State Nondiscrimination Enforcement Efforts in Nebraska

A Review of Implementation of Public Law 97–35 Obligations in Health and Human Services Programs

October 1983



A report of the Nebraska Advisory Committee to the United States Commission on Civil Rights prepared for the information and consideration of the Commission. This report will be considered by the Commission, and the Commission will make public its reaction. In the meantime, the this report should not be attributed to the Commission but only to the Nebraska Advisory Committee.

THE UNITED STATES COMMISSION ON CIVIL RIGHTS

The United States Commission on Civil Rights, created by the Civil Rights Act of 1957, is an independent, bipartisan agency of the executive branch of the Federal Government. By the terms of the act, as amended, the Commission is charged with the following duties pertaining to discrimination or denials of the equal protection of the laws based on race, color, religion, sex, age, handicap, or national origin, or in the administration of justice: investigation of individual discriminatory denials of the right to vote; study of legal developments with respect to discrimination or denials of the equal protection of the law; appraisal of the laws and policies of the United States with respect to discrimination or denials of equal protection of the law; maintenance of a national clearinghouse for information respecting discrimination or denials of equal protection of the law; and investigation of patterns or practices of fraud or discrimination in the conduct of Federal elections. The Commission is also required to submit reports to the President and the Congress at such times as the Commission, the Congress, or the President shall deem desirable.

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An Advisory Committee to the United States Commission on Civil Rights has been established in each of the 50 States and the District of Columbia pursuant to section 105(c) of the Civil Rights Act of 1957, as amended. The Advisory Committees are made up of responsible persons who serve without compensation. Their functions under their mandate from the Commission are to: advise the Commission of all relevant information concerning their respective States on matters within the jurisdiction of the Commission; advise the Commission on matters of mutual concern in the preparation of reports of the Commission to the President and the Congress; receive reports, suggestions, and recommendations from individuals, public and private organizations, and public officials upon matters pertinent to inquiries conducted by the State Advisory Committee; initiate and forward advice and recommendations to the Commission upon matters in which the Commission shall request the assistance of the State Advisory Committee; and attend, as observers, any open hearing or conference which the Commission may hold within the State.

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—A report prepared by the Nebraska Advisory Committee to the U.S. Commission on Civil Rights

Attribution:

The findings and conclusions contained in this report are those of the Nebraska Advisory Committee to the United States Commission on Civil Rights and, as such, are not attributable to the Commission. This report has been prepared by the State Advisory Committee for submission to the Commission and will be considered by the Commission in formulating its recommendations to the President and Congress.

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LETTER OF TRANSMITTAL

Nebraska Advisory Committee to the U.S. Commission on Civil Rights October 1983

MEMBERS OF THE COMMISSION Clarence M. Pendleton, Jr., Chairman Mary Louise Smith, Vice Chairman Mary Frances Berry Blandina Cardenas Ramirez Jill S. Ruckelshaus Murray Saltzman

Linda Chavez, Staff Director

Dear Commissioners:

The Nebraska Advisory Committee submits this report on its study of the efforts of Nebraska State agencies administering Federal Health and Human Services block grants under Public Law 97–35 to assure nondiscrimination. The Advisory Committee obtained information for this study from the State departments of Administrative Services, Health, Public Institutions and Public Welfare, the Nebraska Equal Opportunity Commission and from the State affirmative action officer. It also obtained information from the Region VII, Office for Civil Rights of the U.S. Department of Health and Human Services. The State and Federal agencies were given an opportunity to comment on a draft of this report and their comments and corrections have been incorporated.

The Advisory Committee found that in the past the efforts to ensure nondiscrimination had varied but had generally been ineffective. However, if Governor Robert Kerrey implements a proposed contract compliance executive order, Nebraska will have an effective program to ensure nondiscrimination in contracted programs.

The Advisory Committee notes that Federal resources to ensure nondiscrimination in Public Law 97-35 programs in Region VII remain insufficient. They urge the Commission to study the level of resources needed to ensure an effective compliance program.

We urge you to concur with our recommendations and to assist the Committee in its follow-up activities.

Respectfully,

JAMES M. MCCLYMOND, Chairperson Nebraska Advisory Committee

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CONTENTS

1. Introduction	1
General Compliance Procedures Department of Public Institutions Division of Alcoholism and Drug Abuse (NDADA) Division of Medical Services Department of Public Welfare Division of Social Services Division of Income Maintenance Division of Technical Assistance Department of Health Department of Administrative Services	3 3
Remedies Complaint Procedures Department of Public Institutions Department of Public Welfare Department of Health	8
	10 10
Beneficiaries of Block Grant Services	13
4. The Role of State and Federal Civil Rights Agencies	15
Conclusions Findings and Recommendations	18 18 20

1. Introduction

The Nebraska Advisory Committee review of State and local civil rights agencies noted the reluctance of these agencies to accept deferral authority for enforcement of Federal antidiscrimination laws and regulations beyond those already assumed.1 In view of the transfer of substantial responsibility for Federal review of the use of Federal funds contained in Public Law 97-35 in connection with the new block grant programs, the Advisory Committee decided it would be appropriate to see what would be done by the responsible State agencies that would administer some of these new funds. Its study parallels a similar study recently completed by the Missouri Advisory Committee.2

The Missouri study disclosed a comprehensive system administered by the responsible State agencies for ensuring compliance with Federal civil rights requirements but only limited resources devoted to implementation.3 The Nebraska Advisory Committee sought to determine what efforts Nebraska State agencies had made or would make.

In addition, since over one year has now past since the new block grants were awarded, the Advisory Committee wanted to know whether the allocations of these funds had a discriminatory effect on the availability of the services covered. To determine this, it asked the administering Nebraska State agencies to provide information on the benefi-

Nebraska Advisory Committee, Nebraska Human Rights Agencies (December 1982).

ciaries of the block grant programs in fiscal years 1982 and 1983. The Committee also asked for information on the procedures used to allocate funds and the extent of public participation in the allocation process.

Information for this study was provided by the Nebraska Departments of Administrative Services. Public Welfare, Health and Public Institutions, the Nebraska Equal Opportunity Commission, the State Affirmative Action Officer and the regional office of the U.S. Department of Health and Human Services.

This review is limited to the block grants provided by the U.S. Department of Health and Human Services.

The exact current status of the civil rights requirements administered by the Department of Health and Human Services under the provisions of the Omnibus Budget Reconciliation Act of 19824 has been clarified in the Final Rules issued on July 6, With some exceptions these rules merely reference earlier regulations governing compliance with laws prohibiting discrimination on the bases of race, color, national origin, handicap and age. These rules continue in effect and, to the extent that they were deficient, they remain so.6

The statutory language establishing each of the block grants, except social services, references other

Missouri Advisory Committee, State and Federal Civil Rights Enforcement in Missouri-Nondiscrimination in the New Health and Human Services Block Grant Programs (October 1982).

⁴ Pub. L. 97-35.

⁵ 47 Fed. Reg. 29472-29493 (1982).

⁴⁵ C.F.R. Parts 80 and 81 implement Title VI of the Civil Rights Act of 1964, as amended, by prohibiting discrimination on the bases of race, color, and national origin in many programs of Federal financial assistance. 45 C.F.R. Part 84 prohibits discrimination on the basis of handicap and 45 C.F.R. Part 90 prohibits discrimination on the basis of age in such programs.

statutes that prohibit discrimination based on age, handicap, race, color, and national origin. In addition, the provisions establishing the block grants for preventive health care; alcohol, drug abuse and mental health; primary health care; and, maternal and child health services contain prohibitions of discrimination based on religion or sex. Although there are no antidiscrimination clauses in the legislation covering the social services block grant, the Department of Health and Human Services, in its final regulations commentary states:

Congress has made clear that States and their grantees have the responsibility to prohibit discrimination on the basis of race, color, national origin, age and handicap. In addition, several of the block grants require that religious and sex discrimination be prohibited as well. The Secretary interprets existing laws against discrimination in federally assisted programs as applying to the social services block grant.⁹

All State applicants must provide an assurance of compliance with the provisions of Public Law 97–35 and therefore with the nondiscrimination clauses in the various sections cited above. Pursuant to regulation, they also must provide assurances of compliance with Title VI of the Civil Rights Act and Sec. 504 of the Rehabilitation Act. In the interim regulations these had been waived for some of the block grant applications. That waiver has been withdrawn.

The final regulations specify that the complaint procedures to be utilized for discrimination complaints are the same that were utilized in the past—viz those established under the various antidiscrimination laws—and that complaint procedures specified in Public Law 97-35 do not apply to these

situations.¹⁴ The Department of Health and Human Services states that "regulations implementing novel aspects of the block grant nondiscrimination provisions are being developed and will be published in the future."¹⁵ These would relate to prohibitions of discrimination based on religion or sex. The Department of Health and Human Services apparently will continue to monitor compliance with antidiscrimination laws using the same processes, including periodic compliance reviews, specified in regulations for the administration of the Civil Rights Act, Rehabilitation Act and other antidiscrimination regulations.

In Chapter 2 of this report the Advisory Committee summarizes the external compliance efforts of the Nebraska agencies expending block grant funds. Their internal affirmative action efforts have been reviewed by this Advisory Committee in its study, State Government Affirmative Action in Mid-America: An Update. In Chapter 3 the Advisory Committee summarizes the data it received on the utilization of funds and the allocation process. In Chapter 4 the Committee reviews the activities of Federal and State civil rights compliance agencies. Chapter 5 contains the Committee's conclusions, findings and recommendations. These are intended to assist the U.S. Commission on Civil Rights in its program planning efforts.

The Advisory Committee appreciates the efforts of the Nebraska Departments of Administrative Services, Public Welfare, Health and Public Institutions and U.S. Department of Health and Human Services. They have been provided a chance to comment on a preliminary draft of this report and relevant comments or corrections have been incorporated or otherwise reflected in the final draft.

⁷ Pub. L. 97-35, §§508(a)(1), 677(a), 1908(a)(1), 1918(a)(1), 1930(a)(1), 2606(a).

^{*} Pub. L. 97-35, §§508(a)(2), 1908(a)(2), 1918(a)(2), 1930(a)(2).

 ⁴⁷ Fed. Reg. 29480 (1982).

¹⁰ For example see Pub. L. 97-35, §1905(a)(c)(1).

¹¹ 45 C.F.R. §80.4 and 45 C.F.R. §84.5.

^{12 46} Fed. Reg. 48585 (1981).

¹² No specific section notes this change. See 47 Fed. Reg. 29480 (1982).

^{14 47} Fed. Reg. 29480 (1982).

¹⁵ Ibid.

¹⁶ Nebraska Advisory Committee, State Government Affirmative Action in Mid-America: An Update (March 1982).

2. Compliance Efforts of State Agencies Administering HHS Block Grants

To determine what was being done in the State of Nebraska to ensure that the State complies with the antidiscrimination requirements of the Public Law 97–35 block grants administered by the Department of Health and Human Services, the Advisory Committee asked the chief executives of the Nebraska Departments of Health, Public Institutions and Public Welfare to describe their current measures to ensure that subgrantees do not discriminate. In addition, the Advisory Committee also reviews the practice of the Administrative Services Department because this agency serves as purchaser for many of the supplies and services utilized by the other State agencies.

General Compliance Procedures

Department of Public Institutions

The Department of Public Institutions (DPI) administers the Alcohol, Drug Abuse and Mental Health block grant funding. It does so through two divisions: Alcoholism and Drug Abuse and Medical Services. Each is responsible for the operation of its programs.¹

Division of Alcoholism and Drug Abuse (NDADA)

The division was established in 1967 and in 1972 assumed responsibility for developing and administering the federally-mandated Comprehensive State Alcoholism Plan under Public Law 91-616. That

law required a broadly representative Alcoholism Advisory Council composed of area, ethnic and consumer group representatives, provider representatives and government officials. In 1980 State Alcoholism and Drug Abuse Advisory Committees were created. Their members are appointed by the Governor and include broad representation of consumer and provider groups.² The division thus naturally assumed responsibility for the alcoholism funding under the block grant. Similarly, as the agency responsible for coordinating drug abuse programs in the State, it naturally assumed responsibility for distributing the block funding after categorical grants to area operating programs were ended by the Federal government. The division also funds some statewide educational programs to combat alcohol/drug abuse.

The primary protection against discrimination is contained in division "Regulations for Organizing and Implementing Alcoholism and Drug Abuse Services Under the Division of Alcoholism and Drug Abuse Act" published in January 1983. Chapter V of these regulations contains a clause on clients' rights which includes a line requiring that providers' procedures manuals must contain a statement of the clients' right to "receive services without regard to race, color, sex, national origin, religion, age or disability." The statement of clients' rights is provided to each client on admis-

¹ Ronald L. Jensen, Director, Department of Public Institutions, letter to Chairperson, Nebraska Advisory Committee, June 28, 1983 (hereafter cited as DPI Comment Letter). Mr. Jensen became director in Spring 1983, succeeding W. Ralph Michener.

² Ibid.

^a DPI, Regulations for Organizing and Implementing Alcoholism and Drug Abuse Services Under the Division of Alcoholism and Drug Abuse Act (January 1983), p. 25.

sion. In addition, a client can request in writing that a provider explain why any service has been refused.4 The division stated:

the NDADA will conduct site visits to determine program eligibility for funding. This assessment will assist alcoholism and drug abuse providers to establish acceptable policies and procedures to define their operation. Areas to be assessed are: Fiscal Accountability, Governing Authority, Organization, Clients' Rights, Quality Assurance, Advisory Committees, Client Records, Personnel Policies, Staff Qualifications, Continuing Education and Training, Confidentiality, Accessibility of Services, Continuity of Services, and Pre-Discharge Planning. Each provider is required to describe their program philosophy, goals and objectives and demonstrate how it meets the definition of the service area for which it desires to be certified. Those service areas are: Social Setting Detoxification; Quarterway house; Halfway house; Extended Care; Therapeutic Community; Partial Care; Outpatient; Court-related; Education; Consultant; and Employee Assistance.

Certification site visits are viewed by the NDADA as: 1) enhancing the status of alcoholism/drug abuse providers; 2) a method of comprehensive date collection; and 3) an identification of geographic and programmatic areas needing technical assistance and training.

An orientation to the revised regulations is scheduled for April and May of 1983. Certification site visits are planned for July 1983 through June of 1984.

The on-site visit process begins with an initial application from each agency during certification. Once applications are received, a master schedule is developed and mailed to the agencies. Each agency is responsible for sending their policies and procedures manual to the NDADA two weeks prior to their scheduled site visits. Once the inhouse review is completed, staff visit the agency on-site to review any deficiencies found in the manual and to complete additional data collection such as clinical records and quality assurance records review. An assessment of compliance with the regulations in Chapter 5 is made according to pre-established site visit protocol. Deficiencies are noted and discussed in an exit interview with the staff of the agency.

Once a final rating of full compliance, partial compliance, or noncompliance is determined, a site visit report is prepared by NDADA staff and given to the agency. In cases where approval is not granted, agencies have 90 days to come into compliance. If at the end of the 90-day

DPI Comment Letter.

period, they still do not have NDADA approval, they may appeal the decision using the procedure in Regulation 203 NAC 2-004 or must forfeit approval status and State funding.

In addition, all programs funded on a grant basis, must submit a quarterly progress report on the attached forms. This keeps each NDADA project monitor updated on their respective agency's progress made, problems encountered and plans for the upcoming quarter in relation to the grant proposal and assurances.

Also, all treatment programs funded by NDADA must complete and submit to the Division client socio-economic data on admissions and discharges. This information is computerized and cross-tabulations of the data are a regular (quarterly) output of the system.5

The "Site Visit Protocol Summary" which provides a reviewer a convenient checklist for verifying compliance with Chapter V of the regulations does appear to provide a separate point for noting compliance with the antidiscrimination and explanation of denial of service requirements. But this is limited to the existence of a statement of clients' rights to nondiscriminatory service and does not include evaluation of that requirement.6 But the client questionnaire does provide an opportunity for minorities to state whether the services of a particular agency are known and respected in their community and whether they have experienced discrimination.7 This is not asked of staff.8 Nor is the reviewer of medical records asked to ascertain whether these show a pattern of discrimination.9 However, such data apparently is reviewed based on the client information records supplied to NDADA and computerized. NDADA does conduct special studies on this data and has analyzed utilization of its services by particular ethnic groups.10

In addition, all recipients of State funding must provide an assurance of nondiscrimination based on race, color, national origin, religion, sex, age, marital status, disability in the program operation.¹¹ There is no evidence that compliance with these assurances is reviewed other than by the analysis mentioned earlier.12

⁵ W. Ralph Michener, Director, DPI, letter to CSRO staff, Mar. 30, 1983; Jim Bailey (NDADA), memorandum to Deb Staley, Mar. 28, 1983.

⁶ Nebraska Division of Alcoholism, "Site Visit Protocol Summary" (n.d.); and William E. Ford, Office of the Director, DPI, memorandum to CSRO staff, July 7, 1983.

NDADA, "Client Questionnaire" (n.d.).
 NDADA, "Site Visit Protocol, Staff Questionnaire" (n.d.).

⁹ NDADA, "Site Visit Protocol, Clinic Records Checklist"

¹⁰ William E. Ford, Office of the Director, DPI, telephone interview, Aug. 3, 1983.

¹¹ See: DPI, Grant Continuation No. 1 and DPI, Contract for the Purchase of Drug Abuse Services, Contract No. NDADA 83-22.

¹² W. Ralph Michener, letter to CSRO staff, Mar. 30, 1983; Jim Bailey, memorandum to Deb Staley, Mar. 28, 1983.

Division of Medical Services

The Division of Medical Services (DMS) administers three regional inpatient psychiatric hospitals and also funds community mental health programs through a network of regional boards.¹³ The division stated:

The Medical Services Division contracts with regional mental health governing boards for specified services. Regions, in turn, subcontract with service agencies for provision of mental health services. In order to receive State funds, agencies must be certified by the Division and meet the requirements of the attached regulations. The Division is currently revising these regulations and the related certification procedures. These will be made available when completed. Generally, the certification process will consist of review of the program's policies and procedures (including antidiscrimination policies) and onsite review of programs. Through annual contract provisions, all programs receiving Federal block funds must comply with assurances contained in Public Law 97–35.14

Rule 9 of the 1978 "Regulations for Organizing and Implementing Mental Health Services Under the Nebraska Comprehensive Community Mental Health Services Act" provides a prohibition of discrimination in the provision of service based on race, color, religion, national origin, economic status, age, disability, sex, marital status, admission status or ability to pay.15 The department reported that revisions presently in process to these regulations "will parallel the alcoholism/drug abuse nondiscrimination regulations, including the provision requiring an explanation of denied services, upon request. These new regulations also require that a client receive a written statement of rights upon admission to services."16 In addition, contract provisions require nondiscrimination in terms similar to those used by the alcoholism program.¹⁷ similar requirement is placed on the governing regional boards for mental health services by requiring such principles in their policy manuals.18

The Medical Services Division does tabulate data on ethnic/sex grouping of clients, and could tabulate them for each institution/agency and determine whether there was discrimination.

Department of Public Welfare

Like the DPI, administration of the various block grants and civil rights enforcement efforts are divided between the various program operating divisions.

Division of Social Services

The Division of Social Services administers the Social Services Block Grant. Its clients "have the right to choose an approved provider of services. . . . Anyone who meets the established standards for service provision. . .may be approved as a provider. . . . "19 There are about 6,000 providers. 20 In addition to administering this program the division is responsible for provision of supplemental services to Aid to Families with Dependent Children recipients, the Work Incentive Program, adoptive services, alternative care services for adults, chore services. day care services for children or adults, family planning, foster care, home delivered and congregate meals, homemaker services, protective services, special services for the cerebral palsied, special services for the mentally retarded, transportation services and general referral.21

The division's individual and agency service provider agreement (forms DSS-8 and DSS-9) and Mental Retardation Region Service Provider Agreement include clauses in which funded providers agree not to discriminate either in employment or program operation. Failure to honor these clauses is listed as grounds for immediate termination of the provider agreement.²² Similarly, the division notifies each client that no one can discriminate against the client in provision of service (it does not put on the form a notice that the client can appeal such discrimination nor does it specify to whom an appeal based on discrimination should go).²³

The division states that "Evaluations of all providers are conducted at least annually by local resource

¹³ Nebraska Legislative Council, Blue Book 1982–1983 (n.d.), p. 456.

W. Ralph Michener, letter to CSRO staff, Mar. 30, 1983; George Edgar, DPI, memorandum to Deb Staley, Mar. 25, 1983.

¹⁵ DMS, Regulations for Organizing and Implementing Mental Health Services Under the Nebraska Comprehensive Community Mental Health Services Act (March 1978), p. 9-1.

¹⁶ DPI Comment Letter.

W. Ralph Michener, letter to CSRO staff, Mar. 30, 1983; George Edgar, memorandum to Deb Staley, Mar. 25, 1983.

¹⁸ Ibid.

¹⁹ William J. Wood, Office of the General Counsel, Department of Public Welfare, letter to CSRO staff, Mar. 22, 1983.

²⁰ Ibid.

²¹ Nebraska Legislative Council, Blue Book 1982-1983 (n.d.), pp. 463.

²² Nebraska Division of Social Services, Form DSS-9, Form DSS-8, and "Mental Retardation Region Service Provider Agreement."

²³ Nebraska Division of Social Services, Form DSS-3A.

development staff. The annual evaluation must be carried out in a face-to-face interview with the provider."²⁴ But apparently there are no formal review guides or checklists so there is no way of assuring that the discrimination requirements are adequately checked.

Division of Income Maintenance

The Low Income Home Energy Assistance Block Grant is administered by the Division of Income Maintenance. This division also is responsible for Aid to Dependent Children, State Supplemental Assistance to the Aged, Blind, and Disabled, the State disability program, the Food Stamp Program, Medical Assistance eligibility and Child Support Enforcement Programs.²⁵ Its regulations prohibit discrimination.²⁶ The application form states clearly that if a client feels there has been a civil rights violation there may be an appeal to the State department, the county division or the U.S. Department of Health and Human Services. But it does not provide telephone numbers or addresses for any of these.²⁷

Division of Technical Assistance

The Division of Technical Assistance was established to operate the community action programs funded under the U.S. Community Services Administration. It performed essentially technical functions in aiding community action agencies in their relationships with the Federal government.²⁸ The division is now responsible for distribution of the community services block grant funds.²⁹

The division's contracts with the nine community action agencies (CAAs) do require compliance with the Title VI of the 1964 Civil Rights Act and the Nebraska Fair Employment Practices Act. As a legacy of their connection to the Community Services Administration, the local agencies have extensive civil rights compliance practices. The division

²⁴ William Wood, letter to CSRO staff, Mar. 22, 1983.

proposes to make these a permanent feature by State regulation but has not completed this process.³⁰

The division noted that the affirmative action plans of the community action agencies do include extensive provision of effort to utilize minority, female, or handicapped staff and to ensure equitable representation in programs and on advisory bodies.³¹

What it did not note is that such planning efforts appear to have ended with the demise of the Federal requirement and have not been updated in most cases (the Lincoln Community Action Agency is the exception). The department noted that on May 16, 1983, the Department of Public Welfare hired a new Civil Rights/EEO Officer whose duties will include the monitoring of local agencies to ensure compliance and monitoring agency service provider agreements.³² The division staff stated: "as we have had no complaints regarding civil rights, we are not doing anymore detailed monitoring of this area of their operation than any other."³³ Reporting some monitoring, State officials said:

In order to insure that the required services and activities were being provided, the State uses a combination of onsite and desk top monitoring. State staff visit each CAA on a monthly basis to determine if adequate progress is being made. In addition, CAAs provide quarterly financial and progress reports. The quarterly reports are examined to determine whether there are any fiscal or programmatic problems. To date, no significant problems have been found.³⁴

Department of Health

The State Board of Health was established in 1917 and the Department in 1933. The composition of the board, which serves as head of the department, has been increased over the years until it now includes 14 persons plus the Governor, who serves ex officio. The department has numerous divisions providing a wide range of services.³⁵ The maternal and child health block grant is administered primarily by the division of maternal and child health. This division

²⁵ Nebraska Legislative Council. *Blue Book 1982–1983* (n.d.), pp. 461–462.

Nebraska Department of Public Welfare, Program Manual, Manual Letter No. NAC 9-82 (Rev. July 3, 1982), Sec. 1-006.

²⁷ Nebraska Division of Income Maintenance, Form IM-8.

Nebraska Legislative Council, Blue Book 1982–1983 (n.d.), pp. 463–464.

²⁹ William Wood, letter to CSRO staff, Mar. 22, 1983.

William Wood,, letter to CSRO staff, Mar. 22, 1983; Don Mohr, Field Operations Coordinator, memorandum to William Wood, Mar. 18, 1983.

³¹ Ibid.

³² Gina C. Dunning, Director, Nebraska Department of Public Welfare, letter to Chairperson, Nebraska Advisory Committee, June 28, 1983.

³³ William Wood, letter to CSRO staff, Mar. 22, 1983; Don Mohr, Field Operations Coordinator, memorandum to William Wood, Mar. 18, 1983.

³⁴ Gov. Charles Thone, letter to Harvey Vieth, Director, Office of Community Services, Sept. 8, 1982.

Nebraska Legislative Council, Blue Book 1982–1983 (n.d.), pp. 418–442.

funds a variety of health care programs for infants and their mothers.³⁶ Several divisions of the department participate in administering the Preventive Health and Health Services Block Grant: the Laboratory, Nutrition, Housing and Education divisions.³⁷ But we did not receive responses on the activities of individual divisions.

The department stated that "A standard antidiscrimination clause is included in all contracts with grantees. . . . Grantees are not required to complete any forms or provide evidence of compliance."38 The standard form requires compliance only with Title VI of the 1964 Civil Rights Act. It makes no mention of other Federal or State antidiscrimination requirements.39 This clearly does not meet the requirements of Federal law. The State has an obligation to verify compliance with Title VI, Sec. 504 of the Rehabilitation Act, the various age discrimination statutes. It is apparent that the Department of Health does not do so and has no means of doing so. Similarly, it apparently does not attempt to enforce the State's own antidiscrimination statutes by requiring compliance with them as a condition of funding. In short, the Governor's certification of compliance with the various civil rights requirements that condition a block grant has no apparent validity, except to the extent that it may be presumed that because nobody complains there is no discrimination.

Department of Administrative Services

Because procurement of goods for use by State agencies is centralized in the Purchasing Division of the Department of Administrative Services, the Advisory Committee sought to determine what efforts were made to ensure nondiscrimination and opportunity for minorities in the purchasing process.

The department stated:

Each individual Buyer is responsible for maintaining an active minority/small vendor listing. They must ensure that these vendors are kept abreast of all bids and are given an opportunity to bid. The State Purchasing Director is responsible for ensuring that this takes place.⁴⁰

³⁶ Ibid., p. 411.

³⁹ Ibid., attachment to para. 1.

The application to be on the bid list does require identification of business status.⁴¹ At the present time the compliance efforts of the agency are limited. Its only current effort is to require nondiscrimination as one clause of all contracts.⁴² It did not conduct monitoring of contractor compliance with this clause. Since there was little design construction or renovation of buildings or other physical plant, there had been no monitoring of that. However, new compliance efforts will begin during the State's 1983–1984 fiscal year.⁴³

Remedies

The State's Affirmative Action Officer, Ed Wimes, has developed a model contract compliance procedure and submitted it for consideration by the Governor. While this will have to be modified by individual State agencies that add review items needed to assess particular programmatic elements of contracts, it should serve unmodified for the Purchasing Division and would substantially improve the documents used by the other agencies.

The document, which is printed as an appendix to this report, is comprehensive. It requires an on-site review in which the reviewer obtains information on whether there is an equal employment policy, who administers it and what authority that person has; how policy is communicated to those with supervisory duties; how programs are managed to ensure that they are nondiscriminatory and that clients know their rights; what records are kept of applicant flow for both clients and potential employees; what special recruitment efforts have been made to reach minority, female, older or disabled persons for employment or contracting opportunities; what selfanalysis has been undertaken; whether there have been any complaints of discrimination filed against the contractor and what the outcome of these was.44

Only minor changes are needed to make this document complete. The reviewer should be instructed to examine a roster of employees and their wages showing the race and sex and job category of workers to determine whether there is any discrimination. A worksheet should be provided for this

Gov. Charles Thone, letter to Director, Center for Disease Control, Sept. 25, 1981.

³⁸ Dr. Henry D. Smith, Director, Department of Health, letter to CSRO staff, May 9, 1983.

⁴⁰ Cliffon A. Sexton, Director, Department of Administrative Services, letter to Chairperson, Nebraska Advisory Committee, June 30, 1983.

⁴¹ Ibid.

⁴² Ibid.

⁴³ Robert Ryman, Assistant to the Director, Department of Administrative Services, telephone interview, Aug. 29, 1983.

⁴ Ed Wimes, State Affirmative Action Administrator, "Compliance Review Packet" (June 1983).

purpose. This should be done by comparison to job market civilian labor force data. The reviewer should do the same for new hires since the last review. If few minority, women, handicapped, or older workers have been hired, the reviewer should be instructed to use a series of questions provided in the handbook to test the extent of good faith efforts. A similar procedure should be used to review promotions and terminations if there have been any substantial numbers and if there is a statistical difference for any particular group. Greater detail should be obtained on subcontracting efforts. Information should be obtained on the nature of the subcontracts awarded to minority/female-owned businesses to determine whether there is tracking of opportunity. If few such contracts have been awarded but there is substantial subcontracting, the reviewer should be instructed to test the "good faith" efforts of the contractor/vendor with a series of questions provided in the handbook. Data on available minority/female-owned businesses by type of activity should be provided to assist in this analysis. (It is currently available from the Nebraska Business Development Center and will be available after October 1983 from the Departments of Labor and Administrative Services.) The questions on discrimination against persons because of handicap or age need to be strengthened to include the issues of reasonable accommodation and access both in employment/contracting and program operations. Reviewers should be explicitly instructed to supplement the general questions on program operations with detailed requests for information applicable to particular grant programs. State agencies should be instructed that they must provide a comprehensive listing of such questions and necessary worksheets to ensure compliance with all methods of administration agreed with Federal agencies for the receipt of Federal funds. Where no methods have been agreed upon agencies should be instructed they must provide a list sufficient for an independent determination of compliance with all relevant Federal and State antidiscrimination requirements.

Although the proposed contract compliance handbook was sent to Governor Kerrey's office on June 24, 1983, the Governor had not acted on it as of Aug. 12, 1983. This delay on implementing a

procedure that merely amplifies existing agency practices and provides assurance that the State is complying with agreements it has made to receive Federal funds is inexplicable. However, the Department of Administrative Services is developing its own contract compliance procedures and will be monitoring those of other State agencies. During the 1983–1984 State fiscal year it will assign a current employee to be contract compliance officer and arrange its budget to provide the necessary support services. The department is developing its own compliance questionnaire. The department has already revised the State's minority and women's business enterprise directory.45

Complaint Procedures

Clients, employees, or potential employees can use each agency's grievance mechanisms to complain if they believe they have been victims of discriminatory treatment. None of the agencies provided copies of their posters indicating how clients/employees could know what to do.

Department of Public Institutions

The Division on Alcoholism and Drug Abuse provides in its regulations that each provider shall provide an orientation to its program including an explanation of the grievance procedure and provide due process to persons with grievances. Similarly, the Division of Medical Services requires that mental health programs have grievance procedures covering both services and personnel matters. Specifically, clients and their families are to be informed of their rights, in their spoken language; rules are to be posted and prior informed consent obtained for procedures.⁴⁷

Department of Public Welfare

The Department stated that:

When an allegation of discrimination is made, the Civil Rights/EEO Officer investigates the situation and if evidence of discrimination is found, attempts to work out a settlement with the parties to eliminate the discriminatory action is undertaken. If this is unsuccessful or if either of the parties is dissatisfied, then the appeal is cleared by the Director of Public Welfare.

⁴⁷ DMS, Regulations for Organizing and Implementing Mental Health Services Under the Nebraska Comprehensive Community Mental Health Services Act (March 1978), p. 9-2.

⁴⁵ Robert Ryman, telephone interview, Aug. 29, 1983.

⁴⁶ NDADA, Regulations for Organizing and Implementing Alcoholism and Drug Abuse Services Under the Division of Alcoholism and Drug Abuse Act (January 1983), p. 25.

In the last three years there have only been two complaints made. Both of these were made against service providers. One was made against a doctor by an individual who was employed by him and turned out to be completely groundless. The other complaint was a Section 504 complaint involving a transportation services provider in Beatrice, Nebraska who transported elderly and handicapped individuals on handy vans. The allegation was that a handicapped individual who had served as a relief driver was discriminated against in employment when a full time position became available. The provider argued that the handicapped person's performance had been poor. The transportation service was funded through the Nebraska

Commission on Aging. The outcome was that the handicapped individual was given first priority at any future positions that opened and a small cash compensation of a couple hundred dollars as the individual had been employed elsewhere. 48

Department of Health

The Department of Health stated that:

Any individual can complain about services or employment by writing to the Director or to the State Ombudsman. No such complaints have been received about the block grant funded programs.⁴⁹

William Wood, letter to CSRO staff, Sept. 28, 1982.

⁴⁹ Henry D. Smith, letter to CSRO staff, May 9, 1983.

3. Allocating the Benefits of Block Grants

In this chapter the Advisory Committee reviews two issues: the way by which funds are allocated under the various Health and Human Services Public Law 97-35 block grants and the extent to which minorities and women benefit from these funds.

The Funding Process

Department of Public Institutions

As with program operation, the application for the Alcohol, Drug Abuse and Mental Health grant is essentially in two parts, one related to alcohol and drug abuse, the other to mental health.

The mental health funding was grandfathered by congressional mandate for agencies that had received it under the categorical grant program. To maintain services, since Federal funds were cut by 68 percent, grants were awarded to three community mental health centers whose categorical grants had expired or would expire during FY 1982. The remaining funds were saved to be distributed with FY 1983 funding when five community mental health centers would have lost categorical funding and need block grant support. For FY 1983 each center was to be awarded funds based in part on past Federal funding, partly based on prevalence of chronic or severe mental illness in the center's

The block grant law required that alcohol and drug abuse each get not less than 35 percent of the available funding. And 20 percent of that funding had to be for preventive service programs. In fact, alcohol abuse programs were to be funded at the minimum level (35 percent) and drug abuse at the maximum level (65 percent) because the State provided substantial funding of its own for alcohol programs.⁴

Prevention projects were to receive 20 percent of the available funding from each program, four-fifths of this was to go to local programs for primary prevention programs for individuals, community organizations, prevention programs for minorities. Grant applications were reviewed by a technical review committee and their findings considered by the State Citizen's Alcohol and Drug Abuse Advisory Committee. The proposals also were considered by division staff. The division director then had

service area and the record of the center in actually serving the chronically or severely mentally ill. State funding which also is given to the mental health centers remained constant in the two years. Two of the funded centers have significant concentrations of minorities.² The department held public hearings throughout the State and the legislature also held hearings on the allocations as part of the budget process.³

DPI, "Alcohol and Drug Abuse and Mental Health Services Block Grant Summary." (n.d.)

² DPI, "Addendum to Mental Health Services Block Grant Application."

³ W. Ralph Michener, Director, DPI, letter to CSRO staff, Mar.

^{30, 1983;} George Edgar, memorandum to Deb Staley, Mar. 25, 1983.

Gov. Charles Thone, letter to William Mayer, HHS, Sept. 25, 1981; "Alcohol and Drug Abuse Services Addendum."

three recommendations upon which to base his final decision regarding an award. Special needs target populations was one of the criteria. Local prevention programs were funded in Scottsbluff, Peru, Gering, Seward, Lincoln, Omaha, mostly to work with women or minorities.5 Using a similar procedure, 12 one year grants were made to organizations serving women, minorities and young people in Omaha, Lincoln, Hastings, Gordon, Scottsbluff and Chadron. In addition, several organizations were funded to provide technical assistance to providers statewide.6 Eleven agencies received non-competitive continuation grants. Three of these included minorities in their primary target population and two included women in their primary target population.7 No significant changes were contemplated in funding procedures or levels between 1982 and 1983.8

In addition to the processes described, the Unicameral's Appropriations Committee holds hearings on block grant funding and the division sponsors public hearings throughout the State to obtain local and regional input. The advice of the State Drug Abuse and Alcoholism Advisory Committee and regional governing boards also has been sought.⁹

Department of Public Welfare

As with program operation, the applications submitted by the Department of Public Welfare for Public Law 97-35 block grant funds are in three parts: for social services, for community services and for low income energy assistance.

The allocation of the energy assistance was to be based on need. Notice was to be provided to all those known eligible and widespread publicity was to be arranged (in an effort divided between State and local officials). The State noted that it had provided seven public forums in various parts of the State at which comment had been obtained on the proposed program.¹⁰

Describing its procedure for grant allocation, the Division of Social Services stated:

In Nebraska Social Services Block Grant funds are allocated among three major service groupings: services for aged and disabled adults; services for children, families

NDADA, Alcohol and Drug Abuse Block Grant Plan for FY 1982-83 Funds (n.d.), Table 1. See also application packet. and youth; and special services for the mentally retarded. Block grant public forums are conducted in the summer in several key locations throughout the State to obtain comments for social services planning from clients, providers, local officials, community resource personnel and citizens-at-large. The public comment period, however, is not restricted to the time of the forums, as written comments on the Block Grant Plan are accepted throughout the year.

Once each year the Department presents its Block Grant Plan at a legislative hearing with the Appropriations Committee. In addition, the Nebraska Advisory Council on Intergovernmental Relations reviews the Plan.

Throughout the year, the public has an opportunity to attend hearings and provide written and oral testimony on proposed Departmental regulations and policies.¹¹

For fiscal 1982, the State reported that:

As the means of accomplishing their goals the State chose to grant 90 percent of the funds it received to the nine existing community action agencies. The CAAs were evaluated by the State to insure that they were capable of meeting the goals and objectives.

The funding allocation formula used by the State was based on the same proportional funding level the CAAs received under Section 221 of the Economic Opportunity Act.

The State did not attempt to identify any statewide needs. Instead, it requires the CAAs to conduct needs assessments in the areas they serve and develop objectives to meet those needs. To insure that the State's goals were met, all CAAs were required to address each of the services and activities mandated by Section 675(c) unless they could show through needs assessments or other adequate justification that such services should not be provided in their service areas.¹²

For FY 1983 the State stated that it:

utilized a competitive grant application process. Requests for proposals were issued and a panel made up of State agency staff, the Nebraska League of Municipalities, the Nebraska Association of County Officials and the League of Women Voters reviewed and graded each application. Applications were reviewed to determine the extent to which they will provide the services and activities required under Federal law and meet the grantee selection criteria. . .

- William Wood, Civil Rights/EEO Officer, DPW, letter to CSRO staff, Mar. 22, 1983; Gloria Sanborn, letter to Linda S. McMahon, Oct. 21, 1981.
- William Wood, letter to CSRO staff, Mar. 22, 1983.
- Gov. Charles Thone, letter to Harvey Vieth, Director, Office of Community Services/HHS, Sept. 8, 1982.

⁶ Ibid., Table 2 and notes.

⁷ Ibid., Table 3.

⁸ Ibid.

W. Ralph Michener, letter to CSRO staff, Mar. 30, 1983; Jim
 D. Bailey, memorandum to Deb Staley, Mar. 28, 1983.

- . . .All grantees were required to meet a number of criteria prior to funding. If more than one group applied to serve the same geographical area and/or target population, the one which best met the criteria was selected. The criteria were that grantees be able to:
- -effectively measure the outcome of their services;
- —place an emphasis on reaching the poor and moving them out of poverty;
- —have boards of directors that are well trained, active in policy making activities, and involve private business interests;
- —administer a wide range of human service programs which, at a minimum meet the requirements of Federal law;
- —creatively and aggressively seek nongovernmental funding for their programs;
- —show they have personnel policies, pay policies and operational systems which allow them to use relatively small, highly professional staff for an effective operation;
- -effectively communicate with the total population of the areas they serve;
- —show they use effective procedures to assess local needs and must set priorities based on the needs identified;
- —involve clients in service delivery activities when the clients are capable and able;
- —encourage volunteerism and should use volunteers effectively and plan for and accurately record the volunteer time used;
- —provide evidence that they coordinate their activities with those of other agencies and local governments in the area they serve;
- —if private, nonprofit applicants, provide evidence that the structure and membership of their board of directors are in compliance with the requirements of Federal law.¹⁴

In allocating funds, the State stated it would use a formula:

which weighs the number of eligible persons in an area at 75 percent and the average number of unemployed persons in the area at 25 percent. Existing grantees will be funded at the same proportional amount they currently receive except as indicated below. . . .

In order to increase coordination and cost effectiveness and reduce administrative overhead, the State proposes to fund those multi-county grantees which serve an area containing at least 6,000 eligible persons at a level of \$125,000 per year. If the Federal funding level is reduced, it is probable that this funding level will also be reduced.¹⁵

The State stated that:

The public review and comment requirements of Section 1742(b) were met through a mailing of draft copies of the plan to over 700 public officials, provider agencies, advocacy groups and other interested organizations. In addition, meetings were held to inform staff of publicly and privately funded agencies and public hearings were held at six locations throughout the State. An announcement of the request for proposals was published in a statewide daily newspaper and copies of the announcement were mailed to the same groups indicated above.

The public hearings requirements of Section 1742(c) were met when the Appropriations Committee of the Nebraska Legislature conducted a hearing on the proposed use and distribution of the funds on March 4, 1982.¹⁶

Department of Health

The Department of Health administers two block grants: Maternal and Child Care and Preventive Health.

The Maternal and Child Care grant was allocated initially by a subcommittee for preventive health care that met between June-September 1981. Its members include the department's director, representatives of the other divisions in the department, a physician, a local health care director and representatives of the departments of Public Welfare and Education.¹⁷ While these ranked the programs the rankings were never utilized and all existing programs in FY 1982 were funded prorata based on their FY 1981 funding. This decision was made based on public forums held by the department during September 1981. The department did not specify when and where such forums were held.18 For FY 1983, the department proposed to continue the prorata funding techniques it had used earlier rather than its assessment of need. This would result in a substantial cut in the department's own maternal and child health programs, cuts in maternal and infant care projects, children and youth projects, family planning projects, dental health of children projects and intensive infant care projects as well as cuts in the crippled children program but increases in funding for Sudden Infant Death Syndrome and Lead Based Paint programs and constant funding for

¹⁷ Gov. Charles Thone, letter to Acting Administrator, Health Services Administration, Aug. 9, 1982, attachment.

¹⁸ Ibid.

¹³ Ibid.

¹⁴ Ibid.

¹⁵ Ibid.

¹⁶ Ibid.

Supplemental Social Security Disabled Children program.¹⁹ The funding arrangements were approved by the Unicameral based on hearings the Appropriations Committee held on March 4, 1982.²⁰

The decisionmaking process and actual decisions on allocation of the Preventive Health block grant funds were similar to those described above. A subcommittee for preventive health care met between June-September 1981. Its members were the department's director, representatives of affected departmental divisions, representatives of the departments of Public Welfare and Education, a local health director and a physician.21 It ranked the programs in order of priority. But following public hearings held in September 1981, the decision was made to award the block grants prorata based on FY 1981 funding levels. Several grants were necessitated by block grant requirements that specified continuation levels.22 The department proposed to continue prorata funding for FY 1983. The result for FY 1983 would be substantial reductions in the funding of health department programs administered by its laboratory, nutrition, housing and education divisions, cuts in local health funding, continuation at FY 1982 levels for the hypertension and rape prevention programs and increases in the risk reduction, urban rat control and emergency medical services programs.23 The Unicameral reviewed these funding arrangements at hearings held on Mar. 4, 1983 by the Appropriations Committee.24

Beneficiaries of Block Grant Services

A major issue raised by block granting of funds is the change in level of services provided to particular groups. In general, civil rights organizations have been concerned that this format would result in reduced participation by minorities, women and other disadvantaged persons. The Advisory Committee thus sought to determine whether block granting had disproportionately terminated the programs reaching groups within the Commission's mandate. In fact, the provisions of Public Law 97–35 severely restricted the changes in funding levels that were possible.

The Department of Health provided the following summary of the participation in its programs that were block granted:

The general population breakdown in Nebraska is:

White Male
Black Male
Hispanic Male*0.9%
Asian Male
Indian Male
White Female
Black Female
Hispanic Female*
Asian Female0.2%
Indian Female
*Hispanics are also included in the other race categories.
Handicapped Males and Females 11.2%
Males 40 and Over
Females 40 and Over

A number of the block grant programs serve all citizens of the State in relatively the same proportion as represented above. These would include the following:

Health Incentives Grants—Aid to local health departments

Health Department programs:

Hyptertension Control, Health Education, Risk Reduction, Emergency Medical Services (serves higher proportion of persons 40 and over), Dental Health for Children, Intensive Infant Care and Perinatal, Maternal and Child Health Departmental Activities, Sudden Infant Death Syndrome.

Programs that serve substantial numbers of handicapped are:

Services to Crippled Children, SSI-Disabled Children, Genetic Disease Testing and Counseling

Programs' that serve higher numbers of minorities, particularly blacks, are:

- 22 Ibid.
- 23 Ibid.
- ²⁴ Kathryn Baumbach, telephone interview, May 24, 1983.

¹⁹ Ibid.

Kathryn Baumbach, Division of Personnel, Nebraska Department of Health, telephone interview, May 24, 1983.

Gov. Charles Thone, letter to Director, Center for Disease Control, Sept. 25, 1981, attachment.

Urban Rat Control, Children and Youth, Maternal and Infant Care, Lead-Based Paint Prevention, Family Planning

Programs that serve mostly women are:

Rape Prevention and Services, Family Planning

In addition:

The Genetic Program targets females 40 and over as high risk. The Hypertension Program makes special efforts to reach blacks and persons 40 and over.²⁵

The department noted that there would be funding increases in three of four programs which it identified as serving a predominantly black constituency and a funding decrease in one of two programs which it identified as serving a predominantly female constituency.²⁶ A review of the 1983 program summaries shows reductions in three of five programs serving substantial black populations, reductions in four of eight programs serving the general population and one of three serving the handicapped.²⁷

The Medical Services Division of the Department of Public Institutions was funding eight mental health facilities during FY 1983. Of these, it reported one had a substantial Hispanic population (Scottsbluff) and one a substantial black population (Douglas County Hospital CMHC). Both received substantial funding in FY 1983 but did not receive funding in FY 1982 because they were still receiving categorical grant funds. All eight received substantially more block funds in FY 1983 than they had gotten in FY 1982.²⁸ The division reported that about four percent of the beneficiaries of the block grant programs were black and about 2.5 percent were from other minority groups.²⁹

The Division of Alcoholism and Drug Abuse reported that it had yet to expend FY 1983 funds because of the availability of carry-over funds. In the funding available from FY 1982, it provided grants to 22 programs of which four had substantial

²⁵ Dr. Henry D. Smith, Director, Department of Health, letter to CSRO staff, May 9, 1983. black populations, two substantial Indian populations, one a substantial Hispanic population, two a substantial female population and five a substantial youth population (there was some overlap on these categories). Omaha drug treatment agencies received the largest proportion of funding of such agencies in the State. Prevention programs serving minorities received a substantial portion of all such funding.³⁰

Data on the Social Services Block Grant beneficiaries, provided by the Department of Public Welfare showed that the proportions of black recipients increased slightly and the proportion of Hispanic recipients decreased slightly in State fiscal year 1983, 14.0 percent of recipients were black female, eight percent were black male, two percent were Indian female, 1.3 percent were Indian male, 0.3 percent were Asian or Pacific Islander, 1.3 percent were Hispanic female and one percent were Hispanic male.³¹

The Nebraska Low Income Energy Assistance Program reported that of its assisted applicants in FY 1982, 0.4 percent were Asian male, 0.2 percent were Asian female, 1.3 percent were Hispanic male, 1.4 percent were Hispanic female, 3.1 percent were black male, 9.0 percent were black female, 0.7 percent were Indian male, 1.1 percent were Indian female. It estimated the proportions for FY 1983 would be similar.³²

Data on provision of community services is somewhat difficult because recipients may receive more than one program benefit. But if each recipient of each benefit is treated as distinct, than 22.4 percent of beneficiaries were white male, 6.6 percent were black male, 10.0 percent were Hispanic male, 1.1 percent were Indian male, 42.4 percent were white female, 9.7 percent were black female, 5.5 percent were Hispanic female, 2.3 percent were Indian female. Less than 0.1 percent of Asian recipients were reported.³³

²⁶ Ibid.

²⁷ See: Gov. Charles Thone, letter to Health Services Administration, Aug. 9, 1982 and letter to Center for Disease Control, Sept. 25, 1981, attachments.

²⁸ W. Ralph Michener, letter to CSRO staff, Mar. 30, 1983; George Edgar, memorandum to Deb Staley, Mar. 25, 1983.

²⁹ Ibid. See also: Medical Services Division, Mental Health Information System, Persons Served July 1, 1981-June 30, 1982 (May 27, 1983).

W. Ralph Michener, letter to CSRO staff, Mar. 30, 1983; Jim
 D. Bailey, memorandum to Deb Staley, Mar. 28, 1983.

William J. Wood, Office of the General Counsel, DPW, letter to CSRO staff, Mar. 22, 1983; Data prepared by Division of Research and Statistics, Mar. 18, 1983.

³² William Wood, letter to CSRO staff, Mar. 22, 1983; "Nebraska Low Income Energy Assistance Program, Race and Sex of Assisted Applicants through Sept. 27, 1982."

³³ William Wood, letter to CSRO staff, Mar. 22, 1983. Data summary sheet.

4. The Role of State and Federal Civil Rights Agencies

The role of the U.S. Department of Health and Human Services, Office for Civil Rights, has been defined in the introduction to this report. It must continue to administer its civil rights responsibilities as it has in the past. It has a staff of 13 professionals and three clericals to monitor four States. (In FY 1980 it had a staff of 24.) This staff includes five investigators, two voluntary compliance outreach staff members, one attorney, one program analyst, one administrative technician, one equal opportunity assistant and two managers. Over the period FY 1979-FY 1982 it conducted 20 reviews of Nebraska State and local agencies that now may be block grant program providers. Most were local agencies. It reviewed the Department of Public Welfare in FY 1979. It did not, during that period, review the Department of Health. During the period FY 1979-FY 1982 it received and docketed 33 complaints of discrimination. Its most recent record of a complaint

While our Case Information and Management System shows that the Investigative Report (IR) was completed in final form on June 29, 1979, it was not actually completed until approximately Nov. 11, 1980. The June 29, 1979, date was accurate in the fact that the IR was as complete as it could be until we received the data analysis from our Headquarters. The data collected during the course of this review exceeded the Region's data analysis capabilities. As a result, we referred the data to our Headquarters staff for computer analysis.

against the Department of Public Welfare is in 1981 and against the Department of Public Institutions in 1980. During this period it received no complaints about the Department of Health.¹ These complaint investigations or reviews, of course, not merely cover block grant recipients but also any recipient of Federal funds, whether directly or indirectly. Compared to the number of block grant subrecipients, Health and Human Services has reached only a small portion of the universe—in FYs 1979–1982 it reviewed 42 separate facilities or institutions in connection with 52 complaints or reviews.² In FY 1983 it planned to conduct seven reviews in Nebras-ka, all of local institutions or agencies.³

The Office for Civil Rights (OCR) reviewed the activities of the Department of Public Welfare in 1979. But it did not send its letter of findings until June 30, 1981.⁴ This was a comprehensive review that covered not only the State department but also

During this time the Department of Health, Education and Welfare split into the two current Departments and our Headquarters did not complete the analysis for over one year. It was not returned to the Regional Office until July 28, 1980.

We began completing and revising the IR at that time. Because of the reorganization, the case had been reassigned and the IR was not completed until Nov. 11, 1980, when it was referred to the Chief Regional Civil Rights Attorney (CRCRA) for review, as was the Letter of Findings (LOF). The CRCRA advised that the LOF was legally sufficient on Feb. 27, 1981. On Mar. 12, 1981, we advised Headquarters of our proposed findings. On June 24, 1981, Headquarters advised that we could release our LOF. We did so on June

¹ Lois Carter, Acting Director, OCR, Region VII, letter to CSRO staff, Apr. 4, 1983 and Lorenzo Cervantes, HHS/OCR, interview in Kansas City, Mo., Aug. 9, 1983.

² Ibid.

³ Ibid.

[•] The Regional Director of HHS/OCR stated:

the county departments in Douglas, Lancaster, Sarpy and Scotts Bluff counties.⁵ In its letter of findings, OCR told the Department of Public Welfare it was in noncompliance with Title VI of the 1964 Civil Rights Act because:

- It had failed to implement its Title VI Methods of Administration.
- It had no Title VI compliance officer.
- It had not disseminated its Title VI Methods of Administration to regional and county offices.
- It failed to monitor its vendors compliance with Title VI. Such monitoring as did occur was not likely to be effective, although in 1972 the department had agreed to make its monitoring effective.
- It failed to develop an effective complaint processing procedure to deal with Title VI issues separate from the limited review available for complaints about denial of service.
- It failed to ensure that all its brochures and other written communications indicated there could be no discrimination in provision of service.
- In 1972, OCR had found State officials were not instructed on Federal requirements for nondiscrimination in provision of service. In 1979 these officials remained unaware of the requirements.⁶

To correct these deficiencies, the department was instructed by OCR to:

- Formulate current Methods of Administration under Title VI and submit them for review and approval. The new methods were to reflect the State reorganization since 1965.
- Assign responsibility and duties for Title VI coordination.
- Inform beneficiaries, participants, potential beneficiaries, and other interested persons of their Title VI rights to service and their right to complain under Title VI and the Title VI complaint procedures.
- Maintain a file on all Title VI complaints.
- Formulate procedures for monitoring the State Agency's Title XX Program for discriminatory impact using racial/ethnic statistics on clients to be gathered by the Department of Public Welfare and periodic Title VI compliance reviews of all vendors utilized in the delivery of services.

- Collect and maintain a data base of racial/ethnic statistics on individuals who are eligible for and potential beneficiaries of services. Compare this with racial/ethnic statistics to ascertain whether all segments of the population are being adequately served.
- Formulate and implement procedures for ensuring nondiscrimination in making referrals to other agencies and organizations.

The Office for Civil Rights also found noncompliance with Sec. 504 of the Rehabilitation Act. To remedy noncompliance it required the department to:

- —Take initial and continuing steps to notify participants, beneficiaries, applicants, and employees, including those with impaired vision or hearing, and union or professional organizations holding collective bargaining or professional agreements with the State Agency that you do not discriminate on the basis of handicap.
 - —Designate and make known to all beneficiaries, participants and potential participants and staff the identity of the person or title of the person responsible for coordinating Section 504 activity.
 - —The OCR recommended that the coordinators' job description be revised so that they report directly to the Director or Deputy Director.
 - —Formulate and implement procedures for the handling of Section 504 complaints in a prompt and equitable fashion and make these known to all agency staff, beneficiaries, potential beneficiaries, and other interested persons.
 - —Conduct a self-evaluation of all State Agency policies and practices for compliance with Section 504 and the requirements of the Section 504 Regulations, in accordance with Section 84.6(c) of the Regulations, including an examination of its policies and practices pertaining to all employment decisions; the extent to which its program is readily accessible to and usable by handicapped persons; whether all of its policies and practices are free from discriminatory effects on handicapped persons; whether it is engaging in contractual or other arrangements that subject handicapped persons to discrimination and that its referral practices, selection of sites and geographic locations where Title XX services are offered and its communications with sensory impaired individuals are free from discriminatory effects.
 - —Adopt and implement procedures to ensure that persons with impaired vision or hearing, can obtain information about the State Agency's practice of pro-

and David E. Florence, Deputy Director, HHS/OCR, letter to John Knight, Director, DPI, June 30, 1981.

- ⁶ David E. Florence, letter to John Knight, June 30, 1981.
- 7 Ibid.

^{30, 1981. (}Lois V. Carter, Regional Manager, Department of Health and Human Services, Office for Civil Rights, Region VII, letter to staff, July 22, 1983.)

⁵ HHS/OCR, Investigative Report, Review Nos. 07797001-5 (n.d.)

viding services in the home for persons who, because of handicap, do not have access to the State Agency's facilities.⁸

Shortly after its request, OCR received an agreement from the Department of Public Welfare to take the various actions needed to bring the agency into compliance. Department of Public Welfare (DPW) agreed to formulate a current Methods of Administration under Title VI; ensure beneficiaries, participants, and potential beneficiaries are informed of nondiscrimination rules and how they may file a Title VI complaint by insertions of relevant information in current and future publications; maintain a file of Title VI complaints; monitor Title XX program services by spot checks and collect data on the race/sex of potential participants and actual participants; instruct staff about nondiscrimination in referrals; create a Sec. 504 coordinator and ensure his identity is known to beneficiaries by posters and insertions in other publications; formulate and implement Sec. 504 complaint processes; self-evaluate all State agency practices and policies to ensure compliance with Sec. 504; ensure accessibility of information to the handicapped.9 Based on these commitments, the Office for Civil Rights closed its investigation with findings of compliance by the Department of Public Welfare with both Title VI and Sec. 504.10

The department reported it had implemented this agreement. It had formulated a current methods of administration and assigned responsibility. It had changed the notices on its applications and other printed information. Although some still contain the old information, the department expects to reprint them shortly with the new information. It now maintains a file of Title VI complaints. It not only has data on actual clients in its computer but utilizes

census data for program planning. Title VI complaints are now handled only by the department's affirmative action officer. All new staff are instructed during training that they may not make nondiscriminatory referrals. The Sec. 504 complaint process has been revised. A Sec. 504 self-evaluation will be conducted shortly. This was delayed because of the reorganization of county welfare offices from county to State supervision. Information to the handicapped is now disseminated via the statewide hotline for the handicapped that is administered by the Department of Education.¹¹

At present the Nebraska Equal Opportunity Commission has no role in the monitoring of agency compliance with civil rights requirements of the block grant legislation. Its jurisdiction is limited to the State Fair Employment Practice Act, the Equal Pay Act, the Act Prohibiting Unjust Discrimination in Employment Because of Age and the prohibitions of discrimination in housing and public accommodations contained in the State Civil Rights Act of 1969.12 For the Commission to assume any role, it would need legislative authorization and funding. The authorization could be provided either by blanket authority or by attachment to an appropriation bill. The agency thought to provide adequate monitoring and review it would need three to five additional staff and between \$60-100,000 additional budget authorization.13

The Governor could assign responsibility for implementation to the State Affirmative Action Officer, if the proposed handbook on contract compliance is adopted. In this case, there would have to be agreement with the State Treasurer's Office for release of funds to be contingent upon satisfactory compliance certificates supplied by the affirmative action officer.¹⁴

⁸ Ibid.

David E. Florence, letter to John Knight, Sept. 21, 1981.

¹⁰ Ibid.

William Wood, telephone interview, July 19, 1983.

¹² Nebraska Legislative Council, *Blue Book 1982-1983* (n.d.), pp. 550-552.

¹³ Lawrence Myers, Executive Director, Nebraska Equal Opportunity Commission, telephone interview, May 25, 1983.

¹⁴ See: Ed Wimes, Affirmative Action Administrator, memorandum to Forrest D. Chapman, Department of Personnel, June 24, 1983.

5. Conclusions, Findings and Recommendations

Conclusions

This report is not about the level of discrimination in block grant funded programs nor does it address the level of discrimination in health and human services programs generally. Rather, it contains information about the extent to which agencies charged with responsibilities to ensure nondiscrimination in one set of federally-funded programs, the Public Law 97-35 block grants administered by the U.S. Department of Health and Human Services, actually fulfill their statutory obligations. The report also contains data on the extent to which minorities, women and the handicap continue to benefit from the funding transferred by Public Law 97-35 from categorical to block grants. Deficiencies in either of these areas do not "prove" discrimination in practice or intent. Rather they suggest a neglect whether benign or otherwise of statutory obligations designed to ensure equality. The Advisory Committee recognizes that these obligations may seem peripheral to program managers concerned with the fair and effective operation of large programs of general social benefit. Seeing no obtuse discrimination, it is easy for program managers to view nondiscrimination enforcement as of marginal concern. But we cannot choose the laws we will obey because they seem beneficial and the laws we will ignore because they seem unimportant. Nor has there been the informal assignment of discretion such as that given

to police officers to choose whether enforcement is effective. In accepting the Public Law 97-35 block grants, States through their governors accept the responsibility to ensure nondiscrimination and must take whatever action is necessary to give reality to that promise.1 Following the regulatory and juridical histories of the various Federal civil rights laws, this means the States have committed themselves to seek out and eradicate any potential or actual discrimination in federally-funded programs. And the Federal administering agency, the U.S. Department of Health and Human Services, has a parallel obligation not only to ensure there is no discrimination in federally-funded programs but also to ensure that States give effect to their assurances. The extent to which these obligations have been effected by Nebraska State agencies and by the Region VII Office of Civil Rights of the Department of Health and Human Services is open to question.

The Nebraska Department of Public Institutions administers block grant programs through both its Alcoholism and Drug Abuse and Medical Services divisions. The former does review data on clients of each institution and does contain limited questions on its review protocols for determining compliance with antidiscrimination regulations. But it does not specifically review compliance with the various nondiscrimination assurances it requires. It is open to

¹ 47 Fed. Reg. 29474 (July 6, 1982) and application letters cited in earlier chapters.

question whether the reviews it does conduct are sufficient to ensure nondiscrimination.

The Division of Medical Services does maintain data on the race/sex of clients and presumably could analyze this by institution to test for discrimination but does not report doing so. While it includes the standard contractual language prohibiting discrimination there is no evidence of reviews to ensure compliance with them.

The Nebraska Department of Public Welfare administers block grant programs through its divisions of Social Services, Income Maintenance and Technical Assistance. The Division of Social Services does conduct annual reviews of its providers but there are no formal review guides or checklists that would allow determination as to whether compliance with the antidiscrimination assurances is thoroughly reviewed. The Division of Income Maintenance does not report any formal review mechanism. Its application does note clients may complain to Federal, State or local agencies but fails to provide names and addresses for these. The Division of Technical Assistance notes that because it has not had any complaints of discrimination, it is not providing any special resources to monitoring compliance with antidiscrimination assurances. It stated that its regulations were currently being revised and some monitoring was occuring that disclosed no significant problems. But the level of current compliance with the antidiscrimination requirements is open to question and the extent of proposed efforts to ensure compliance remains unclear.

The Nebraska Department of Health includes standard antidiscrimination clauses in all its contracts but does not require contractors to complete any forms or provide any evidence of compliance with the assurances. Thus it apparently takes no measures to ensure compliance.

All three State agencies administering block grants funds do have complaint procedures. But it was impossible for the Advisory Committee to determine from the data provided whether the procedures devised or utilized are likely to be effective.

The Department of Administrative Services is responsible for purchasing the goods used by the various State agencies that administer Federal funds. To date, its contract compliance efforts to ensure nondiscrimination by contractors and equal opportunity in participation in State purchasing have been

limited or nonexistent. This should change if the contract compliance procedures it will implement during the 1983–1984 State fiscal year are comparable to those proposed by the State Affirmative Action Coordinator.

In many cases allocations of funds under the health and human services block grants were "grandfathered," limiting the discretion of the granting State agency. In other cases the agencies apparently chose to continue existing levels of support on a prorata basis despite internal suggestions for reallocation. Thus, while in some programs reduced funding by the Federal government meant reduced funding of programs, there was little overall change in the allocation of resources. These decisions were made in a process that included internal agency discussions (sometimes assisted by advisory committees), public hearings and legislative hearings. While some minority programs did suffer, there was little overall indication of a reallocation of resources away from local providers or types of services targeted to minorities or women.

The Nebraska Equal Opportunity Commission has no jurisdiction to review compliance by State agencies with their nondiscrimination obligations under the block grants, although it indicates that with authority it could conduct reviews for between \$60-100,000.

Alternately, the Governor could assign this responsibility to the affirmative action administrator. He would coordinate implementation by the State agencies in conjunction with the draft contract compliance document he submitted to the Governor on June 24, 1983. The Governor's delay in making necessary modifications to this document and approving its use seems inexplicable to the Advisory Committee. The contract compliance program to be implemented by the Department of Administrative Services may be an alternative if sufficient resources are allocated and effective procedures are developed.

The Office for Civil Rights of the U.S. Department of Health and Human Services (HHS/OCR) in Region VII does have continued responsibility for compliance both by the State agencies and their providers. In recent years HHS/OCR's primary emphasis has been on reviewing providers. The number of providers reviewed in Nebraska is only a very small proportion of the universe within HHS/OCR's jurisdiction.

HHS/OCR conducted only one departmentwide review of State practices—the Social Services Division of the Department of Public Welfare. This 1979 review was not closed until Sept. 21, 1981, when an agreement for remedies to Title VI and Sec. 504 noncompliance was obtained. The Department of Public Welfare does submit quarterly reports and reported it had complied with its agreement. It is therefore unclear that HHS can verify whether there is compliance with the State assurances of nondiscrimination by the other agencies receiving Federal block grant funds.

It is not clear whether there is discrimination in the block grant programs. Much of the surface evidence suggests there is none. But the problem is that there are no mechanisms that adequately guard against discrimination. Such measures are essential if the assurances of nondiscrimination are to have meaning.

Findings and Recommendations

The following findings and recommendations are submitted under the provisions of Sec. 703.2(e) of the Commission's regulations, empowering the Advisory Committee to "Initiate and forward advice and recommendations to the Commission upon matters which the State Committee has studied."

The Advisory Committee presents the findings and recommendations for consideration by the Commission in its national program planning and for its consideration in advising the President and Congress on matters within its jurisdiction.

Finding 1: State efforts to ensure compliance with Federal antidiscrimination laws have, generally, been insufficient to meet the obligations the State and its agencies assumed in accepting such funds in the past. Although some improvements are contemplated by individual agencies, much of the future machinery is likely to be equally insufficient. How-

ever, if that machinery were coupled with the contract compliance procedure proposed by the State's affirmative action officer, it would be effective.

Recommendation 1: The Governor, as ex officio guarantor of compliance with Federal antidiscrimination laws should consider implementing his State affirmative action administrator's suggested contract compliance procedures with the modifications suggested in this report.

Finding 2: Absent any significant change in the allocation of responsibility for antidiscrimination contract compliance, the State agencies administering Federal funds could do much more than they are doing to ensure adequate enforcement of Federal and State antidiscrimination laws. The Department of Administrative Services new contract compliance program may provide some remedies.

Recommendation 2: The agencies administering Federal programs should strengthen the quality of the evaluative tools used to assess compliance with antidiscrimination laws; heighten the priority assigned to antidiscrimination activities in general administrative reviews; and allocate additional resources to agency affirmative action officers so that they can effectively review the compliance of grantees, contractors, and vendors with antidiscrimination contract provisions.

Finding 3: The level of resources available to Federal civil rights agencies to review contract compliance is clearly far less than needed to adequately monitor State compliance with antidiscrimination assurances and grantee performance.

Recommendation 3: The U.S. Commission on Civil Rights should consider conducting a new review of Federal contract compliance efforts in which it would consider how "New Federalism" principles could be used to make the entire compliance effort more effective.

STATE of NEBRASKA'S
EXTERNAL
COMPLIANCE REVIEW PROGRAM
FOR
BLOCK GRANTS, VENDORS
SUPPLIERS AND SUBCONTRACTORS

FORWARD

This EEO compliance review packet has been developed to aid the State of Nebraska in determining the compliance status of block grant recipients, vendors, suppliers and subcontractors who apply and receive state and federally funded projects or programs with the State of Nebraska.

This compliance packet will be completed by the compliance officer and will be a part of the permanent records maintained by appropriate state agencies administering the program or project. It is also noted that any contractor, vendor, supplier or grantee who sublets any of their work to a third party is still accountable for the sublet actions and performance.

Every project, program or activity is separate and stands alone as far as EEO compliance is concerned. A vendor, supplier, subcontractor or grantee's EEO policy and implementation of this policy must be reflected in every and all projects, programs, activities they undertake with the State of Nebraska.

If the supplier, vendor, subcontractor or grantee is unable to answer questions of this compliance review it may indicate a problem area which will require the compliance officer to take follow-up action. If the vendor, supplier, subcontractor or grantee fails to respond to the recommended suggestions and or remedies outlined by the compliance officer then a "show-cause" notification will be issued to the affected party. This notification will allow the affected party the opportunity to state why the program should not be terminated. If the reason provided is justified because of business necessity or a bona fide occupational qualification the program, project may be allowed to continue by the grantor.

The compliance officer is the connecting link between the state agency and the party(s) involved in this program, projects or activities supported by state and federal funds. As, such this individual must be a key figure in insuring equal opportunity and equal treatment is guaranteed for all applicants and recipients of the programs or projects they award.

FOR EEO COMPLIANCE

TO: (firm, agency, contractor)

FROM: (compliance officer's name and organization)

SUBJECT: (equal employment compliance review)

Dear:

This is to advise that we (I) will conduct and Equal Employment Compliance review on (date) at (time). The review will be held at (location) located at (address). The purpose of this review is to examine all phases of your firms' Equal Employment activities in keeping with the spirit and requirements of Title VI, and Title VII legislation.

Please advise if a compliance review has been conducted by other government agencies within a period of six months prior to the schedule date of this review.

We (I) are looking forward to meeting with you. If the date specified seriously conflicts with your schedule, please let (me) us know.

Very truly yours,

Grant/Program Grantees' EEO Compliance Review

Grant/Program No						
	Grantee					
Location						
	Type of Program					
Vendor	Supplier	or	Subcontractor			
This report prepared by(name)						
Department of_						
Division				date		

State of Nebraska's External Compliance Review Program for Suppliers, Vendors, subcontractors, Grantees

THE FOLLOWING QUESTIONS SHOULD BE ASK OF THE OWNER, PROGRAM DIRECTOR PERSONNEL OFFICER OR DESIGNATED REPRESENTIVE OF SUCH PARTIES:

1.	Are you aware of the Title VII, and Title VI Equal Employment opportunity requirements?
	How is this communicated to your staff and the general public; (program recipients)
2.	Do you have an Equal Employment policy? Is it posted for review? (CRO should personally view and retain a copy)
3.	Who, if one has been appointed, is your Equal Employment Opportunity Officer. What position do they retain in your organization?
4.	Does your EEO Officer have adequate knowledge, authority, and responsibility to carry out the compliance provisions of Title VII and Title VI provisions? How was this determined?

5.	How are all members of your staff who are authorized to hire, supervise promote, and discharge employees, or who recommend such action, made fully aware of the EEO policies of your firm?
6.	Has your EEO Officer held a meeting with all supervisory and personnel office employees, prior to receipt of this grant/or contract award to explain your EEO policy and how these activities are to be carried out? (summarize dates and locations of such meetings.)
7.	How frequently does yourcEEQ Officer conduct meetings with supervisory employees/program administrators or managers?
8.	How do you ensure that the program recipients are treated and receive benefits on a non-discriminatory basis?
9.	Are all new supervisory personnel given a thorough presentation by your EEO Officer, or other knowledgeable official, within thirty days of their hire?
	How is this accomplished?

10.	Are all applicants and or recipients informed of your EEO policy when they report for an interview or work?
11.	When advertising for employees, do your advertisements carry the notation "An Equal Opportunity Employer"?
	Attach a copy of advertising previously used:
12.	Are advertisements for employees carried in newspaper and other publications which have a large circulation among women and minority groups?
13.	Are supervisory employees instructed to keep a record of all personnel who apply for employment and or benefits? How is the record kept as to whether the applicant is minority, female or disabled and why the applicant/recipient is not eligible for employment or receipt of benefits?
14.	Does you agency maintain a list of minority, disabled and female recruitment sources; provide written notification to minority disabled and female recruitment sources and to community organizations when you have employment or benefit: programs available?
	Is this information documented?

15:	What efforts are taken by you to recruit members of the local community who represent minority, female and the disabled groups as a part of your administrative staff?
16.	Does your agency rely in whole or in part upon unions as a source of your work force?
17.	How many protected group members have been referred by Unions for employment?
18.	Has your agency/company made an effort to incorporate an EEO clause in all union agreements to the end that such unions will be contractually bound to refer applicants without regard to race, religion sex, color or national origin?
19.	Are all wages, working conditions, and employee benefits established and administered, and personnel actions of every type, including hiring, upgrading, promotion, transfer, demotion, layoff, and termination taken without regard to race, color, religion, sex or national origin?
	Specify:

20.	How often are periodic inspections made of the project or program site to insure working conditions, program administration and employee facilities do not indicate discriminating treatment?
	Who conducts the inspection and or review?
21.	How are employees or recipients informed of whom they are to contact if they believe discrimination is occurring?
22.	How are investigations made of all complaints, and how is a record made of the appropriate action?
23.	How does your agency/company try to utilize minority and female owned business' as subcontractors, suppliers, vendors or program assistants?
24.	What is the total dollar amount awarded to these firms? What internal evaluations are accomplished to determine program or project quality and efficiency?

25.	Are there	any pending	discriminatory	suits	against	your	firm
	agency or	program?					

26. Have you had any discrimination suits filed against your firm agency or program?

What was the outcome of those charges?

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