilities
- - Association for Retarded Children
- Ⓢ - Sunland Facility (M.R. Institutional)

EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - GENERAL DATA

SRS:RSA:DMR:CR
TENTATIVE FORM 1

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility										
	City or Town								Level of Retardation					Age Groupings					Services for Retarded with other Handicapping Conditions (Code)
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	
R-11	Ft. Myers	Lee		LARC Vocational Training Center	B		A	37	---	20	14	3	---	---	25	12	---	---	C
"	"	"		Sheltered Workshop	B		A	13	---	---	2	11	4	6	3	---	---	---	---
"	"	"		LARC Day Care Center	F		A	6	---	---	---	---	4	2	---	---	---	---	---
"	"	"		Riverside Kindergarten	F		A	48	---	14	30	4	---	5	43	---	---	---	---
"	"	"		Riverside School	F		A	48	---	---	---	---	---	---	---	---	---	---	---
COMMUNITY FACILITY TOTALS					3-F 1-B		4-A	104	---	34	50	9	---	38	58	---	---	---	1-C



Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility											
	City or Town							Level of Retardation			Age Groupings								
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
R-11							734		655	79			46	488/200					
	PUBLIC SCHOOLS TOTALS (Note 1)																		

	INSTITUTIONAL																		
	SUB-TOTAL																		
							152												
							31												
							13												
							31												
							227												

(See Inventory Foreword Section and Note 2)

NOTES:

- Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.
- Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.

Services for Retarded
 With other Handicapping
 Conditions (Code)



EXHIBIT II
STATE PLAN

SRA:RSA:DMR:CR

TENTATIVE FORM 2 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

1968 Florida

Date State

Page 1 of 1 pages

Location		Name of Facility	Diagnosis & Total Number Served	Day Facility						Residential Facility								
City or Town	County			Average Daily Case Load in Services			Total Number Served	Average Daily Case Load in Services			Total Number Served	Average Daily Case Load in Services						
2a	2b	2c	4a	4b	4c	4d		4e	4f	4g		4h	5a	5b	5c	5d	5e	5f
R-11 Ft. Myers	Lee	LARC Vocational Training Center & Sheltered Workshop	37	6	37	37	37	37	37	37	37							
"	"	LARC Day Care Center	13			13	13	13										
"	"	Riverside Kindergarten	6			6		6										
"	"	Riverside School	48			48	6	48										
COMMUNITY FACILITY TOTALS			104	6	91	56	104	37										
PUBLIC SCHOOL TOTALS			734			655	79	734										
INSTITUTIONAL TOTALS																		227

NOTE:
See Notes 1 and 2 on Form 1.



REGION XII

The western portions of Broward and Dade Counties are conservation areas and are part of the Everglades. The western portion of Monroe County is also part of the Everglades and has been designated as the Everglades National Park. In Broward County alone, over one million acres has been set aside in the western portion as Indian reservations.

Fort Lauderdale is the county seat of Broward County and is known as the "Venice of America", due to about 175 miles of canal waterways within the city limits. It is one of the fastest growing areas in the United States in the past ten years. Broward County is also the site of a deep water port, Port Everglades, with cruise ships from the whole world making port and taking passengers from this point.

Dade County is a jewel in Florida's crown, with its county seat, Miami, being the largest city in Florida, with 3 other cities having over 50,000 population, and another five cities with over 20,000 population. The fantastic growth of this area may be seen by the fact that in 1900 the larger Dade County area that exists today had a population of 5,000 people--today it has over 1,100,000. One of its cities, Homestead, is the farming capital for the southern part of Florida, with a population largely of minority groups.

Monroe County is well known for the Keys, islands which stretch in a curve from the mainland for approximately one hundred miles. It is most famous as a vacation resort and for naval activity at the air, patrol and submarine bases. Key West, the county seat of Monroe County, lost its title as the most southern city in the United States with the statehood of Hawaii.

Culturally Broward and Dade Counties offer many exciting activities. For example, each has a symphony and a junior symphony orchestra, ballet companies, commercial art galleries, famous art museums and opera guilds.

Compared with the state average only Monroe County has less non-white residents and less numbers of senior citizens. Although Dade County had less than the average number of non-whites in the last census period, the Cuban crisis has changed this picture, so that the county will at least equal the state average. Income-wise these counties are average to above average, as well as in the numbers of years of schooling of its residents.

Professional and para-professional people may receive their training at many educational settings within the area. For example: The Florida Keys Junior College at Key West, Monroe County; Fort Lauderdale Junior College in Broward County; Miami-Dade Junior College, University of Miami, Jones College, Biscayne College, and Berry College in Miami.

The area is rich in generic availability of medical and handicapped services. Both Broward and Dade have hospitals, long term care facilities, and numbers of nursing homes. With the exception of Monroe County each county has diagnostic and treatment facilities available, and each county has rehabilitation facilities available. Dade and Broward Counties are each among the ten largest population areas in the state, and in addition Broward County is one of the ten most rapid growth counties. Psychiatric services are available and with the increasing population in the area planning for additional needs is continuous.

Because of the large population in this area, the need for public school special education classes for the retarded is especially evident. Only twenty-six percent of the area needs are being met through the public school systems at the present time, and each county shows a sizeable waiting list.

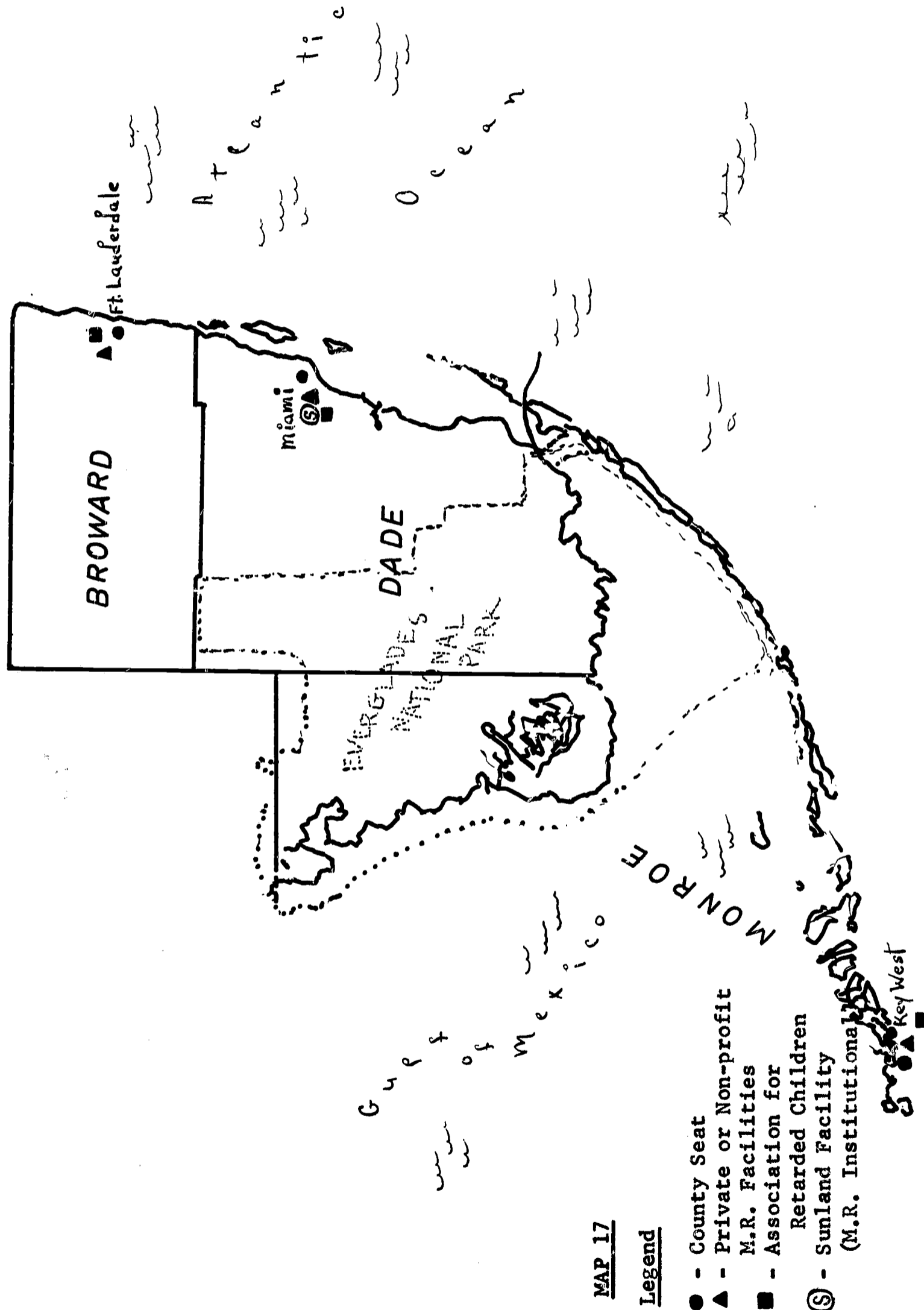
There are large numbers of community mental retardation private and non-private settings in Broward and Dade Counties; including day, residential and diagnostic and evaluation services. Monroe County has one day facility. In addition the state maintains and administers another of its modern and innovative institutional programs, Sunland Training Center at Miami, with a one thousand bed capacity.

Additional day facilities are needed in all areas. One additional setting is seen as needed for Monroe, 3 for Fort Lauderdale, and 5 for Dade County. In addition 1 residence center for mentally retarded would be in order for planning in this area. All of these projections could be met within a four year period with unlimited funds.

REGION XII

Population

1967 - 1,613,500
 1973 - 1,960,400



MAP 17

Legend

- - County Seat
- ▲ - Private or Non-profit M.R. Facilities
- - Association for Retarded Children
- Ⓢ - Sunland Facility (M.R. Institutional)

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town	2a							2b	2c	Level of Retardation						Age Groupings				9
											7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	
								6	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	Services for Retarded with other Handicapping Conditions (Code)	
R-12	Key West	Monroe		Sunshine Trn. Center	F	A		13	12	1	8	2				12					
	Dania	Broward		Card's Residence for Girls	G	C		20	20	13	3	4				20					
	Davie	"		Shulten Pioneer Ranch School	D	A		22	22	18	4					8		14			
	Ft. Lauderdale	"		Sun Dial School	F	A		99	99	52	44	3				99					
	"	"		Sun Dial Pre-School	F	A		10	10	5	4	1									



EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

SRS:RSA:DMR:CR
TENTATIVE FORM 1
INVENTORY - GENERAL DATA

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town							Level of Retardation		Age Groupings										
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
R-12	Ft. Lauderdale	Broward	Sun Dial Adult Activity Ctr.	F	A	12	12				12					12				
	"	"	Sun Dial Sheltered Workshop	F	A	48	48		40	8						48				
	"	"	Sun Dial Summer Residence	G	A	18	18		17	1				16		2				
	"	"	Broward County Opportunity Center	B	B	25	25		7	7	10	1				25				
	"	"	Pediatrics Care Center	G	A	30	30		3	10	7	10								
			Total				6													

65 Year and over
45-64 years
21-44 years
13-20 years
6-12 years
0-5 years
(Below 20 IQ)
Severe (20-34 IQ)
Moderate (35-49 IQ)
Mild (50-67 IQ)
Borderline (68-83 IQ)

Services for Retarded
with other Handicapping
Conditions (Code)



Area	Location		Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility						Services for Retarded With other Handicapping Conditions (Code)						
	City or Town	County					Name of Facility	7a	7b	7c	7d	7e		8a	8b	8c	8d	8e	8f
1	2a	2b	2c	3	4	5	Total	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	
R-12	Hollywood	Broward	Sun Dial Pre-School	F	A	11	11	---	6	4	1	---	11	---	---	---	---	---	---
	Oakland Park - Wilton Manors	"	Sun Dial Pre-School	F	A	10	10	---	8	2	---	---	10	---	---	---	---	---	---
	Plantation	"	Sun Dial Pre-School	F	A	9	9	---	6	3	---	---	9	---	---	---	---	---	---
	Pompano	"	Sun Dial Pre-School	F	A	10	10	---	2	8	---	---	10	---	---	---	---	---	---

EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - GENERAL DATA

SRS:RSA:DMR:CR

TENTATIVE FORM 1

INVENTORY - GENERAL DATA

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town							Level of Retardation						Age Groupings					Services for Retarded with other Handicapping Conditions (Code)	
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f		9
R-12	Opal																			
Locke		Dade	Marian Center	A	A	75	75	-	33	23	15	4	10	65		--				
Naranja		"	Naranja Children's Home	G	C	23	23	-	-	-	3	20	11	12		--				
Hialeah		"	Montanari Clinical School & Residential Treatment Center	A	C	110	110	-	70	30	8	2	6	98		6				
North Miami Beach		"	North Dade Children's Ctr.	F	B	15	12	-	2	2	6	2	5	7		--				
Miami		"	Jerrytown, Inc.	G	C	10	10	-	3	4	3	-	-	3		7				
Miami		"	Haven School	A	A	142	142	-	12	95	25	10	20	87		35				

EXHIBIT II
SRS:RSA:DMR:CR
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - GENERAL DATA

Area	Location		County	Name of Facility	Type of Facility (Code)	Type of Ownership	Type of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility											
	City or Town								Level of Retardation			Age Groupings						65 year and over Services for Retarded with other Handicapping Conditions (Code)		
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e		8f	
R-12	Miami	Dade		Flagami Child Developmental Nursery	F	A	33	-	7	8	13	5	21	12	-	-	-	-	-	
	"	"		Miami Adult Ctr.	B	A	46	15	15	10	-	-	-	20	20	20	-	-	-	
	"	"		Hope School	D	A	58	3	37	15	1	2	26	28	4	-	-	-	-	
	"	"		Exceptional Children's Home	G	A	39	-	-	19	10	10	12	27	-	-	-	-	-	
	"	"		Maysland	G	A	4	-	-	1	3	-	-	-	4	-	-	-	-	
	"	"		Jewish Vocational Services, Inc.	F	A	45	-	8	-	-	-	-	2	6	-	-	-	-	
	"	"		Goodwill Industries Sheltered Workshop	F	A	1,000	-	-	-	25	60	-	40	45	-	-	-	-	
							85													



EXHIBIT II
STATE PLAN
COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM
INVENTORY - GENERAL DATA

SRS:RSA:DMR:CR
TENTATIVE FORM 1

Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility													
	City or Town	County					Level of Retardation			Age Groupings										
1	2a	2b	2c	3	4	5	Total	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	Services for Retarded with other Handicapping Conditions (Code)	
R-12	Miami	Dade	Special Youth Project in Meat Cutting	F	B	26	26	-	-	-	-	-	-	-	25	1	-	-		-
"	"	"	Robert T. Knight Adult Activity Center	F	A	13	13	-	-	13	-	-	-	-	9	4	-	-	-	-
"	"	"	University of Miami Child Care Center	E	C	269	269	-	92	82	52	43	114	155	-	-	-	-	-	-
"	"	"	Marian School	F	A	26	26	4	6	9	7	-	3	23	-	-	-	-	-	-
COMMUNITY FACILITY TOTALS							1309	23	463	455	259	109	298	778	233	-	-	-	-	-

3-A
2-B 23-A
2-D 3-B
1-E 5-C
16-F
7-G



Area	Location		Name of Facility	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility													
	City or Town	County					Level of Retardation			Age Groupings										
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9	
R-12							6	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (Below 20 IQ)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	Services for Retarded with other Handicapping Conditions (Code)	
	PUBLIC SCHOOL TOTALS (Note 1)			F	B	---	2607	---	2102505	---	---	---	13	1504/1090	---	---	---	---	---	---
	INSTITUTIONAL SUB-TOTAL						1,120													
	Mental Retardation						124													
	State Hospitals						106													
	Youth Services						187													
	Florida Division of Corrections						187													
	TOTAL (Note 2)						1,537													
	NOTES:																			
	1. Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.																			
	2. Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.																			

Location		Name of Facility	Diagnosis & Total Number Served	Day Facility						Total Number Served	Residential Facility										
City or Town	County			Average Daily Case Load in Services							Total Number Served	Average Daily Case Load in Services									
				Diagnosis & Evaluation 4b	Treatment 4c	Education 4d	Training 4e	Custodial Care 4f	Sheltered Workshop 4g			Diagnosis & Evaluation 5b	Treatment 5c	Education 5d	Training 5e	Custodial Care 5f	Sheltered Workshop 5g				
R-12	Key West	Monroe	3	---	---	8	12	12	---	---	---	---	---	---	---	---	---	---	---	---	
	Ft. Lauderdale	Broward	---	---	96	---	99	99	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	9	---	10	10	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	12	12	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	12	12	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	48	48	---	---	48	48	48	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	25	25	---	---	---	25	25	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

EXHIBIT II
 STATE PLAN
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		Name of Facility	Diagnosis & Total Number Served	Day Facility						Residential Facility						
	City or Town	County			Average Daily Case Load in Services						Average Daily Case Load in Services						
2a	2b	2c	4a	4b	4c	4d	4e	4f	4g	4g	5a	5b	5c	5d	5e	5f	5g
R-12	Dania	Broward	Card's Residence for Girls	---	---	---	---	---	---	---	20	---	---	---	---	---	---
	Davie	"	Shulsten Pioneer Ranch School	---	5	---	5	5	5	---	17	---	---	17	17	17	---
	Hollywood	"	Sun Dial Pre-School	---	11	10	11	11	11	---	---	---	---	---	---	---	---
	Oakland Park - Wilton Manors	"	Sun Dial Pre-School	---	10	10	10	10	10	---	---	---	---	---	---	---	---
	Plantation	"	Sun Dial Pre-School	---	9	9	9	9	9	---	---	---	---	---	---	---	---
	Pompano	"	Sun Dial Pre-School	---	10	10	10	10	10	---	---	---	---	---	---	---	---
	Opalocka	Dade	Marian Center	---	62	62	62	62	62	---	13	---	---	13	13	13	---
	Naranja	"	Naranja Children's Home	---	---	---	---	---	---	---	23	---	---	---	---	---	---



Area	Location		Name of Facility	Diagnosis & Total Number Served	Day Facility						Residential Facility							
	City or Town	County			Average Daily Case Load in Services						Total Number Served	Average Daily Case Load in Services						
					4a	4b	4c	4d	4e	4f		4g	4h	5a	5b	5c	5d	5e
R-12	Hialeah	Dade	Montanari School & Residential Ctr.	---	14	14	14	10	14	14	---	---	96	96	90	96	96	---
	North Miami Beach	"	North Dade Children's Center	---	12	---	3	12	12	---	---	---	---	---	---	---	---	---
	Miami	"	Jerrytown, Inc.	---	48	48	---	45	48	48	---	---	---	---	3	10	10	10
	"	"	Haven School	---	33	---	15	33	33	---	---	---	---	---	62	94	94	29
	"	"	Flagami Child Developmental Nursery	---	33	---	---	---	---	---	---	---	---	---	---	---	---	---
	"	"	Miami Adult Center	---	40	12	6	12	40	40	40	---	---	---	---	---	---	---
	"	"	Hope School	---	25	---	25	25	25	25	---	---	---	---	25	30	33	---
	"	"	Exceptional Children's Home	---	39	---	---	---	---	---	---	---	---	---	19	20	39	---
	"	"	Maysland	---	4	---	---	---	---	---	---	---	---	---	1	3	4	---
	"	"	Jewish Vocational Services, Inc.	---	8	---	---	---	---	---	---	---	---	---	---	---	---	---
					8	8	8	8	8	8	8	8	8	8	8	8	8	8



Location		City or Town 2a	County 2b	Name of Facility 2c	Diagnosis & Total Number Served 4a	Day Facility						Residential Facility					
Average Daily Case Load in Services						Diagnosis & Evaluation 4b	Treatment 4c	Education 4d	Training 4e	Custodial Care 4f	Sheltered Workshop 4g	Total Number Served 5a	Diagnosis & Evaluation 5b	Treatment 5c	Education 5d	Training 5e	Custodial Care 5f
R-12		Miami	Dade	Goodwill Industries Sheltered Workshop	85				85								
		"	"	Special Youth Project in Meat Cutting	26			26									
		"	"	Robert T. Knight Adult Activity Center	13				13								
		"	"	University of Miami Child Care Center													
		"	"	Marian School	26		9	26	26								
COMMUNITY FACILITY TOTALS					643	1611	4332	615	643	206							
PUBLIC SCHOOL TOTALS					2607		2102	505	2607								
INSTITUTIONAL TOTALS															1537	1537	

NOTE: See Notes 1 and 2 on Form 1.



SRS:RSA:DMR:CR
 TENTATIVE FORM 1
 INVENTORY - GENERAL DATA
 EXHIBIT II
 1968
 STATE PLAN
 COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		Type of Facility (Code)	Type of Ownership of Facility (Code)	Total Number of Persons Served	Mentally Retarded Persons Served in Facility													
	City or Town	County				Name of Facility	Level of Retardation				Age Groupings								
1	2a	2b	2c	3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
STATE OF FLORIDA			5-A, 5-B, 4-I, 5-E, 60-F, 13-G	77-A, 6-B, 9-C	6,654	4,049	85	1,530	778	225	694	2,291	1,064	9,982	5,712				3-A/1-B/3-C/ 2-D/1-E/1-F/ 2-G/1-H
COMMUNITY FACILITY TOTALS																			
STATE OF FLORIDA				B		17,103													
PUBLIC SCHOOL TOTALS (NOTE 1)																			
STATE OF FLORIDA																			
INSTITUTIONAL TOTALS																			
Mental Retardation																			
State Hospitals																			
Youth Services																			
Florida Division of Corrections																			
STATE GRAND TOTAL (NOTE 2)																			
NOTES:																			

1. Supplement #1 provides names, locations, age groups and levels of retardation; for all those public schools in Florida which are providing special education classes for the mentally retarded.

2. Statewide data for Sunland Training Centers and Sunland Hospitals; including levels of retardation, age groupings and services, are listed on pages 163 - 165.

EXHIBIT II
STATE PLAN

SRA:RSA:DMR:CR
TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

1968 Florida
Date _____ State _____
Page 1 of 1 pages

Location		Name of Facility	Diagnosis & Total Number Served	4a	Day Facility						Total Number Served	Residential Facility								
City or Town	County				4b	Average Daily Case Load in Services		4d	4e	4f		4g	Average Daily Case Load in Services		5a	5b		5c	5d	5e
2a	2b	2c	Diagnosis & Evaluation	Treatment		Education	Training				Custodial Care		Sheltered Workshop	Diagnosis & Evaluation		Treatment	Education			
			3																	
			836	2,533	2,533	231	15,246	1,907	17,103	777	680	124	108	297	617,680	81				

NOTE:
See Notes 1 and 2 on Form 1



Discussion of Programmed Needs

Statewide, there is no region, county or community which has been able to bring sufficient resources to bear to eliminate the need for facilities construction for the mentally retarded. In most instances, less than 50 percent of those statistically eligible are being accommodated by combinations of Special Education provisions in the public schools, Sunland Training Centers, Sunland Hospitals; in other State Institutional arrangements or by private school, training or residential settings.

Need, therefore, is well established for additional facilities for the mentally retarded within all areas throughout the state. Naturally the need is greatest (in terms of numbers) in the more populous urban areas. By the same token, more has been and is being continually geared for in the same areas: while in rural or smaller communities, signs of progress are less noticeable.

Obviously, it is not practical (or in fact possible) to plan to place some form of mental retardation facility construction within the hundreds of communities throughout the state, within a planning period of four years. What does appear reasonable to a planning program is that within the limited Federal Funding available, each region have available plans for a diagnostic and evaluation facility and sufficient day and residential facilities to provide equal consideration of need.

Proposed Programmed Facilities within each region are noted on each SRS:RSA:DMR - 3. Major city needs have been specified by City and County.

INSTRUCTIONS - FORM 3

PROGRAMMING DATA REPORT

General: Information should be recorded by city or town, for additional facilities and services programmed within a four year period. Thus, the data will be grouped so as to reveal the total mental retardation construction program within a particular city or town.

Form Column Number

1. Enter name or number of planning or service area.
2. Enter the name of the county in column 2a and city or town in column 2b for which there are programmed facilities.
- 3a. Enter type of facility programmed. Each programmed facility in each city or town must be separately entered. Use the following code:
 - A - D&E Clinic, Day Facility, Residential Facility
 - B - D&E Clinic, Day Facility
 - C - D&E Clinic, Residential Facility
 - D - Day Facility, Residential Facility
 - E - Diagnostic and Evaluation Clinic Only
 - F - Day Facility Only
 - G - Residential Facility OnlyDefinitions of these facilities are provided in Section IX, C-2.
- 3b. Enter type of construction proposed (or combination of types) for each facility listed in 3a using the following code:
 - 1 - New
 - 2 - Addition
 - 3 - Remodeling
 - 4 - Replacement
 - 5 - Purchase of Existing Building
- 4a-f. Check each specified service to be provided in programmed facility. Use definitions contained in Section IX, C-1.
- 5a-e. Check each specified level of mental retardation to be served in programmed facility.
- 6a-f. Check each specified age group to be served in programmed facility.
7. Enter total number of additional mentally retarded individuals to be served in programmed facility.
8. Enter total number of individuals to be served in programmed facility.
9. Enter type of other handicapping condition for which the mentally retarded will receive definitive, structured services, using the following code:
 - A - Hearing impairments
 - B - Visual impairments
 - C - Speech impairments
 - D - Language impairments
 - E - Convulsive disorders
 - F - Motor impairments (including C.P.)
 - G - Behavior disorders
 - H - Other: Describe specific handicapping condition(s) on separate sheet or footnote. If only one handicapping condition is described, use Code H. Assign additional code letters as needed.

See Section IX, C-3 for definitions.

Summaries

Totals for each planning area (or region) must be recorded for columns 3a and b, 7, 8, and 9. In column 3a subtotals must be given for each type of facility coded; in column 3b subtotals must be given for each type of construction coded; in column 9 subtotals must be given for each type of handicapping condition coded.

A State total for columns 3a and b, 7, 8, and 9 must be received at the end of the program list for this Form.

COMMUNITY MENTAL RETARDATION FACILITIES CONSTRUCTION PROGRAM

Area	Location		Type of Facility (Code)		Type of Construction (Code)		Services to be Offered (Checks)						Level of Retardation to be Served (check)						Age Grouping to be Served (check)						Total Number of Retarded Individuals to be Served	Total Number of Individuals to be Served	Services for Other Handicapping Conditions to be Provided for the Mentally Retarded (Code)
	City or Town	County	3a	3b	4a	4b	4c	4d	4e	4f	5a	5b	5c	5d	5e	6a	6b	6c	6d	6e	6f	7	8	9			
R-1	Pensacola Pensacola Pensacola Milton Crestview Crestview	Escambia Escambia Escambia Santa Rosa Okaloosa Okaloosa	F G A F F G	1 1 1 1 1 1			X X X X X X	X X X X X X	X X X X X X		X X X X X X	X X X X X X	X X X X X X	X X X X X X	X X X X X X	X X X X X X	X X X X X X	X X X X X X	X X X X X X	X X X X X X	40 20 300 40 40 20 460	400 20 400 40 40 20 460	C/D -- A/C/D/F C/D C/D -- 1A/4C/ 4D/1F				
		SUBTOTAL/TOTAL		(6-1)																							
R-2	Marianna Panama City Port St. Joe	Jackson Bay Gulf	F G F	1 1 1			X X X	X X X	X X X		X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	40 20 20 80	40 20 20 80	C/D -- C/D 2C/2D				
		SUBTOTAL/TOTAL		(3-1)																							
R-3	Tallahassee Perry Madison	Leon Taylor Madison	G F F	1 1 1			X X X	X X X	X X X		X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	20 40 40	20 40 40	-- C/D C/D				



Area	Location		3a	3b	Type of Facility (Code)	Type of Construction (Code)	Services to be Offered (Check)						Level of Retardation to be Served (check)						Age Grouping to be Served (check)						7	8	9
	City or Town	County					Diagnosis & Evaluation	4a	4b	4c	4d	4e	4f	5a	5b	5c	5d	5e	6a	6b	6c	6d	6e	6f			
R-3 cont'd.	Quincy	Gadsden	F	1	(4-1)		X		X			X			X						40	40	C/D				
	SUBTOTAL/TOTAL				1G/3F																	140	140	3C/3D			
R-4	Jacksonville	Duval	A	1		X									X						300	300	A/C/D/F				
	Jacksonville	Duval	F	1			X	X			X	X			X						40	40	C/D				
	Jacksonville	Duval	G	1				X	X												40	40					
	Lake City	Columbia	G	1				X	X												20	20					
	Lake City	Columbia	F	1				X	X		X	X			X						40	40					
	St. Augustine	St. Johns	F	1				X	X		X	X			X						40	40					
	Green Cove Springs	Clay	F	1				X	X		X	X			X						40	40					
	SUBTOTAL/TOTAL				(7-1)																	520	520	1A/2C 2D/1F			
R-5	Gainesville	Alachua	G	2/3				X			X												30	30			
	Gainesville	Alachua	F	1				X			X	X			X						40	40	C/D				
	Ocala	Marion	G	1											X						40	40					



Area	Location		3a	3b	3c	Services Offered (Check)						Level of Retardation to be Served (check)						7	8	9		
	City or Town	County				4a	4b	4c	4d	4e	4f	5a	5b	5c	5d	5e	6a				6b	6c
R-5 cont'd	Palatka	Putnam	F	1	(1-2/3)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	40	40	C/D
		SUBTOTAL/TOTAL																		120	150	2C/2D
R-6	(Unnamed)	Brevard	A	1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	300	300	A/C/D/F
	Eau Gallie	Brevard	F	1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	40	40	C/D
	Orlando	Orange	F	1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	200	200	A/C
	Orlando	Orange	F	1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	40	40	C/D
	Glenwood	Volusia	G	1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	40	40	C/D
	Daytona Beach	Volusia	F	1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	40	40	C/D
	Leesburg	Lake	F	1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	30	30	C/D
	Sanford	Seminole	F	1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	30	30	C/D
		SUBTOTAL/TOTAL																		720	720	2A/7C/6D/1F



Area	Location		Services to be Offered (Check)													Level of Retardation to be Served (check)				Age Grouping to be Served (check)						Total Number of Individuals to be Served	Total Number of Individuals to be Served	Services for Other Handicapped Conditions to be Provided for the Mentally Retarded (Code)								
	City or Town	County	Diagnosis & Evaluation	Treatment	Education	Training	Custodial Care	Sheltered Workshop	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (below 20)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	5a	5b	5c	5d	5e	6a				6b	6c	6d	6e	6f	7	8	9
		Type of Facility (Code)	Type of Construction (Code)																																	
		3a	3b	4a-4f																																
*R-7	Tampa	Hillsborough	X	X																X	X	X	X	X	X	X	X	X	X	X	X	X	200	200	A/C	
	**Tampa	Hillsborough				X	X	X	X	X	X	X								X	X	X	X	X	X	X	X	X	X	X	X	X	X	80	80	
	**Tampa	Hillsborough				X	X	X	X	X	X	X								X	X	X	X	X	X	X	X	X	X	X	X	X	X	200	200	A/C/D
	Dade City	Pasco				X	X	X	X	X	X	X								X	X	X	X	X	X	X	X	X	X	X	X	X	X	40	40	C/D
	Brooksville	Hernando				X	X	X	X	X	X	X								X	X	X	X	X	X	X	X	X	X	X	X	X	X	20	20	C/D
	Lecanto	Citrus				X	X	X	X	X	X	X								X	X	X	X	X	X	X	X	X	X	X	X	X	X	20	20	C/D
	Lecanto	Citrus				X	X	X	X	X	X	X								X	X	X	X	X	X	X	X	X	X	X	X	X	X	45	45	C/D
			(7-1)																														605	605	2A/5C/4D	
R-8	Clearwater	Pinellas	X	X															X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	70	250	A/C/D
	St. Petersburg	Pinellas	X	X															X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	300	300	A/C/D/F
	* Regional Center in St. Petersburg will also serve this region																																			
	** These programs envision growth of activity in Model Cities Area under sponsorship of HARC																																			

Area	Location		Type of Facility (Code)		Type of Construction (Code)		Services to be Offered (Check)						Level of Retardation to be Served (check)						Age Grouping to be Served (check)			Total Number of Retarded Individuals to be Served	Total Number of Retarded Individuals to be Served	Services for Other Handicapping Conditions to be Provided for the Mentally Retarded (Code)															
	City or Town	County	3a	3b	4a	4b	4c	4d	4e	4f	5a	5b	5c	5d	5e	6a	6b	6c	6d	6e	6f				7	8	9												
																												Diagnosis & Evaluation	Treatment	Education	Training	Custodial Care	Sheltered Workshop	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (below 20)	0-5 years
1																																							
R-8 cont'd	St. Petersburg	Pinellas	D	1			X	X	X			X	X	X		X	X	X	X																		40	C/D	
	Bradenton	Manatee	F	1			X	X	X			X	X	X		X	X	X	X																			40	C/D
	Bradenton	Manatee	G	1				X	X			X	X	X				X	X																		20		
	Sarasota	Sarasota	F	1			X	X	X			X	X	X		X	X	X	X																			40	C/D
	SUBTOTAL/TOTAL		1A/1B/1D/2F/1G	(6-1)																																	650	2A/5C/5D/1F	
R-9	DeSoto City	Highlands	F	1			X	X	X			X	X	X		X	X	X	X																			40	C/D
	Wauchula	Hardee	F	1			X	X	X			X	X	X		X	X	X	X																			20	C/D
	Lakeland	Polk	E	1			X	X	X			X	X	X		X	X	X	X																			150	A/C
	Lakeland	Polk	G	1				X	X			X	X	X				X	X																			20	
	SUBTOTAL/TOTAL		1E/2F/1G	(4-1)																																		230	1A/3C/1D
R-10	Port Salerno	Martin	B	2	X	X		X	X			X	X	X		X	X	X	X																			100	
	Vero Beach	Indian River	F	1				X	X			X	X	X		X	X	X	X																			40	C/D
	Fort Pierce	St. Lucie	G	1				X	X			X	X	X		X	X	X	X																			20	



Area	Location		3a	3b	4a	Services to be Offered (Check)					Level of Retardation to be Served (check)					7	8	9								
	City or Town	County				4b	4c	4d	4e	4f	5a	5b	5c	5d	5e				6a	6b	6c	6d	6e	6f		
			Type of Facility (Code)	Type of Construction (Code)	Diagnosis & Evaluation	Treatment	Education	Training	Custodial Care	Sheltered Workshop	Borderline (68-83 IQ)	Mild (50-67 IQ)	Moderate (35-49 IQ)	Severe (20-34 IQ)	Profound (below 20)	0-5 years	6-12 years	13-20 years	21-44 years	45-64 years	65 years and over	Total Number of Retarded Individuals to be Served	Total Number of Additional Mentally Retarded Individuals to be Served	Total Number of Individuals to be Served	Services for Other Handicapping Conditions to be Provided for the Mentally Retarded (Code)	
1																										
R-10	Palm Beach	Palm Beach	A	1	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	300	300	300	A/C/D/F	
					(1-2)																	425	460	460	1A/2C/2D/1F	
					(3-1)																					
R-11	Ft. Myers	Lee	F	1			X					X	X	X	X	X	X	X	X	X	40	40	40	C/D		
	Ft. Myers	Lee	G	1			X					X	X	X	X	X	X	X	X	X	40	40	40	---		
	Ft. Myers	Lee	E	1	X	X						X	X	X	X	X	X	X	X	X	150	150	150	A/C		
	Naples	Collier	F	1		X						X	X	X	X	X	X	X	X	X	40	40	40	C/D		
	Punta Gorda	Charlotte	F	1			X					X	X	X	X	X	X	X	X	X	30	30	30	C/D		
					(5-1)																300	300	300	1A/4C 3D		
R-12	Ft. Lauderdale	Broward	A	1	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	300	300	300	A/C/D/F	
	Ft. Lauderdale	Broward	C	1	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	20	40	40	E/F	
	Hollywood	Broward	F	1			X	X	X	X	X	X	X	X	X	X	X	X	X	X	40	40	40	C/D		
	Pompano Beach	Broward	F	1			X	X	X	X	X	X	X	X	X	X	X	X	X	X	40	40	40	C/D		



Area	Location		3a	3b	4a	Services Offered (Check)						Level of Retardation to be Served (check)						Age Grouping to be Served (check)						7	8	9		
	City or Town	County				Diagnosis & Evaluation	Treatment	4b	4c	4d	4e	4f	5a	5b	5c	5d	5e	6a	6b	6c	6d	6e	6f				Total Number of Retarded Individuals to be Served	Total Number of Additional Mentally Retarded Individuals to be Served
R-12 cont'd	Miami	Dade	G	1					X						X										40	40	40	
	Miami	Dade	G	1					X						X										20	40	40	
	Miami	Dade	F	1					X						X										20	162	F	
	Miami Beach	Dade	D	1					X						X										10	25	C/D	
	Homestead	Dade	G	2							X				X										20	30	---	
	Key West	Monroe	F	2/B											X										30	42	C/D/F	
	SUBTOTAL/TOTAL		LA/1C/1D/4E/4F/	(8-1)																					540	759	1A/5C/5D/1E/4F	
	SUBTOTAL/TOTAL		3G	(1-2)																								
	SUBTOTAL/TOTAL		(1-2/B)																									
REGIONS	6A/2B/1C/2D/4E/35E/18G		(64-1)																						4610	5074	11A/44C/36D/1E/9F	
1 - 12			(2-2)																									
TOTALS			(2-2/B)																									



Sunland Training Center and Sunland Hospital Data
(Services Provided - Age Groups Involved)

Area	Location		Type of Facility (Code)	Type of Facility (Code)	Type of Ownership	Total Number of Persons Served	Mentally Retarded Persons Served in Facility												
	City or Town	County					Name of Facility	Level of Retardation						Age Groupings				65 years and over	Services for Retarded With other Handicapping Conditions (Code)
								7a	7b	7c	7d	7e	8a	8b	8c	8d	8e		
1				3	4	5	6	7a	7b	7c	7d	7e	8a	8b	8c	8d	8e	8f	9
STATEWIDE																			
	Miami	Dade	Sunland Training Center	G	B	509	509		114	154	130	111	16	353	140				
	Gainesville	Alachua	"	"	"	1927	1927		252	393	494	788	37	915	975				
	Marianna	Jackson	"	"	"	825	825		100	400	200	125	75	550	200				
	Ft. Myers	Lee	"	"	"	989	989		178	247	257	218	13	792	184				
	Orlando	Orange	Sunland Hospital	"	"	1089	1089		77	62	122	828	277	416	396				
	Tallahassee	Leon	"	"	"	369	369		26	43	169	131	43	243	83				
	Arcadia	DeSoto	Sunland Adult Center	"	"	238	238		75	66	35	11	0	7	210				
												Unknown (38)							



EXHIBIT II
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SRA:RSA:DMR:CR
TENTATIVE FORM 2
INVENTORY - SERVICES DATA FOR MENTALLY RETARDED PERSONS SERVED ONLY

Location		Name of Facility	Total Number Served Diagnosis & Clinic Only	Day Facility							Residential Facility															
City or Town	County			2a	2b	2c	Average Daily Case Load in Services							Average Daily Case Load in Services												
							4a	4b	4c	4d	4e	4f	4g	4h	5a	5b	5c	5d	5e	5f	5g					
Miami	Dade	Sunland Training Center	3																							
Gainesville	Alachua	"																								
Marianna	Jackson	"																								
Ft. Myers	Lee	"																								
Orlando	Orange	Sunland Hospital																								
Tallahassee	Leon	"																								
Arcadia	DeSoto	Sunland Adult Center																								
				3																						

STATEWIDE



SECTION VI

SECTION VI

Priorities

Project Recommendations

Prior to processing facility construction requests to Federal Authorities, the Division of Mental Retardation will consider the recommendations of the following agents:

- a. The Regional Representative, within whose assignment area a project is being proposed. In some instances, the recommendations of Mental Retardation Councils or Community Planning Groups may be requested through this representative.
- b. A selected reading committee of outstanding professional and lay persons.

Priority Categories

Separate priorities were established for Multi-Regional Comprehensive Mental Retardation Centers, for Diagnostic and Evaluation Clinics and Residential Facilities and for Day Facilities.

Category 1 - Comprehensive Regional Mental Retardation Centers:

Within the priority determination of the State of Florida, "A" or top priority is reserved for the development of Regional Community Mental Retardation Centers.

The justification for this priority is that each Regional Community Mental Retardation Centers services will:

1. cross regional county boundaries containing areas of all priority needs.
2. provide comprehensive services, without duplicating adequate services already being provided or capable of being expanded in existing community facilities for the mentally retarded.
3. serve as a focal point of referral for mentally retarded.
4. encourage increased community private mental retardation facility growth and development.
5. assist rural and smaller community by the use of mobile teams for services, such as diagnosis and evaluation, and provide needed contractual services where needed.

Two Regional Community MR Centers have been approved to date for construction in Pinellas and Duval Counties.

Category 2 - Diagnostic and Evaluation Clinics only and Residential Facilities

The 12 regions into which Florida has been segmented for purposes of mental retardation planning, allow for maximum driving times of three hours from area center, to any point within any region. This is excessive for day facility services, but adequate for a diagnostic and evaluation clinic or residential setting.

1. Priorities B, C, D, E, and F are assigned within this section of this plan, and were determined from the 7 factors established by draft procedures directives of the Division of Mental Retardation, Social and Rehabilitation Services, Department of Health, Education, and Welfare.

Category 3 - Day Facilities

Each of Florida's 67 counties is a planning area for consideration of day facility needs. Such an area assignment is consonant with regional planning, since the regional boundaries are all contiguous with selected county boundaries. Such an area consideration assures facilities will be within 30-60 minutes driving time from the center of a county.

1. Priorities B, C, D, E, and F are established and were determined from the 7 factors noted by Category 3 above.

Allotments

The following portions of Florida's allotment are set aside:

- a) For direct assignment to Construction Programs - 98 percent of each fiscal year's allotment.
- b) The remaining 2 percent is to be utilized as follows:
-2 percent for administration expenses for plan development.

Cut-Off Date

June 1 of a fiscal allotment year will be the cut-off date for consideration of eligible projects, for obligation of funds allotted by the Federal government to the State of Florida. (June 1, 1969, is the cut-off date for consideration of projects for FY 1969 fund allocations)

To be eligible for consideration, a sponsor should have submitted to the Division of Mental Retardation by this date: a construction request, preliminary sketches, a narrative, money and other required assurances; and be prepared to proceed into construction without delay if approved.

Should insufficient numbers of eligible sponsors apply to utilize available funds by the cut-off date, the first sponsors determined to be eligible subsequent to the cut-off date will be processed for construction approval within funds available.

Table of Priority Assignment Notes

In all cases of comparative statistical figures - ranks, ratios and other measures that follow have been so calculated that the lowest number equals the greatest need.

APPENDIX A contains the basic descriptions and pertinent statistical background materials, from which the following master chart was derived.

Achievement Ratio is an achieved factor score compared with a maximum possible score. Further discussion of this measure is made in Appendix A.

TABLE 9

PRIORITY ASSIGNMENTS

COUNTY PRIORITY

DAY FACILITIES

COUNTY	NEED RANK	ACHIEVEMENT RATIO	PRIORITY
Alachua	57	.69510	F
Baker	20	.40938	C
Bay	63	.72495	F
Bradford	39	.53305	D
Brevard	67	.80957	F
Broward	57	.69510	F
Calhoun	9	.33689	B
Charlotte	44	.57569	D
Citrus	30	.47761	D
Clay	26	.45629	C
Collier	48	.59062	E
Columbia	7	.32836	B
Dade	65	.76759	F
DeSoto	27	.46269	D
Dixie	39	.53305	D
Duval	52	.66525	E
Escambia	59	.71429	F

REGIONAL PRIORITY

D & E. AND RESIDENTIAL

REGION	NEED RANK	ACHIEVEMENT RATIO	PRIORITY	COUNTIES IN REGION
I	4	.46430	C	Escambia Okaloosa Santa Rosa Walton
II	8	.58335	E	Bay Calhoun Franklin Gulf Holmes Jackson Liberty Washington
III	10	.61906	F	Gadsden Jefferson Leon Madison Taylor

COUNTY	NEED RANK	ACHIEVEMENT RATIO	PRIORITY
Flagler	7	.32836	B
Franklin	24	.42857	C
Gadsden	1	.23028	B
Gilchrist	15	.36460	C
Glades	37	.52239	D
Gulf	54	.68657	E
Hamilton	18	.38806	C
Hardee	21	.41791	C
Hendry	29	.47122	D
Hernando	11	.35181	C
Highlands	43	.56717	D
Hillsborough	53	.68444	E
Holmes	5	.31983	B
Indian River	35	.49680	D
Jackson	13	.36034	C
Jefferson	17	.38592	C
Lafayette	38	.52452	D
Lake	32	.48614	D

REGION	NEED RANK	ACHIEVEMENT RANK	PRIORITY	COUNTIES IN REGION
III	10	.61906	F	Wakulla
IV	3	.45239	B	Baker Bradford Clay Columbia Duval Hamilton Lafayette Nassau St. Johns Suwannee
V	5	.35725	D	Union Alachua Dixie Gilcrest Levy Marion Putnam

PRIORITY ASSIGNMENT - TABLE 9 (CONT'D.)

COUNTY	NEED RANK	ACHIEVEMENT RATIO	PRIORITY
Lee	51	.66311	E
Leon	59	.71429	F
Levy	10	.34968	C
Liberty	45	.57782	D
Madison	6	.32196	B
Manatee	50	.61407	E
Marion	28	.46482	D
Martin	41	.54584	D
Monroe	56	.69297	E
Nassau	33	.49041	D
Okaloosa	61	.71642	F
Okeechobee	42	.54798	D
Orange	55	.69083	E
Osceola	14	.36247	C
Palm Beach	62	.72068	F
Pasco	4	.28358	B
Pinellas	64	.74414	F
Polk	45	.57783	D
Putnam	22	.42644	C

REGION	NEED RANK	ACHIEVEMENT RANK	PRIORITY	COUNTIES IN REGION
VI	1	.41668	B	Brevard Flagler Lake Orange Osceola Seminole Sumter Volusia
VII	2	.42858	B	Citrus Hernando Hillsborough Pasco
VIII	12	.60716	F	Manatee Pinellas Sarasota
IX	6	.47630	E	Hardee Highlands Okeechobee Polk

COUNTY	NEED RANK	ACHIEVEMENT RATIO	PRIORITY
St. Johns	22	.42644	C
St. Lucie	24	.42857	C
Santa Rosa	36	.51386	D
Sarasota	66	.79744	F
Seminole	19	.39232	C
Sumter	3	.27932	B
Suwannee	12	.35608	C
Taylor	49	.59702	E
Union	47	.57996	E
Volusia	33	.49041	D
Wakulla	30	.47761	D
Walton	2	.23241	B
Washington	16	.37953	C

REGION	NEED RANK	ACHIEVEMENT RANK	PRIORITY	COUNTIES IN REGION
X	7	.55954	E	Indian River Martin Palm Beach St. Lucie
XI	11	.63097	F	Charlotte Collier DeSoto Glades Hendry Lee
XII	9	.60716	F	Broward Dade Monroe

APPENDIX A

APPENDIX A

PRIORITY DESCRIPTIVE AND STATISTICAL MATERIAL

General

Draft procedures for developing the State Plan Community Mental Retardation Facilities Construction Program (P. L. 88-164 Title I, Part C, as amended) were received from the Division of Mental Retardation Community Resources Branch, Rehabilitation Services Administration, SRS, Department of Health Education and Welfare, in October, 1968.

One important part of the plan procedures concerned priorities, and stated in part-"The relative need of areas should be determined according to information available concerning the following factors. The State Plan shall give the relative weights assigned to each of these factors..." Rationale for weight assignment was also requested.

The Draft procedures also outlined the method by which each factor would be determined.

Each factor was considered by the Division to have equal weight, in view of the statewide need for services of all types, for all age groups, and all levels of retardation. Under this factor system, the larger counties are among the lowest priority groups. Historically, however, in this program very few of the smaller counties have been able to consider matching community programs, due to the difficulties involved in fund raising. Generally, it is anticipated these larger counties will still be utilizing the greater share of available funds.

In the few instances, where sponsors in smaller counties may be able to meet matching requirements, they will generally be requesting smaller projects, and instituting seed-growth community programs, where little needs are presently being met.

The Seven Factors - Included in the Method of Determination and Application of Priorities

TABLES 10 and 11 apply for County and Regional ranking.

The following seven factors were stipulated by the procedural directions and were used to calculate both County and Regional area needs. Equal weighting was assigned to each factor.

1. Need for Services and Facilities Factor - This factor measures the need by computing the estimated numbers of retarded not now being served by existing facilities and services.

Method of Determination - Ratio of need in each service area to total State need.

Method of Application - Regions and Counties are each ranked from greatest need to lowest need. In the case of County need the rank is from 1-67 and for Regional need 1-12. In each case 1 represents the greatest need.

2. Percent of Families with Low Income - The source of the latest information on this factor is the 1960 U. S. Census, "Florida, General Social and Economic Characteristics".

Method of Determination - Ratio of need in each service area to total State need.

Method of Application - As for factor 1.

3. Per Capita Income - The data provided in this factor was taken from estimates of the Bureau of Economic and Business Research, University of Florida. The latest figures are those of 1966, and represent the current income from private and government sources.

Method of Determination - Ratio of per capita income in service area to per capita income in State.

Method of Application - As for factor 1.

4. Median School Years Completed - Latest data source utilized by the Florida Department of Education is the 1960 Census, "Florida, General Social and Economic Characteristics". It includes persons 25 years of age and over.

Method of Determination - Ratio of median school years completed in service area to the state median.

Method of Application - As for factor 1.

5. Rate of Infant Mortality - Data provided is from the Florida State Board of Health, Bureau of Vital Statistics records and represents the annual average infant death rates for the years 1961-1965.

Method of Determination - Ratio of infant mortality rate in each service area to the State rate.

Method of Application - As for factor 1.

The remaining two of seven factors are judgmental in nature. They were assessed by responses from various agencies and resource persons (active in the area of judgment being assessed) to a request to them for such factors. The following suggestions were made for considerations in responding to judgmental "needs" of the areas:

"Some suggested judgmental factors which might be considered in a judgmental opinion for priority considerations of county needs

-Availability of generic services which could be adapted to mental retardation use.

-Capacity of a region to participate in building community programs - money, leadership, local organization support, and programs in operation or planned.

- Availability of professional and sub-professional staffing.
- County Commission support.
- Active United Fund operation throughout County.
- Need for handicapped services generally in county.
- Other valid judgmental factors."

6. Special Needs of Particular Groups of Mentally Retarded - These groups include retarded with handicaps and those beyond school age - a judgmental factor.

Method of Determination - The following agencies, resources and considerations were used to assess this factor:

Florida Crippled Childrens Commission
 Vocational Rehabilitation Department
 Sunland Training Facilities Waiting Lists (Florida
 Mental Retardation Institutions)
 Employment Division records of 1967 county unemployment
 Division of Mental Retardation

Method of Application - As for factor 1.

7. Present Availability and Utilization of Public and Private Community Resources for the Retarded - a judgmental factor.

Method of Determination - The following agencies, resources and considerations were used to assess this factor:

Florida State Board of Health
 Florida Department of Public Welfare
 Florida Division of Mental Health
 Vocational Rehabilitation Services Department
 Division of Exceptional Child Education
 Division of Mental Retardation

Method of Application - As for factor 1.

Achievement Ratio Determinants

The achievement ratio is a combined factor score compared with the possible score. When segmented into equal unit measures, it determines the priority separation points.

Day Facility Achievement Ratio - County Priority Determination

Each of the 67 Florida Counties is ranked for need from 1-67 for each of seven priority factors. This ranking makes possible a minimum score of seven (7 factors x 1 weight for each factor) and a maximum score of 469 (7 factors x 67 weight for each factor).

In fact, the sum of all scores from the seven factors vary from 108-378. When scores are converted to Achievement Scores, a ratio spread of .23028 - .80957 results. The achievement score

ratio of each county then determines that counties priority from the following scale:

.23028	B
.34614	C
.46200	D
.57785	E
.69371	F
.80957	

Diagnostic and Evaluation and Residential Achievement Ratio
Regional Priority Determination

Each of Florida's twelve Regions is ranked for need from 1-12 for each of seven priority factors. This ranking could result in a minimum score of seven (7 factors x 1 weight for each factor) and a maximum score of eighty-four (7 factors x 12 weight for each factor).

In fact, the sum of all ranks of the seven factors varied between 35-53 within the twelve regions. Rank sums changed to achievement scores (score attained ÷ maximum score possible) give a ratio spread of .41668 to .63097.

The achievement score ratio of each county then determines that counties priority from the following scale:

.41668	B
.45953	C
.50239	D
.54525	E
.58811	F
.63097	

TABLE 10

DETERMINATION OF RANKING FACTORS BY REGIONAL SERVICES AREA

FOR D & E AND RESIDENTIAL FACILITY PRIORITIES

REGIONS	NEED FOR SERVICES/FACILITIES	FAMILIES WITH LOW INCOME	PER CAPITA INCOME	MEDIAN SCHOOL YEARS COMPLETED	INFANT MORTALITY	SPECIAL NEEDS HANDICAPPED AND BEYOND SCHOOL AGE	AVAILABILITY UTILIZATION PUBLIC - PRIVATE RESOURCES	SUM OF FACTOR RANKING
I	7	9	4	5	10	1	3	39
II	12	2	9	10	3	6	7	49
III	11	4	7	7	4	10	9	52
IV	3	1	12	12	1	7	2	38
V	9	5	8	9	5	8	1	45
VI	2	3	11	11	2	2	4	35
VII	5	6	2	4	7	4	8	36
VIII	4	11	1	1	12	12	12	53
IX	8	8	5	3	9	3	10	46
X	6	10	6	6	8	5	6	47
XI	10	6	10	8	5	9	5	53
ALL	1	12	3	2	11	11	11	51

TABLE 11

DETERMINATION OF RANKING FACTORS BY COUNTY SERVICE AREA

FOR DAY FACILITY PRIORITIES

COUNTY	NEED FOR SERVICES/FACILITIES	FAMILIES WITH LOW INCOME	PER CAPITA INCOME	MEDIAN SCHOOL YEARS COMPLETED	INFANT MORTALITY	SPECIAL NEEDS HANDICAPPED AND BEYOND SCHOOL AGE	AVAILABILITY UTILIZATION PUBLIC-PRIVATE RESOURCES	SUM OF FACTOR RANKING
Alachua	13	46	48	60	47	56	56	326
Baker	60	19	10	11	16	43	33	192
Bay	21	54	43	57	60	48	57	340
Bradford	47	34	17	23	38	44	47	250
Brevard	8	67	67	67	56	62	51	378
Broward	3	60	47	65	34	55	62	326
Calhoun	62	7	5	8	6	26	44	158
Charlotte	35	39	29	51	62	39	15	270
Citrus	50	20	13	33	49	10	49	224
Clay	32	49	9	43	47	30	4	214
Collier	31	52	58	49	24	35	28	277
Columbia	33	27	24	23	11	23	13	154
Dade	1	63	65	60	57	54	60	360
DeSoto	59	29	33	32	12	16	36	217
Dixie	61	18	20	11	61	47	32	250

COUNTY	NEED FOR SERVICES/FACILITIES	FAMILIES WITH LOW INCOME	PER CAPITA INCOME	MEDIAN SCHOOL YEARS COMPLETED	INFANT MORTALITY	SPECIAL NEEDS HANDICAPPED AND BEYOND SCHOOL AGE	AVAILABILITY UTILIZATION PUBLIC-PRIVATE RESOURCES	SUM OF FACTOR RANKING
Duval	2	64	63	51	50	62	20	312
Escambia	10	62	55	49	48	58	53	335
Flagler	58	16	28	27	3	16	6	154
Franklin	53	4	31	20	51	21	21	201
Gadsden	25	11	12	1	1	9	49	108
Gilchrest	64	2	8	20	18	49	10	171
Glades	67	32	59	3	10	46	28	245
Gulf	50	50	64	38	45	31	44	322
Hamilton	54	5	25	2	21	46	29	182
Hardee	45	28	35	23	44	3	18	196
Hendry	44	39	66	27	14	23	8	221
Hernando	42	22	23	27	41	8	2	165
Highlands	43	35	41	36	9	41	61	266
Hillsborough	4	55	56	41	39	60	66	321
Holmes	52	1	1	45	5	16	30	150
Indian River	27	41	53	54	22	5	31	233
Jackson	28	12	14	17	41	40	17	169

TABLE 11 (CONT'D.)
DAY FACILITY PRIORITIES

TABLE 11 (CONT'D.)
DAY FACILITY PRIORITIES

COUNTY	NEED FOR SERVICES/FACILITIES	FAMILIES WITH LOW INCOME	PER CAPITA INCOME	MEDIAN SCHOOL YEARS COMPLETED	INFANT MORTALITY	SPECIAL NEEDS HANDICAPPED AND BEYOND SCHOOL AGE	AVAILABILITY UTILIZATION PUBLIC-PRIVATE RESOURCES	SUM OF FACTOR RANKING
Jefferson	55	8	7	6	4	57	44	181
Lafayette	65	21	27	14	2	59	58	246
Lake	20	30	42	45	26	25	40	228
Lee	15	43	50	51	24	63	65	311
Leon	16	59	52	65	35	52	56	335
Levy	41	13	15	17	32	42	4	164
Liberty	66	16	19	17	67	36	50	271
Madison	40	3	6	45	8	27	22	151
Manatee	14	36	34	43	44	65	52	288
Marion	18	26	26	36	26	32	54	218
Martin	34	48	46	47	16	23	42	256
Monroe	22	61	54	54	53	35	46	325
Nassau	37	42	45	30	36	30	10	230
Okaaloosa	19	66	57	67	64	28	35	336
Okeechobee	48	56	32	32	19	33	37	257

COUNTY	NEED FOR SERVICES/FACILITIES	FAMILIES WITH LOW INCOME	PER CAPITA INCOME	MEDIAN SCHOOL YEARS COMPLETED	INFANT MORTALITY	SPECIAL NEEDS HANDICAPPED AND BEYOND SCHOOL AGE	AVAILABILITY UTILIZATION PUBLIC-PRIVATE RESOURCES	SUM OF FACTOR RANKING
Orange	7	65	60	63	55	50	24	324
Osceola	36	24	22	38	17	13	20	170
Palm Beach	6	56	62	58	26	66	64	338
Pasco	23	22	11	27	32	2	16	133
Pinellas	5	46	49	57	58	67	67	349
Polk	9	53	51	39	52	8	59	271
Putnam	26	33	40	34	37	19	11	200
St. Johns	30	37	39	46	20	13	15	200
St. Lucie	24	44	36	40	7	11	39	201
Santa Rosa	29	50	30	43	59	18	12	241
Sarasota	12	58	61	62	54	64	63	374
Seminole	17	45	21	55	34	5	7	184
Sumter	46	14	18	30	13	5	5	131
Suwannee	39	10	16	11	30	38	23	167
Taylor	51	31	44	14	65	37	38	280
Union	56	25	37	11	66	51	26	272
Volusia	11	38	38	60	28	21	34	230

TABLE 11 (CONT'D.)
DAY FACILITY PRIORITIES

TABLE 11 (CONT'D.)
DAY FACILITY PRIORITIES

COUNTY	NEED FOR SERVICES/ FACILITIES	FAMILIES WITH LOW INCOME	PER CAPITA INCOME	MEDIAN SCHOOL YEARS COMPLETED	INFANT MORTALITY	SPECIAL NEEDS HANDICAPPED AND BEYOND SCHOOL AGE	AVAILABILITY UTILIZATION PUBLIC-PRIVATE RESOURCES	SUM OF FACTOR RANKING
Wakulla	63	9	2	8	63	53	26	224
Walton	38	15	3	20	30	2	1	109
Washington	58	6	4	14	41	13	42	178



APPENDIX B

APPENDIX B

MINIMUM STANDARDS OF MAINTENANCE AND OPERATION

General

State agencies concerned with mental retardation have scheduled conferences to discuss existing standards of operations and maintenance; and to propose new standards for those facilities serving the retarded, for which no standards are presently recognized statewide.

Resume of Present Standards and Licensing for Retarded Settings

1. Diagnostic and Evaluation Clinics

Florida Statutes (Chapter 483) provide detailed requirements for clinical laboratories, but aside from this and stringent requirements for licensing medical professionals, there are no minimum standards for diagnostic and evaluation clinics.

2. Residential Facilities

(a) The State Department of Public Welfare is responsible for setting minimum standards for the care of dependent children away from their homes, and for licensing of institutions and agencies providing this care. This responsibility extends to all county non-profit residential schools or houses for retarded, and to commercially operated schools or houses for the retarded. In the case of commercial enterprise houses the standards are presently limited to counties having over 267,000 population. Private academic boarding schools are not covered.

Licensure is through the state or district office.

(b) The Florida State Board of Health licenses commercial enterprise homes in all counties (except those over 267,000 in population). Such homes for the retarded as well as physical handicapped settings, are carried as "Homes for Special Services".

3. Day Care Facilities

(a) The State Department of Public Welfare licenses facilities providing for the group care of children in 3 counties - (Dade, Duval, Orange). This group care of children is defined as any facility (non-profit or commercial) providing for care and development of 6 or more children, 2-6 years of age for 4 or more hours regularly during the day.

(b) The County Health Departments in 14 counties license pre-school and day nurseries. In 2 counties this licensure is by a County License Board.

(c) Many counties and cities require day nurseries, nursery schools and kindergartens to purchase occupational licenses.

Standards Conference

Enforcement of standards usually requires legislation action in the form of licensing authority penalties for failure to take corrective action on items found deficient. Certain programs already have such authority (as noted by the overview given previously under the Resume of Present Standards and Training). Such legislative program will not be ready until the next legislative period in 1971.

New standards to apply to facilities constructed for diagnosis and evaluation, day and resident facilities, require agreement of the several state agencies concerned in present programs. It is hoped to accomplish this agreement within the coming year by means of joint conferences.

Agreements reached by these conferences will be issued as Florida's second interim plan. Pending this issuance the most inclusive standards this Division has found are published by the Arkansas State Board of Health as "Rules and Regulations for Constructing Facilities for the Mentally Retarded". With the permission of the Arkansas Board of Health, this compilation, edited and changed in detail only, has been accepted by this Division and by the Florida Advisory Council, Division of Community Hospitals and Medical Facilities, for construction as the "First Interim Standards for Maintenance and Operation for Facilities Constructed under P.L. 88-164."

First Interim Minimum Standards for Facilities Constructed Under P.L. 88-164 Title I, Part C - Sponsor's Requirements

Sponsors for federal matching construction, must assure the State Agency that they will comply with the applicable facility standards for their facility. This compliance must be de facto, except for waiver of specific items requested in writing by the sponsor, prior to application approval.

The sponsor must assure access to the Division of Mental Retardation or its agency designate for purposes of inspection for compliance with the standards, at reasonable times upon prior notice. This access right shall be recognized for a period of five years.

The First Interim Standards are issued as a supplement to this appendix, and are a part of the 1969 Florida State Plan for Construction.

In addition to the First Interim Standards adopted, the following references are regulatory. (Where a conflict may arise between the First Interim Standards and the listed references, the latter will govern.)

1. Day Facility

"Minimum Standards for Group Day Care of Children" published by the State of Florida, Department of Public Welfare. Applies to 6 or more children - 2 to 6 years of age away from home 4-12 hours/also applies to program providing full time care as well as described day care. (Combination: as day care and independent boarding house.)

2. Residential Facility

(a) "Minimum Standards for Residential Schools or Homes for Retarded Children", published by the Department of Florida, Department of Public Welfare.

(All non-profit residential schools or homes for retarded children and commercial enterprise residences in Counties with over 260,000 people.)

(b) "Florida Statutes Chapter 400)" - Nursing Home and Related Facility Licensure

(For all commercial enterprise residential homes in counties with less than 260,000 population)

The following references are recommended to administrators, officers and boards of directors of facilities listed.

1. Comprehensive Facility

State Residential Facilities: "Standards for State Residential Institutions for the Mentally Retarded", prepared by the American Association on Mental Deficiency (Monograph Supplement to AAMD Journal January 1964, Vol. 68, No. 4)

2. Day Facilities

"Standards for Day Care Service" - Child Welfare League of America, Inc.

3. Diagnosis and Evaluation Clinics

"American Psychiatric Association Standards for Hospitals and Clinics" - 1949, Revised 1958

4. Sheltered Workshops

"Standards for Rehabilitation Facilities and Sheltered Workshops" - Published by Vocational Rehabilitation Administration, Department of Health, Education, and Welfare, Washington, D.C - 1967

SEE SUPPLEMENT 2

FIRST INTERIM STANDARDS FOR OPERATIONS AND MAINTENANCE

APPENDIX C

APPENDIX C

GENERAL STANDARDS OF CONSTRUCTION AND EQUIPMENT

Construction

General

Nothing stated herein relieves the sponsor from compliance with building codes, ordinances and regulations which are required by city, county or state jurisdictions. Where such codes are not in effect, it is the sponsor's responsibility to consult one of the national building codes generally used in the area for all components of the building type being considered.

None of the following standards, nor other recommended guide materials however are intended to restrict design initiative or construction techniques.

Public Health Service Regulation - 54.119

Public Law 88-164, Title I, Part C, provides that the Secretary of Health, Education and Welfare will prescribe by general regulations: -

"(3) general standards of construction and equipment for facilities of different classes and in different types of location."

These Regulations were issued and provide a base for additional considerations peculiar to local or particular situations. A copy of these regulations is part of the planning material furnished to each "prospective sponsor," on contact with the Division of Mental Retardation.

The general standards, as issued were adopted by the Florida Advisory Council during 1966, and any deviation from these regulations requires a waiver through the Division of Mental Retardation.

Architectural Barriers

Public Law 90-480 (August 1968), is an act providing certain buildings financed with Federal funds be so designed and constructed as to be accessible to the physically handicapped.

The Administrator of General Services was authorized by this act to set standards for design, construction and alteration of buildings for the aforementioned purposes (except for residential structures and Department of Defense facilities).

The Secretary of Housing and Urban Development is authorized to prescribe such standards for residential structures.

The act states that each building designed, constructed or altered, after effective date of a standard issued under this Act will be done in accordance with such standards.

This legislation carries out a major recommendation of the National Commission on Architectural Barriers.

Pending the establishment of the above standards, the USASI specifications "Making Buildings and Facilities Accessible to and Usable By the Physically Handicapped" Publication A-117.1-1961 apply. Deviation from these guidelines must be approved by Regional authority (through the Division of Mental Retardation) in each instance.

Other Design

The publication "Design of Facilities for the Mentally Retarded" (P.H.S. Pub. # 1181-C-1 U.S. Dept. HEW; Public Health Service; Division of Hospital and Medical Facilities, Architectural, Engineering and Equipment Branch, Washington DC 20201) is utilized by this Division of Mental Retardation as the basic guide for space considerations needed by individuals, the retarded or staff in the various types of facilities. It is illustrative and suggestive in design, however square footage assignments are considered to be desirable minimum in most cases. Where lesser space allowance is considered necessary it should be cleared with the Division of Mental Retardation.

While not a standard of construction the report of the Public Health Service Committee "Planning of Facilities for the Mentally Retarded" (P.H.S. Pub. # 1181-B-1) is recommended to the sponsor and Architect as basic to considerations of the various skills interested in a retarded facility. This in that it strives for a common understanding of basic concepts and factors, as they affect planning for the retarded and deals with the scope of the problem of retardation.

Construction and Equipment Standards Additional to Regulations

In addition to the Regulations issued by the Secretary, the following sections of "General Standards of Construction and Equipment for Hospital and Medical Facilities" (P.H.S. Pub. # 930-A-7' December 1967) will be used as standards for mental retardation facilities;

- a. Section 2 - Site
- b. Section 3 - Site Survey
- c. Section 4 - Subsoil Investigation - Although the complete report is not due until Application Part 3, a preliminary engineering report, based upon borings at the proposed site of the facility, will be made at submission time of Part I of the application. If any unusual soil conditions are found at this time which make further engineering check desirable, a complete subsoil investigation will be made prior to completing Part I.
- d. Section 6 - Plans, Specifications and Estimates - for all facility construction
- e. Section 5 - Equipment - Classification and Applicants Responsibility
- f. Section 9 - Diagnostic or Treatment Center - for D & E clinic applications

The following sections of the same publication are recommended as guides for planning mental retardation facilities, as follows:

- a. Section 9 - Facility for long term case, nursing homes Chronic Disease Hospitals - have many helpful considerations which might be adapted to day and residential mental retardation facilities.

- b. Sections 14, 16 and 17 - Rehabilitation Facilities - have similar helpful considerations for such a setting.

Equipment Standards

Responsibility of the Applicant - to prepare and submit written documents stating all items essential to functioning of the planned facility - fixed and movable.

Fixed - specifications, bid documents and contracts for all fixed equipment to be purchased outside the construction contract must be submitted.

Movable - an equipment list must be submitted as soon as possible after award of construction contract.

Cut-Off Date - is established by the State Agency for each project prior to its completion. All requests for Federal participation in equipment costs must be submitted to and approved by State Agency prior to the cut-off date.

Fixed Equipment - is that equipment permanently attached to the building, or which must be connected to a service distribution system - designed and installed during construction for specific use of the equipment.

Movable Equipment - are all items of equipment not considered to be fixed.

Carpeting - must be certified to have passed AST - ME - 84 with flame spread rating 0-75, by an independent recognized testing laboratory. Applicant must obtain certificate from vendor.

Fixed Equipment Time Ineligibility - all fixed equipment items not having specifications and bid documents approved in writing prior to awarding contract.

Bids - there must be a minimum of three prospective bidders to whom specifications are sent. Competitive bidding is normally required for all fixed equipment not in the construction contract.

Movable Equipment, Written Approval and Method of Purchase

Equipment list must be approved in writing by State Agency and Regional office prior to purchase.

Purchase of approval items may be made on the open market, by quotations or through competitive bidding.

Guidelines for the Preparation of Equipment Documents

These instructions have been promulgated by the Division of Community Hospitals and Medical Facilities and are normally forwarded to each sponsor within the normal construction progress of the project.

National Standards

The guidance of the following publications should be referred to where neither the Regulation or this Section specify information of pertinence to the sponsor for construction matters.

American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) Handbook of Fundamentals (secs. 8-23C1, 8-24J4c, 9-17C1, and 9-18H4c)

American Society for Testing and Materials (ASTM) Standard No. E 84-61, Method of Test for Surface Burning Characteristics of Building Materials (secs. 8-22E and 9-16E)

American Society for Testing and Materials (ASTM) Standard No. E 90-61T, Recommended Practice for Laboratory Measurement of Airborne Sound Transmission Loss of Building Floors and Walls (Tenative) (secs. 8-20A15, table 1 and 9-14A19, table 3)

American Society for Testing and Materials (ASTM) Standard No. E 119, Method of Fire Tests of Building Construction and Materials (secs. 8-22D and 9-16D)

Federal Housing Administration (FHA) Publication No. 750, Impact Noise Control in Multi-family Dwellings (secs. 8-20A15, table 1 and 9-14A19, table 3)

International Standards Organization (ISO) Recommendations No. 140-1960, Field and Laboratory Measurements of Airborne and Impact Sound Transmission (secs. 8-20A15, table 1 and 9-14A19, table 3)

National Electrical Manufacturers Association (NEMA) Bulletin No. XR4-10, Minimum Power Supply Requirements (sec. 8-24G2)

National Fire Protection Association (NFPA) Standard No. 70, National Electrical Code (sec. 8-24G2)

National Fire Protection Association (NFPA) Standard No. 56, Code for the Use of Flammable Anesthetics (sec. 8-20B2, 8-23D2s, 8-24F1 and G1, and 9-14B2)

National Fire Protection Association (NFPA) Standard No. 82, Standard for Incinerators (secs. 8-23B and 9-17B)

National Fire Protection Association (NFPA) Standard No. 10, Standards for the Installation of Portable Fire Extinguishers (secs. 8-20A14 and 9-14A18)

National Fire Protection Association (NFPA) Standard No. 101, Life Safety Code (secs. 8-20A1 and 9-14A1)

Public Health Service (PHS) Publication, Labor Standards Provisions for Construction Grant Programs (sec. 6-3B7)

Public Health Service (PHS) Publication No. 934, Food Service Sanitation Manual (secs. 8-12 and 9-7)

Public Health Service (PHS) Publication No. 1038, Report of Public Health Service Technical Committee on Plumbing Standards (secs. 8-23E and 9-17E)

Underwriters' Laboratories, Inc. (UL) Publication No. 181, Air Ducts (secs. 8-23D2j and 9-17D2h)

United States of America Standards Institute (USASI) Standard No. A117.1-1961, American Standard Specifications for Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped (secs. 8-1B and 9-1B)

Copies of non-Government publications can be obtained from the various agencies at the addresses listed in the next column.

American Society of Heating, Refrigerating and Air-Conditioning Engineers
United Engineer Center
345 East 47th Street
New York, New York 10017

American Society for Testing and Materials
1916 Race Street
Philadelphia, Pennsylvania 19103

International Standards Organization
(USA Headquarters, United States of America Standards Institute)
10 East 40th Street
New York, New York 10016

National Electrical Manufacturers Association
155 East 44th Street
New York, New York 10017

National Fire Protection Association
60 Batterymarch Street
Boston, Massachusetts 02110

Underwriters' Laboratories, Inc.
207 East Ohio Street
Chicago, Illinois 60611

United States of America Standards Institute (Formerly American Standards Association, Inc.)
10 East 40th Street
New York, New York 10016

APPENDIX D

APPENDIX D

ESTIMATED POPULATION FOR FLORIDA COUNTIES

	July 1, 1967	1973
Alachua	90,500	108,500
Baker	8,300	9,300
Bay	63,200	79,900
Bradford	12,900	15,000
Brevard	210,700	267,800
Broward	465,500	585,400
Calhoun	7,700	7,600
Charlotte	19,900	31,200
Citrus	13,300	16,500
Clay	24,200	27,700
Collier	29,400	37,300
Columbia	24,600	28,200
Dade	1,095,500	1,310,000
DeSoto	13,200	16,600
Dixie	5,000	5,000
Duval	494,400	595,700
Escambia	179,400	220,300
Flagler	5,100	5,800
Franklin	7,200	8,600
Gadsden	44,100	46,800
Gilchrist	3,400	3,800
Glades	4,000	4,300
Gulf	9,400	10,000
Hamilton	8,000	8,600
Hardee	14,800	15,200
Hendry	11,900	15,000
Hernando	13,200	17,000
Highlands	25,100	31,700
Hillsborough	437,900	510,600
Holmes	11,300	12,600
Indian River	32,900	44,800
Jackson	35,900	40,000
Jefferson	9,300	10,800
Lafayette	2,800	3,400
Lake	63,400	76,000
Lee	79,100	97,200
Leon	88,500	107,600
Levy	12,500	14,400
Liberty	3,000	2,900
Madison	14,800	16,800
Manatee	80,700	104,800
Marion	63,900	78,700
Martin	23,200	32,200
Monroe	52,500	65,000
Nassau	19,200	24,000

	July 1, 1967	1973
Okaloosa	63,900	90,600
Okeechobee	9,400	12,500
Orange	302,200	393,000
Osceola	21,200	26,600
Palm Beach	293,600	366,900
Pasco	48,100	60,500
Pinellas	437,900	519,800
Polk	235,600	265,500
Putnam	32,500	37,400
St. Johns	32,300	38,900
St. Lucie	48,700	61,900
Santa Rosa	30,900	43,200
Sarasota	95,900	131,500
Seminole	68,300	87,100
Sumter	13,200	16,600
Suwannee	16,900	20,900
Taylor	13,200	14,400
Union	6,700	7,200
Volusia	163,400	199,500
Wakulla	5,600	5,800
Walton	15,800	17,300
Washington	11,900	13,300
TOTALS	5,902,000	7,201,000

Notes

1. State totals furnished by Public Health Service as base line figures determining State grant amounts for construction.
2. County estimates, furnished by School of Economic and Business Research, University of Florida; on basis of State totals furnished by Public Health Service.

APPENDIX E

STAFFING GRANT INFORMATION

General Information and Background

In 1963, Congress responded to community need for aid in meeting the high costs of construction, acquisition, expansion, replacement, remodeling and equipping local facilities to house essential specialized care, treatment, and training services for the retarded. This was done through the ties to respond to the unmet needs of their retarded citizens, some potential sponsors of community facilities found provision of the necessary operational support a further barrier to developing a local spectrum of specialized services.

Again Congress responded to community concern. In December of 1967, they passed the Mental Retardation Amendments of 1967 (P.L. 90-170). Included in this legislation were provisions for the extension of the Community Mental Retardation Facilities Construction program through June, 1970, and for Federal participation in the operational costs of community facilities.

Over eight million dollars (\$8,350,000) have been appropriated for fiscal year 1969 for staffing grants to public and other nonprofit community facilities for the mentally retarded. An additional \$14 million is authorized to be appropriated for new projects for the fiscal year ending June 30, 1970. This program is an important first step in stimulating and aiding communities to meet the needs of their retarded citizens. These monies, authorized by the Mental Retardation Amendments of 1967 (P.L. 90-170), will provide grants on a declining percentage basis for a period of 51 months; to meet a portion of the costs of professional and technical personnel for the initial operation of new facilities, or for new services in existing facilities for the mentally retarded. Any new public or private nonprofit community facility initiating diagnostic, treatment, educational, training, personal care or sheltered workshop services for the mentally retarded or any existing community facility desiring to initiate one of these services not previously provided, serve a group not previously served, or employ a new method of delivering a currently offered service may apply for funds.

The program is administered by the Division of Mental Retardation, Rehabilitation Services Administration, Social and Rehabilitation Services, Department of Health, Education, and Welfare. Application materials and consultation are available on request to the Division of Mental Retardation; Attention: Facilities Coordinator; Room 460; Larson Building; Tallahassee, Florida 32304; or directly to the Department of Health, Education, and Welfare; Rehabilitation Services Department; Room 404; 50-7th Street, N.E.; Atlanta, Georgia 30323. The deadline for receipt of completed applications in Atlanta for Fiscal Year 1969 funding, is May 1, 1969.

Model City Program

A substantial amount of staffing money will be specially directed to demonstration areas within model city programs, wherever eligible projects may be presented. For further details concerning such demonstration areas, contact:

Director
City Demonstration Agency
7th Floor, Justice Building
1351 N.W. 12 Street
Miami, Florida 33125

Director
City Demonstration Agency
City of Tampa
Tampa, Florida
33601