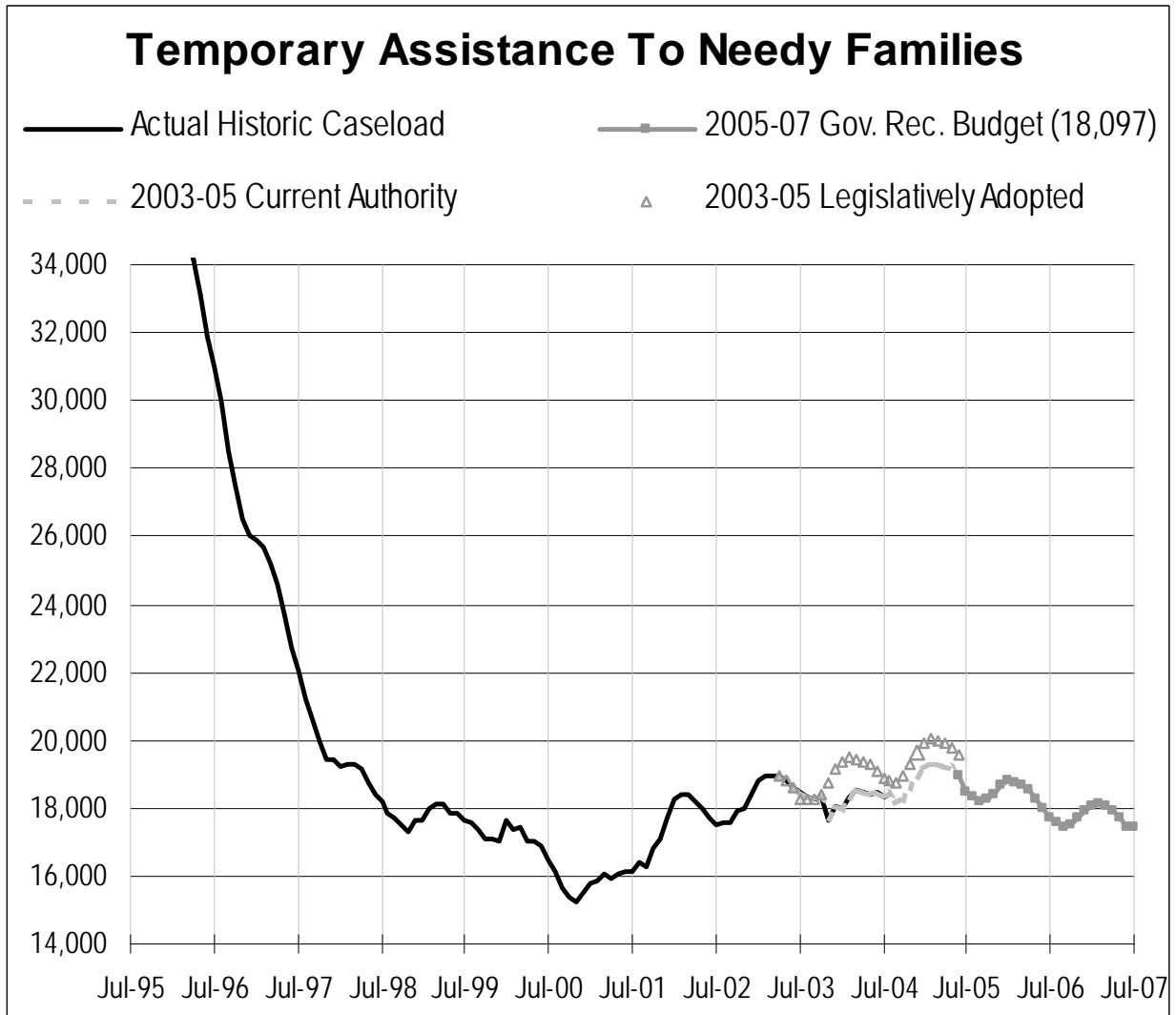


## Temporary Assistance to Needy Families



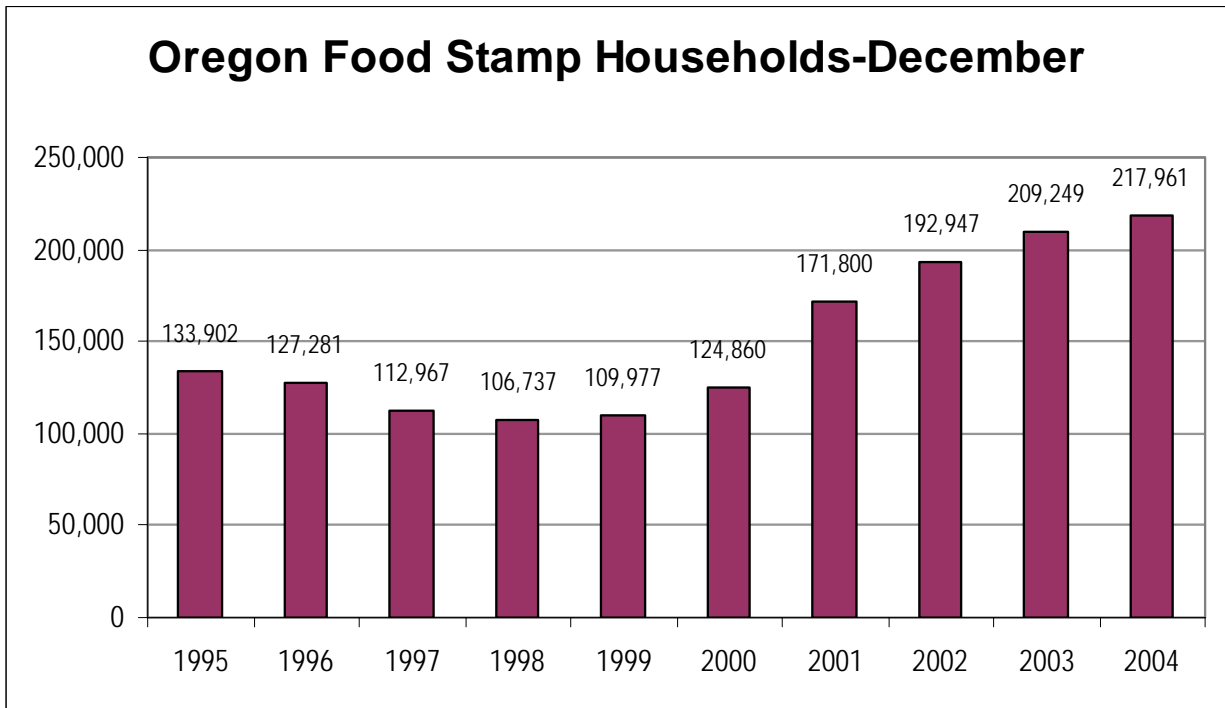
After peaking in early 1994 at about 43,400 cases, single-parent TANF families began a steady decline that continued through the end of 2000. The caseload hit its lowest point in November 2000, reporting 14,769 cases. Since that low point, the caseload has shown some modest increases and a return to historical seasonal variation. In October 2004, the number of single-parent families stood at 17,592.

Two-parent families have seen an even more dramatic drop than the single and no-parent segments of the population served. It has decreased from more than 4,000 in 1993 to just over 1,000 at the current time -- a drop of 70 percent versus a 59 percent in single-parent families.

More of the adults in two-parent families have a work history and the presence of two parents in the household often means fewer problems with child care and greater support for the employed parent.

<b>Poverty Level by Family Size</b>			
Family Size	Poverty	150 Percent	185 Percent
		Poverty	Poverty
1	776	1,164	1,435
2	1,041	1,561	1,926
3	1,306	1,959	2,416
4	1,571	2,356	2,906
5	1,836	2,754	3,396
6	2,101	3,151	3,887

The TANF caseload has remained relatively stable since the start of the biennium.



## Child Protective Services

### Program Evaluation of Family Based Services

*The provision of Family Based Services is based on the following research. These findings provide the foundation for linking Family Based Services to positive family outcomes.*

Recent research reports such as “Evidence Based Practices in Mental Health Services for Foster youth” by the California Institute of Mental Health and the “Child Physical and Sexual Abuse: Guidelines for Treatment” by the National Crime Victims Research and Treatment Center and the Center for Sexual Assault and Traumatic Stress, indicate that the most successful, evidence-based treatments utilize “wrap-around” and cognitive behavioral treatment strategies.

Successful programs are consistent with System of Care principles that establish parents as partners and provide treatment in the least restrictive environment possible. Family Based Service programs are based upon these principles, utilizing the Family Decision Meeting process to coordinate treatment and engage parents as partners in the change process. Services to the non-abusing parent are especially helpful to help protect children in the future. DHS is currently evaluating based on how evidence supports this with current populations of families we serve.

The CIMH study noted that, ‘Research on interventions with sexually abused children has shown that abuse-specific cognitive behavioral therapy results in better outcomes than standard community treatments and that families participating in family centered casework, cognitive behavioral therapy or family therapy also had improved outcomes.’ (Executive Summary, p. 13)

The “Service Effectiveness” report by the Child Welfare Partnership at Portland State University published in January 1999 indicated that the services effective at reunifying families include visitation, parent training, drug and alcohol inpatient treatment, drug and alcohol outpatient treatment, Intensive Family Services, family counseling, and Alcoholics Anonymous/ Narcotics Anonymous. There were

insufficient numbers for IHS and FSAT services to be evaluated in these studies. These services required parents to attend or mostly attend all sessions.

Service effectiveness is also related to family characteristics. An increased re-abuse rate is associated with alcohol involvement, angry/aggressive behaviors, domestic violence and a lack of supervision. Families who re-abuse their children are burdened with more problems than are families who don't.

## Performance Measures

Oregon has improved this outcome over the past two years, decreasing re-abuse from 8.9 percent to 7.6 percent.

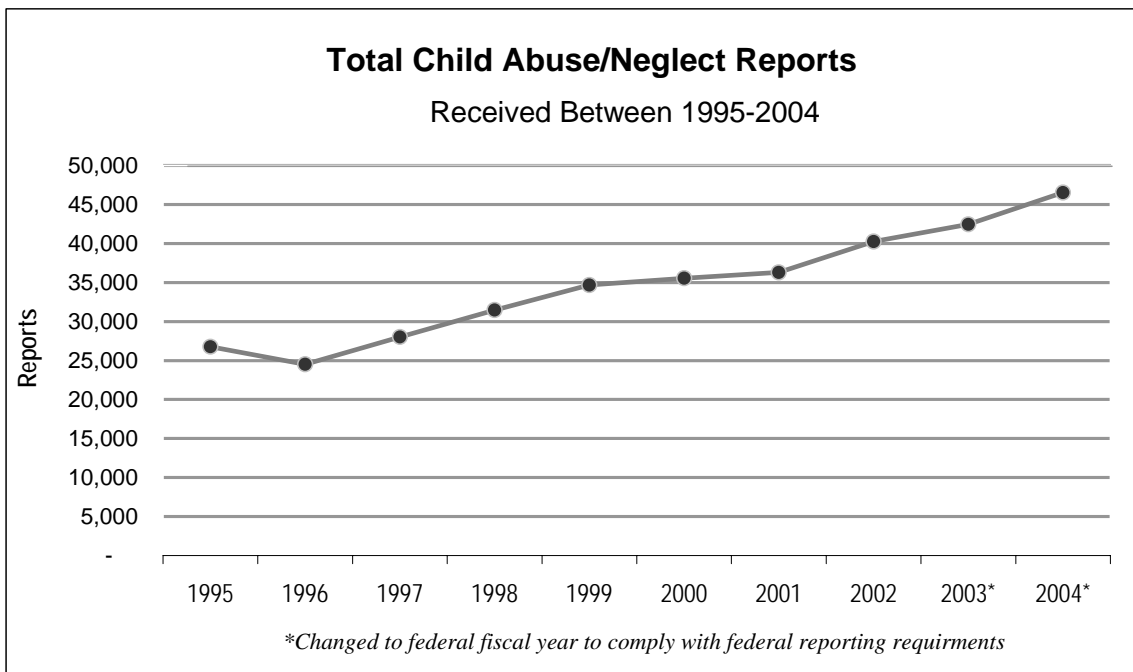
National Standard	6.1 percent or fewer children had another substantiated report within six months of a prior substantiated report
Oregon Program Improvement Plan Goal	To be less than or equal to 7.7 percent
Oregon 2002 <i>(initial abuse Oct. '01 – Sept. '02, subsequent abuse through Mar. '03)</i>	8.9 percent
Oregon 2003 <i>(initial abuse Oct. '02 – Sept. '03, subsequent abuse through Mar. '04)</i>	7.6 percent

## Child Abuse/Neglect Reports

### Total Child Abuse/Neglect Chart

In 2004, DHS child welfare received 46,524 reports of suspected child abuse and neglect, an increase of 9.6 percent from the previous year.

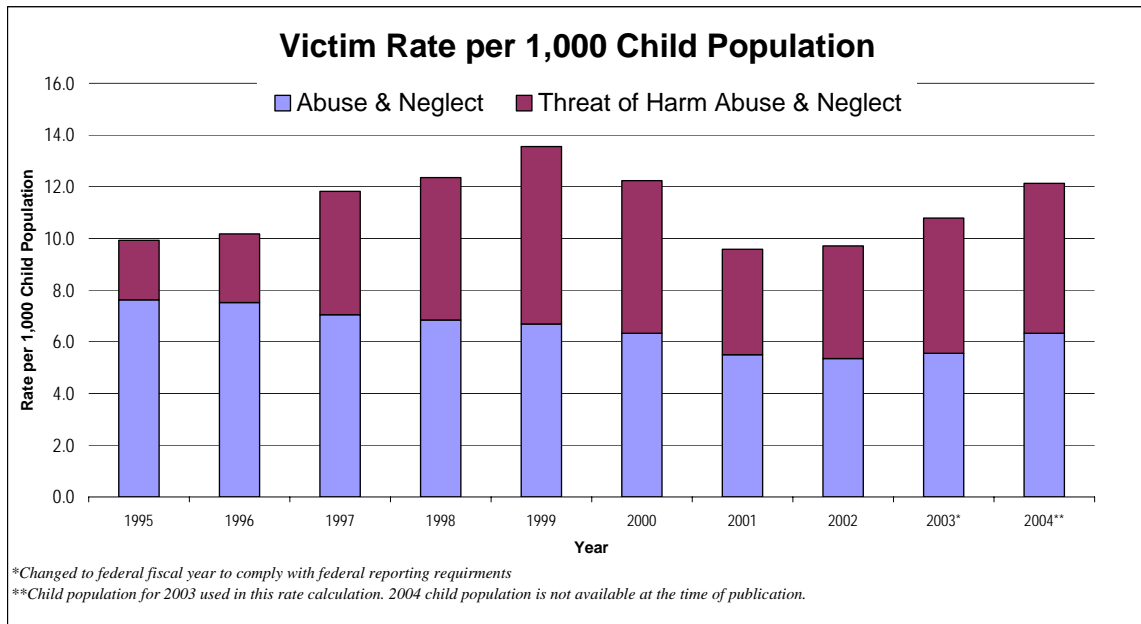
Over the past ten years there has been a 73.8 percent increase in the number of reports of suspected child abuse and neglect. Factors that influence increased reporting include improved training for mandatory reporters, increased intensity of family problems, and increased awareness of child abuse and neglect in the general population.



## Victim Rate Chart

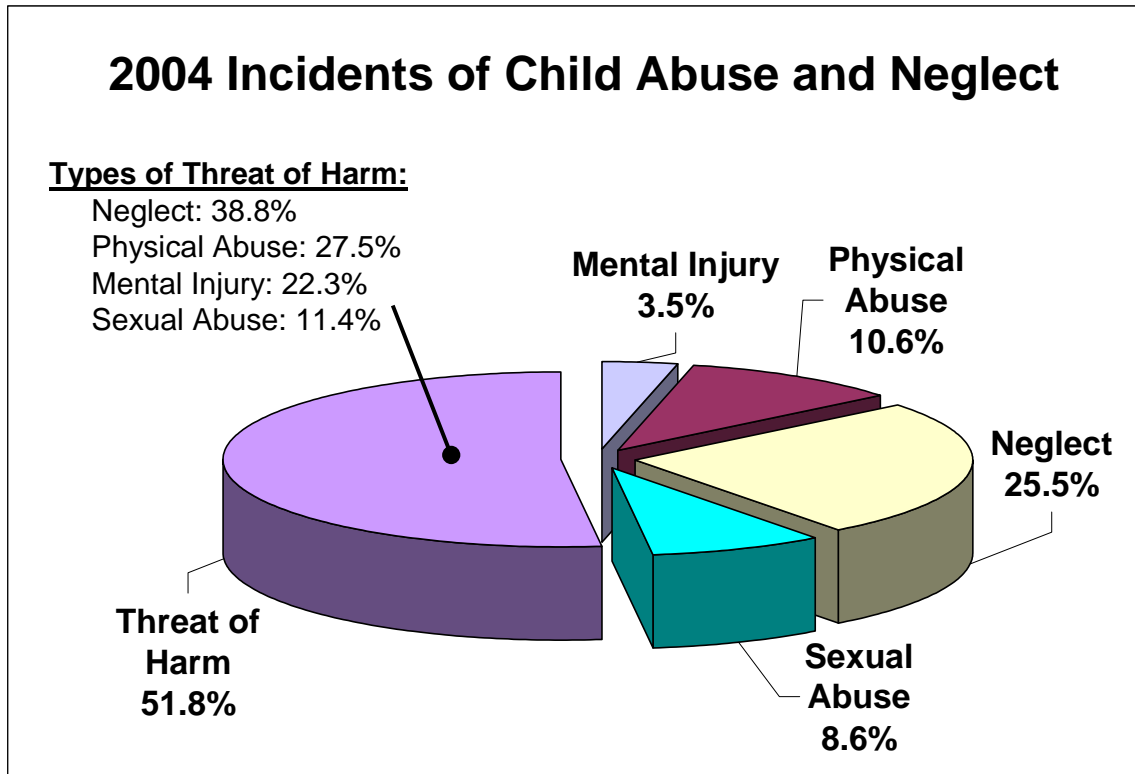
There were 10,622 child abuse and neglect victims in 2004, an increase of 12.4 percent from 2003.

Overall, the number of victims of child abuse declined from a high in 1999, when 11,291 children were victims of child abuse and neglect. However, increasing family problems has led to an increase in the number of victims of child abuse and neglect over the past three years.

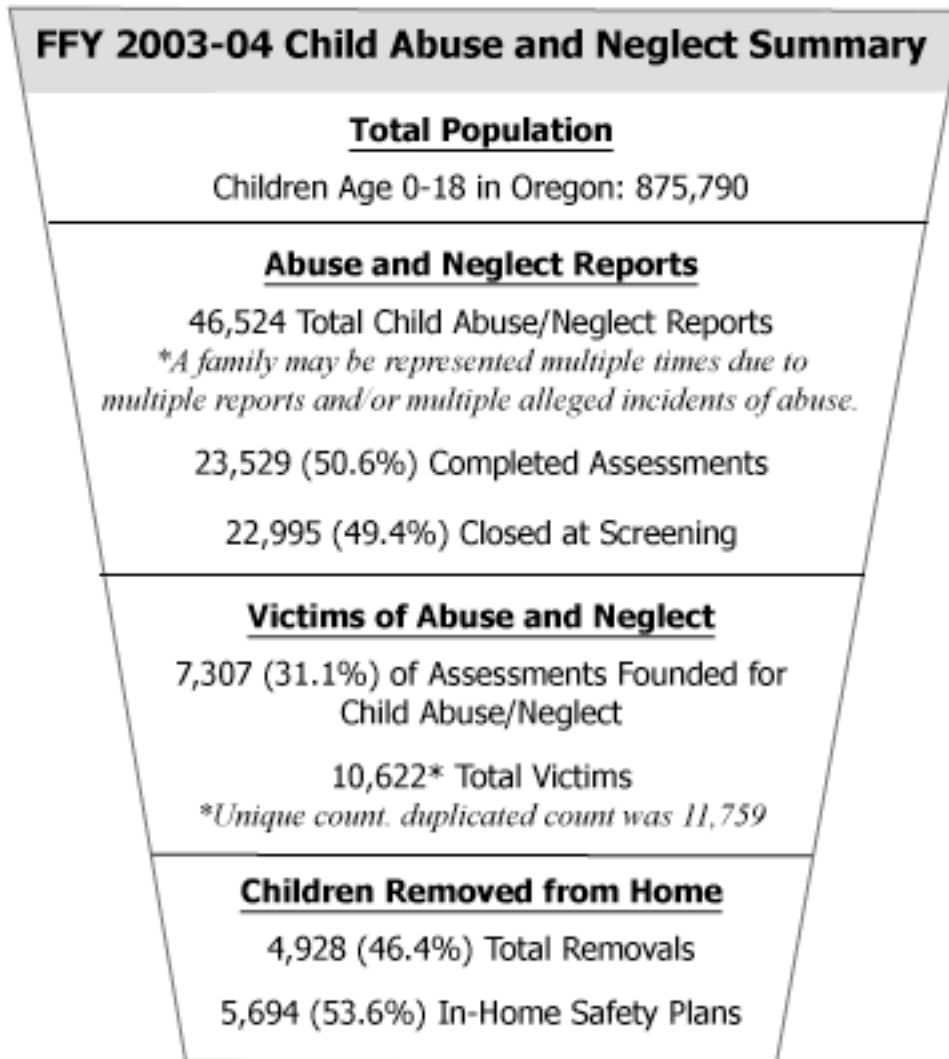


## 2004 Incidents of Child Abuse and Neglect Chart

Each type of maltreatment experienced by a victim in a founded referral counts as an incident of child abuse and neglect. There were 13,387 incidents of child abuse and neglect in 2004, an increase of 13.8 percent over 2003.



## FFY 2003-04 Child Abuse and Neglect Summary Chart

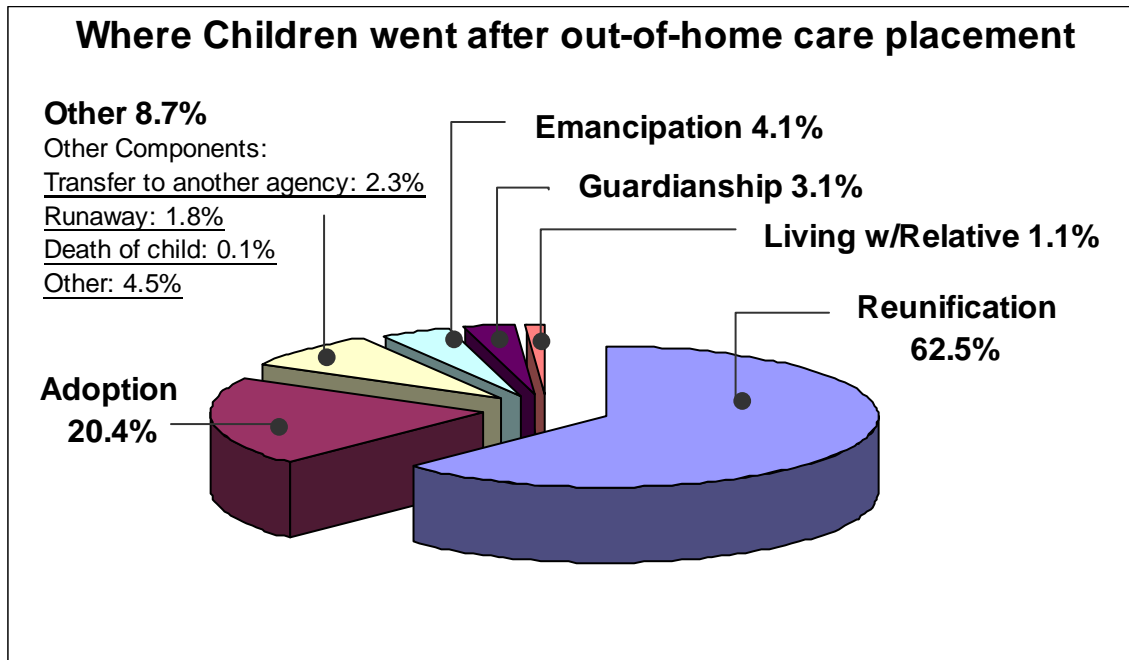


- ◆ 15.7 percent of total protective service child abuse/neglect reports are founded for child abuse or neglect.
- ◆ Nearly 54 percent of victims of child abuse/neglect remain in their homes.

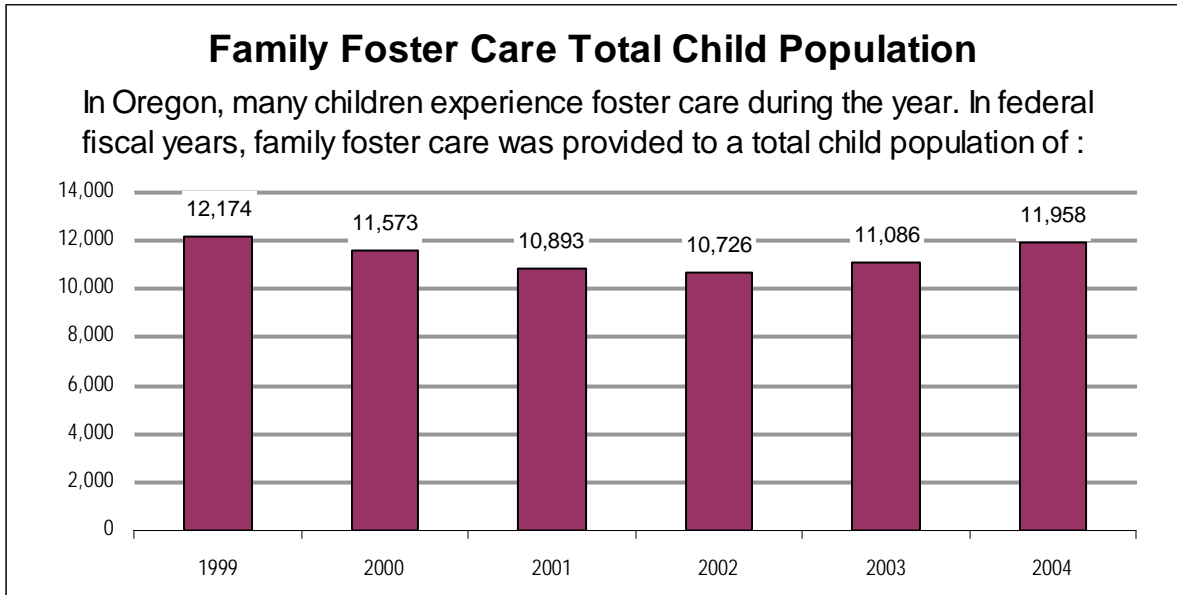
## Out of Home Care

### Where Children Went After Out-of-home Care Placement Chart

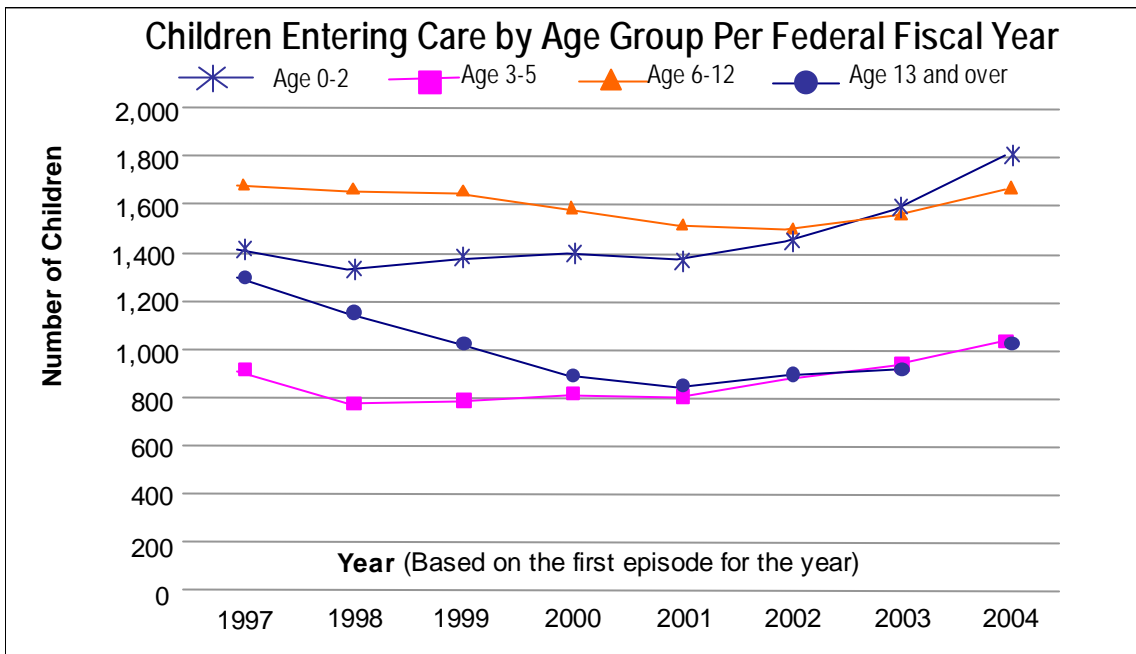
In FFY 2004, 2,892 (62.5 percent) of the children and youth existing the out-of-home care system were successfully reunified with their families.



## Family Foster Care Total Child Population



## Children Entering Care Chart



## Primary Reasons Children Enter Care

Many children are neglected, or have been emotionally, physically, or sexually abused. As a result, they may have emotional, behavioral, mental or physical problems, which require special services.

- ◆ Foster parents and relative caregivers increasingly need special skills and support to deal with the special needs of children in care.
- ◆ In October 2004, 50 percent of the children in family foster care were receiving additional service through special rate program.

<b>Primary Reasons Children Enter Care</b>		
Reasons Why Enter	Number	Percent of Removals
Physical Abuse	3,986	72%
Parent Drug Abuse	3,925	71%
Parent Alcohol Abuse	3,731	68%
Inability To Cope	3,217	58%
Behavior	2,823	51%
Neglect Abuse	2,626	48%
Inadequate Housing	1,836	33%
Sexual Abuse	572	10%
Disability	518	9%
Incarceration Of Parent	185	3%
Child Alcohol Abuse	167	3%
Abandonment	164	3%
Child Drug Abuse	110	2%
Death Of Parent	5	0%
<b>Total Children Entering Care</b>	<b>5,515</b>	<b>**</b>

*\*\*Does not sum to 100% as children can have more than one condition for removal.*

## Cost of Caring for Children Charts

Approximately 20.5 percent of the children entering foster care are less than three-years of age.

### Cost of caring for children

The cost of basic care in family foster care is determined by the age of the child and has been adjusted over time due to a cost of living increase allowable through legislative authorization.

Age of children in out-of-home care as of September 30, 2004:

0-5 years of age	38.7 percent
6-12 years of age	29.0 percent
13+ years of age	32.2 percent

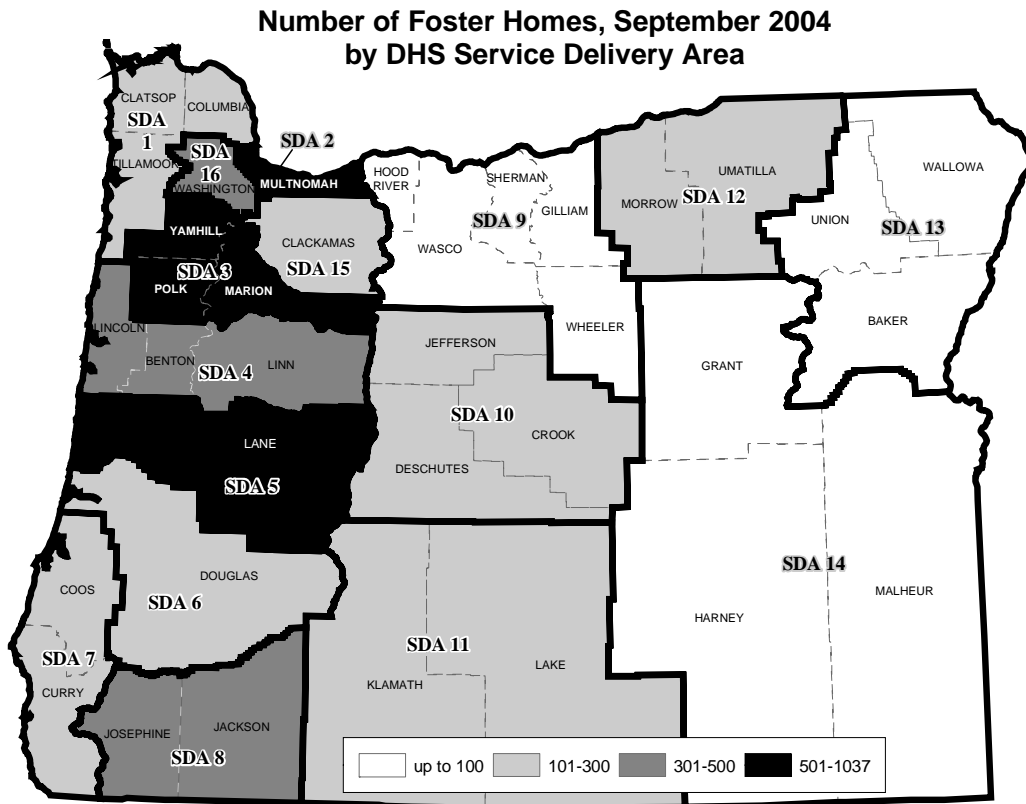
### Family Foster Care Basic Reimbursement Rates

Effective December 31, 2004:

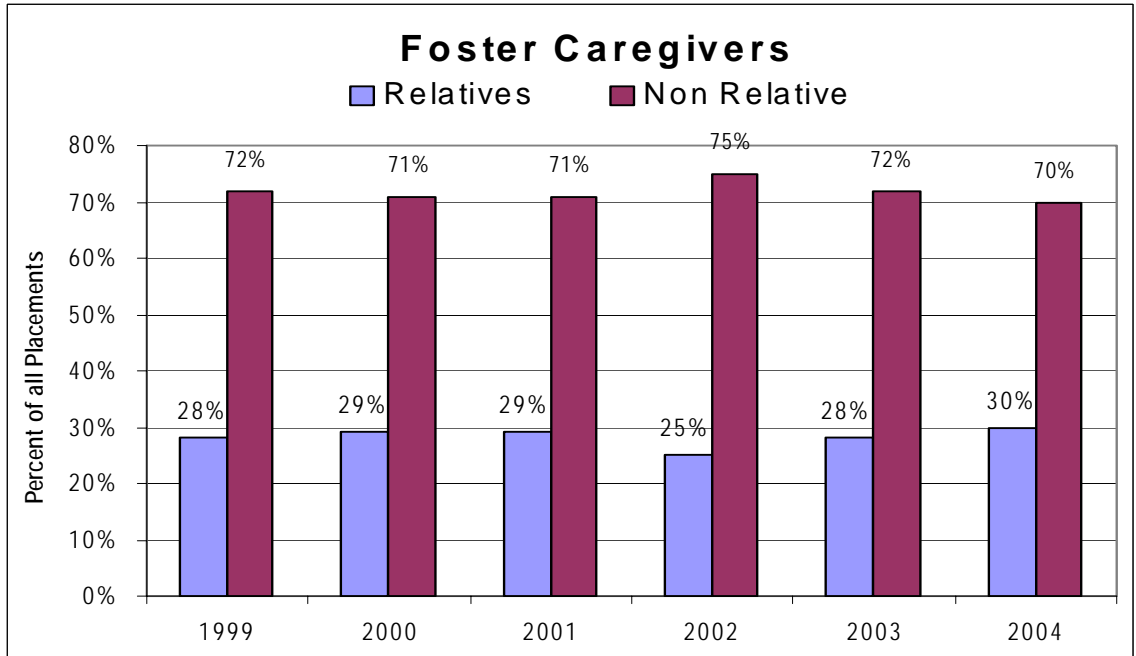
Monthly Rate	Age 0-5	Age 6-12	Age 13 +
Room, board, other	\$325	\$322	\$383
Clothing replacement	\$45	\$51	\$73
Personal allowance	\$8	\$20	\$29
<b>Total monthly</b>	<b>\$378</b>	<b>\$393</b>	<b>\$485</b>

## Number of Foster Homes Chart

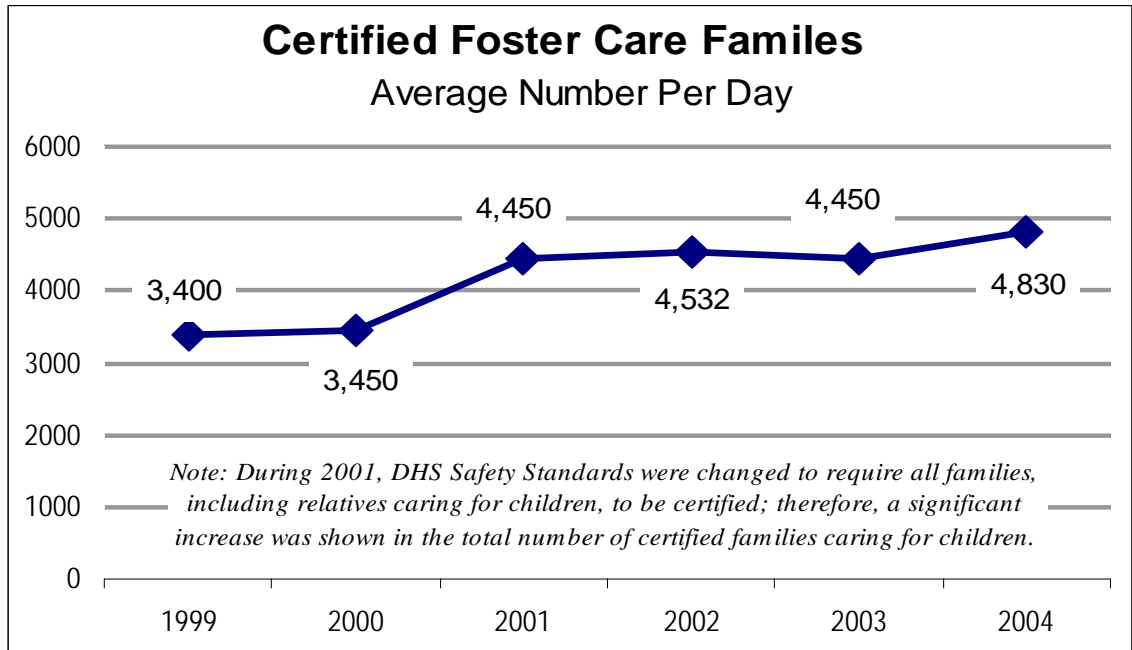
It most often remains in the child’s best interest to remain in their same communities when coming into foster care. Therefore, Foster Families and Relative Caregivers are needed and found in all counties and communities around the state.



### Foster Caregivers Chart



### Certified Foster Care Families Chart



## Adoptions

### Adoption Services Purchased

Adoption services are purchased from:

- ◆ Eleven licensed Oregon private adoption agencies which comprise the Special Needs Adoption Coalition (SNAC).
- ◆ Boys and Girls Aid Society acts as the coordinating private agency, assisting with in-state and out-of-state recruitment, publication of the *Family Matters* newsletter, pre-service adoptive family training, and quality screening and linking of qualified out-of-state families with waiting Oregon children.
- ◆ Northwest Adoption Exchange provides nationwide recruitment of qualified adoptive families for waiting Oregon children through linkages with similar exchanges nationwide.
- ◆ More than fifty out-of-state private adoption agencies bring forward prospective adoptive families and provide placement and post-placement supervision services to Oregon children placed with these families.

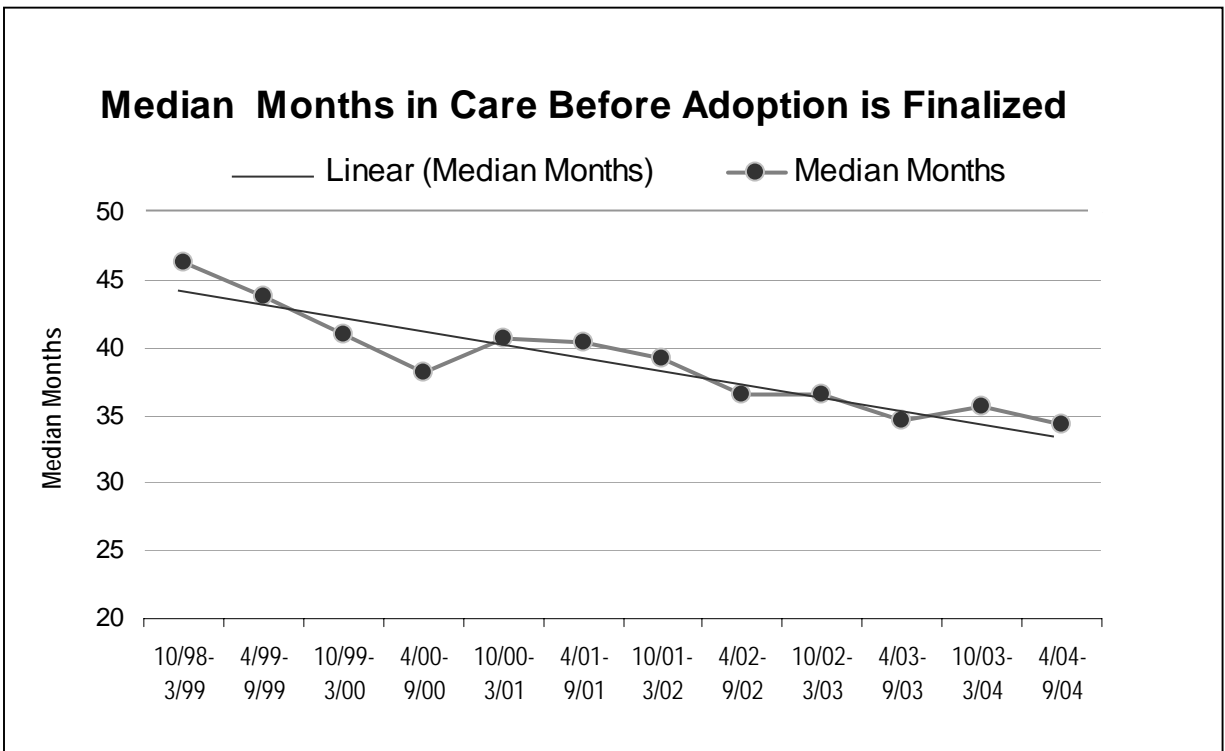
### Finalized Adoptions

Of the DHS foster children whose adoptions finalized in 2003 and 2004:

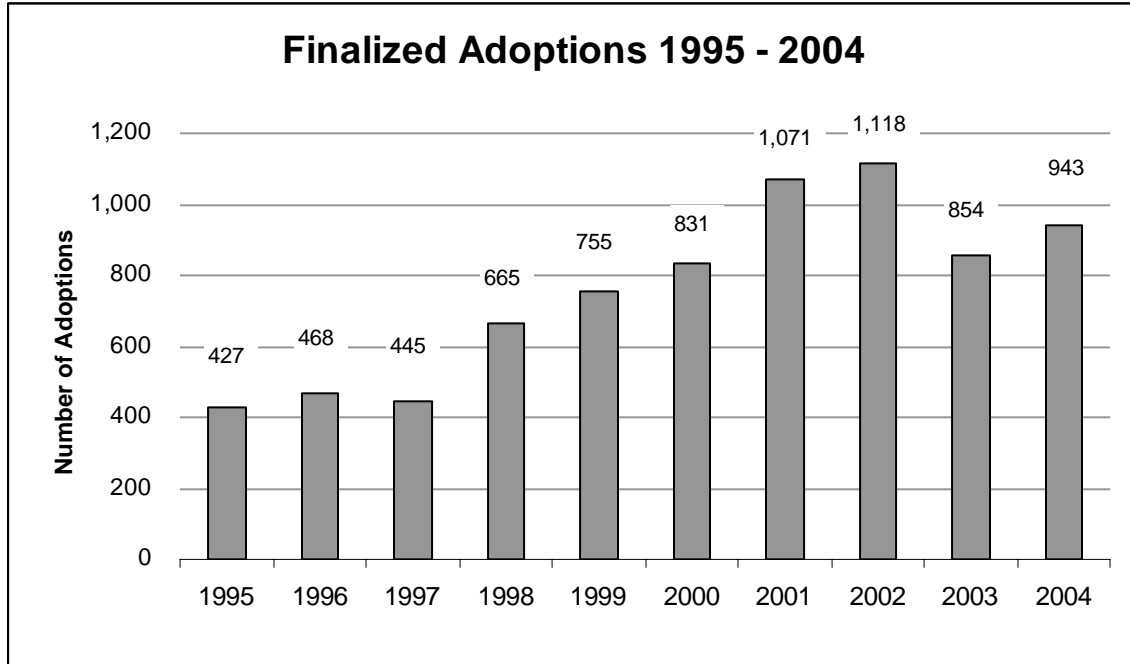
- ◆ 35 percent were adopted by their relatives, 32 percent by their non-related foster parents, and 33 percent by non-related families recruited for adoption.
- ◆ 77 percent were adopted by Oregon families, and 23 percent adopted by non-Oregon families, including relatives who live out of state.
- ◆ 72 percent were adopted by families working directly through DHS, 5 percent by families working through private agencies in Oregon, 12 percent by families working through public agencies in other states, and 11 percent by families working through private agencies outside of Oregon.

- ◆ 96 percent were adopted by families in which at least one of the adoptive parents is of the same race or ethnicity as the child.
- ◆ Twenty-six percent of children whose adoptions finalized in 2003 and 23 percent of children whose adoptions finalized in 2004 were age nine or over at the time of finalization.
- ◆ 1,029 children, or over half of all the children whose adoptions finalized in 2003 and 2004, are members of sibling groups in which at least one other child also had a finalized adoption. 980 of these 1,029 children (95.2 percent) were adopted along with at least one of their siblings by the same adoptive family.

### Median Months in Care Before Adoption is Finalized



## Finalized Adoptions Chart



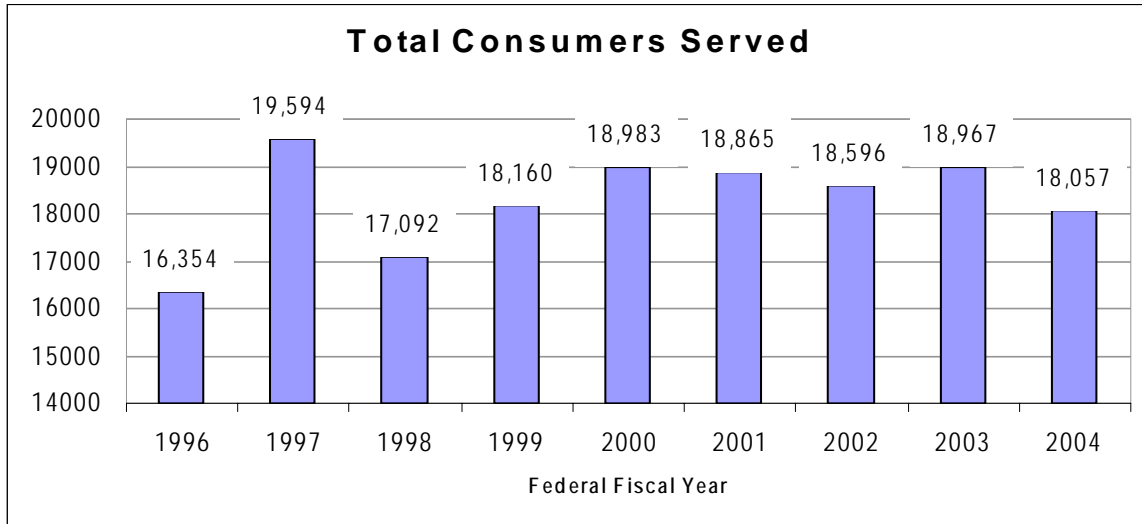
The number of adoptions increased in 2004 to 943. This exceeds the number of children (887) legally freed for adoption during the same period. DHS anticipates continued performance at approximately these levels during each of the two years of the 2005-07 biennium.

The smaller number (854) of Oregon adoptions in 2003 is primarily the result of two factors. First, adoptions were achieved between 1999 and 2002 for nearly all of the children for whom the ASFA time line provisions had already passed. Second, the introduction in 1999 of the DHS subsidized guardianship program through a federal Title IV-E waiver has provided a permanency alternative for children for whom adoption is not a viable plan. The guardianship alternative has been used for a larger number of children in each year since its introduction.

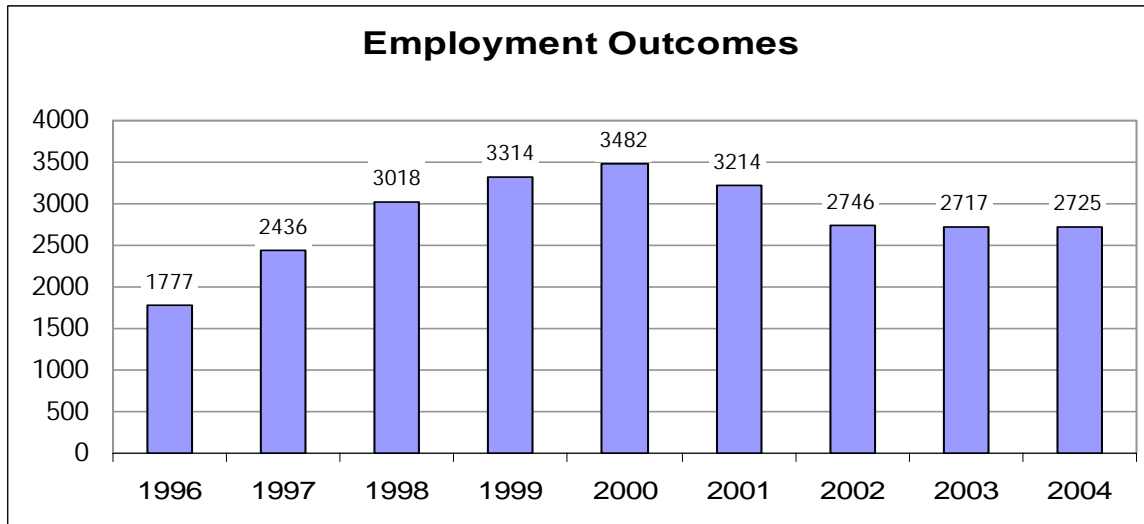
## Office of Vocational Rehabilitation Services

### Program Growth or Reduction

The number of consumers served by OVRS has remained steady over the last several years. In Federal Fiscal Year (FFY) 1996, the program served 16,354 consumers, and in FFY 2004, OVRS served 18,057.

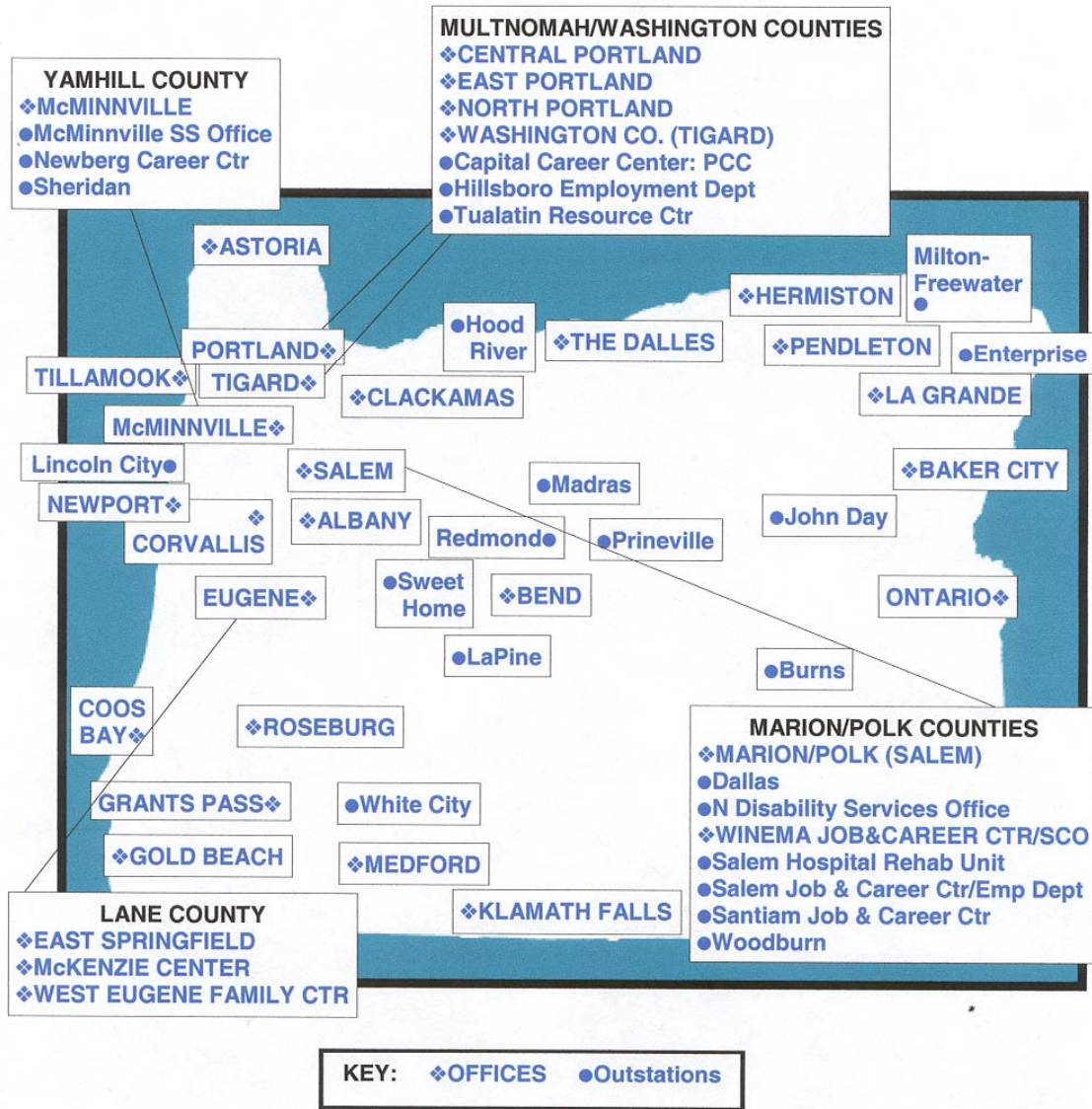


Employment outcomes follow the economic health trends of Oregon. In FFY 1996, the program rehabilitated and placed 2,139 consumers in employment; and in FFY 2004, OVRS rehabilitated and placed 2,725 consumers in employment.



Department of Human Services  
 2005 Ways and Means Presentation – Appendices

OFFICE OF VOCATIONAL REHABILITATION SERVICES  
 Field Offices and Outstations  
 2003



## Consumer Profiles

The chart on the following page illustrates, for Federal Fiscal Year 2004, the demographic profile of OVRS consumers, as well as their occupations at closure. The following narrative provides a description of two cases typical of persons benefiting from the services of OVRS:

**Adult profile #1:** An example of a Vocational Rehabilitation client is a person in his mid-30's residing in a rural area of Oregon. He is a high school graduate with some post-secondary education. He experiences a combination of disabilities including mental health and mobility issues impacting his ability to work. OVRS has directly provided and coordinated services including vocational counseling and guidance, skills training, specialized job development and placement, evaluation of adaptive equipment provided at the workplace, follow-along for a minimum of 90 days after placement and post-employment services to maintain his job. His own income is now the primary source of his economic support.

**Youth profile #2:** An example of a Youth Transition Program (YTP) client is a 19-year-old woman residing in a metropolitan area. She has received YTP services during the last year of high school and for one year after graduation. She experiences a significant learning disability, impacting her ability to work. Through a school-based transition specialist, she has received individualized planning, instruction in academic, vocational, independent living and personal-social skills, job training and continues to receive follow-up support to maintain her job as a medical assistant.

Department of Human Services  
2005 Ways and Means Presentation – Appendices

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**Consumer Profiles**  
Federal Fiscal Year (FFY) 2004

<b>Education</b>	Quantity	Percent
None	39	0.2
Grades 1 - 7	747	4.1
Grades 8 - 11	2,501	13.9
Special Education	938	5.2
Grade 12	7,447	41.2
Grade 13 - 15	5,017	27.8
Grades 16 & Higher	1,368	7.6
<b>Total</b>	<b>18,057</b>	<b>100</b>

<b>Age</b>	Quantity	Percent
Under 20	1,121	6.2
20 to 29	3,601	19.9
30 to 39	3,690	20.4
40 to 49	5,198	28.8
50 to 59	3,694	20.5
60 Plus	753	4.2
<b>Total</b>	<b>18,057</b>	<b>100</b>

<b>Race &amp; Ethnicity</b>	Quantity	Percent
African American	795	4.4
American Indian	506	2.8
Asian	307	1.7
Hispanic & Latino	740	4.1
White	15,710	87
<b>Total</b>	<b>18,057</b>	<b>100</b>

<b>Gender</b>	Quantity	Percent
Male	9,335	51.7
Female	8,722	48.3
<b>Total</b>	<b>18,057</b>	<b>100</b>

<b>Primary Disability</b>	Quantity	Percent
Alcohol & Drug	705	3.9
Cognitive	2,762	15.3
Deaf/Hearing Loss	1,101	6.1
Developmental	906	5
Orthopedic	7,115	39.4
Other Mental	1,046	5.8
Psychiatric	2,480	13.7
Respiratory	156	0.9
Specific Learning	1,426	7.9
Traumatic Brain Injury	360	2
<b>Total</b>	<b>18,057</b>	<b>100</b>

<b>Occupations</b>	Quantity	Percent
Managerial	55	2
Professional	257	9.4
Health & Technical	139	5.1
Sales	233	8.6
Clerical & Support	553	20.3
Service	834	30.6
Agricultural & Timber	42	1.5
Production & Trades	187	6.9
Self-Employment	87	3.2
Machinists	338	12.4
<b>Total</b>	<b>2,725</b>	<b>100</b>

Department of Human Services  
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Primary Disability Impairments	Count of People with Disability Impairments
Blindness	68
Cognitive impairments	4007
Communicative impairments	199
Deaf-Blindness	11
Deafness, communication auditory	195
Deafness, communication visual	272
General physical debilitation	870
Hearing loss, communication auditory	349
Hearing loss, communication visual	73
Manipulation	516
Mobility	1014
Mobility and manipulation	988
No impairment	3
Other Hearing Impairments	21
Other mental impairments	2623
Other orthopedic impairments	1847
Other physical impairments	2295
Other visual impairments	120
Psychosocial impairments	2603
Respiratory impairments	155
<b>Total</b>	<b>18,229</b>

Department of Human Services  
2005 Ways and Means Presentation – Appendices

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Primary Disability Impairment	Various Causes for Cognitive Impairments
Cognitive impairments	Accident/injury
	Alcohol abuse or dependence
	Anxiety disorder
	Asthma and other allergies
	Attention-Deficit Hyperactive Disorder (ADHD)
	Autism
	Cancer
	Cardiac and circulatory system
	Cerebral Palsy
	Congenital condition/birth injury
	Depressive and other Mood Disorders
	Drug abuse or dependence
	Epilepsy
	HIV and AIDS
	Immune Deficiencies excluding HIV/AIDS
	Mental Illness
	Mental retardation
	Multiple Sclerosis
	Parkinson's Disease/neurological
	Personality disorders
	Polio
	Schizophrenia/psychotic disorder
	Specific learning disabilities
Spinal Cord injury	
Stroke	
Traumatic brain injury	

## Additional Outcome Measures

### Federal Standards and Indicators

Indicator 1.2

Percentage of Individuals Receiving Services Who Had Employment Outcomes		
AGENCY	2002/2003	2001/2002
	Percent with Employment Outcomes After Services: Indicator 1.2 (?55.8%)	Percent with Employment Outcomes After Services: Indicator 1.2 (?55.8%)
Oregon	59.77	63.13
Washington	48.6	54.71
Alaska - C	59.3	57.98
Idaho	59.33	58.58

Indicator 1.3

Percentage of Persons with Employment Outcomes Who Were Competitively Employed		
AGENCY	2002/2003	2001/2002
	Percent of Employment Outcomes that were Competitive Employment: Indicator 1.3 (?72.6%)	Percent of Employment Outcomes that were Competitive Employment: Indicator 1.3 (?72.6%)
Oregon	99.48	93.32
Washington	98.05	96.78
Alaska - C	97.51	96.32
Idaho	99.5	99.12

Indicator 1.4

Percentage of Persons with Competitive Employment Outcomes Who Had Significant Disabilities		
AGENCY	2002/2003	2001/2002
	Percent of Individuals with Competitive Employment Outcomes who had a Significant Disability: Indicator 1.4 (?62.4%)	Percent of Individuals with Competitive Employment Outcomes who had a Significant Disability: Indicator 1.4 (?62.4%)
Oregon	95.71	95.95
Washington *	99.24	97.27
Alaska - C	81.6	79.07
Idaho	96.26	93.34

\* In Order of Selection

Department of Human Services  
2005 Ways and Means Presentation – Appendices

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Indicator 1.5

Ratio of Average VR Hourly Wage To Average State Hourly Wage		
	2002/2003	2001/2002
AGENCY	Ratio of Average Hourly VR Wage to Average State Wage: Indicator 1.5 (?.52)	Ratio of Average Hourly VR Wage to Average State Wage: Indicator 1.5 (?.52)
Oregon	0.59	0.584
Washington	0.527	0.555
Alaska - C	0.7	0.694
Idaho	0.624	0.607

Indicator 1.6

Difference in Percentage of Individuals Achieving Competitive Employment Income Who Report Own Income as Primary Source of Support at Closure And Application		
	2002/2003	2001/2002
AGENCY	Difference Between Percent Self- Supporting at Closure and Application: (?53.0)	Difference Between Percent Self-Supporting at Closure and Application: (?53.0)
Oregon	77.65	74.68
Washington	58.31	61.7
Alaska - C	55.8	61.77
Idaho	70.61	52.48

Indicator 2.1

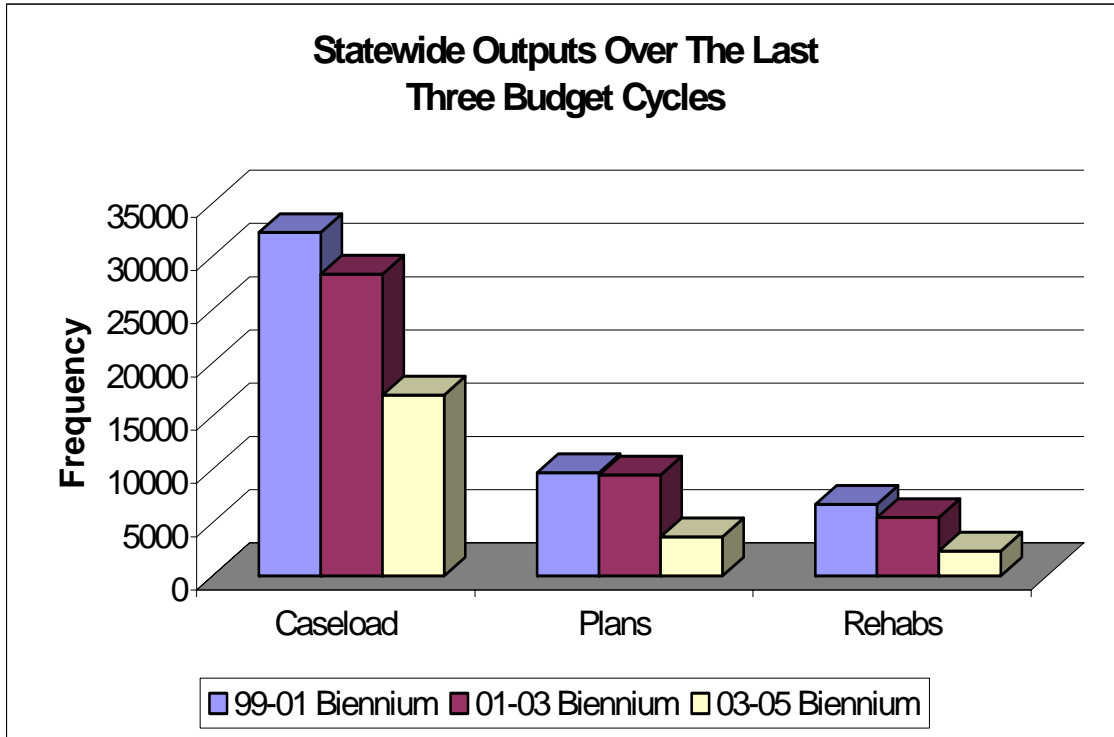
Ratio of Minority to Non-Minority Service Rate		
	2002/2003	2001/2002
AGENCY	Ratio of Minority Service Rate to Non- Minority Service Rate: (?.80)	Ratio of Minority Service Rate to Non-Minority Service Rate: (?.80)
Oregon	0.89	0.966
Washington	0.986	0.849
Alaska - C	0.974	0.96
Idaho	1.013	0.938

Department of Human Services  
2005 Ways and Means Presentation – Appendices

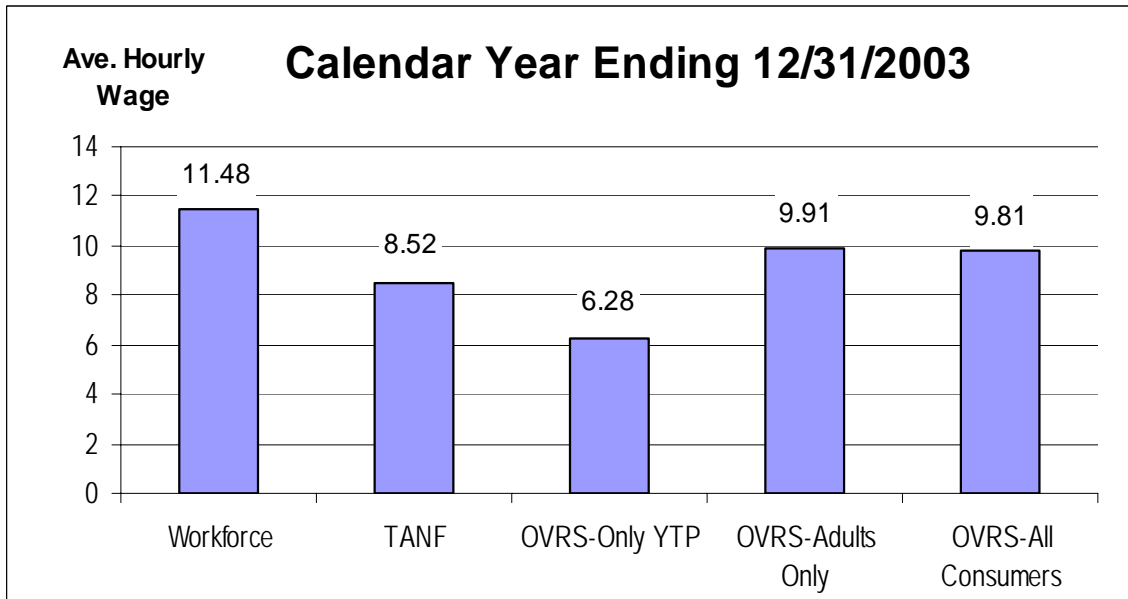
**OVRS Performance by County During FFY-04  
(10/1/04 to 9/30/04)**

County	Served	Closed- Employed	Average Wage	Average Hours	Annual Earnings	Tax Revenue
Baker	149	22	9.94	35	397,997.60	95519.42
Benton	456	74	9.59	29	1,070,167.28	256,840.15
Clackamas	1484	279	10.34	31	4,650,394.32	1,116,094.64
Clatsop	127	23	9.13	26	283,906.48	68,137.56
Columbia	206	30	8.57	28	374,337.60	89,841.02
Coos	227	44	8.88	25	507,936.00	121,904.64
Crook	51	10	12.36	34	218,524.80	52,445.95
Curry	83	8	7.99	29	96,391.36	23,133.93
Deschutes	392	82	10.39	29	1,284,785.84	308,348.60
Douglas	443	68	8.82	30	935,625.60	224,550.14
Gilliam	3		0	0	-	-
Grant	41	12	8.58	36	192,741.12	46,257.87
Harney	54	9	7.31	19	65,000.52	15,600.12
Hood River	67	7	12.61	31	142,291.24	34,149.90
Jackson	984	135	8.89	30	1,872,234.00	449,336.16
Jefferson	64	10	9.65	30	150,540.00	36,129.60
Josephine	415	57	9.11	30	810,061.20	194,414.69
Klamath	257	38	10.92	29	625,759.68	150,182.32
Lake	14	4	8.2	24	40,934.40	9,824.26
Lane	1910	333	8.66	28	4,198,783.68	1,007,708.08
Lincoln	363	65	8.94	29	876,298.80	210,311.71
Linn	735	104	9.95	32	1,721,907.20	413,257.73
Malheur	172	32	8.87	30	442,790.40	106,269.70
Marion	1882	275	10.72	32	4,905,472.00	1,177,313.28
Morrow	48	5	9.78	27	68,655.60	16,477.34
Multnomah	4043	590	10.25	30	9,434,100.00	2,264,184.00
Polk	295	66	10.64	32	1,168,527.36	280,446.57
Sherman	8	3	8.67	21	28,402.92	6,816.70
Tillamook	154	28	10.88	25	396,032.00	95,047.68
Umatilla	603	97	9.64	31	1,507,348.96	361,763.75
Union	135	17	10.95	35	338,793.00	81,310.32
Wallowa	26	7	9.13	35	116,316.20	27,915.89
Wasco	141	20	9.33	30	291,096.00	69,863.04
Washington	1369	195	10.05	30	3,057,210.00	733,730.40
Wheeler	7	1	6.9	20	7,176.00	1,722.24
Yamhill	567	88	10.03	29	1,331,021.12	319,445.07
<b>Totals</b>	<b>17,975</b>	<b>2,725</b>	<b>9.84</b>	<b>30</b>	<b>41,829,840.00</b>	<b>9,620,863.20</b>

### Statewide Outputs Over the Last Three Budget Cycles



### Average Hourly Wage by Workforce Programs



## **OVRs's Performance in Comparison to Other States in the Region**

FY 2003	Rehab	Plans	Empl. FTE	Expenditure	Caseload	Ave. Caseload by FTE
Oregon-General	2,715	4,736	208	36,626,620	18,877	90.8
Oregon-Blind	85	141	40	4,799,994	914	22.9
Alaska-Combined	523	807	95	12,923,168	4,164	43.8
Idaho-General	1,799	3,766	137	13,831,772	12,959	94.6
WA-General	2,405	5,599	368	63,653,332	17,631	47.9
WA-Blind	125	267	72	8,765,106	1,282	17.8

## **Order of Selection**

The Office Vocational Rehabilitation Services (OVRs) is required to implement an “Order of Selection” process for providing rehabilitative services if the agency determines that it cannot serve all eligible individuals who apply. Normally the decision to implement an Order of Selection is affected by one of the following factors:

- ◆ Shortage of funds to meet ongoing service needs
- ◆ Lack of personnel to meet demand for services

These factors are often the result of circumstances outside of the agency’s control such as decrease in fiscal or personnel resources, increase in program costs, influx of referrals and/or the inability to obtain all available federal funding.

The Office of Vocational Rehabilitation continually monitors services to people with disabilities to insure that services are available, appropriate and result in employment outcomes. Any type of “wait list” for services or lack of performance is of significant concern for OVRs. Corrective action in these situations is quickly developed and implemented. If services are

delayed due to insufficient personnel or lack of funds, the Office of Vocational Rehabilitation is required to implement an Order of Selection.

## **Impact**

The impact of implementing an Order of Selection is as follows:

- ◆ The vocational rehabilitation application process changes from a service delivery focus to an eligibility activity:
  - An additional information and referral service is required to link applicants to other workforce programs in lieu of rehabilitation services
  - Staff resources are redirected towards determining service priority for each applicant utilizing strict eligibility criteria.
  - Persons determined eligible are placed on a wait-list according to priority group.
- ◆ The Youth Transition Program is adversely impacted under an Order of Selection. Area schools will continue to be required to provide services but without VR assistance.
- ◆ The wait-list process is statewide which compromises services for special populations and rural areas. Even if only one person is waiting in Grants Pass for services but 100 are ahead of that person on the list in Portland, the person in Grants Pass will wait for the people in Portland to be served.
- ◆ Considerable staff resource is dedicated to the management of the wait-list. These staff will not be providing services as they were previously, further contributing to a reduction in services.
- ◆ Implementing the required priority system and relegating people to a wait-list creates a conflict for applicants in need of services increasing the requests for fair hearings. The increase in fair hearing requests takes

time and staff resources away from client services and program audit activities.

- ◆ Services will be delayed causing many applicants to remain in other government subsidized programs rather than gaining employment. Consumers who are employed while waiting for services may lose their employment causing them to utilize other government services.

## **Cost Containment**

### **Financial Needs Test**

Federal regulations restrict the situations in which a state vocational rehabilitation agency can require clients to contribute to their vocational rehabilitation services. Within these restrictions, a state agency can increase required contribution levels to reduce its expenditures.

Clients who are on SSI or SSDI are exempt from the required financial contributions under federal law. For other clients, required contributions may be increased toward the following services: training and education and related expenses; transportation; physical and mental restoration services; self-employment assistance; post-employment services; and occupational licenses, tools, equipment, initial stocks, and supplies

There remain several types of vocational rehabilitation services that an agency must provide its clients that are exempt from any required client contributions. These include assessments; vocational counseling and guidance; job developers; job search and placement assistance, job retention services, follow-up services, and follow-along services; personal assistance services; and (as needed for an individual to participate in the vocational rehabilitation program) hearing aids; auxiliary aids or services, such as interpreter services including sign language and oral interpreter services for individuals who are deaf or hard of hearing; or tactile interpreting services for individuals who are deaf-blind.