

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from scanned originals with text recognition applied
(searchable text may contain some errors and/or omissions)

STATE LAW LIBRARY
AUGUSTA, MAINE

081107

**Study and Report of
CITIZEN'S TASK FORCE
on**

**Intergovernmental
Welfare Programs**

16

SUBMITTED TO GOVERNOR KENNETH M. CURTIS

SEPTEMBER, 1968

This study and report is presented in recognition
of the principle that Man is made to:

KNOW THE TRUTH
UNDERSTAND THE TRUTH
and to
ACT UPON THE TRUTH

It is dedicated to those persons who in the face
of economic need and adversity continue to
struggle and continue to hope.

TABLE OF CONTENTS

Letter of Transmittal
Members of Citizens Task Force
Study Staff

CHAPTER I

- INTRODUCTION

	Page
Background of the Study	1
Purpose of the Study	3
The Study Process	6
Governmental Welfare Programs in Maine	8
Organization of the Report	11

CHAPTER II

- SUMMARY OF RECOMMENDATIONS & FINDINGS

Preliminary Statement	12
Recommendations	
Relating to Welfare Policy Statement	13
Relating to Transfer of General Assistance Administration	15
Relating to State Financing	19
Relating to Appointment of Municipal Service Officer	21
Relating to Transfer of Fulltime Municipal Welfare Workers	21
Relating to Abolishment of Settlement Laws	21
Relating to Extension of State Medical Program	23
Relating to Meeting Full Need and Removal of Restrictive AFDC Regulations	24
Relating to State Application for Title XIX Reimbursement Rate	25
Relating to Expansion of AFDC - Unemployed Father Program	26
Relating to System of Pre-investigation Grants	27
Relating to Additional Data Processing Systems Staff	28
Relating to Providing AFDC Matching for Foster-Children's Program	28
Relating to Extension of Declaration of Need Method to AFDC	29
Relating to Making Assistance System Benefits Available to Indians	30
Relating to Appeals and Fair Hearings	31
Relating to Right to Assistance and Equal Protection	32
Relating to Use of Food Stamps and Donated Commodities	34
Relating to Semi-Monthly Assistance Payments	36
Relating to Child Welfare	36

CHAPTER III
- RESPONSE TO QUESTIONNAIRES & INTERVIEWS

	Page
Explanatory Statement, Data Recorded on a Questionnaire by 253 Welfare Officers	38
Questionnaire Returns	38
Analysis of Data	38
Observations from Questionnaire Information	40
Comments on Questionnaire by Maine Welfare Officials	45
Findings from Face-to-Face Interviews with Welfare Officials	
Explanatory Note	49
With Respect to Municipal Organization for Welfare	49
With Respect to Reasons for Granting General Assistance	51
With Respect to Record Keeping	52
With Respect to Standards of Assistance	52
With Respect to Settlement Laws	53
With Respect to Donated Commodities and Food Stamps	54
With Respect to Prevention and Rehabilitation	54
With Respect to the State, Its Programs and Personnel	55
With Respect to Position of Overseer of the Poor	56
With Respect to Families Receiving Welfare Payments	57
With Respect to State Administration of General Assistance	57

CHAPTER IV

Administrative Costs in a Plan for State Administration of General Assistance	59
Premises	59
Factors in Determining Administrative Costs	59
New State Monies for Administration	62

APPENDIX

Patterns of Administration and Sources of Financing of General Assistance in the United States	A-1
Elements in a Modern and Acceptable General Assistance Program	A-4
Maine Welfare Directors Association Questionnaire	A-5
Municipality Sample by County	A-9

CHAIRMAN
EIL D. MICHAUD
SOUTH PORTLAND

ASST. CHAIRMAN
EDWARD BREWSTER
AUGUSTA

MEMBERS
MATTHEW I. BARRON
PORTLAND
HON. SEVERIN BELIVEAU
RUMFORD
REV. LOUIS BERUBE
SOUTH BERWICK
REV. MALCOLM BROWN
STEEP FALLS
CLINTON A. CONANT
STRONG
FRANCIS T. FINNEGAN
AUGUSTA
DONALD FONTAINE
PORTLAND
HON. JOHN E. GILL
SOUTH PORTLAND
MERLE F. GOFF
BANGOR
NORMAN S. HALL
SANFORD
MRS. ROBERT C. HUTCHINSON
AUGUSTA
MRS. ELLEN KINNEY
AUGUSTA
ABRAHAM LACASSE
AUGUSTA
ADRIEN LAVERDIERE
LEWISTON
WILLIAM M. LUNT, JR.
FAIRFIELD
DR. LEONARD W. MAYO
WATERVILLE
MRS. CHARLES D. McEVROY, JR.
BANGOR
ERNEST A. MCKAY
DANFORTH
LEO J. MORENCY
RUMFORD
MICHAEL J. MURPHY
BANGOR
MRS. LORRAINE PINKHAM
BATH
WILFRED POIRIER
AUGUSTA
HON. CARLETON DAY REED JR.
WOOLWICH
PROFESSOR JOHN ROMANYSHYN
PORTLAND
HON. RODNEY W. ROSS
BROWNVILLE
HON. JOHN L. SALISBURY
HALLOWELL
MICHAEL SCHOONJANS
OLD ORCHARD BEACH
REV. ROGER SMITH
AUGUSTA
GEORGE E. SULLIVAN, M. D.
WATERVILLE
ROBERT E. TOOLE
BANGOR
CONRAD VAN HYNING
GUILFORD
MRS. GABRIELLE WALKER
PORTLAND
HON. MILDRED F. WHEELER
PORTLAND



CITIZENS' TASK FORCE
on
INTERGOVERNMENTAL WELFARE PROGRAMS

September 15, 1968

Honorable Kenneth M. Curtis
Governor of the State of Maine
State House
Augusta, Maine

Dear Governor Curtis:

On behalf of the members of the Task Force on Intergovernmental Welfare Programs, I am happy to submit to you the final Task Force report and its recommendations regarding the administration and financing of General Assistance programs in Maine.

You will recall that in December, 1967, you established the Task Force and appointed a bipartisan group of citizens representing all walks of life. Members were charged with the responsibility of studying the General Assistance programs and determining their effectiveness as it relates to the meeting of needs of our people. The Task Force was also asked to recommend programs that would improve the overall delivery of general assistance services.

Appreciation is extended to Dr. J. Allen Broyles, the first chairman, for helping the Task Force to get off to a fine start. Members held twelve meetings since its initiation. Community Research Associates, Inc., a consultation firm in New York, conducted a thorough study of the General Assistance programs in Maine. The facts gathered and guidelines provided by Community Research Associates were most valuable to the Task Force. The preliminary recommendations advanced by the Task Force were exposed in seven public hearings which allowed citizens-at-large to express their opinions.

Our work was further enhanced through the marvelous cooperation of the Commissioner of the Department of Health and Welfare. We express our gratitude, especially to departmental staff members who worked closely with us.

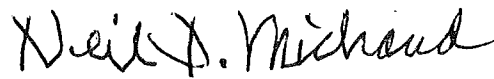
Governor Curtis

- 2 -

September 15, 1968

The report shall reveal that the Task Force members are convinced that Maine's General Assistance program for too long has been tied to policies established prior to and during the Colonial period. It is now time for our State to undertake vast changes in this system; changes based on principles which would uphold the basic human rights and dignity of those in need and afford them an opportunity to develop to their fullest potential in order that they become contributing members of our society.

Sincerely yours,



Neil D. Michaud
Chairman, Citizens Task
Force on Intergovernmental
Welfare Programs

NDM:et

enc.

CITIZENS TASK FORCE ON INTERGOVERNMENTAL WELFARE PROGRAMS

Chairman -

Neil D. Michaud
Administrative Director
Diocesan Bureau of Human Relations
317 Congress Street
Portland, Maine 04101

Matthew I. Barron
Director, City of Portland
Welfare Department
1151 Brighton Avenue
Portland, Maine 04101

Severin M. Beliveau
McCarthy, Beliveau & Beliveau
150 Congress Street (Box 6)
Rumford, Maine 04276

Rev. Louis Berube
St. Michael's Rectory
29 Young Street
South Berwick, Maine 03908

Seward Brewster
Central Maine Power Company
9 Green Street
Augusta, Maine 04330

Rev. Malcolm Brown
RFD 1
Steep Falls, Maine 03085

Clinton A. Conant
Coordinator-Director
Franklin County Community Action
Council, Inc.
Strong, Maine 04983

Francis T. Finnegan
Vice-Chairman of the Board
Depositors Trust Company
286 Water Street
Augusta, Maine 04330

John E. Gill
Member, House of Representatives
70 Springwood Road
South Portland, Maine 04106

Merle F. Goff
City Manager
Bangor, Maine 04401

Norman S. Hall
Chairman, Board of Selectmen
267 Main Street
Sanford, Maine 04073

Mrs. Robert C. Hutchinson
63 Mayflower Road
Augusta, Maine 04330

Abraham LaCasse
Director of Health and Welfare
City Hall
Augusta, Maine 04330

Adrien Laverdiere
69 Albert Street
Lewiston, Maine 04240
(Chairman, Board of Health and
Welfare)

William M. Lunt, Jr.
Town Manager
P.O. Box 149
Fairfield, Maine 04937

Dr. Leonard W. Mayo
Professor of Human Development
Colby College
Waterville, Maine 04901

Mrs. Charles D. McEvoy, Jr.
51 Highland Street
Bangor, Maine 04401

Ernest A. McKay
Town Manager
Danforth, Maine 04424

Leo J. Morency
Town Manager
739 Somerset Street
Rumford, Maine 04276

Michael J. Murphy
Executive Director
United Community Services of
Penobscot Valley, Inc.
611 Hammond Street
Bangor, Maine 04401

Wilfred Poirier
Executive Secretary
Maine Hospital Association
83 Western Avenue
Augusta, Maine 04330

Carleton Day Reed, Jr.
Maine State Senate
Woolwich, Maine 04579

Professor John Romanyshyn
Department of Social Welfare
University of Maine
96 Falmouth Street
Portland, Maine 04103

Rodney W. Ross
Maine State Senate
Brownville, Maine 04414

John L. Salisbury
Executive Secretary
Maine Municipal Association
89 Water Street
Hallowell, Maine 04347

Michael Schoonjans
3 Westland Avenue
Old Orchard Beach, Maine 04064

Rev. Roger Smith
9 Summer Street
Augusta, Maine 04330

George E. Sullivan, M.D.
Secretary, Board of Registration of Medicine
P.O. Box 748 (Res: RFD, Fairfield)
Waterville, Maine 04901

Robert E. Toole
The Greater Bangor Maine Labor Council
120 Essex Street
Bangor, Maine 04401

Conrad Van Hyning
RFD 2
Guilford, Maine 04443

Mrs. Mildred F. Wheeler
Member, House of Representatives
29 Pya Road
Portland, Maine 04101

Mrs. Lorraine Pinkham
40 Russell Street
Bath, Maine 04530

Mrs. Ellen Kinney
10½ Howe Street
Augusta, Maine 04330

Mrs. Gabrielle Walker
226 York Street
Portland, Maine 04103

Donald F. Fontaine
Pine Tree Legal Assistance, Inc.
65 India Street
Portland, Maine 04111

Mrs. Rita Lloyd
47 Mill Street
Augusta, Maine 04330

Charles W. Tenney, Jr.
Chief Attorney
Pine Tree Legal Assistance, Inc.
156 Danforth Street
Portland, Maine 04101

STUDY STAFF

COMMUNITY RESEARCH ASSOCIATES

Study Director

Harry O. Page, Director
for Public Welfare, Community
Research Associates

Consultant on Administrative Finance and Statistics

Henry J. Rosner, Assistant
Commissioner, New York City
Department of Social Services

Consultant on Child Welfare Services

John R. McGaughey, Director,
Division of Child Guardianship,
Massachusetts Department of
Public Welfare

Consultants on Social Service Practices

Ted Myers, Supervising Welfare
Representative (Family Services),
N.Y. State Department of Social
Services, Buffalo, New York

Mrs. Alice Sheahan, Director
Middletown District Office,
Connecticut Welfare Department

Robert F. McCaffrey, Supervisor,
Food Stamp Program, Rhode Island
Department of Social Welfare

CHAPTER I

INTRODUCTION

BACKGROUND OF THE STUDY

By executive order Governor Kenneth M. Curtis directed the Department of Health and Welfare to sponsor a study of the public welfare system of the State to determine what changes, if any, should be made in the total welfare structure, both administratively and substantively, to insure that, within the resources available, the people of the State are receiving maximum value in services for tax dollars spent. Leadership for the study was vested in a bi-partisan Task Force appointed by the Governor and composed of members of the Legislature, socially-minded citizens, municipal managers and overseers of the poor. Title 22, Section 3101 of the Maine Health and Welfare Laws provides that "The Department of Health and Welfare shall investigate and inspect the whole system of public charities in the State which derive their support wholly or in part from State, county or municipal appropriations but not including any institution of a purely educational or industrial nature."

The membership of the Citizens Task Force is noteworthy because of its broad representation of varied levels of interest and concern with social problems in the State's population. A bi-partisan body, the Task Force members represent the Legislature, the clergy, city and town managers, city and town welfare officers, selectmen, welfare recipients, voluntary social welfare agencies, labor, education, law, a legal aid society, medicine, Community Action Programs, the Maine Hospital Association, Maine Municipal Association and service-minded citizens.

The study committee was supported by and involved the cooperation of the Maine Municipal Association, the Maine Department of Health and Welfare and the United States Department of Health, Education and Welfare.

On December 12, 1967, by invitation, a representative of Community Research Associates, a non-profit social research corporation in New York City, met with a sub-

committee of the Citizens Task Force and discussed the potential areas of activity involved in the study. Community Research Associates was requested to submit a proposal for the study under which it would furnish professional consultation to the Governor's Task Force.

When the Task Force held its first meeting on December 21, 1967, most of its members had knowledge of public welfare operations in the State gained from first hand experience. They knew, for example:

1. That general assistance is a public relief program administered to needy families and individuals by a welfare officer in each of the 496 municipalities.
2. That general assistance granted families and persons with a legal settlement is paid for by the town of settlement.
3. That general assistance granted families and persons having no legal settlement in any town is paid for by the State through the State Health and Welfare Department.
4. That public assistance to the needy aged, blind, disabled and to families with dependent children is administered by the State Department of Health and Welfare through a statewide network of district and branch offices.
5. That the cost of public assistance is met through Federal grants, State appropriations and by the municipalities which pay 18 percent of the relief granted Aid to Families with Dependent Children which have a legal settlement in a town.
6. That many municipalities make supplemental general assistance payments to families and persons receiving public assistance because of the State's financial inability to meet adequately known and budgeted needs of its welfare recipients.
7. That Child Welfare Services given in behalf of children who are neglected, dependent, delinquent, handicapped or living in danger are administered and paid for by the State Department of Health and Welfare.

8. That the known needs of and demands for services by the people of Maine constitute a serious financial problem which the Governor, the Legislature, the Mayors and Councils and Selectmen are hardpressed to solve.
9. That a major financial burden is represented by public welfare expenditures which, in calendar year 1967, totaled nearly 35 million of which more than two million was spent for general assistance.
10. That there was a sound and urgent reason for Governor Curtis' order for a study of general assistance and related welfare programs.

PURPOSE OF THE STUDY

The Task Force agreed upon the following study purposes:

1. To review all State laws relating to municipal poor relief in the State of Maine; evaluate the appropriateness of the existing laws in relation to current, acceptable social welfare language and objectives; and make such recommendations as would seem desirable to modernize the general assistance statutes and improve general assistance administration.
2. To collect and analyze facts on the number and characteristics of families and individuals receiving general assistance in Maine; the nature and amount of general assistance expenditures, including costs of administration; and to make such recommendation with respect to uniform record-keeping and reporting as would provide current and accurate data on total general assistance recipients and costs.
3. To examine the structure now existing for general assistance administration in each town and city and to make such recommendations as would provide the most efficient form of organization for the administration of general assistance.
4. To analyze the functions and activities of the town and city general assistance agencies in relation to the functions and activities of the State Department of Health and Welfare to determine the suitability of the current

division of statutory responsibility as between the towns and cities and the State; the differences which may exist in the nature and amount of assistance granted eligible, needy persons throughout the State; the degree of overlapping and duplication which may exist between towns and between towns and the State; and to make such recommendations as may be found desirable to achieve functional unity; eliminate duplication and overlapping between towns and the State; and produce a coordinated, balanced system of programs between the public social welfare agencies in Maine.

5. To determine areas of unmet need in both the administration and program of general assistance.
6. To measure the potential impact upon the public social welfare programs, including general assistance, of the Federal hospital and medical insurance and extended indigent medical care programs (Titles 18 and 19 of the Social Security Act).
7. To study the settlement laws with respect to their current worth in the overall public welfare system and to make such recommendations as may be found desirable on the basis of the evaluative results.
8. To study any existing plans or programs sponsored by the general assistance agencies in the towns for the purpose of preventing dependency and promoting family and individual rehabilitation and to make such recommendations as will stimulate maximum movement toward goals of prevention and rehabilitation.
9. To study the management systems in the larger towns and cities in relation to management practices in the State Department of Health and Welfare, including fiscal planning and control; statistical reporting; office procedures; and the use of electronic data processing; and to make such recommendations as will afford simplification and improvement in procedures.
10. To review the respective town and city general assistance agencies' use of both public and voluntary social welfare agencies and resources in the state and to make such recommendations as may be found desirable to insure

the maximum use of these community-supported health and welfare organizations.

11. To develop a Maine social welfare blueprint for the guidance of the Governor, the Maine Legislature, the Task Force and State and local welfare officials, designed to provide a plan of general assistance objectives and requirements in administration and under which the taxpayers may be assured of maximum value for welfare dollars expended for assistance and service.

In addition, the following two decisions were made:

- (a) It was voted to contract with Community Research Associates of New York City to serve as consultants and to carry out the details of the study.
- (b) It was voted unanimously to adopt the following Statement of Policy which would be a focus for its further decisions and a base as to the purpose and intent of welfare legislation:

“It is the policy of this State:

1. That its social welfare programs shall provide assistance care and service to the persons of the State in need thereof and thereby promote the well-being of all the people of the State;
2. That it is the purpose of the Social Welfare laws to establish and support programs which contribute to the prevention of dependency and social maladjustment, as well as rehabilitative, preventive and protective services;
3. That assistance, care and service shall be administered promptly, with due regard for the preservation of family life, and without restriction of individual rights or discrimination on account of race, religion, political affiliation or place of residence within the State;
4. That assistance, care and service shall be so administered as to maintain and encourage dignity, self-respect and self-reliance. It is the legislative intent that financial assistance granted shall be adequate to maintain a reasonable standard of health and decency based on current cost of living indices;
5. That it is further declared to be the policy of this state to direct its efforts to the strengthening of family life for the care and protection of children; to assist and encourage the use by any family of all avail-

able personal and community resources to this end; and to provide substitute care of children only when the family, with the use of resources available to it, is unable to provide the necessary care and protection to assure the rights of any child to sound health, and normal physical, mental, spiritual and moral development.

6. That all legitimate advantage should be taken of federal funds available toward Maine's public welfare costs."

The Maine welfare statutes do not set forth any legislative guides as to the purpose and intent of the welfare laws.

THE STUDY PROCESS

The study staff met with the Task Force on January 8, 1968 and began its field work which was formally ended on March 29, 1968 with the exception of a meeting on April 26, when the Task Force listened to reports from the three consultants who visited local welfare officers. The State Department of Health and Welfare provided the study staff with office space and secretarial service. The State Commissioner of Health and Welfare and members of the Department staff met all requests for data and provided many services.

During the period from December 21, 1967 to March 29, 1968 the Task Force met seven times. Attendance was good to excellent. One member attended 7 meetings, 3 members, 6 meetings; 11 members, 5; 7 members, 4; 3 members, 3; 5 members, 2; 4 members, 1; and 2 members did not attend a single meeting. Each meeting had a planned agenda. Task Force minutes were kept. Study consultants presented findings which were discussed. Special guests were invited to present expert testimony on such matters as the settlement laws and the legal aspects of the general assistance program. Pine Tree Legal Assistance staff members served as unpaid consultants to the Task Force on matters relating to Maine's poor relief laws. The Task Force had a group meeting with representatives of voluntary health and welfare agencies. In attendance at this meeting were spokesmen for ten groups organized under Economic Opportunity and Community Action programs. By invitation, representatives of the Task Force attended an ADC Mother's Club meeting. Through arrangements by the

State Divisions of General Assistance and Family Services, members made home visits to welfare recipients and solicited their thinking on needed improvements in the general assistance program. A questionnaire seeking basic information on the administration, cases and costs of general assistance and related matters was prepared by the Maine Welfare Directors Association and mailed to each of the 496 municipal welfare officers.

A statistically valid sample of 150 municipalities with representation from each of the 16 counties was drawn and face-to-face interviews with the welfare officer in each selected locality were held by the three study consultants assigned field visits. Home visits to welfare recipients were made by the consultants when their time schedules permitted. Reports on the consultants' interviews are filed with the Task Force. Interviews were held with the heads of various State departments active in the social welfare field. District offices of the State Department of Health and Welfare were visited. Pertinent statistics were collected and available materials reviewed.

The written report and recommendations from Community Research Associates was received on May 16. Copies of the report were prepared and mailed to Task Force members for discussion at two meetings (May 28, 1968 and June 26, 1968). The project director, Mr. Harry O. Page, met with the full Task Force on May 28 to answer any questions members had to present to him in regard to his report to the Task Force.

The Task Force completed its review of the consultant's report and agreed to its preliminary recommendations on June 26, 1968. Prior to its June meeting a sub-committee of the Task Force met with the Governor to discuss the Task Force's desire to have open public hearings on its preliminary recommendations prior to submitting to him a final report. The request was agreed to wholeheartedly by the Governor.

Seven public hearings were scheduled and held throughout the State of Maine. These hearings were held in the following municipalities:

July 15 - Lewiston
July 16 - Portland
July 17 - Brewer
July 23 - Presque Isle
July 24 - Machias
July 30 - Sanford
July 31 - Augusta

Arrangements were made for advance publicity through newspaper releases and television and radio news bulletins in regard to time, place and purpose of the hearings. In addition, approximately 4,000 written invitations were mailed to special interest groups and interested public including all legislators, legislative candidates, municipal officials and community action organizations.

With minutes of its regular meetings, minutes of the public hearings and written statements received from members of the public at large, in addition to analysis of the consultant's report, the Citizens Task Force on Inter-governmental Welfare Programs met on August 9, 1968 and adopted the following final recommendations for transmittal to Governor Kenneth M. Curtis. To the knowledge of the Task Force, all persons and agencies with pertinent information and a direct relationship to the program of general assistance were seen and data and viewpoints solicited and received.

The Task Force wishes to extend its thanks and appreciation to the general public for its interest and thoughtful participation. It particularly wishes to express appreciation for the excellent cooperation of the many municipal officials including overseers of the poor, selectmen, Town Clerks, Town Managers who responded to the questionnaires and participated in individual conferences with the consultant staff. Their participation has enabled the Task Force to submit what it believes is an objective report with meaningful recommendations that can benefit all citizens of the State of Maine.

Task Force conclusions made in this report are not criticisms of individual persons or municipalities but are, we believe, valid criticisms and conclusions in regard to an antiquated system under which many dedicated people must struggle to meet needs of people and to serve their municipality and State.

GOVERNMENTAL WELFARE PROGRAMS IN MAINE

Since the Depression of the Thirties and the passage of the Social Security Act in 1935, Maine citizens, along with other Americans, have been caught up in a social welfare revolution which has produced a wide variety of welfare programs designed to provide family income when the wage earner retires, dies, is disabled or is unemployed; to provide

the necessities of life to the needy; and to promote the rehabilitation of families and individuals who are publicly-dependent or are living in poverty. Each session of Congress spawns new social legislation some of which is basic and far-reaching, such as Medicare and Medicaid and some of which is experimental in nature and directed toward resolving the great unrest in urban areas through education, job training, work incentives, improved housing, etc. The end result of this public emphasis on social welfare matters is a constantly changing, complex, and costly package of social programs about which few citizens have knowledge. The following tabulation presents factual information on selected governmental programs operating in Maine and providing income maintenance, welfare and preventive and rehabilitative services:

**GOVERNMENTAL PROGRAMS IN THE STATE OF MAINE
PROVIDING INCOME MAINTENANCE, ASSISTANCE
AND PREVENTIVE AND REHABILITATIVE SERVICES**

Program	Number of Beneficiaries	Amount of Benefits Paid
Old-Age, Survivors & Disability Insurance (Social Security)	135,441	\$113,374,728 *
Unemployment Compensation	28,352	7,726,370 **
State Welfare Assistance	34,120	32,499,334 +
Local general assistance	6,900	1,437,999 **
Economic Opportunity Programs	16,000	11,703,303 +
Title V Work Experience and Training Program	900	1,169,596 ***
Vocational Rehabilitation	1,246	535,755 +
Donated Commodity Program	14,203	410,499 +
Manpower Development and Training Act	2,392	1,250,000 **
Department of Indian Affairs	1,200	240,000 +
TOTALS	240,613	169,347,584

* For calendar year 1966

** For calendar year 1967

*** Allocated for fiscal year ending March 31, 1968

+ Fiscal year ending June 30, 1967

In examining this table it should be noted: that these programs involve nearly 25% of the state's population; that it can be reasonably assumed that the 169 million is spent in Maine and, therefore, has a tremendous impact on the state's economy; and that if the full benefits of the programs are to be realized by Maine citizens, then all public welfare employees, including local welfare officers, must have knowledge of these resources and refer eligible persons to the appropriate programs.

ORGANIZATION OF THE REPORT

This report includes a summary of the major recommendations and the findings which support them. Included is a summary statement on the findings which resulted from personal interviews with local welfare officers; information on the characteristics of general assistance recipients and a statement on new moneys required for State administration of general assistance.

The appendix contains copies of questionnaires used in the study and charts presenting data collected for the Task Force.

Report recommendations are numbered consecutively.

CHAPTER II

A SUMMARY OF THE MAJOR STUDY RECOMMENDATIONS AND FINDINGS

PRELIMINARY STATEMENT

The public relief program of general assistance which this study examines is as old as the State of Maine. Long before Maine was admitted to the Union on March 15, 1820 pauper relief was an accepted community obligation. When, in 1641, under a charter granted by Charles I, the first chartered city in the United States was established by Sir Ferdinando Gorges in what is now York, the needs of the poor were met by an overseer of the poor who acted in accordance with the Elizabethan Poor Law of 1601. Maine's general assistance laws today are essentially of a 1601 vintage. Title 22 of the Maine health and welfare laws contains a chapter entitled, "Municipal Support of the Poor: Paupers, Settlements and Support". Section 4462 of the law provides that "persons chargeable shall not be set up and bid off at auction either for support or service; but towns at their annual meetings, under a warrant for the purpose, may contract for the support of their poor for a term not exceeding 5 years".

No living person can remember when poor persons were put up for auction in Maine but the fact that, in 1968, this prohibition against auctions remains in the State's welfare laws tells us three things about the citizens of Maine: (1) that the program of general assistance is a matter of little concern to the people and their legislative representatives; (2) that the program must involve relatively few persons, otherwise it would command public attention; and (3) that, although support of the poor is accepted as a rightful duty of every municipality, the general assistance program is not considered by the productive, self-supporting citizens to be the most popular of the public services.

The State of Maine, like a chain, is no stronger than its weakest citizens and, therefore, the subject of public welfare is a matter of importance and concern. In the fiscal year ending June 30, 1967, 26 percent of the total State expenditures of more than 127 million were for health, welfare and charities purposes. The evidence produced by this study will show that general assistance administered by municipal over-

seers of the poor is inextricably woven into the pattern of assistance programs administered by the State Health and Welfare Department. In the face of the fact that public welfare expenditures are being made at the rate of nearly 35 million a year and involve the well-being of more than 40,000 men, women and children, it is obvious that this major public humanitarian industry should be well-managed, economically and efficiently operated and clear as to its goals and functions.

Today, as in the past, the 496 municipal officers who administer general assistance have no authoritative standards by which they perform their duties except for the mandates in the Municipal Support of the Poor Laws and these largely relate to settlement determination and procedures. The State pays for assistance granted persons without a legal settlement but has no supervisory authority over local administration. Unlike the assistance programs of aid to the aged, blind, disabled and dependent children in which the Federal Government participates, the cost of general assistance is a 100 percent direct burden upon the property of taxpayers in the towns and upon the general funds of the State. In the absence of any uniform standards, general assistance is granted needy families and persons on an inequitable basis throughout the state with eligibility and the amount of aid determined in accordance with the judgment and attitude of the individual town overseer and the size of the town's relief appropriation. In short, there is no organized welfare system in Maine for serving all needy families and individuals and under which the taxpayer can be assured that all eligible persons are receiving equal treatment, that adequate services are being directed toward restoring as many people as possible to self-support and that full advantage is being taken of available resources, including Federal moneys. The Task Force has concluded that it would be advantageous at this time to all citizens of Maine if its 17th century poor relief machine was replaced by a 20th century social welfare model and to this end have made recommendations to the citizens of Maine.

It is Recommended:

1. That the following policy statement adopted by the Task Force at its initial meeting be adopted by the Legislature as a preamble to welfare statutes

and as a guideline for all future decision in regard to welfare legislation.

“It is the policy of this state:

- a. That its social welfare program shall provide assistance, care and service to the persons of the state in need thereof and thereby promote the well-being of all the people of the state;
- b. That it is the purpose of the social welfare laws to establish and support programs which contribute to the prevention of dependency and social maladjustment, as well as rehabilitative, preventive and protective services;
- c. That assistance, care and service shall be administered promptly, with due regard for the preservation of family life, and without restriction of individual rights or discrimination on account of race, religion, political affiliation or place of residence within the state;
- d. That assistance, care and service shall be so administered as to maintain and encourage dignity, self-respect and self-reliance. It is the legislative intent that financial assistance granted shall be adequate to maintain a reasonable standard of health and decency based on current cost of living indices;
- e. That it is further declared to be the policy of this state to direct its efforts to the strengthening of family life for the care and protection of children; to assist and encourage the use by any family of all available personal and community resources to this end; and to provide substitute care of children only when the family, with the use of resources available to it, is unable to provide the necessary care and protection to assure the rights of any child to sound health, and normal physical, mental, spiritual and moral development.
- f. That all legitimate advantage should be taken of federal funds available towards Maine’s public welfare costs.”

GENERAL COMMENT

It is the feeling of the Task Force that such a statement speaks for itself and is in keeping with the principle that man is a dignified human being with value to society and is not a serf subject to the whims and fancies of society because he falls in financial need. It is felt that all current laws in regard to welfare should be reviewed in keeping with this policy and that any law found not to be in conformance be amended

or deleted. More specific detail in regard to proposed changes are given in a later recommendation in this report.

2. That to promote movement toward prevention and rehabilitation, provide equitable treatment to all needy persons, to multiply the value of Maine welfare tax dollars, eliminate duplication between the State and the towns and to decrease paper work, the responsibility for administration of general assistance shall be transferred from the municipalities to the State.

GENERAL COMMENT

The Task Force recognizes that state administration of a welfare program is no panacea for meeting needs of people. It overwhelmingly feels that its proposal does, more realistically, make possible the objectives of a meaningful welfare services program and makes possible the means of the citizens of Maine, through legislative action and review, to be involved in programs established to meet the needs of people. The Task Force also overwhelmingly feels that the present structure of the general assistance program has not met these needs and gives no indication of being able to meet them.

In addition, the State of Maine has failed to take advantage of the maximum Federal aid presently available to it under the public assistance titles of the Federal Social Security Act for all of its welfare programs. Maine is losing almost \$6,000,000 a year in Federal aid which could be used to improve welfare services to its people. By taking advantage of the option under Section 1118 of the Social Security Act, the State could receive approximately 70 cents in Federal funds of every dollar spent in the next fiscal year on a greatly improved welfare program. The need for these additional welfare funds exists as will be specified below. The present expenditure by the Maine taxpayer, both local and state, of \$13,688,000 would provide matching funds for a Federal expenditure of \$26,768,000 or \$5,820,000 in additional welfare benefits. Table I and Table II compares the distribution of welfare costs in 1967 with estimated expenditure in 1968-1969 under the centralized plan advocated in this report.

TABLE I
WELFARE EXPENDITURES – MAINE DEPARTMENT OF HEALTH AND WELFARE
JANUARY 1, 1967 - DECEMBER 31, 1967

Program	Total	State Share	% State	Local Share	% Local	Federal Share	% Federal
Aid to Aged, Blind & Disabled	8,989,590	2,144,545	24%	-	-	6,845,045	76%
Aid to Families with Dependent Children	7,446,721	938,110	13%	842,761	11%	5,665,850	76%
Medical Assistance	9,941,079	3,575,114	36%	-	-	6,365,965	64%
Child Welfare	2,048,440	2,035,540	99.4%	-	-	12,900	0.6%
General Assistance	2,143,673	705,674	33%	1,437,999	67%	-	-
Total Assistance	31,601,878	9,398,983	30%	2,280,760	7%	19,922,135	63%
Administration	3,862,794	1,581,175	41%	427,349	6%	2,065,919	53%
Total All Programs	34,643,946	10,980,158	31%	2,708,109	7%	20,955,679	62%

TABLE II
FISCAL EFFECT IN 1968 - 1969 OF ADOPTING PROPOSAL
FOR STATEWIDE WELFARE OPERATION

Aid to Aged, Blind & Disabled			Federal	State
Assistance	9,720,000	69.92%	6,796,224	2,923,776
Administration	1,193,000	62.5%	745,625	447,375
	10,913,000		7,541,849	3,371,151
Aid to Families with Dependent Children				
	8,028,000			
	2,000,000			
Assistance	10,028,000	69.92%	7,011,578	3,016,422
Administration	1,690,000	62.5%	1,056,250	633,750
	11,718,000		8,067,828	3,650,172
Medical Assistance Program				
	12,000,000			
	2,000,000			
Assistance	14,000,000	69.92%	9,788,800	4,211,200
Administration	272,000	62.5%	170,000	102,000
	14,272,000		9,958,800	4,313,200
General Assistance				
Assistance	400,000		-0-	400,000
Administration	100,000			100,000
Child Welfare				
	2,200,000			1,100,000
	(1,100,000 @ 69.92%		769,120	330,880
	860,554 @ 50%		430,277	430,277
	3,060,554		1,199,397	1,861,157
	40,463,554		26,767,874	13,695,680

OVERALL FINDINGS:

1. That the municipal program of general assistance is entangled in the State programs of public assistance which are severely handicapped by inadequate funds and, as a result neither system is satisfactory.
2. That in contrast to the Twentieth Century Social Security Act laws which govern the administration of aid to the needy aged, blind, disabled and dependent children, Maine's support of the poor laws are archaic and obsolete and dictate an administrative attitude which hinders movement toward prevention of social disorders and family rehabilitation.
3. That, if the State were to expand its programs, adequately finance them and extend its current income-maintenance methods of administration, the number of "pure" general assistance cases, i.e., those in need and ineligible for a Federal-State program, would be minimal in number and cost.
4. That in the absence of mandated general assistance standards there is no true system of general assistance administration but 496 separate general assistance administrative units.

SPECIFIC FINDINGS:

The present welfare system involves duplication of administration of welfare programs between two levels of government, the State and the towns. First, there are many cases where the towns supplement the Aid to Families with Dependent Children grants issued by the State because of their inadequacy. Secondly, the delay in accepting AFDC cases for four months means that these must be carried as General Assistance cases for this period. Similarly, the limitations on the acceptance of unemployed fathers means that these cases must be carried as general assistance without the benefit of Federal aid.

Finally, the State charges back to the towns 18% of the cost of AFDC (towns where the recipients have settlement). Conversely, the towns charge back to the State the cost of care of persons on general assistance who lack settlement in their towns of

residence. In the State headquarters of Health and Welfare, 17 employees are engaged in what is basically a useless function irrelevant to the assistance granting process. It will be noted on Table I that the local share of AFDC is 11% rather than 18%. This is due to the fact that in almost 40% of the cases this process ends in a blind alley of a family without settlement and therefore no basis for charge back. This result further emphasizes the futility of the settlement procedures. These charges and counter-charges consume an immense amount of time both locally and in the state office since each case has to be separately analyzed as to its legal settlement. Centralization of all welfare administration and payments in the State would immediately eliminate an immense amount of paper work and time that could better be utilized in rehabilitation services to welfare recipients. For administrative costs involved in a plan for State administration of general assistance, see Chapter IV.

3. **Although the Task Force recognizes the need for planning and recommendations for fiscal funding, it is limiting its recommendations to State financing with no local tax assessment. It recommends further that because of the complexities of financing the vast multitude of State and local programs the matter of funding be considered by the Governor's Task Force on Municipal and State Revenue.**

FINDINGS:

The Task Force considered for a major proportion of its time various alternatives including an annual per capita assessment to be paid into a State welfare fund to be used exclusively for welfare purposes. It was found that some communities are in a position where their per capita costs are under the average per capita cost of \$2.70, although the majority are well above this cost. In addition, an assessment would be difficult in that municipalities would be taxed for something over which they have no administrative voice. The Task Force feels that the best alternative would be for the State to give relief to the local taxpayer by absorbing this cost.

4. **That the municipal officers shall appoint for a three year term in every municipality where there is no organized full-time public welfare office a**

Municipal Service Officer who shall come under the supervision of the Commissioner of the State Department of Health and Welfare who shall also fix and pay the compensation of the Municipal Service Officer. The Service Officer's duties shall consist of:

- a) authorizing emergency general assistance to any family or individual found in need;
- b) bringing the family and/or individual and problem to the attention of full-time Department of Health and Welfare staff for planning and carrying out continuing services;
- c) making available applications and information in regard to public and voluntary social services agencies and programs which might be available and/or requested by the individual and family;
- d) immediately following through on referrals as requested by individuals and/or families.

FINDINGS:

The purpose of this recommendation is twofold: First, to insure that assistance is available to needy persons at night and over weekends when public offices are normally closed; and, secondly, through the information and referral service performed by the Municipal Service Office, to give prompt service to municipal residents and, at the same time, make available to the State helpful facts on welfare applicants which the Municipal Service Officer may be able to contribute.

Most applications for general assistance are emergent in nature and of short duration. It is anticipated that almost all emergency requests will be adequately met with a grant of assistance not in excess of \$20.00 per family. Authorizations for physician's services or hospitalization will not require an immediate relief payment.

Although the original appointments are made by or through the municipal officials, pay evaluation and accountability for performance is vested in the State Commissioner of Health and Welfare or his designated representative within the Department. At the same time the Department of Health and Welfare should continue to explore and

develop ways and means of making its ongoing services available on a 24 hour a day basis insofar as manpower permits.

5. **That, effective on the date of a plan for State administration of general assistance all municipal welfare officers and workers employed full-time in an organized municipal welfare department shall, on a non-competitive basis, be transferred to the employ of the State Department of Health and Welfare.**

The duties of the transferred municipal employees shall be determined by the State Commissioner of Health and Welfare and, jointly with the State Department of Personnel, he shall fix the compensation of the transferred employees.

FINDINGS:

Out of the 496 local welfare offices, there are 20 municipalities which employ full-time welfare directors and in the 20 offices are 14 social workers and 21 clerks. Included in this group are several veteran employees whose longtime experience would be of great value to the State. A rough screening of the professional workers indicates that a total of 22 (12 welfare directors; one social work supervisor and 9 social workers) would probably accept State jobs. Federal regulations require that persons working with public assistance applicants or recipients possess a college degree. The majority of the municipal social workers meet this educational requirement. It is anticipated that a big majority of the 21 clerks would accept employment in a State district office in their respective localities.

6. **That, for the purpose of reducing administrative costs in State and municipal welfare departments, the settlement laws shall be abolished and families and persons in need of assistance, service or care shall make application in their municipality of residence or wherever they are found in need.**

FINDINGS:

With respect to public welfare services, it is felt that the Task Force, the Governor and the Legislature can make a major contribution to the public good by voting to

abolish the settlement laws. Born of a period in English history when feudal barons sought to keep serfs in bondage within their walled estates, the settlement laws have for more than 150 years been a costly and frustrating element in Maine's poor relief system. The settlement laws determine the pocket of government out of which a general assistance grant is to be paid. Countless hours and hundreds of thousands of dollars have been spent in administrative costs in determining the settlement status of relief applicants and recipients. Welfare officers have compromised themselves and other officials in seeking to avoid acknowledging settlement status for a needy family or person. Families have been urged to accept relief in order to keep them in a non-settled status and a financial liability of the State.

The settlement laws get relief to no one. They are an archaic remnant of an obsolete pauper relief system which Maine should abandon. The Legislature has recognized the worthlessness of these settlement laws and in 1957 and 1959 established special committees to study them. In the absence of any overall plan for reorganizing the State's welfare system the committees failed to recommend abolishment of settlement and the useless game has continued. If any plan for improving welfare administration is adopted, then a basic part of the plan should be abolishment of the settlement laws.

In general, a person who lives for five consecutive years in a town and is self-supporting gains a settlement and any relief required by the person is a charge upon his town of settlement. Relief granted by a town to a person without a settlement is reimbursed by the State Department of Health and Welfare. Of \$2,143,673 spent for general assistance in the calendar year 1967, one-third or \$705,674 was the State's share for non-settled cases. Determination of the State's responsibility involved countless hours of investigation, correspondence and telephone calls between State personnel and local welfare officers.

The average taxpayer has no knowledge of what the settlement laws cost him. For the larger cities in Maine, determination of settlement and the maintenance of settlement records require daily attention by the welfare director and members of his staff. For example, if the veteran welfare director of the City of Portland is asked about the monthly average of general assistance cases in the city in 1967, he produces a ledger which shows a monthly average of cases served of 215 and this total is broken down to

show that, on the average, 80 cases were non-settled and a charge upon the State; 51 cases had settlements in other towns; and 84 cases had settlement in Portland. The longtime Corporation Counsel of the City of Portland knows more about the settlement laws than any other person in Maine and his knowledge comes from years of study and struggle with the State and other municipalities. He advocates abolishment of the settlement laws.

It is worth noting that settlement is not an eligibility factor in the public assistance categories of Old Age Assistance, Aid to the Blind, Aid to the Disabled and Aid to Families with Dependent Children which are administered by the State. The municipalities pay 18% of the cost of Aid to Families with Dependent Children with a settlement in their town. There are arguments between the State and the town over settlement status in AFDC cases but the State has the final word and this fact causes some towns to feel that they are forced to expend funds over which they have no control.

If the proposed plan for State administration of general assistance is adopted, then settlement ceases to be a factor.

The settlement laws have no useful place in today's public welfare system and should be abolished.

7. **That the State's Title XIX Medicaid Program be immediately extended to cover all of the medically needy in Maine and shall include payment for drugs. In addition, the State should develop plans for payment of expenses of dental care and eye care not covered by the Federal-State Title XIX program.**

FINDINGS:

The State Department of Health and Welfare now has legislative authority to provide comprehensive medical care under Title XIX of the Federal Social Security Act to both the recipients of public assistance as well as the medically indigent. This is the title under which the Federal government will pay in Maine 69.92% of the costs of all medical services rendered to all of the medically indigent in the State in the federally related categories i.e., over 65, under 21, disabled, or blind together with hospital care for the parents of children. However, the State of Maine has elected to limit its partici-

pation in the Medicaid Program to persons in receipt of federal categorical public assistance and to children receiving foster care. Costs of drugs and dental care are not met in the State's current Medicaid Program. Recipients of public assistance must either use their food money to purchase drugs or apply to the town welfare officer for a drug order. In practice this means doing without either food or the drug unless the town welfare officer responds favorably to an application for a drug order. Unfortunately, there is no uniformity of medical plan from town to town. One town may be more liberal or humane than another. Thus, under the present system, Maine will continue to have two standards of medical care in a town. The family on State administered public assistance is likely to receive better care than the family not on assistance. The family that is encouraged to achieve a status of self-support may find itself worse off with respect to medical care. This will hamper movement toward the rehabilitation of the family on assistance. Some families with expensive medical histories may resist employment opportunities because with it will come the need to pay for expensive treatments which they cannot afford and which the town will not provide if they are working and which is theirs for the asking as long as they remain on public assistance.

The Medicaid plan should be immediately expanded to include all medically indigent. Under the Title XIX formula the \$800,000 spent annually for hospital and medical care by the towns could become a base for a \$2,500,000 medical expenditure because of matching Federal funds at the rate of \$2.14 of Federal money for each Maine dollar.

The participation of the State Department of Health and Welfare also should not be limited to items covered by the Title XIX program but should also provide for cost of dental care and eye care not covered by Title XIX program. This should be done as part of its administration of a statewide general assistance program.

8. **That the State welfare regulations be amended and promulgated for the purpose of providing all individuals and families with financial assistance adequate to maintain a reasonable standard of decency and health. In addition, funds should be expended to allow the Department of Health and Welfare to meet full need in its Aid to Families with Dependent Children program in accord with the above standards rather than limit its participation to a maximum**

dependent on the number of children in the family (\$250 total maximum). This would decrease the amount of general assistance funds now expended to supplement such grants. In addition, the Department of Health and Welfare should permit public assistance recipients to retain maximum amount of earnings available under Federal regulations.

FINDINGS:

The regulations limit the amount of assistance to an eligible AFDC family to a maximum of \$80 a month to a mother and one child, \$30 for the second child and \$27 a month for each child thereafter not to exceed a total of \$250. The result of this limitation is that over 500 of the Dependent Children families which do not receive adequate assistance are forced to apply to the towns for additional support through the general assistance program. Many families are, moreover, denied supplemental assistance although they need it. Those families which are denied essential supplemental aid must suffer in silence. The State Department of Health and Welfare estimates that the current deficit in adequate grants to these needy mothers and children is about \$2,000,000 annually. There is no basis for exploring rehabilitative measures leading to self-support with a family trying to exist on a near-starvation level. Until recently a substantial increase in the grants would have been primarily at State expense, since Maine is within \$2 of the Federal reimbursable ceiling of \$32 per grantee, per month. This is no longer a valid reason for holding the grants below a minimum adequate standard of health and decency.

The deducting of all earnings dollar for dollar allows no incentive for parents and children to make use of educational and employment opportunities or to plan for legitimate expenses which are not allowed for in the budgeted grant. Such exemption of earnings is mandatory by Federal regulation as of July, 1969.

9. That the State Department of Health and Welfare file a plan with the United States Department of Health, Education and Welfare under which the State can apply the Title XIX reimbursement rate of 69.92% to assistance expenditures. This is contingent upon the adoption of a reasonable standard of decency in its assistance standard and the meeting of these standards by

a full money grant rather than its present system of meeting only partial need on a minimum standard of decency.

FINDINGS:

Under the new Section 1118 of Title XIX, added to the Social Security Act in the summer of 1965, states were given the option of applying the Title XIX medical formula to assistance grants. Taking the option eliminates the Federal ceilings on grants and enables the Maine taxpayer to limit the amount of the increased cost to 30 cents on the dollar.

Aid to Families with Dependent Children money payments next year are estimated to total \$8,028,000 at the present rate of expenditure. It is estimated that \$2,000,000 is the minimum cost of providing full grants. Under existing formulas only \$300,000 of this sum would be subject to Federal sharing. Therefore, \$1,850,000 of the increase would have to come from State funds. Under the 1118 option only \$600,000 would come from Maine funds or a saving to the Maine taxpayer of \$1,250,000 annually. This is a situation where the State of Maine can be on the side of the angels by providing more adequately for its deprived women and children and still save money for its taxpayers.

10. That adequate appropriations be made to expand the public assistance program of Aid to Families with Dependent Children of Unemployed Fathers by open-ending the appropriation of relief for such families to be shared in by the Federal Government to the extent of 69.92%.

FINDINGS:

This recommendation is made in accordance with the principle stated earlier in this report that it is prudent and proper for the State of Maine to take maximum advantage of all Federal funds which are legitimately available for sharing in relief costs. Currently, unemployed fathers and their families can legally be granted assistance by the State. However, the number of such families on Federal assistance has been limited. Four hundred families or one-sixth of the general assistance caseload consists of such

families and, of the total relief granted, 69.92 cents of every dollar spent can be in Federal money. There should be no limitation of aid to this group. If there were a recession, the number of unemployed fathers would multiply. Therefore, adoption of this recommendation would make it much easier for the State to weather an economic storm. It is the Task Force's understanding that the Department of Health and Welfare plans to have this program implemented statewide by October 1, 1968.

11. That, as a means of further reducing the need for, and cost of general assistance, the State Department of Health and Welfare establish a system of pre-investigation or presumptive grants in the Federally-aided assistance categories, accompanied by a system of daily special grants under which a prorated check is issued to the first of the month in which the full grant can be made effective.

FINDINGS:

At the present time the State Department of Health and Welfare does not accept cases in the Federal categories until the elements of Federal eligibility have been established for the category. Furthermore, assistance is granted near the end of the month, the 27th of the month, for the period beginning the first of the month. Thus months may elapse before assistance is granted although the need is immediate. During this waiting period grocery orders and rent orders financed from general assistance have to be issued by the towns at 100% local or State expense depending upon settlement. Such assistance would be Federally non-reimbursable even if it were issued by the State Department of Health and Welfare because it is restrictive in character. Only cash grants are Federally matchable.

Federal law permits the issuance of assistance on a presumptive or pre-investigation basis and allows three months to establish eligibility for Federal matching. A municipal Service Officer, (see Recommendation No. 4) for example, could grant immediate assistance on an emergency basis through a check written against a central bank account to a family where the man has disappeared or the individual alleges he is over 65, or appears to be permanently disabled, on a pre-investigation basis pending proof of the required elements. The Federal funds would be available retroactively when the

proof is accomplished. Since most applications will fit into the Federal categories under the recommendations in this report, the failure to establish a system in accordance with these principles has resulted in the loss of considerable Federal reimbursement. However, this requires additional systems planning related to the State's Automatic Data Processing System so that such payments could be related to the regular payments for Federal claiming purposes.

12. **That the State Department of Health and Welfare provide additional full-time assistance to its Data Processing Systems Analyst and instruct its program divisions to move more energetically in installing the new Data Processing Systems.**

FINDINGS:

An examination of the system for making welfare payments discloses that Maine has not yet realized its potential for reducing clerical work or producing reports for planning through Data Processing. It has a total system on paper which requires implementation. The sophisticated equipment available to it is not being fully utilized. The equipment is presently in the State Comptroller's office. That office should be requested to cooperate with Health and Welfare more imaginatively and diligently in installing the new system.

13. **That the State Department of Health and Welfare immediately submit plan material to the Federal government to provide AFDC matching for the foster children's program.**

FINDINGS:

At the present time there is no Federal contribution for foster care payments. However, under the new Federal law committed children in foster care may be reimbursed at the AFDC rate if they would have been eligible or potentially eligible for an AFDC grant. It is estimated that 50% of all foster home grants could qualify for matching Federal money. Under the option of 1118 this would be 69.92%. However, this reimbursement is not automatic. All foster care cases will have to be reviewed and a case record reconstructed to support this finding. Time is of the essence in realizing

this additional aid.

14. **The Declaration of need method in the Federal adult categories should be extended to the Aid to Families with Dependent Children category.**

FINDINGS:

The projected budget for 1968-1969 allows an increase of \$252,760 for administration, \$3,862,794 to \$4,115,554. This increase is required to take care of normal upward adjustments in salaries. It does not allow for an increase in staff. It is our view that no increase in the total number of positions is required although positions may have to be modified as to title. Maine has pioneered very successfully in its Declaration of Need Project for the Federal adult categories, and this method should be extended to the AFDC category. This is the system under which need is determined by an examination of an affidavit by a technician rather than by a caseworker. In the near future the grants will be calculated by the computer. This is under way and should be expedited. The emphasis will be on delivery of income for a large part of the caseload. The cost of delivering such income should be less than that presently being expended. This change should be reflected in a reduction in the number of social workers. Future emphasis should be on utilizing the services of trained social workers to treat the problem families that can be helped by such services. Without expanding administrative costs, the Department should be able to take on this program, by increasing the number of technicians simultaneously reducing the number of caseworkers. Along with this development, there should be a plan for raising the number of trained social workers to treat the problem families. All this not only can be accomplished within the present administrative budget but it will also be a Federal requirement in the near future. Action to accomplish this result need not await the general reorganization contemplated by the foregoing recommendations.

The Task Force has been informed that this recommendation has been started prior to this report and will be in effect statewide by October 1, 1968. The recommendation is being made a part of this report to show the Task Force's endorsement of such action.

15. That, if a plan of State administration of general assistance is adopted, the Indian Tribes of Maine shall, with the cooperation of the State Commissioner of Indian Affairs and with the approval of the tribal councils be requested to participate in the development of a plan under which the benefits of a comprehensive, centralized assistance system may be made available to all Indians needing them.

FINDINGS:

The Department of Indian Affairs was established in January, 1966. Prior to this time jurisdiction over Indians was lodged in the State Department of Health and Welfare. Currently, the Indian population consists of some 1,200 persons who are about evenly distributed between the Penobscot Tribe in Old Town and the Passamaquoddy Tribe located on two Reservations: the Pleasant Point Reservation at Perry and the Indian Township Reservation (with communities at Princeton and Peter Dana Point).

The Department's current budget is \$240,000.

There are no welfare laws relating specifically to Indians. An Indian on a reservation and in need of relief applies to the Indian Development Specialist who grants aid in the form of a food voucher drawn on the applicant's store of choice. At one time a Penobscot got free medical care regardless of financial status. Currently the Indian Development Specialist can authorize such care on the basis of need. The Passamaquoddy have what amounts to a blanket medical coverage as everyone is needy. The Passamaquoddy in need of medical care goes to a doctor of his choice. The Department receives a bill from the doctor for his service plus the cost of transportation and drugs. If the person is admitted to a hospital, then the Department is billed directly. The average per capita income of a Passamaquoddy, including welfare grants, is \$430 a year. It is estimated that 70% of the total Department appropriation of \$240,000 is spent on general assistance. Indians are eligible for and are granted public assistance. The State Department of Health and Welfare grants assistance to needy families and persons regardless of race or color and, therefore, has no statistics on Indians. In February, 1968, there were 256 persons of the Indian race in Maine who were receiving public assistance payments (212 AFDC; 44 aged, blind or disabled).

Under a longtime established practice milk is delivered daily to the Passamaquoddy on their reservations at a monthly cost of about \$2,000. It would appear that milk is delivered to families regardless of their economic status.

The legal settlement laws apply to Indians and complicate the financing of general assistance.

A Maine Indian is deemed to never gain a legal settlement regardless of the length of his residence in the State and regardless of his self-support status.

If a family headed by an Indian and not living on a reservation is in need of relief, then application is made to the town of residence; any aid granted is a charge upon the State.

A Penobscot Indian woman on a reservation and married to a non-Indian or a Canadian Indian and in need of relief must go to a town overseer of the poor. If she is a Passamaquoddy, then the State Division of General Assistance is contacted and if relief is authorized, then the State Division of General Assistance pays for relief granted.

If an Indian woman who is married to a white man, and during her marriage becomes in need of relief, then application is made to the town of settlement of the husband and if he is non-settled, the State Division of General Assistance reimburses the town for aid granted.

The schooling of Indian children off a reservation is a responsibility of the town of residence of the child.

There is general agreement that the current method of administering general assistance to needy Indians could and should be strengthened. The recommended plan for State general assistance administration could result in benefits to the Indians. Any revised plan should continue to make available general assistance to any Indian falling in need within the State of Maine as it does for non-Indians.

- 16. That the Health and Welfare laws of the State shall be amended to provide that any person who is denied general assistance or is not satisfied with the amount of general assistance allotted to him by the Department of whose application is not acted upon with reasonable promptness shall have the right of appeal to the Commissioner who shall provide the appellant with reasonable notice and opportunity for a fair hearing. Said Commissioner or a mem-**

ber of the Department designated by him shall hear all evidence pertinent to the matter at issue and render a decision thereon within a reasonable period after the date of the hearing. When the evidence in the case is heard by a person other than the Commissioner, the decision shall be rendered in the name of the Commissioner.

FINDINGS:

During the deliberations of the Citizens Task Force, its legal consultants pointed out that the right of appeal and fair hearing is provided by the State Welfare laws to public assistance applicants or recipients who are dissatisfied with the action taken by the State Health and Welfare Department with respect to their applications or the amount of assistance but that the same right is not provided by law for general assistance applicants or recipients. The Task Force was unanimous in its belief that the State welfare laws should be amended to provide this basic right.

In making this recommendation the Task Force gave first priority to meeting a basic need not now met. Secondly, it recommends after review of the fair hearing structure, consideration be given to ways and means of speeding up the overall hearing procedure and that the total procedure be reviewed in light of the possibility of having an "impartial" hearing panel not directly associated with the Department to whom the appeal can be made if dissatisfaction continues to exist after a fair hearing by the Commissioner of the Department of Health and Welfare or his delegate. At present the only resource is through the courts which is time consuming and of great expense to the appellant.

17. **That the State laws pertaining to general assistance and so-called "paupers" be revised to assure that all individuals found in need in the State of Maine who are unable to live in reasonable decency and health without assistance shall: a) have their right to assistance defined with reasonable specificity by statute or regulation and b) have the same rights, privileges and immunities as are enjoyed by other persons.**

FINDINGS:

In a statement presented to, and filed with, the Citizens Task Force and entitled “Some Legal Aspects of Maine’s General Assistance Program”, legal consultants described current legal trends, including recent constitutional rulings that “have created a climate of legal thought quite different from that which existed at the time the present law was enacted”.

Among the legal trends cited are those which hold:

1. That the government should not be allowed to impose any conditions that would be unconstitutional if imposed on persons not on welfare.
2. That government has a duty to provide assistance to those in need, and that from the existence of a duty arises a right in the individual.
3. That Maine’s support of the poor law contains provisions which authorize “both a direct and a subtle means for exerting strict control over the welfare recipient. For example:
 - a. Section 4459: Makes criminal the refusal of a recipient to perform employment directed by the town. Failure to perform employment is not a crime for non-recipients.
 - b. Section 4464: Permits a pauper to be forcefully placed in a union farm.
 - c. Section 4464: Defines the liability of relatives for support of a pauper and makes the relative responsible to a town that provides for it.
 - d. Section 4470: Provides for the removal of State paupers and assumes that the individual is not free to live where he chooses.
 - e. Section 4480: Sets up the coercive authority to implement removal of a pauper.
 - f. Section 4484: Makes it a crime to be intemperate and a pauper.
4. That basic equal protection means that “legislation cannot be arbitrarily applied to some and not to others”,
5. That the provision of constitutional due process for welfare recipients would include the following essential procedural ingredients:
 - a. Standards. The standards and guidelines that determine how and what a

recipient is to get should be formally promulgated and distributed so as to be available to all administrators as well as the public.

- b. Notice. Procedural fairness depends on the concerned party being made aware that action is to be taken and alerted to the “how’s, when’s and where’s”.
 - c. Hearing. The most influential matters at a hearing are the disposition of the officer making the decision, the reliability of the evidence used to base the decision and the form of representation for the individual.
 - d. Decision. The decision has to be understandable to the individual and given some concrete form of expression in order for review, which will be necessary in some cases, to be meaningful.
18. In order to help meet for all families and individuals the right to an adequate diet the Department of Health and Welfare should explore ways to effectively utilize the food Stamp Program, Donated Commodities Program and/or any other programs that might be devised to provide sufficient food for adequate nourishment. Such programs make available to all low income families whether or not receiving general assistance or other categorical grants a method of attaining a more adequate diet. In addition, the Department of Health and Welfare should work closely with other agencies and the public in planning and developing literature, formal and informal classes on dietary education and any other means available to help persons in planning and preparing meals on low income.

FINDINGS:

Although the Task Force studied advantages and disadvantages of both the Food Stamp Program and the Donated Commodities Program, it did not feel that the advantages of one outweighed the other program to the extent the Task Force could recommend one program over the other.

Welfare officials in Maine have had years of experience with the programs under which the U.S. Department of Agriculture makes surplus foods available to welfare and low-income families. The oldest program is that of Donated Commodity Distribution

which is still in operation in the State. At its peak in April, 1959 there were 62,500 individuals served. Currently the program serves less than 15,000 persons. The decline in the program is not because donated foods are unavailable but because municipalities do not wish to pay costs of transportation, storage, handling and record-keeping. Available commodities (which vary from month to month) are cheese, oleo, dry beans, corn meal, flour, canned chopped meat, dry milk, peanut butter, raisins, rice, shortening or lard and rolled oats or rolled wheat. The estimated retail value of foods distributed has been \$7.00 per person per month.

During the past two or three months there has been a decided increase in the amount and type of commodities available from the Department of Agriculture for distribution including fruit and vegetable juices, canned vegetables, evaporated milk, canned whole chicken, scrambled egg mix and instant chocolate milk drink. By October, 1969 the estimated retail value of foods distributed will be \$12 per person per month. The Department of Health and Welfare is now taking steps to maintain statewide inventory at a more stable level so as to cut down on storage and handling costs to the municipalities. There continues to be no way of resolving costs of transportation to municipalities.

The Food Stamp Program which is in effect only in Androscoggin County is a method for distributing commodities through the normal channels of trade, the retail grocery store. Welfare authorities certify the families and persons eligible for the program. Participation requires that the eligible party use that portion of his income set aside for food to purchase (usually through a bank) food stamps. The food stamps are issued in accordance with family size and in an amount which increases food purchasing power on the average by one-third (in large families it is doubled). The food stamp holder goes to a store of his choice and up to the value of the stamps buys foodstuffs of his choice (non-food items, such as soap, toilet tissue, etc. are excluded from stamp purchase).

Of Maine's 240,245 families (1960 Census) 124,650 have incomes of less than \$5,000 a year. On a conservative estimate, one-third or 41,000 families are potentially eligible for the stamp or donated commodity program. In addition, one-third or 26,000 single individuals have potential eligibility or a grand total of 66,000 family-individual eligibles. It is estimated that 50 percent of those eligible will buy stamps. Based on

operational costs in Androscoggin County, the State cost of a statewide Food Stamp program would be \$200,000 a year for State administration plus a charge of twenty-five cents for each stamp transaction amounting to \$99,000.

Under the Food Stamp Plan, the eligible family or person can receive more food, has a wider choice of foodstuffs and can buy when he chooses. For the municipality there are no costs involved. Disadvantages of the Food Stamp Plan are that not all grocery stores participate in the plan; possession of stamps mark the holder as a person of low income; and, as stamps can be bought only with cash, careful budgeting is required on the part of the low income purchaser; and persons residing in rural areas face a transportation problem to purchase stamps.

- 19. That, for the purpose of helping public assistance recipients manage their assistance allowances, the responsible State administrative agencies (Department of Health and Welfare, Comptroller, Treasurer, etc.) devise procedures so that the method of payment be changed from the present practice of monthly payments to semi-monthly payments.**

FINDINGS:

Public assistance payments to eligible families and individuals are made monthly in cash. None of the payments exceeds a minimum adequate allowance and for families the amount which the State can grant is below the known budgeted family need. To so manage an insufficient sum of money as to have it buy necessary food, clothes, shelter and other basic necessities for a month requires careful planning and great skill. If assistance payments were made every 15 days instead of monthly, the planning-budgeting problem of the welfare recipient would be somewhat relieved. With the automated machines now used by the State Controller and with cooperation from the State Department of Health and Welfare, a changeover from monthly to semi-monthly payments could be accomplished with little added cost to the State and Federal governments.

- 20. That following recommendations be sent to the Governor in relationship to the Child Welfare program in Maine.**

“In attempting to carry out the mandate of December, 1967, i.e. (a) find a sound and more equitable means of financing welfare programs; and (b) strengthen the preventive and rehabilitative components of local and State programs for dependent people, the Task Force on Intergovernmental Welfare Programs recognized the vital part that an adequate child welfare program plays in the realization of these objectives. In the long view no aspect of the entire welfare program of a state has a greater potential in preventing adult dependency than well-financed, properly staffed and effectively administered child care services. The Task Force realized, however, that it was not prepared nor had it been specifically directed to undertake a thorough study of the child welfare services of the State. In spite of this, certain observations have been made on child welfare in the course of our study which we believe are fundamental and germane to strengthening the overall program. We are presenting these observations in a separate memo attached to this report and addressed to you with the recommendation that a separate and thorough study be made of child welfare services of the State at an early date.”

CHAPTER III

RESPONSE TO QUESTIONNAIRES AND INTERVIEWS

EXPLANATORY STATEMENT -

Data Recorded on a Questionnaire by 253 Welfare Officers

At the outset of this study a questionnaire was prepared by the Maine Welfare Directors Association and mailed to the 496 municipal welfare officers. The purpose of the questionnaire was two fold: (1) to collect factual information on the administrative and program operations in the municipalities; and (2) to get a true count of the number of families and individuals granted general assistance during the year 1967 and the total amount of assistance granted. This latter purpose was felt desirable because no one in Maine knows the number of persons receiving general assistance or the amount of relief granted. The State Department of Health and Welfare requests a monthly report from each municipality but the rate of return is from 55 to 60 percent. A second follow-up request for return of the study questionnaire was mailed to the local welfare officers.

THE QUESTIONNAIRE RETURNS

There were 253 or 51 percent of the 496 municipal welfare officers who completed the questionnaires and returned them. A total tabulation of the returns will be found on the following pages of this report. The basic question as to the size and cost of general assistance in Maine remains unanswered. It should be noted, however, that the 253 municipalities reporting contain 75 percent of the State's population and, therefore, offer a valid base for analysis and observation.

ANALYSIS OF THE DATA

An analysis of the data on the questionnaires shows:

- A. With respect to the incidence of assistance in the state
 1. That 29 towns granted no general assistance in 1967.
 2. That 32 cities and towns, 5,000 and over in population, had 48% of the

total general assistance cases and spent 58% of the total assistance expenditure.

- B. With respect to medical care
 - 1. Of a total of \$1,941,142 spent for General Assistance, the sum of \$709,513 or 32 percent was expended on medical care (hospital care, physician's services, medication).
 - 2. Of a total of \$1,941,142 spent for General Assistance, the municipalities expended \$192,833 or 10 percent for medical payments which supplemented Public Assistance programs.
- C. With respect to reasons for granting general assistance
 - 1. Of total of 11,469 cases on which reasons for granting assistance were reported, 6,265 or 55 percent of the cases granted aid were State Public Assistance cases for which the State had basic responsibility but was unable to meet full budgeted need.
 - 2. Of total of 11,469 cases, there were 2,158 or 19 percent in which aid was granted because of a health problem (illness or disability).
 - 3. There were 1,683 or 15 percent of the total cases granted aid in which the reason for assistance was loss of support of the father or husband. Of these cases 1,336 or 12 percent were potential AFDC because of the presence of children who were dependent because of the loss of support of the father.
 - 4. Of the total of 1,086 cases granted relief because of unemployment, an estimated 543 or 50 percent of the total general assistance cases would be potential AFDC recipients provided the State were to expand its AFDC-Unemployed Father program.
- D. With respect to municipal costs for State public assistance programs
 - 1. General Assistance payments, other than medical care, were made to supplement Public Assistance programs in the amount of \$253,602 or 13 percent of the total expenditure of \$1,941,142.
- E. With respect to the attitude of welfare officers toward public welfare
 - 1. In the succeeding pages of this report will be found comments by municipal welfare officers as recorded on returned questionnaires.

OBSERVATIONS DRAWN FROM THE QUESTIONNAIRE INFORMATION

From a study of the information recorded on the questionnaire, it is reasonable to observe:

1. That for approximately 460 of the 496 municipalities the duty of administering general assistance is not a major problem but a part-time responsibility.
2. That the costliness of medical care can create a financial crisis in a small town, with one serious case of illness wiping out the town's assistance appropriation.
3. That, if through increased Federal grants, adequate State funds were available for:
 - a. Meeting full budgeted needs of public assistance recipients;
 - b. Absorbing the 18% AFDC chargeback to municipalities;
 - c. Paying the cost of medical care for public assistance and general assistance recipients;
 - d. Extending the AFDC - Unemployed Father's program;
 - e. Abolishing the AFDC waiting period of four months;then the general assistance caseload would be reduced by 90 percent.
4. That, of the remaining general assistance cases and based upon an analysis of the total Portland caseload in 1966, one-third of the cases receive temporary assistance for a period not exceeding 30 days in a year and are eligible for Federal cost sharing of 50 percent under a 1967 amendment to the Social Security Act.
5. That, with existing Federal and State programs with the potential to absorb more than 90 percent of the current general assistance cases and with the State now responsible for granting aid to more than 85 percent of all needy persons, both conservation of Maine tax dollars and efficient delivery of services dictate State administration of all welfare programs.

GENERAL ASSISTANCE TASK FORCE STUDY

DATA RECORDED ON 253 RETURNED LOCAL MUNICIPAL QUESTIONNAIRES

Table 1. Percentage distribution of local welfare workers by type and by work status.

Title	Total	Full Time	Part Time
Welfare directors.....	100.0	8.3	92.0
Social Workers.....	100.0	93.0	7.0
Clericals.....	100.0	39.0	61.0

Table 2. Estimated number of local welfare workers by type and by work status.

Title	Total	Full Time	Part Time
Total	318	55	263
Welfare directors.....	249	20	229
Social Workers.....	15	14	1
Clericals.....	54	21	33

Table 3. Reported administrative expense of local welfare departments

Character of Expenditure	Expenditure
Total	\$341,879
Welfare Officials salaries.....	\$123,604
Other salaries.....	\$187,679
Other Administrative expense.....	\$ 30,596

Table 4. Estimated GA cases by type of case

Type of case	Reported cases
Total	8,176
One person cases.....	3,201
Man and wife only.....	593
One parent and children.....	2,217
Two parents and children.....	2,165

29 towns reported having no relief expenditures in 1967.

Table 5. Estimated GA cases by settlement status.

Settlement	Number of cases	Per cent
Total	8391	100.0
Settled.....	4831	58
Other town.....	1642	18
Non settled.....	1855	22
Undetermined.....	63	2

Table 6. Payments by settlement status.

Settlement	Reported payments	Per cent
Total	1,941,142	100.0
Settled.....	1,129,831	58
Other town	362,259	18
Non settled.....	443,171	22
Undetermined.....	5,881	2

Table 7. GA payments for medical care and burials, by type of activity.

Type of service	Reported payments
Total	\$731,911
Hospital care.....	253,698
Nursing home care.....	80,893
Physician's services.....	93,406
Medication.....	281,516
Burials.....	22,398

Table 8. GA payments for supplementation of public assistance by type of payment and by program.

Program	Total	Medical payments	Other payments
Total	\$446,435	\$192,833	\$253,602
AFDC.....		35,241	184,223
OAA.....		100,211	35,718
AB.....		3,854	4,224
AD.....		53,527	29,437

Table 9. Local Share of AFDC payments.

Local Share (18%)	\$902,680
-------------------------	-----------

Table 10. Reasons for granting general assistance.

Reason	Number of cases
Unemployment.....	1086
Under employment.....	643
Illness or disability.....	2158
Loss of support of father.....	347
Loss of support of husband (where there are children).....	1336
Burial.....	120
AFDC local share.....	2956
Supplement AFDC.....	1137
Supplement OAA.....	1240
Supplement AB.....	54
Supplement AD.....	392

Table 11. Reported GA cases by type of payment.

Type of payment	Number of cases
Cash grant.....	36
Payment in kind.....	3929
Vendor payments.....	1762

Table 12. Distribution of types of records maintained by reporting local welfare departments.

Type of record kept	Yes	No
Application forms.....	180	34
Case records.....	173	31
Method of payments records.....	185	20
Donated commodities forms.....	92	88
Referral forms		
Health and Welfare.....	132	31
Other.....	22	34

Table 13. Local Welfare officials opinion of degree of cooperation with various state welfare workers.

State workers	Excellent	Good	Fair	Poor
AFDC worker.....	87	83	17	11
Adult worker.....	56	61	16	
State GA worker.....	115	77	9	4
CW worker.....	80	75	21	13

Table 14. Local welfare departments having established standards for selected requirements, reported by towns.

Item	Established requirements	
	YES	NO
Groceries.....	180	44
Fuel.....	110	92
Rent.....		
Clothing.....	98	104
Other.....	29	49

Table 15. Comparisons of local standards with State standards.

State standards	Local standards		
	Higher	Same	Lower
Family Services.....	40	30	65
General Assistance.....	38	35	66

Table 16. Exchange of helpful information between state and local welfare agencies.

Item	Frequently	Occasionally	Never
Local agency able to provide help to the state..	69	126	13
State able to provide help to local agency.....	64	139	12

Table 17. Necessity for requesting additional funds for GA during last 5 years.

Requested increased appropriation	Yes	No
Last year.....	41	185
Each of last 5 years.....	14	201
4 out of last 5 years.....	4	210
3 out of last 5 years.....	13	203
2 out of last 5 years.....	14	199
1 out of last 5 years.....	36	180

**Comments by Maine local welfare officials
as recorded on General Assistance questionnaire**

1. Need help with dental and drugs. Get rid of 18%.
2. How many dogs is a man supposed to have and still get help from the State?
3. State should furnish a schedule for allowance on clothing.
4. We maintain no such services.
5. I have made a study of the Vermont plan for welfare and believe it would be most beneficial to Maine municipalities.
6. Two hospital bills outstanding will increase our welfare budget double this coming year.
7. Due to increased casework aide workers our budget has to be increased because people that did not require aid before are now requesting some.
8. I find that many ADC checks are not sufficient to cover not even living expenses.
9. There is critical need of one uniform standard for relief that is realistic but not luxurious.
10. The town does not want anyone going without the essentials of a decent living and the state seems to feel the same way. Drinking is our worst problem. In many cases the more you help them the more drink they can buy. What can you do? Your donated commodities program is the first step to calling on the town and it should be stopped. A man's self respect is a great asset and as long as he can keep the support of his family in his hands he is likely to do a better job than any other way. I think probably you do not agree with me but I have been overseer of the poor in a small town where everyone knows everybody else for eleven years and I think I am right.
11. Vermont approach to public assistance considered to be most satisfactory for all concerned.
12. The budgeting of E. Plantation could never compare with the State.
13. We have heavy overdraft for fiscal 1967. The cost of medication started to rise about the time Medicare became effective - still rising - and is major challenge to municipal ability to finance.
14. Town of Troy has a Trust Fund for needy poor from which we helped 6 families to the amount of \$426.00 mostly for medical expenses.
15. We budget them down just what they can get along with such as groceries.
16. The only case one single woman on State disability under General Assistance, being a State charge, I have the greatest trouble. All the time going to a doctor and demanding fuel, clothes and transportation to a doctor once a week.

17. We are firm in finding every fact about a client to be sure that he is entitled to help. We have found in the past many cases of fakery because they are too lazy to work. If we find this to be the case we demand a physical examination and if nothing is found to be wrong we order them to work. In some cases they pass up the physical and that is the last we hear of them.
18. I feel the State could achieve more if they purchased drugs for nursing patients and the towns reimbursed them.
19. More funds should be made available to rehabilitation and training agencies to get persons off the "dole" theory.
20. I was told by a Dept. of Health and Welfare worker that the Dept. condones "male boarders" in cases where the ADC recipient has a large family. If this is the policy of the Dept. of Health and Welfare I think there is a great deal this Task Force can do to improve the Dept. It certainly needs it.
21. All 496 municipalities in the State should be under the direct administration of the State Division of General Assistance.
22. The Health and Welfare recipients live higher on the hog than most working families in this area.
23. One of the largest problems I have found is the lack of action on the part of the State Health and Welfare to enforce divorce support payment decrees. Many of the cases I aid result from the failure of the husband to make court-ordered support payments to Health and Welfare.
I generally try to give a minimum amount of assistance - enough to get by on if the money is spent wisely but not enough to make them think of welfare as a way of life. Any luxuries are not allowed.
24. We feel that all welfare work should be taken care of by the people in the municipality who are responsible for welfare because these people are much closer to the people who need to be helped.
25. We have reached the stage where recipients cannot live on any Public Assistance grant and instead of trying to improve the situation we keep trying to get new programs started. If some of the "waste" could be eliminated in programs like AFDC more grants could be made compatible with decency and health at no extra cost.

26. The remarks made by many welfare workers to clients is very demanding on the Town Welfare Department. In many cases when a mutual client ask State workers for extra relief that is impossible to give, the worker tells them to head right for the local overseer of the poor because they must help. In my opinion the judgment of some workers is dam poor. If any one would like to call at my office I would be glad to discuss the matter in detail.
27. There is too much unmet need in the state grants.
28. I feel in this day of rising costs in living, education, medical field, etc. that all welfare should be handled by professionals.
29. We have a very liberal Trust Fund that we can use in conditions of hardship for the poor and needy.
30. A requisite of a welfare official is the wisdom of Solomon which I have not, therefore, my comments are merely observations. Settlement laws have become archaic and are a complete waste of time, money and effort if the philosophy is that all persons are to be adequately housed and fed. Town officials are not trained social workers and the degree of assistance, I am sure, varies as to location, wealth of the town and associations. Effort should be concentrated on education (training of children in recipient families). Trained, not necessarily educated personnel is needed to administer the welfare programs.
31. Franklin County has a Family Counseling Service that we use. Rangely's share is \$412.50
32. I believe there should be an incentive to work established among all welfare recipients. Also a clear picture of who the "State" really is.
33. This year has seen a much larger than usual town poor and state poor cost since many Indians did not return to Canada. Seems as though they are all either sick or hungry. There has been little opportunity for them to work since the first of November because of low potato prices and slow shipments.
34. 18% charge of AFDC should be done away with. Town of settlement should be done away with since local official loses all control over case when dead beat leaves town. Chronic cases should be State controlled along with Federal subsidy. Agreement, of and by local official is a must!
35. Our town does not raise much money for support of town poor and as a result we find the community trying to help each other.

36. I feel that all welfare cases, regardless of the category, should be budgeted by the state and the municipalities should be reimbursed for all welfare expenses.
37. Municipalities need extra help to pay for Hospital, Medical, and Nursing Home care for indigent cases.
38. We have just been lucky in recent years (No cases in 1967).
39. I feel that the program should be administered 100% by the State. In towns such as ours it is impossible to keep abreast of welfare laws, assessing laws and administration.
40. Additional funds for relief requested. This was because of a large hospital bill for 5 days until death.
41. Haven't had any recipients of town aid in 1967. Haven't refused anyone. But of course that doesn't mean that potential isn't here.
42. The only comment I have is that the case workers usually have the habit of recommending to the recipient that additional assistance can be had from the municipality, if, for example, the ADC check does not suffice; this has a tendency to permit the poor financial manager to use all of the check in a week or so, and then turning to the town.
43. We feel that on a State charge the State should pay burial expenses instead of the town where the person has no settlement. It makes a town charge when the town is not responsible for the person. Everything else has increased in price in the last few years. The State should increase their allowance on funeral expenses as it leaves a real burden on small towns.
44. Our assistance is supplemental only. Biggest item being medications for nursing home patients.
45. We have a few families that never ask for help unless really needed. On the other hand some have their hand out for everything and expect more.

FINDINGS FROM FACE-TO-FACE INTERVIEWS WITH WELFARE OFFICERS

EXPLANATORY NOTE

During the period from January 8 to March 29, 1968 three study consultants conducted face-to-face interviews with municipal welfare officers in each of the State's 16 counties. The total random sample drawn for the study (see the Appendix for a copy of the sample schedule) consisted of 150 municipalities distributed by population as follows: over 10,000: 18; over 5,000: 8; 3,000 - 5,000: 8; 2,000 - 3,000: 6; 1,000 - 2,000: 26; under 1,000: 84. There were a total of 138 interviews actually held; 12 were not completed because of illness of the official, unkept appointments, and in 2 instances, the weather. There were 15 interviews with welfare recipients in their homes. The scheduling of meetings with welfare recipients was difficult in some towns because at the time of the visit there were no persons receiving aid.

The purpose of the interviews was to get firsthand information in regard to the welfare office organization in the municipality: the size of the welfare load and its cost: the reasons for relief: types of records maintained: knowledge and use of relationships with State welfare personnel; and, importantly, the thoughts of the welfare officers on such basic welfare matters as the settlement laws and changes in the pattern of welfare financing and administration.

This section of the report presents a consensus of the study consultants findings in the various municipalities and of the viewpoints of the welfare officers. After visiting with city and town managers, selectmen and overseers of the poor in cities, towns and plantations throughout the state, the visiting consultants can testify that the down-east State of Maine Yankee of today is, as were his ancestors, a rugged individualist with compassion for the needy; contempt for the lazy; conservative in spending his and other people's money; a built-in belief in home rule; and a jaundiced regard of most things labeled State or Federal.

THE FINDINGS:

A. With respect to municipal organization for welfare administration

There are three identifiable groups in municipalities which function as overseer of the poor:

1. The Town Managers. These officers are appointed by boards of selectmen and charged with conducting the business of town. Town managers are involved in all segments of town government: road construction and maintenance; garbage and sewage disposal; maintenance of cemeteries; public land acquisition; assessment of property; collection of taxes, fire and police protection, and so forth plus being overseer of the poor. This poor officer function is considered by most fulltime town managers as the part of their job for which they are least prepared by training and experience. While some town managers state that as much as 45 percent of their time is spent on general assistance administration, the majority indicate that little time is spent on overseer's duties and that the job is delegated to a clerk or typist in the town office.
2. The second group of overseers of the poor are relatively few in number and consist of persons generally with the title of Welfare Director. These officers are found in the cities and larger towns and are appointed either by city managers with the approval of the Mayor and Council or by boards of selectmen. For the most part, the Welfare Director has a fulltime job and is free to administer assistance in accordance with the provisions of the State poor laws and his established standards of eligibility and assistance except for situations presenting unusual needs or involving large expenditures. In these instances the final decision is generally made by the city or town manager or the board of selectmen. In Portland the Welfare Director is also the City Hospital Administrator.
3. The third group of overseers and the largest in the state is composed of elected First Selectmen. The typical First Selectman is a man between the ages of 50 to 70; has held his present office an average of 10 years; has entered public service as a Third Selectman and worked himself up to First; and has had long experience in town government, more than 25 years in many instances. The First Selectman is a part-time town employee who receives a token salary for his service. To make a living for himself and his family he works fulltime in

some occupation other than town business and he may be a potato farmer, blueberry farmer, lobsterman, lumberman, pulpwood cutter, carpenter, factory worker or small businessman.

The study consultants found the typical selectman much more interested in the economy of his entire community than in the problem of general assistance; whether to dump, ship or hold potatoes; the price of lobster, changes in the Gulf Stream and off-shore pollution; the limited market for blueberries and shipping costs; about the lack of jobs for high school graduates which has caused an exodus of young people to industry in Massachusetts and Connecticut and resulted in a "brain drain" leaving behind "old people and dropouts". Maine, they say, "has dwelled upon a glorious past that no longer exists" and "has a lot of catching up to do".

B. With respect to reasons for granting general assistance

Because social records are not maintained in many of the towns, information on the reasons for granting general assistance in the 138 municipalities visited is incomplete. Ranked numerically, the list of reasons is as follows:

1. Illness and disability, including drug payments for State public assistance cases.
2. Supplementation of Aid to Families with Dependent Children.
3. Supplementation of Old Age Assistance, Aid to Blind and Aid to Disabled recipients.
4. Loss of family income, due primarily to desertion; some by reason of death.
5. Unemployment, due primarily to lack of jobs; some by reason of mental deficiency.
6. Temporary unemployment,(seasonal workers).
7. Underemployment (large families with father's earnings inadequate).
8. Supplementation of inadequate Social Security benefit.
9. Burials.

It should be noted that the principal reasons for general assistance confirm the information recorded by 253 municipal welfare officers on the study questionnaires. The problem of health is the biggest cause for welfare expenditures in Maine as it is in other states. The health problem for local relief officials in Maine is aggravated by reason of the State's failure to pay the cost of drugs for State assistance recipients both in their own homes

and in nursing homes. It is worth noting, too, that the other major reasons for general assistance are attributable to insufficient State funds for meeting known needs of State cases.

These findings support the overall study finding that at least 90 percent of the current general assistance load would be eliminated if the State adequately met its statutory obligation, and simultaneously, was able to take advantage of all Federal monies to which the State is entitled.

C. With respect to record keeping

In most of the city welfare offices in Maine and in all municipalities employing a fulltime welfare officer adequate general assistance records are maintained. Applications for relief are completed on all applicants; social histories are maintained recording the need for relief, the results of home visits, collateral information, referrals, changes in status, etc.; and complete data recorded as to the type and amount of aid granted. In most towns, however, record keeping consists of a ledger in which is recorded the name of the family or person, the date on which aid is granted and the amount of money authorized for groceries, wood, rent, drugs, etc. An application is completed on a State-furnished form for all cases which are believed to have no settlement and for which the State will pay the assistance. From the viewpoint of most municipal welfare officers there is no need to be accountable for any welfare activity other than how the relief appropriation was spent. General Assistance cases are so few that there is no need for elaborate record keeping, they say. Further, they indicate they know everyone in town and, besides, they don't have the facilities or help needed for record maintenance. The findings of the study consultants confirm these latter statements. The selectmen in the towns do know their families and can give you chapter and verse on the family and its problems.

D. With respect to standards of assistance

There is no State-established standard as to the amount of assistance which should be granted eligible persons for such basic necessities as food, clothing and shelter. Each local officer sets his own standards of assistance and there is great variation among the towns. One consultant visited a welfare family consisting of a disabled father, a mother and eight children and was told by the father that their weekly grocery order was for \$25.00 and

that the family found it difficult to exist. In the cities and large towns assistance is generally granted by vouchers for food, clothing, rent, medical and hospital care and other necessities. In the smaller towns groceries and medical and hospital care are the allowable items. Shelter is sometimes provided in town-owned houses but payment for rent is rare. Cash payments are never made except to provide transportation to a family or person wishing to leave town or in an unusual situation, such as a single woman with a severe facial skin disorder to whom \$5.00 a week was given in cash for food. Some town officers refuse to supplement the State assistance category of Aid to Families with Dependent Children while others think it necessary to supplement what they consider to be inadequate AFDC allowances. The consultants found that the State Division of General Assistance exercises an influence on the amount of the food allowance granted by local welfare officers. The State Division has an established food standard which it insists the town officers follow in granting assistance to State cases, i.e. the non-settled families and persons. Several municipal welfare officers follow the State standard in granting assistance to town cases and, whether they do or not, they make frequent reference to the State standard and comment as to whether their allowances are the same or below or above the standard.

Several of the towns visited had small endowment funds which had been established "for the poor", These are administered by the welfare officer almost entirely at his discretion, although some are earmarked for clothing, for food, for milk or some other specific purpose. The officials find these trust funds useful because they can give assistance without regard for the settlement status of the recipient.

E. With respect to the settlement laws

On the subject of settlement the study interviews found the municipal welfare officers almost in unanimous agreement that something should be done to change the settlement laws. The few who saw no reason for change were officials in towns attracting a large number of summer employees and these officers felt that if it weren't for the settlement laws, many of the temporary workers would remain in town and apply for relief. One welfare officer characterized the settlement system as "ridiculous and archaic". Another said that the settlement laws are unfair in that a town is saddled with expenses for a family, none of whose members has lived in the town for one or two generations. One welfare officer reported that he had no problem with settlement as he simply refused all cases, let the State make a study and

when the determination was made that the family was settled in his town he accepted the case without question. Some officers believe that settlement no longer serves a useful purpose as people have to move to where jobs are and if they happen to become in need, the town from which they moved shouldn't be liable for aid granted. There are those who believe all settlement determination should be made by the State; others think the time for gaining a settlement should be reduced from 5 years to one. All agreed that if there were State administration of general assistance, the need for settlement laws would be abolished.

F. With respect to surplus commodities and food stamps

As indicated previously in this report, many towns have discontinued a surplus commodity distribution program on the ground that it is too costly to administer. In their interviews, the consultants found that towns continuing the program liked it while others said that food was wasted and that few recipients knew how to use what was available. Some town welfare officers said that surplus commodities were used as a substitute for general assistance and helped families until they could get back to work or received other help.

One study consultant was made aware of a commodity distribution plan in the Rockland area under which the program is being regionalized, with a considerable reduction in the operating costs involved when each community is serviced directly.

Most of the welfare officials have knowledge of the Food Stamp Program which has been in effect in Androscoggin County for two years and all officers expressed the hope that the program would soon be initiated in their counties. In the absence of banks in rural areas, there were suggestions that the State itself take responsibility for selling food stamps to eligible persons or contract with local communities to do so.

G. With respect to prevention and rehabilitation

The goal of public welfare should be to prevent social disorders and to rehabilitate families to levels of self-support, self-care and strengthened family living. To move toward this problem-solving purpose requires that the welfare officer identify the problems presented by the family he is serving; diagnose the causes of the problem; and, in all instances in which the family can be improved, develop a treatment plan which makes use of all needed and available community resources.

Only in some of the larger cities and towns did the study consultants find concern about prevention and rehabilitation and evidence of the use of existing governmental resources, such as the Work Experience Program, Manpower Development and Training Projects, Vocational Rehabilitation, Neighborhood Youth Corps, the Job Corps, and other Economic Opportunity programs. In most towns there was the expressed feeling that persons receiving general assistance were "at the bottom of the barrel" and had little potential for movement toward self dependence. The program of Headstart was acknowledged as an outstanding program and there was expressed approval of the Headstart purpose of helping children get ready for school experience and in finding remediable physical impairments. Officials pointed out that in many towns the nearest hospital was so far away that if outpatient services were required, it became almost impossible for the family or the town to provide them on a continuing basis. But this problem, as it was frequently pointed out, is something that everybody in the community has to face and not just the low-income families.

There were expressions of resentment toward the Community Action Councils by some welfare officers on the ground that they could use their time more constructively than "going from house to house urging people to apply for relief".

H. With respect to the State, its welfare programs and personnel

The municipal welfare officers feel a kinship to the State Division of General Assistance, respect the Division's personnel, generally accept its decision on matters of settlement and get help from its standards on food allowances.

In reference to the State employees who work with AFDC families and in the Adult categories of the aged, blind and disabled, there were varied expressions ranging from excellent cooperation from all State workers to "I haven't seen them in two to three years" (in reference to Adult category staff) and the feeling that the ADC workers could make better use of the town welfare officer's information. The municipal welfare officers were generally critical of the State Child Welfare program and the Child Welfare workers. "I report many cases to them and they don't follow up". The study consultants believe that there is a lack of understanding of the State child welfare laws and of the goals, policies and procedures of the State Division of Child Welfare.

The local welfare officers, for the most part, have resentment against the Aid to Families with Dependent Children program. Criticism arises because of two factors: (1) the towns are charged 18 percent of the total ADC grant to a family with a settlement and the town has no part in the decision to grant aid or the amount of it, and (2) the feeling that the program itself is wrong in that it provides assistance to families broken by divorce or desertion. Said one local officer: "I don't think much of it. I think we pay too much. We pay more than the State. Gripes me, we don't have anything to say about it. They (State) are so damn lenient. Man should be made to pay. They don't have pride: they separate to get ADC. These field workers interview them. I don't know; they put everyone on. They can give the field workers a snow-job."

The State's rule that there shall be a four months waiting period before acting on AFDC applications in which a child is in need because of a deserting father was criticized by some officials because the town pays general assistance when State and Federal funds could be meeting the cost.

Several municipal officers were critical of the State's program of Aid to the Permanently and Totally Disabled on the ground that the State's definition of permanent and total disability was too limited and rigid and, therefore, kept on general assistance persons whom the towns knew were so disabled as to be unable to perform useful work. They termed this category the "Apt to Die" program.

I. With respect to the position of overseer of the poor

With the exception of the municipalities employing fulltime welfare directors, the study consultants found few town managers or first selectmen who spoke approvingly of their duties as overseer of the poor. The job is a thankless one with the overseer caught between the taxpayer who wants welfare expenditures kept at a minimum and the poor whose needs should be met. The position which the overseer is placed in is not pleasing to him. "I don't like to be hard but you have to", "I feel like a go-between with the taxpayer and the needy. I act as a balance between what the taxpayer wants to give and what the poor need."

Economic conditions contribute to the attitude of the welfare officer. The official in the larger and more prosperous towns tends to be more liberal in his thinking on welfare programs and in his attitude toward the needy. In the smaller, economically-deprived towns in which all residents have relatively low incomes, the welfare officer's knowledge of con-

ditions forces him to measure need for relief by a restrictive standard. In such towns the poor are aware of the situation and make application only when in desperate circumstances.

The town managers generally give as little attention as is possible to their overseer of the poor duty and delegate it to a clerk. Many of the selectmen say that they would like to leave the job of overseer if they could find someone who would run for office. Overall, both the town managers and the selectmen feel they are not qualified to deal with the complex social problems which welfare families present to them. They feel able to and do meet emergency needs but they do not get involved in studying families and attempting to work out plans for rehabilitating a family or person to self-support.

J. With respect to families receiving welfare payments

In visiting welfare recipients, the study consultants found them living in substandard housing. Some lived in houses which they "owned" but on which they had made no payments on taxes or mortgages for years. Some families lived rent free in town-owned houses while others lived rent free in shacks in return for service, such as safeguarding a company-owned forest.

In a majority of the families visited, the basic cause of dependency was a health problem: severe arthritis, polio disability, heart condition, strokes, mental retardation. In other cases the family was in need because the father was in jail.

Most recipients felt that they were not receiving sufficient relief to meet their needs. Most ADC mothers couldn't understand the State system under which their needs were determined to require a relief payment of a certain amount and then the State granted assistance in an amount less than that which the family is found to need.

K. With respect to State administration of general assistance

On the subject of the advisability of transferring the administration of general assistance from the municipalities to the State Health and Welfare Department, the study found greatly divided opinion. About 45 percent of the officials interviewed were emphatically opposed to such a transfer; 35 percent were emphatically in favor; while 20 percent had no opinion or said they were not in a position to render one. There was general agreement that the municipalities would welcome being relieved of the financial burden of general assistance and that any change should result in financial relief to the towns.

Those opposed to a State takeover gave as their reasons:

1. Fear of Federal and State control.
Have too much Federal-State control now.
Would represent further encroachment on the right of a town to govern itself.
Distant supervision brings a lack of understanding of local problems.
Present system isn't functioning but town should not give up right to control assistance.
Town government is on its way out but they don't want to contribute to its death.
2. General assistance load will grow.
People who are now ashamed or too proud to apply for aid will seek it under State.
3. Fear of State taxation without local representation.
The State would levy a tax upon the towns for general assistance as it does for the 18 percent ADC chargeback and the town would have no voice in the matter.

Those approving a State takeover gave as their reasons:

1. So few general assistance cases that it doesn't matter.
If the State did its job adequately and fully implemented existing programs, there would be but a handful of general assistance cases.
2. State administration would promote rehabilitation of general assistance families and individuals.
State workers are qualified to give counsel in difficult family situations.
State workers are aware of rehabilitative resources and how to use them.
3. State administration would provide a uniform standard of eligibility and assistance.
Much inequality under present operation.
Who gets relief and how much now depends upon individual overseer's standards.

CHAPTER IV

ADMINISTRATIVE COSTS INVOLVED IN A PLAN FOR STATE ADMINISTRATION OF GENERAL ASSISTANCE

Premises

The proposed plan for State administration of general assistance is based on the following premises:

1. That the State will meet the full budgeted needs of recipients of assistance under the programs of old-age assistance, aid to the blind, aid to the permanently and totally disabled and aid to families with dependent children.
2. That the State will adopt a presumptive-eligibility policy for all public assistance applicants.
3. That the State will provide assistance and service to all needy families and individuals not eligible for a Federal-State program of assistance.
4. That the State will extend its medical assistance program to include payment of medication costs for public assistance recipients and medical care for general assistance recipients and other medically indigent persons.
5. That the State will extend its program of Aid to Families with Dependent Children - Unemployed Fathers to include all eligible persons.
6. That the State will extend the Food Stamp plan on a statewide basis.
7. That the municipalities 18 percent share in Aid to Families with Dependent Children will be eliminated.

Factors in Determining Administrative Costs

An estimate of new State monies to administer a State program of general assistance is not easily made because of several unknowns:

1. The size of the general assistance caseload in the State when it is no longer necessary for the municipalities to supplement Federal-State assistance programs.
2. The number of families and individuals who will make an initial application for general assistance because of the shift from local to State administration.
3. The extent of the increase in caseload activity caused by families seeking adjust-

ments in relief payments deemed inadequate or by families renewing applications previously denied.

There were 253 municipalities out of a total of 496 which returned questionnaires on general assistance to the Task Force. Inaccurate and incomplete reporting on the questionnaires result in four different figures being recorded in four items requesting data on the number of cases served in the past fiscal year. These recorded totals are as follows: 8,176; 8,391; 11,469; and 5,727. Although the Task Force questionnaire results are useful as guide to Maine's general assistance experience, it is the Task Force opinion that for purposes of providing a base for computing administrative costs, the January report compiled for the State Division of General Assistance is a more complete and reliable guide in that it is computed on the basis of reports from nearly 60 percent of the municipalities. The January report indicates a total caseload of 2,514 cases. Of these cases there were 1,452 which received medical care only. If these potential State cases were deducted, there remain 1,545 general assistance cases. On the assumption that under State administration of general assistance new application would be made, this figure is increased by 50 percent to a total of 2,268 which is being used for computation of administrative costs requiring new State monies.

A second factor under a State-administered system is the cost involved in the transfer to State employment of fulltime municipal welfare directors, social workers and clerks. Data on the 253 returned questionnaires shows that 20 municipalities employ fulltime welfare directors and employ 14 social workers and 21 clerks whose salaries total \$249,300 a year. A screening of the welfare directors and social workers indicates that of the professional employees a total of 22 (12 welfare directors; one social work supervisor and 9 social workers) would probably accept State jobs. It is anticipated that the big majority of the 21 clerks would accept employment in a State district office in their respective localities. In addition 20 more clerical staff are needed to meet current and future clerical needs of the department.

A third factor is determination of the average caseload per worker resulting in fixing the number of social workers and supervisors required to administer a general assistance load of approximately 2,300 cases. If it is accepted that adequate social services can contribute to the prevention and elimination of social disorders, then the average caseload should be 60 cases per worker and one supervisor for every five workers. On such a basis provision

should be made for a total of 7 supervisors and 38 workers.

A fourth factor is the administrative cost involved in providing office space for the new program. The 7 District Offices of the State Department are crowded and new space would have to be found for the staff administering general assistance.

A fifth factor is for the employ of municipal Service Officers in municipalities in which there is no District Office or a State Health and Welfare representative.

A sixth factor is the staff needed if the AFDC - Unemployed Fathers program were extended to grant aid to some 400 unemployed fathers whose needs are now being met through general assistance. One supervisor and 7 workers would be needed under a staffing formula of one supervisor for every five workers and an average of 60 cases per worker.

A seventh factor involves the use in a State administered program of the current staff of the State Division of General Assistance consisting of a director, 2 supervisors, 7 workers and 7 clerks.

New State Monies for Administration

A. It is estimated that the State Department of Health and Welfare would require an additional appropriation for administrative purposes as follows:

Item	Description	Estimated Cost
Space in 7 Districts	Based on current State rental costs	\$ 11,550.00
6 Supervisors	GA - AFDC -UF @ \$7,982 each	47,892.00
23 Social Workers	GA - AFDC - UF @ \$5,668 each	130,364.00
43 Town GA staff	Salaries at time of transfer to State	200,000.00
20 Clerical Workers		70,000.00
Travel	45 workers @ \$560 each	25,200.00
Equipment	74 Supervisors, workers, clerks incl. dictating equip.	47,318.00
	Gross Total	532,324.00
	Federal Share	250,192.00
	Net State Share	282,132.00
B.	Estimated State cost for administering statewide Food Stamp Plan	200,000.00
C.	Estimated salaries for town service officers	50,000.00
Grand Total of State Administrative Costs		
	Net State expenses for GA and AFDC - UF	282,132.00
	Statewide Food Stamp Program	200,000.00
	Town service officers	50,000.00
Estimated municipal administrative savings under GA transfer and Food Stamp Program		
	Reported salaries and expenses (252 towns)	341,879.00
	Estimated salaries and expenses (243 towns)	85,470.00
	Commodity distribution costs (154 towns)	14,400.00

APPENDIX

**PATTERNS OF ADMINISTRATION AND SOURCES OF FINANCING OF
GENERAL ASSISTANCE PROGRAMS IN THE UNITED STATES***

State	State Supervision			Source of Funds	
	State Administration	Over Local Administration	No State Supervision	By Percentage State	Distribution Local
ALABAMA		x		98.3	1.7
ALASKA	x			100.0	
ARIZONA	x			100.0	
ARKANSAS		x		100.0	
CALIFORNIA		x			100.0
COLORADO			x		100.0
CONNECTICUT			x	50.0	50.0
DELAWARE	x			50.0	50.0
D.C.	x			100.0	
FLORIDA	(No State program - some cities, counties grand aid)				100.0
GEORGIA	(No State program)				100.0
GUAM	x			100.0	
HAWAII	x			100.0	
IDAHO	(No State program)				100.0
ILLINOIS		x		67.7	32.3
INDIANA	(No State program - townships administer - Data not available)				
IOWA	(No State program - the State administers 2/3 of counties)				100.0
KANSAS		x		50.0	50.0
KENTUCKY	(No State program - some counties and large cities give aid)				100.0
LOUISIANA	x			100.0	
MAINE	(Supervises but does not set standards)			45.8	54.2
MARYLAND		x	(limited program)	85.4	14.6
MASSACHUSETTS		x		23.0	77.0
MICHIGAN		x		35.3	64.7
MINNESOTA		x (except 15 counties)		2.4	97.6
MISSISSIPPI	(No State program)				100.0
MISSOURI	x			98.2	1.8
MONTANA		x			100.0

State	State Supervision		Source of Funds	
	State Administration	Over Local Administration	No State Supervision	By Percentage Distribution State Local
NEBRASKA			x	(Data not available)
NEW HAMPSHIRE	(No State program - counties pay for non-settled)			100.0
NEVADA	(No State program)			100.0
NEW JERSEY		x		43.5 56.5
NEW MEXICO	x			100.0
NEW YORK		x		50.7 49.3
N. CAROLINA		x		100.0
N. DAKOTA		x		2.5 97.5
OHIO		x		85.5 14.5
OKLAHOMA	x			28.9 71.1
OREGON		x		70.0 30.0
PENNSLYVANIA	x			100.0
PEURTO RICO	x			100.0
RHODE ISLAND		x		100.0
S. CAROLINA	x			71.6 28.4
S. DAKOTA	(No State program)			100.0
TENNESSEE	(No State program)			100.0
TEXAS	(No State program)			100.0
UTAH	x			100.0
VERMONT			x	10.0 90.0
VIRGINIA		x		46.0 54.0
VIRGIN ISLANDS	x			100.0
WASHINGTON	x			100.0
W. VIRGINIA		x		39.8 60.2
WISCONSIN			x	6.2 93.8
WYOMING		x		76.3 23.7
TOTALS	16	20	6	

***Source of Data:**

1. Patterns of administration taken from 1967 Public Welfare Directory, American Public Welfare Association, Chicago.
2. Source of funds by percentage distribution taken from January 1968 release of Social and Rehabilitation Service, U.S. Department of Health, Education and Welfare and entitled **Public Assistance - - Annual Statistical Data, Calendar Year 1966.**

Notes and Comment:

1. The data recorded is for 50 States, the District of Columbia and three Territories.
2. Entries bearing the notation "No State program" means that general assistance is a very limited program and is granted by very few cities and counties within the state.
3. Maine is the only state reporting that it supervises local administration of general assistance but sets no standards.
4. To summarize:
 - a. 16 states including District of Columbia report State administration of general assistance.
 - b. 20 states report local administration under State supervision.
 - c. 6 states report exercising no State supervision.
 - d. Maine reports supervision but does not set standards.
 - e. 12 states report that they have no statewide program of general assistance.
 - f. With respect to financing
 1. 16 states pay 100% of the cost or 90% of it.
 2. In 19 states local governments pay 100% of the cost or 90% of it.
 3. In 4 states the cost is shared on a 50-50 matching basis by state and local governments.

General Comment

An analysis of the patterns of administration of the public assistance categories of aid to the aged, blind, disabled and dependent children shows that, among 51 jurisdictions (50 states and the District of Columbia) there are 29 state administered systems and 22 in which there is state supervision over local administration.

ELEMENTS IN A MODERN AND ACCEPTABLE GENERAL ASSISTANCE PROGRAM

A modern and acceptable General Assistance program contains the following elements:

1. Recognizes the dignity and worth of the individual.
2. Has prescribed, uniform standards of eligibility.
3. Has prescribed, uniform standards of assistance.
4. Is adequately financed.
5. Provides for the maintenance of adequate social and financial records.
6. Provides for a mandatory reporting system under which monthly statistical reports on applications, cases and costs are prepared and filed with a central agency, such as the State Department of Health and Welfare, the data tabulated and a report prepared for publication and distribution to governmental officials and to the communities throughout the State.
7. An awareness of preventive and rehabilitative resources in the State and the use of them by welfare recipients.
8. Provides for the right of appeal and a fair hearing for those welfare applicants or recipients who are dissatisfied with the action taken on their applications or with the amount of assistance granted, respectively.

**MAINE WELFARE DIRECTORS
ASSOCIATION**

Request for information on General Assistance past fiscal year

City/Town.....Name of Welfare Official.....
Title.....

I. Organization - Staff:

- A. Is Welfare Official's job: Fulltime.....Part-time.....
- B. Other persons employed in General Assistance administration:
 - 1. Number of social workers.....Fulltime.....Part-time.....
 - 2. Number of clerical workers.....Fulltime.....Part-time.....
- C. Administrative Costs
 - 1. Salary paid Welfare Official.....
 - 2. Other salaries.....
 - 3. Total of other administrative expenses
in addition to salaries.....

II. Caseload Information

- A. Number of families granted general assistance in past fiscal year.....
 - 1. Of total - how many were one-person families.....
 - 2. Of total - how many were families of only man & wife.....
 - 3. Of total - how many were families of 1 parent plus one
or more children
 - 4. Of total - how many were families of man, wife & one
or more children
- B. Settlement of Total Number of Families receiving Assistance
 - 1. How many cases had settlement in your municipality.....
 - 2. How many cases had settlement in a different municipality.....
 - 3. How many cases were established as non-settled.....
 - 4. How many cases where settlement has not been determined.....
- C. Amount of Assistance given past fiscal year
 - 1. For cases with settlement in your municipality.....
 - 2. For cases with settlement in a different municipality.....
 - 3. For cases established as non-settled.....
 - 4. For cases where settlement not established as yet.....
 - 5. Total of items 1,2,3 and 4.....

- D. Of total amount of Assistance granted (Item C5)
 - 1. How much spent for in-patient hospital care.....
 - 2. How much spent for in-patient nursing home care
(exclusive of medication and physician's services).....
 - 3. How much spent for physician's services (all cases).....
 - 4. How much spent for medications (all cases).....
 - 5. How much spent for burials.....
 - 6. How much spent to reimburse municipal's share of AFDC (18%).....
 - 7. How much spent to supplement physician's fees and medication in
 - a. AFDC.....
 - b. Old Age Assistance.....
 - c. Aid to the Blind.....
 - d. Aid to the Disabled.....
 - 8. How much spent to supplement needs other than physician's fees and
medication in
 - a. AFDC.....
 - b. Old Age Assistance.....
 - c. Aid to the Blind.....
 - d. Aid to the Disabled.....

III. Reasons for Granting Assistance

- A. How many cases received assistance because of
 - 1. Unemployment.....
 - 2. Under employment (earnings insufficient for needs).....
 - 3. Illness or disability.....
 - 4. Loss of support from father.....
 - 5. Loss of support of husband (in cases where there are children).....
 - 6. For burial.....
 - 7. How many AFDC cases do you have for which you are
billed 18% of grant.....
 - 8. How many AFDC cases do you have in your municipality which
you supplement the grant.....
 - 9. How many Old Age Assistance cases do you supplement.....
 - 10. How many Aid to the Blind cases do you supplement.....
 - 11. How many Aid to the Disabled cases do you supplement.....

IV. Information on type of Welfare Payments

- 1. How many recipients do you grant assistance to in the form of
cash grants
- 2. How many recipients do you grant in-kind payments
(fuel, rent, clothes, etc.)
- 3. How many recipients do you have where you make only vendor
payments to hospitals, physicians, nursing homes or for
medication

4. Does recipient have choice as to receiving cash or in-kind payment

V. Records maintained by Municipal Welfare Official

	Yes	No
1. Application form
2. Case records
3. Method of payments records
4. Federal-State forms for donated commodities
5. Referral forms for other resources		
Health and Welfare
Other (specify)

VI. General Information

1. What would you consider the degree of cooperation and help you receive from the following:

	Excellent	Good	Fair	Poor
A. AFDC Worker
B. Adult Category Worker
C. State General Assistance worker
D. Div. of Child Welfare worker
E. Other (Name)

2. Do you have established standards for allowing for:

	Yes	No
groceries
fuel
rent
clothing
other (name)

3. Do you feel that your budgeting is more or less adequate than that of:

	More	Less
A. State Division of General Assistance
B. State Division of Family Services

Comments of explanations you may wish to make on above question

.....

.....

.....

.....

.....

MUNICIPALITY SAMPLE BY COUNTY WELFARE STUDY

ANDROSCOGGIN COUNTY (6 Municipalities)	(Cont. Cumberland County)
Over 10,000	2,000 - 3,000
Auburn	Gray
Lewiston	0 - 2,000 (under 1,000)
Over 5,000	Baldwin
Lisbon	Naples
0 - 2,000	
Durham	FRANKLIN COUNTY (6 Municipalities)
Livermore	Over 5,000
0 - 2,000 (under 1,000)	Farmington
Leeds	0 - 2,000
AROOSTOOK COUNTY (21 Municipalities)	Phillips
Over 10,000	Rangeley
Caribou	0 - 2,000 (under 1,000)
Limestone (Air Base)	New Sharon
Presque Isle	Kingfield
Over 5,000	New Vineyard
Fort Fairfield	HANCOCK COUNTY (10 Municipalities)
Over 2,000	3,000 - 5,000
St. Francis	Bar Harbor
Monticello	0 - 2,000
Washburn	Blue Hill
Sherman	Gouldsboro
0 - 2,000 (under 1,000)	0 - 2,000 (under 1,000)
Chapman	Hancock
Portage Lake	Eastbrook
Castle Hill	Long Island
Cyr	Lamoine
New Limerick	Franklin
Crystal	Otis
Caswell	Trenton
Westfield	
Garfield	KENNEBEC COUNTY (9 Municipalities)
Wade	Over - 10,000
Linneus	Augusta
Benedicta	Waterville
Oxbow	Over 5,000
CUMBERLAND COUNTY (10 Municipalities)	Gardiner
Over 10,000	0 - 2,000
Brunswick	Pittston
Portland	Manchester
So. Portland	West Gardiner
Westbrook	Monmouth
Over 5,000	0 - 2,000 (under 1,000)
Scarborough	Albion
3,000 - 5,000	Fayette
Yarmouth	
Windham	

KNOX COUNTY (5 Municipalities)

3,000 - 5,000

Camden

0 - 2,000

Rockport

0 - 2,000 (under 1,000)

Washington

Owls Head

So. Thomaston

LINCOLN COUNTY (5 Municipalities)

0 - 2,000

Boothbay

Bristol

0 - 2,000 (under 1,000)

Southport

Somerville

So. Bristol

OXFORD COUNTY (11 Municipalities)

Over 10,000

Rumford

Over 5,000

Mexico

2,000 - 3,000

Bethel

0 - 2,000

Fryeburg

0 - 2,000 (under 1,000)

Hartford

Greenwood

Hiram

Hebron

Hanover

Magalloway

Upton

PENOBSCOT COUNTY (18 Municipalities)

Over 10,000

Bangor

Over 5,000

Brewer

3,000 - 5,000

Dexter

2,000 - 3,000

Newport

0 - 2,000

Milford

Howland

Patten

Cont. Penobscot County

0 - 2,000 (under 1,000)

Burlington

Clifton

Dixmont

Drew Plantation

Exeter

Eddington

Lagrange

Newburgh

Seboeis

Staceyville

Edinbury

PISCATAQUIS COUNTY (6 Municipalities)

3,000 - 5,000

Dover-Foxcroft

0 - 2,000

Brownville

0 - 2,000 (under 1,000)

Parkman

Lakeview

Shirley

Sebec

SAGadahoc COUNTY (3 Municipalities)

Over 10,000

Bath

0 - 2,000

Bowdoinham

Arrowsic

SOMERSET COUNTY (9 Municipalities)

Over 5,000

S. Fairfield

2,000 - 3,000

Anson

0 - 2,000 (under 1,000)

Harmony

Detroit

Jackman

Highland Plt.

Emden

Moscow

Starks

WALDO COUNTY (7 Municipalities)

0 - 2,000

Searsport

Cont. Waldo County

0 - 2,000

Lincolntonville
Knox
Montville
Monroe
Liberty
Palermo

WASHINGTON COUNTY (13 Municipalities)

3,000 - 5,000

Calais

0 - 2,000

Baileyville

0 - 2,000 (under 1,000)

Columbia Falls
Codyville
Whitneyville
Harrington
Steuben
Cooper
Columbia
Deblois
Northfield
Beddington
Wesley

YORK COUNTY (11 Municipalities)

Over 10,000

Biddeford
Kittery
Saco

3,000 - 5,000

Eliot

2,000 - 3,000

Berwick
Buxton

Over 10,000

Sanford

0 - 2,000

Alfred

0 - 2,000 (under 1,000)

Shapleigh
Parsonfield
Newfield