

| No.    | 事業名<br>(所管課)           | 事業費(千円)               | 事業概要及び見直しの視点  | 見直し内容(案)   |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|--------|------------------------|-----------------------|---|--|------|-----|--------|-------|-----|-------|-------|----------|-----|--------|-----------|-----------------------|-----|-------|-----|-----------|----------|-----|-----|-----|--|-----|-----|--------|-----|-------|--|-----|-----|------|------|-------|--|--------|------|----|-----|---|--|---|---|---|---|---|--|---|--|---|---|----|----|-----|---|--|---|---|---|---|---|---|--|---|---|---|----|----|----|-------|---|--|--|---|--|---|--|--|--|--|--|--|--|---|-----|---|--|--|---|--|---|--|--|--|--|--|--|--|---|----|------|---|--|--|---|--|---|--|--|--|--|--|--|--|--|----|-----|---|--|--|---|--|---|--|--|--|--|--|--|--|--|---|--------|----|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|---|----|------|--|--|--|---|--|---|--|--|--|---|--|---|--|----|
| 1      | 交通安全協会補助金<br>(防災行政課)   | 24年度(決算)<br>4,491     | <b>【事業概要】</b><br>地域における交通事故防止活動や交通安全意識の高揚及び交通安全確保のための啓発活動、道路環境整備などの総合的な交通安全対策を積極的に展開する清須市交通安全協会に対し、補助金を交付する。<br><br><b>【見直しの視点】</b><br>補助金支給額の見直し | <b>現状維持</b><br><br>○ 補助金の使途は市協会の活動費が中心であり、指導料の水準については北名古屋市と同程度である。<br>○ 平成25年度には補助金支給額の見直しを行っており、さらには平成26年6月に市交通安全条例が改正され、新たに「飲酒運転の根絶」及び「高齢者の交通事故防止」に対する市の責務等が追加されたところであり、今後、市協会の活動を拡充していかなければならない状況である。<br>○ よって、補助金支給額は現状維持とし、現状の支給額の範囲内で、引き続き、市協会の活動を支援していく。  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        | 25年度(決算見込み)<br>3,991  |   |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        | 26年度(当初)<br>3,991     |   | <b>＜検証＞ 清須市交通安全協会の収支状況(平成25年度決算)</b> <table border="1"> <thead> <tr> <th></th> <th>科目</th> <th>金額(千円)</th> <th>主な内容</th> </tr> </thead> <tbody> <tr> <td rowspan="4">歳入</td> <td>補助金</td> <td>3,991</td> <td>市補助金</td> </tr> <tr> <td>繰越金</td> <td>10</td> <td></td> </tr> <tr> <td>諸収入</td> <td>1</td> <td>預金利子等</td> </tr> <tr> <td>計</td> <td>4,002</td> <td></td> </tr> <tr> <td rowspan="5">歳出</td> <td>会議費</td> <td>20</td> <td></td> </tr> <tr> <td>事業費</td> <td>303</td> <td>保険・研修等</td> </tr> <tr> <td>活動費</td> <td>3,540</td> <td>啓発物品 233千円、指導料 2,571千円(※) 等<br/>※3時間未満…1,000円、3時間以上6時間未満…2,000円<br/>6時間以上…3,000円<br/><b>【北名古屋市の場合】</b><br/>2時間未満 1,000円、2時間以上 2,000円、夜間 2,000円</td> </tr> <tr> <td>事務費</td> <td>25</td> <td>事務用品</td> </tr> <tr> <td>計</td> <td>3,888</td> <td></td> </tr> </tbody> </table>   |      | 科目  | 金額(千円) | 主な内容  | 歳入  | 補助金   | 3,991 | 市補助金     | 繰越金 | 10     |           | 諸収入                   | 1   | 預金利子等 | 計   | 4,002     |          | 歳出  | 会議費 | 20  |  | 事業費 | 303 | 保険・研修等 | 活動費 | 3,540 | 啓発物品 233千円、指導料 2,571千円(※) 等<br>※3時間未満…1,000円、3時間以上6時間未満…2,000円<br>6時間以上…3,000円<br><b>【北名古屋市の場合】</b><br>2時間未満 1,000円、2時間以上 2,000円、夜間 2,000円 | 事務費 | 25  | 事務用品 | 計    | 3,888 |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 科目                     | 金額(千円)                | 主な内容  |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
| 歳入     | 補助金                    | 3,991                 | 市補助金  |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 繰越金                    | 10                    |   |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 諸収入                    | 1                     | 預金利子等   |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 計                      | 4,002                 |   |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
| 歳出     | 会議費                    | 20                    |   |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 事業費                    | 303                   | 保険・研修等  |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 活動費                    | 3,540                 | 啓発物品 233千円、指導料 2,571千円(※) 等<br>※3時間未満…1,000円、3時間以上6時間未満…2,000円<br>6時間以上…3,000円<br><b>【北名古屋市の場合】</b><br>2時間未満 1,000円、2時間以上 2,000円、夜間 2,000円        |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 事務費                    | 25                    | 事務用品  |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 計                      | 3,888                 |   |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
| 2      | 精神障害者医療費支給費<br>(保険年金課) | 24年度(決算)<br>34,466    | <b>【事業概要】</b><br>精神障害者の医療費の一部を支給することにより、精神障害者の福祉の増進を図る。<br><br><b>【見直しの視点】</b><br>市単独事業(県補助事業の横出し部分)の見直し  | <b>現状維持</b><br><br>○ 精神手帳1・2級で県補助範囲を拡大し、全疾病を対象としている県内団体は8割弱となっている。<br>○ 一方で、精神手帳3級の者については、日常生活での援助を要する状態であり、社会生活上のハンディを抱えていることから、本市においては補助の対象としているが、県内団体では2割前後にとどまっている。<br>○ こうしたことから、精神手帳3級の者については、他団体の水準と比較して、見直しの余地があるが、本事業のみの水準比較ではなく、手当等も含めた精神障害者福祉施策全体の水準や、他の福祉分野との均衡等を総合的に勘案した上で結論を出すこととし、今回は現状維持とする。   |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        | 25年度(決算見込み)<br>39,470 |   |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        | 26年度(当初)<br>45,916    |   | <b>＜参考＞ 県補助事業と市単独事業の関係</b> <table border="1"> <thead> <tr> <th colspan="2"></th> <th>県補助事業</th> <th colspan="2">市単独事業</th> </tr> <tr> <th colspan="2"></th> <th>精神手帳1・2級</th> <th></th> <th>精神手帳3級</th> </tr> </thead> <tbody> <tr> <td>通院</td> <td>障害者自立支援医療を適用した精神科疾患のみ</td> <td>全疾病</td> <td></td> <td>全疾病</td> </tr> <tr> <td>入院</td> <td>精神病床入院のみ</td> <td>全疾病</td> <td></td> <td>全疾病</td> </tr> </tbody> </table>  |      |     | 県補助事業  | 市単独事業 |     |       |       | 精神手帳1・2級 |     | 精神手帳3級 | 通院        | 障害者自立支援医療を適用した精神科疾患のみ | 全疾病 |       | 全疾病 | 入院        | 精神病床入院のみ | 全疾病 |     | 全疾病 |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        | 県補助事業                 | 市単独事業   |  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        | 精神手帳1・2級              |   | 精神手帳3級   |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
| 通院     | 障害者自立支援医療を適用した精神科疾患のみ  | 全疾病                   |   | 全疾病  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
| 入院     | 精神病床入院のみ               | 全疾病                   |   | 全疾病  |      |     |        |       |     |       |       |          |     |        |           |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        |                       |   | <b>＜検証＞ 他団体比較(支給対象者)</b> <table border="1"> <thead> <tr> <th colspan="4"></th> <th>清須市</th> <th colspan="5">類似団体</th> <th colspan="5">近隣団体</th> <th>全市町村(該当数)</th> </tr> <tr> <th colspan="4"></th> <th></th> <th>津島市</th> <th>知立市</th> <th>豊明市</th> <th>田原市</th> <th>愛西市</th> <th>北名古屋市</th> <th>瀬戸市</th> <th>日進市</th> <th>小牧市</th> <th>尾張旭市</th> <th>春日井市</th> <th></th> </tr> </thead> <tbody> <tr> <td rowspan="6">保健福祉手帳</td> <td rowspan="2">1・2級</td> <td>通院</td> <td>全疾病</td> <td>○</td> <td></td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> <td>○</td> <td>39</td> </tr> <tr> <td>入院</td> <td>全疾病</td> <td>○</td> <td></td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td>○</td> <td>○</td> <td>41</td> </tr> <tr> <td rowspan="4">3級</td> <td rowspan="2">通院</td> <td>精神科疾患</td> <td>○</td> <td></td> <td></td> <td>○</td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>9</td> </tr> <tr> <td>全疾病</td> <td>○</td> <td></td> <td></td> <td>○</td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>7</td> </tr> <tr> <td rowspan="2">入院</td> <td>精神病床</td> <td>○</td> <td></td> <td></td> <td>○</td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>14</td> </tr> <tr> <td>全疾病</td> <td>○</td> <td></td> <td></td> <td>○</td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>7</td> </tr> <tr> <td rowspan="2">精神科診断者</td> <td>通院</td> <td>精神科疾患</td> <td></td> <td>2</td> </tr> <tr> <td>入院</td> <td>精神病床</td> <td></td> <td></td> <td></td> <td>○</td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td></td> <td>○</td> <td></td> <td>23</td> </tr> </tbody> </table> |      |     |        |       | 清須市 | 類似団体  |       |          |     |        | 近隣団体      |                       |     |       |     | 全市町村(該当数) |          |     |     |     |  | 津島市 | 知立市 | 豊明市    | 田原市 | 愛西市   | 北名古屋市  | 瀬戸市 | 日進市 | 小牧市  | 尾張旭市 | 春日井市  |  | 保健福祉手帳 | 1・2級 | 通院 | 全疾病 | ○ |  | ○ | ○ | ○ | ○ | ○ |  | ○ |  | ○ | ○ | 39 | 入院 | 全疾病 | ○ |  | ○ | ○ | ○ | ○ | ○ | ○ |  | ○ | ○ | ○ | 41 | 3級 | 通院 | 精神科疾患 | ○ |  |  | ○ |  | ○ |  |  |  |  |  |  |  | 9 | 全疾病 | ○ |  |  | ○ |  | ○ |  |  |  |  |  |  |  | 7 | 入院 | 精神病床 | ○ |  |  | ○ |  | ○ |  |  |  |  |  |  |  |  | 14 | 全疾病 | ○ |  |  | ○ |  | ○ |  |  |  |  |  |  |  |  | 7 | 精神科診断者 | 通院 | 精神科疾患 |  |  |  |  |  |  |  |  |  |  |  |  |  | 2 | 入院 | 精神病床 |  |  |  | ○ |  | ○ |  |  |  | ○ |  | ○ |  | 23 |
|        |                        |                       |   | 清須市  | 類似団体 |     |        |       |     | 近隣団体  |       |          |     |        | 全市町村(該当数) |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        |                       |   |  | 津島市  | 知立市 | 豊明市    | 田原市   | 愛西市 | 北名古屋市 | 瀬戸市   | 日進市      | 小牧市 | 尾張旭市   | 春日井市      |                       |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
| 保健福祉手帳 | 1・2級                   | 通院                    | 全疾病   | ○  |      | ○   | ○      | ○     | ○   | ○     |       | ○        |     | ○      | ○         | 39                    |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        | 入院                    | 全疾病   | ○  |      | ○   | ○      | ○     | ○   | ○     | ○     |          | ○   | ○      | ○         | 41                    |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 3級                     | 通院                    | 精神科疾患   | ○  |      |     | ○      |       | ○   |       |       |          |     |        |           |                       | 9   |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        |                       | 全疾病   | ○  |      |     | ○      |       | ○   |       |       |          |     |        |           |                       | 7   |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        | 入院                    | 精神病床  | ○  |      |     | ○      |       | ○   |       |       |          |     |        |           |                       |     | 14    |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        |                        |                       | 全疾病   | ○  |      |     | ○      |       | ○   |       |       |          |     |        |           |                       |     | 7     |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
| 精神科診断者 | 通院                     | 精神科疾患                 |   |  |      |     |        |       |     |       |       |          |     |        |           | 2                     |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |
|        | 入院                     | 精神病床                  |   |  |      | ○   |        | ○     |     |       |       | ○        |     | ○      |           | 23                    |     |       |     |           |          |     |     |     |  |     |     |        |     |       |  |     |     |      |      |       |  |        |      |    |     |   |  |   |   |   |   |   |  |   |  |   |   |    |    |     |   |  |   |   |   |   |   |   |  |   |   |   |    |    |    |       |   |  |  |   |  |   |  |  |  |  |  |  |  |   |     |   |  |  |   |  |   |  |  |  |  |  |  |  |   |    |      |   |  |  |   |  |   |  |  |  |  |  |  |  |  |    |     |   |  |  |   |  |   |  |  |  |  |  |  |  |  |   |        |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |   |    |      |  |  |  |   |  |   |  |  |  |   |  |   |  |    |



| No.              | 事業名<br>(所管課)                   | 事業費 (千円)   | 事業概要及び見直しの視点   | 見直し内容 (案)   |       |       |       |       |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|------------------|--------------------------------|--|--|---|-------|-------|-------|-------|-------|-------|-------|-------|------|-----|--|--|-----|-----|-----|-----|------|-----|------|-----|------|---------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----|-------|-------|-------|-------|---------|-------|-------|-------|-------|-------|-------|----|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----|-------|-------|---|-------|---|-------|-------|----|-------|-------|-------|----|-------|-------|---|-------|---|-------|-------|---|-----------------|-------|-------|------|---|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---|-------|-------|---|-------|---|-------|-------|-------|-------|-------|-------|-----------------|---------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-----|-------|-----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----|-------|-------|-------|-------|-------|-------|-------|---|-------|-------|-------|-------|---|-------|---|---|---|---|---|--------|--------|--------|-----------------|------------|------------|------------|------------------|---|----|----|--|--|---|---|
| 6                | 障害者福祉金支給費<br>(社会福祉課)           | 24年度 (決算)<br>160,436   | <b>【事業概要】</b><br>知的、身体又は精神等の障害者に対し、手当を支給することにより、福祉の増進を図る。<br><b>【見直しの視点】</b><br>支給額の見直し  | <b>現状維持</b>   |       |       |       |       |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  |                                | 25年度 (決算見込み)<br>165,350  |  | <p>○ 支給額については、他団体平均を上回っており、見直しの余地があるが、本事業のみの水準比較ではなく、医療費支給等も含めた障害者福祉施策全体の水準や、他の福祉分野との均衡等を総合的に勘案した上で結論を出すこととし、今回は現状維持とする。</p> <p>≪検証≫ 他団体比較 (支給月額)</p> <table border="1"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">平均</th> <th rowspan="2">清須市</th> <th colspan="4">類似団体</th> <th colspan="5">近隣団体</th> </tr> <tr> <th>津島市</th> <th>知立市</th> <th>豊明市</th> <th>田原市</th> <th>北名古屋</th> <th>瀬戸市</th> <th>日進市</th> <th>小牧市</th> <th>春日井市</th> </tr> </thead> <tbody> <tr> <td rowspan="6">身体障害者手帳</td> <td>1級</td> <td>4,344</td> <td>8,100</td> <td>2,000</td> <td>3,800</td> <td>4,800</td> <td>4,500</td> <td>7,000</td> <td>2,500</td> <td>4,000</td> <td>6,000</td> <td>4,500</td> </tr> <tr> <td>2級</td> <td>3,989</td> <td>6,100</td> <td>2,000</td> <td>3,800</td> <td>3,600</td> <td>3,500</td> <td>7,000</td> <td>2,500</td> <td>3,000</td> <td>6,000</td> <td>4,500</td> </tr> <tr> <td>3級</td> <td>3,333</td> <td>5,000</td> <td>2,000</td> <td>2,200</td> <td>2,300</td> <td>2,500</td> <td>7,000</td> <td>2,500</td> <td>2,000</td> <td>6,000</td> <td>3,500</td> </tr> <tr> <td>4級</td> <td>2,389</td> <td>2,100</td> <td>1,000</td> <td>2,200</td> <td>1,800</td> <td>1,500</td> <td>2,500</td> <td>2,000</td> <td>1,000</td> <td>6,000</td> <td>3,500</td> </tr> <tr> <td>5級</td> <td>1,767</td> <td>1,800</td> <td>0</td> <td>1,600</td> <td>0</td> <td>1,000</td> <td>2,500</td> <td>0</td> <td>1,000</td> <td>2,000</td> <td>2,500</td> </tr> <tr> <td>6級</td> <td>1,683</td> <td>1,600</td> <td>0</td> <td>1,100</td> <td>0</td> <td>1,000</td> <td>2,500</td> <td>0</td> <td>1,000</td> <td>2,000</td> <td>2,500</td> </tr> <tr> <td rowspan="3">療育手帳</td> <td>A</td> <td>4,344</td> <td>8,100</td> <td>2,000</td> <td>3,800</td> <td>4,800</td> <td>4,500</td> <td>7,000</td> <td>2,500</td> <td>4,000</td> <td>6,000</td> <td>4,500</td> </tr> <tr> <td>B</td> <td>3,589</td> <td>6,400</td> <td>2,000</td> <td>2,200</td> <td>3,600</td> <td>2,500</td> <td>7,000</td> <td>2,500</td> <td>3,000</td> <td>6,000</td> <td>3,500</td> </tr> <tr> <td>C</td> <td>1,871</td> <td>3,000</td> <td>0</td> <td>1,100</td> <td>0</td> <td>1,000</td> <td>2,500</td> <td>2,000</td> <td>2,000</td> <td>2,000</td> <td>2,500</td> </tr> <tr> <td rowspan="3">精神障害者<br/>保健福祉手帳</td> <td>1級</td> <td>4,344</td> <td>8,100</td> <td>2,000</td> <td>3,800</td> <td>4,800</td> <td>4,500</td> <td>7,000</td> <td>2,500</td> <td>4,000</td> <td>6,000</td> <td>4,500</td> </tr> <tr> <td>2級</td> <td>3,589</td> <td>6,400</td> <td>2,000</td> <td>2,200</td> <td>3,600</td> <td>2,500</td> <td>7,000</td> <td>2,500</td> <td>3,000</td> <td>6,000</td> <td>3,500</td> </tr> <tr> <td>3級</td> <td>1,600</td> <td>3,000</td> <td>1,000</td> <td>1,100</td> <td>2,300</td> <td>1,000</td> <td>2,500</td> <td>0</td> <td>2,000</td> <td>2,000</td> <td>2,500</td> </tr> <tr> <td>自閉症状群</td> <td>0</td> <td>6,000</td> <td>0</td> </tr> <tr> <td>所得制限の有無</td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td>○</td> </tr> </tbody> </table> <p>(注1) 白抜き金額は最高額<br/>(注2) 愛西市 (類似団体)、尾張旭市 (近隣団体) は制度体系が異なるため比較対象外</p> |       | 平均    | 清須市   | 類似団体  |       |       |       | 近隣団体  |      |     |  |  | 津島市 | 知立市 | 豊明市 | 田原市 | 北名古屋 | 瀬戸市 | 日進市  | 小牧市 | 春日井市 | 身体障害者手帳 | 1級   | 4,344 | 8,100 | 2,000 | 3,800 | 4,800 | 4,500 | 7,000 | 2,500 | 4,000 | 6,000 | 4,500 | 2級 | 3,989 | 6,100 | 2,000 | 3,800 | 3,600 | 3,500 | 7,000 | 2,500 | 3,000 | 6,000 | 4,500 | 3級 | 3,333 | 5,000 | 2,000 | 2,200 | 2,300   | 2,500 | 7,000 | 2,500 | 2,000 | 6,000 | 3,500 | 4級 | 2,389 | 2,100 | 1,000 | 2,200 | 1,800 | 1,500 | 2,500 | 2,000 | 1,000 | 6,000 | 3,500 | 5級 | 1,767 | 1,800 | 0 | 1,600 | 0 | 1,000 | 2,500 | 0  | 1,000 | 2,000 | 2,500 | 6級 | 1,683 | 1,600 | 0 | 1,100 | 0 | 1,000 | 2,500 | 0 | 1,000           | 2,000 | 2,500 | 療育手帳 | A | 4,344 | 8,100 | 2,000 | 3,800 | 4,800 | 4,500 | 7,000 | 2,500 | 4,000 | 6,000 | 4,500 | B | 3,589 | 6,400 | 2,000 | 2,200 | 3,600 | 2,500 | 7,000 | 2,500 | 3,000 | 6,000 | 3,500 | C | 1,871 | 3,000 | 0 | 1,100 | 0 | 1,000 | 2,500 | 2,000 | 2,000 | 2,000 | 2,500 | 精神障害者<br>保健福祉手帳 | 1級      | 4,344 | 8,100 | 2,000 | 3,800 | 4,800 | 4,500 | 7,000 | 2,500 | 4,000 | 6,000 | 4,500 | 2級  | 3,589 | 6,400     | 2,000 | 2,200 | 3,600 | 2,500 | 7,000 | 2,500 | 3,000 | 6,000 | 3,500 | 3級 | 1,600 | 3,000 | 1,000 | 1,100 | 2,300 | 1,000 | 2,500 | 0 | 2,000 | 2,000 | 2,500 | 自閉症状群 | 0 | 6,000 | 0 | 0 | 0 | 0 | 0 | 0      | 0      | 0      | 0               | 0          | 所得制限の有無    |            | ○                |   |    |    |  |  | ○ | ○ |
|                  | 平均                             | 清須市  | 類似団体   |   |       |       |       | 近隣団体  |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  |                                |  | 津島市  | 知立市   | 豊明市   | 田原市   | 北名古屋  | 瀬戸市   | 日進市   | 小牧市   | 春日井市  |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 身体障害者手帳          | 1級                             | 4,344  | 8,100  | 2,000   | 3,800 | 4,800 | 4,500 | 7,000 | 2,500 | 4,000 | 6,000 | 4,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 2級                             | 3,989  | 6,100  | 2,000   | 3,800 | 3,600 | 3,500 | 7,000 | 2,500 | 3,000 | 6,000 | 4,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 3級                             | 3,333  | 5,000  | 2,000   | 2,200 | 2,300 | 2,500 | 7,000 | 2,500 | 2,000 | 6,000 | 3,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 4級                             | 2,389  | 2,100  | 1,000   | 2,200 | 1,800 | 1,500 | 2,500 | 2,000 | 1,000 | 6,000 | 3,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 5級                             | 1,767  | 1,800  | 0   | 1,600 | 0     | 1,000 | 2,500 | 0     | 1,000 | 2,000 | 2,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 6級                             | 1,683  | 1,600  | 0   | 1,100 | 0     | 1,000 | 2,500 | 0     | 1,000 | 2,000 | 2,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 療育手帳             | A                              | 4,344  | 8,100  | 2,000   | 3,800 | 4,800 | 4,500 | 7,000 | 2,500 | 4,000 | 6,000 | 4,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | B                              | 3,589  | 6,400  | 2,000   | 2,200 | 3,600 | 2,500 | 7,000 | 2,500 | 3,000 | 6,000 | 3,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | C                              | 1,871  | 3,000  | 0   | 1,100 | 0     | 1,000 | 2,500 | 2,000 | 2,000 | 2,000 | 2,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 精神障害者<br>保健福祉手帳  | 1級                             | 4,344  | 8,100  | 2,000   | 3,800 | 4,800 | 4,500 | 7,000 | 2,500 | 4,000 | 6,000 | 4,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 2級                             | 3,589  | 6,400  | 2,000   | 2,200 | 3,600 | 2,500 | 7,000 | 2,500 | 3,000 | 6,000 | 3,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 3級                             | 1,600  | 3,000  | 1,000   | 1,100 | 2,300 | 1,000 | 2,500 | 0     | 2,000 | 2,000 | 2,500 |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 自閉症状群            | 0                              | 6,000  | 0  | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 所得制限の有無          |                                | ○  |  |   |       |       |       | ○     | ○     |       | ○     | ○     |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 7                | 心身障害者等タクシー<br>料金助成金<br>(社会福祉課) | 24年度 (決算)<br>13,522<br>25年度 (決算見込み)<br>14,184<br>26年度 (当初)<br>15,248 | <b>【事業概要】</b><br>心身障害者等が電車、バスなど通常の交通機関を利用することが困難なため、タクシーを利用する場合に料金の一部を助成し、その世帯の経済的負担の軽減を図り、もって福祉の向上に資する。<br><b>【見直しの視点】</b><br>配布枚数の見直し及び所得制限の導入 | <b>見直し実施 (所得制限の導入)</b><br>[効果額: 504千円 実施時期: 平成27年度]   |       |       |       |       |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  |                                |  |  | <p>○ 所得制限を導入している団体は少ないものの、世帯の経済的負担の軽減を図るという制度の目的を鑑み、所得制限を導入する。</p> <p>○ 所得制限の基準としては、対象者がほぼ同一である障害者福祉金 (No.6) の所得制限 (※) の基準に合わせることにより、障害者福祉施策間の均衡を図る。</p> <p>○ なお、配布枚数については、他団体平均を大きく上回る状況ではあるが、年間60枚以上の利用者は少数であり、実質的な利用水準は他団体の配布数並みであることから、現状維持とする。</p> <p>※ 課税総所得金額 本人 3,604,000円以上、扶養義務者 6,287,000円以上 (県の在宅重度障害者手当と同様)</p> <p>≪検証≫</p> <p>① 他団体比較 (制度概要)</p> <table border="1"> <thead> <tr> <th rowspan="2">対象者</th> <th rowspan="2">清須市</th> <th colspan="5">類似団体</th> <th colspan="5">近隣団体</th> <th rowspan="2">平均</th> </tr> <tr> <th>津島市</th> <th>知立市</th> <th>豊明市</th> <th>田原市</th> <th>愛西市</th> <th>北名古屋</th> <th>瀬戸市</th> <th>日進市</th> <th>小牧市</th> <th>尾張旭市</th> <th>春日井市</th> </tr> </thead> <tbody> <tr> <td rowspan="6">療育手帳</td> <td>A</td> <td>○</td> </tr> <tr> <td>B</td> <td>○</td> </tr> <tr> <td rowspan="3">身体障害者手帳</td> <td>1級</td> <td>○</td> </tr> <tr> <td>2級</td> <td>○</td> </tr> <tr> <td>3級</td> <td>○</td> </tr> <tr> <td rowspan="3">精神障害者<br/>保健福祉手帳</td> <td>1級</td> <td>○</td> </tr> <tr> <td>2級</td> <td>○</td> </tr> <tr> <td>3級</td> <td></td> <td></td> <td></td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td rowspan="2">助成内容</td> <td>助成額 (円)</td> <td>650</td> <td>500</td> <td>610</td> <td>610</td> <td>500</td> <td>700</td> <td>500</td> <td>500</td> <td>820</td> <td>基本料金</td> <td>500</td> <td>630</td> <td>587</td> </tr> <tr> <td>年間配布数 (枚)</td> <td>120</td> <td>24</td> <td>36</td> <td>48</td> <td>12</td> <td>24</td> <td>48</td> <td>36</td> <td>48</td> <td>48</td> <td>36</td> <td>72</td> <td>39</td> </tr> <tr> <td>所得制限</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td></td> <td>○</td> <td></td> </tr> </tbody> </table> <p>② 利用状況</p> <table border="1"> <thead> <tr> <th></th> <th>平成23年度</th> <th>平成24年度</th> <th>平成25年度</th> </tr> </thead> <tbody> <tr> <td>月平均枚数 [枚] (年換算)</td> <td>3.6 (43.2)</td> <td>3.8 (45.6)</td> <td>3.6 (43.2)</td> </tr> <tr> <td>60枚以上の利用者の割合 [%]</td> <td>—</td> <td>12</td> <td>26</td> </tr> </tbody> </table>   | 対象者   | 清須市   | 類似団体  |       |       |       |       | 近隣団体  |      |     |  |  | 平均  | 津島市 | 知立市 | 豊明市 | 田原市  | 愛西市 | 北名古屋 | 瀬戸市 | 日進市  | 小牧市     | 尾張旭市 | 春日井市  | 療育手帳  | A     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○  | ○     | ○     | ○     | B     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○  | ○     | ○     | ○     | ○     | 身体障害者手帳 | 1級    | ○     | ○     | ○     | ○     | ○     | ○  | ○     | ○     | ○     | ○     | ○     | ○     | 2級    | ○     | ○     | ○     | ○     | ○  | ○     | ○     | ○ | ○     | ○ | ○     | ○     | 3級 | ○     | ○     | ○     | ○  | ○     | ○     | ○ | ○     | ○ | ○     | ○     | ○ | 精神障害者<br>保健福祉手帳 | 1級    | ○     | ○    | ○ | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | 2級    | ○     | ○ | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | 3級    |   |       |       |   | ○     |   |       |       |       |       |       |       | 助成内容            | 助成額 (円) | 650   | 500   | 610   | 610   | 500   | 700   | 500   | 500   | 820   | 基本料金  | 500   | 630 | 587   | 年間配布数 (枚) | 120   | 24    | 36    | 48    | 12    | 24    | 48    | 36    | 48    | 48 | 36    | 72    | 39    | 所得制限  |       |       |       |   |       |       |       | ○     |   |       |   |   | ○ |   |   | 平成23年度 | 平成24年度 | 平成25年度 | 月平均枚数 [枚] (年換算) | 3.6 (43.2) | 3.8 (45.6) | 3.6 (43.2) | 60枚以上の利用者の割合 [%] | — | 12 | 26 |  |  |   |   |
| 対象者              | 清須市                            | 類似団体   |  |   |       |       | 近隣団体  |       |       |       |       | 平均    |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  |                                | 津島市  | 知立市  | 豊明市   | 田原市   | 愛西市   | 北名古屋  | 瀬戸市   | 日進市   | 小牧市   | 尾張旭市  |       | 春日井市 |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 療育手帳             | A                              | ○  | ○  | ○   | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○    |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | B                              | ○  | ○  | ○   | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○    |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 身体障害者手帳                        | 1級   | ○  | ○   | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○    | ○   |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  |                                | 2級   | ○  | ○   | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○    | ○   |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  |                                | 3級   | ○  | ○   | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○    | ○   |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 精神障害者<br>保健福祉手帳                | 1級   | ○  | ○   | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○    | ○   |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 2級               |                                | ○  | ○  | ○   | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○     | ○    |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 3級               |                                |  |  |   |       | ○     |       |       |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 助成内容             | 助成額 (円)                        | 650  | 500  | 610   | 610   | 500   | 700   | 500   | 500   | 820   | 基本料金  | 500   | 630  | 587 |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 年間配布数 (枚)                      | 120  | 24   | 36  | 48    | 12    | 24    | 48    | 36    | 48    | 48    | 36    | 72   | 39  |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 所得制限             |                                |  |  |   |       |       |       | ○     |       |       |       |       | ○    |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  | 平成23年度                         | 平成24年度   | 平成25年度   |   |       |       |       |       |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 月平均枚数 [枚] (年換算)  | 3.6 (43.2)                     | 3.8 (45.6)   | 3.6 (43.2)   |   |       |       |       |       |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
| 60枚以上の利用者の割合 [%] | —                              | 12   | 26   |   |       |       |       |       |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |
|                  |                                |  |  | <p>≪参考≫ 制度の仕組み</p> <p>※No.8「心身障害者等ガソリン費助成金」との選択制</p> <p>① 受給資格者の申請に基づき、市が心身障害者等タクシー料金助成利用券を交付する。(1年度当たり120枚)</p> <p>② 受給資格者は、市と契約したタクシー業者のタクシーを利用し、降車の際、利用券1枚(上限650円)を運転手に渡す。後日、タクシー業者は市へ助成金を請求する。</p>  |       |       |       |       |       |       |       |       |      |     |  |  |     |     |     |     |      |     |      |     |      |         |      |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |       |       |         |       |       |       |       |       |       |    |       |       |       |       |       |       |       |       |       |       |       |    |       |       |   |       |   |       |       |    |       |       |       |    |       |       |   |       |   |       |       |   |                 |       |       |      |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |       |       |       |       |       |       |       |       |       |   |       |       |   |       |   |       |       |       |       |       |       |                 |         |       |       |       |       |       |       |       |       |       |       |       |     |       |           |       |       |       |       |       |       |       |       |       |    |       |       |       |       |       |       |       |   |       |       |       |       |   |       |   |   |   |   |   |        |        |        |                 |            |            |            |                  |   |    |    |  |  |   |   |

(他団体比較は清須市調べ)

| No.   | 事業名<br>(所管課)                      | 事業費 (千円)               | 事業概要及び見直しの視点   | 見直し内容 (案)   |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|-------|-----------------------------------|------------------------|--|---|-----|----------|-------|-----|-----|-----------------------------------|-----------------------|---|-------|-----------------------------------|----|--|-----|-----|-----|-----|-------|-----|-----|-----|------|------|-----|------|---|---|--|--|--|---|---|--|---|--|---|---|---|--|--|--|---|---|--|---|--|---|---------|----|---|--|--|--|---|---|--|---|--|---|----|---|--|--|--|---|---|--|---|--|---|----|---|--|--|--|---|---|--|---|--|---|-------------|----|---|--|--|--|---|---|--|---|--|---|----|---|--|--|--|---|---|--|---|--|---|----|---|--|--|--|---|---|--|---|--|---|------|------|--------|--|--|--|----------|--|--|--|--|--|--|-----|------|--|--|--|----------|------|--|-----|--|---------|------|--|--|--|--|---|--|--|--|--|---|
| 8     | 心身障害者等自動車ガソリン費用助成金<br>(社会福祉課)     | 24年度 (決算)<br>15,889    | <b>【事業概要】</b><br>心身障害者等に自動車ガソリン費用助成金を支給し、その世帯の経済的負担の軽減を図り、もって福祉の向上に資する。<br><b>【見直しの視点】</b><br>助成限度量の見直し及び所得制限の導入 | 見直し実施 (所得制限の導入)   |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   | 25年度 (決算見込み)<br>17,974 |  | [効果額 : 795 千円 実施時期 : 平成 27 年度]  |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   | 26年度 (当初)<br>19,872    |  | <p>○ 所得制限を導入している団体は少ないものの、<b>世帯の経済的負担の軽減を図るという制度の目的を鑑み、所得制限を導入する。</b></p> <p>○ 所得制限の基準としては、<b>対象者がほぼ同一である障害者福祉金 (No.6) の所得制限の基準 (※) に合わせる</b>ことにより、<b>障害者福祉施策間の均衡を図る。</b></p> <p>○ なお、<b>助成限度量</b>については、他団体と比較して高い水準にあるが、<b>一人当たりの市負担額は、選択制の制度であるタクシー料金助成 (No.7) と比較して、著しく高いとは言えないことから、両制度の均衡を保つため、現状維持とする。</b></p> <p>※ 課税総所得金額 本人 3,604,000 円以上、扶養義務者 6,287,000 円以上 (県の在宅重度障害者手当と同様)</p> <p>《検証》</p> <p>① 他団体比較 (制度概要)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">清須市</th> <th colspan="4">類似団体</th> <th colspan="5">近隣団体</th> </tr> <tr> <th>津島市</th> <th>知立市</th> <th>豊明市</th> <th>田原市</th> <th>愛西市</th> <th>北名古屋市</th> <th>瀬戸市</th> <th>日進市</th> <th>小牧市</th> <th>尾張旭市</th> <th>春日井市</th> </tr> </thead> <tbody> <tr> <td rowspan="6">対象者</td> <td rowspan="2">療育手帳</td> <td>A</td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td>B</td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td rowspan="3">身体障害者手帳</td> <td>1級</td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td>2級</td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td>3級</td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td rowspan="3">精神障害者保健福祉手帳</td> <td>1級</td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td>2級</td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td>3級</td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td rowspan="3">助成内容</td> <td>助成範囲</td> <td>購入費の5割</td> <td></td> <td></td> <td></td> <td>年12,000円</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>限度量</td> <td>月40ℓ</td> <td></td> <td></td> <td></td> <td>1回1,000円</td> <td>月10ℓ</td> <td></td> <td>月4ℓ</td> <td></td> <td>月1,200円</td> </tr> <tr> <td>所得制限</td> <td></td> <td></td> <td></td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td></td> <td>○</td> </tr> </tbody> </table> <p style="margin-left: 40px;">月 3,300 円程度<br/>(165ℓ/円 × 40ℓ × 0.5)</p> <p>② 一人当たり年間市負担額 (タクシーとの比較)</p> <p>ガソリン : 165ℓ/円 × 36.8ℓ (平成 25 年度平均) × 12 月 × 0.5 = 36,432 円</p> <p>タクシー : 650 円 × 3.6 枚 (平成 25 年度平均) × 12 月 = 28,080 円</p> |     | 清須市      | 類似団体  |     |     |                                   | 近隣団体                  |   |       |                                   |    | 津島市  | 知立市 | 豊明市 | 田原市 | 愛西市 | 北名古屋市 | 瀬戸市 | 日進市 | 小牧市 | 尾張旭市 | 春日井市 | 対象者 | 療育手帳 | A | ○ |  |  |  | ○ | ○ |  | ○ |  | ○ | B | ○ |  |  |  | ○ | ○ |  | ○ |  | ○ | 身体障害者手帳 | 1級 | ○ |  |  |  | ○ | ○ |  | ○ |  | ○ | 2級 | ○ |  |  |  | ○ | ○ |  | ○ |  | ○ | 3級 | ○ |  |  |  | ○ | ○ |  | ○ |  | ○ | 精神障害者保健福祉手帳 | 1級 | ○ |  |  |  | ○ | ○ |  | ○ |  | ○ | 2級 | ○ |  |  |  | ○ | ○ |  | ○ |  | ○ | 3級 | ○ |  |  |  | ○ | ○ |  | ○ |  | ○ | 助成内容 | 助成範囲 | 購入費の5割 |  |  |  | 年12,000円 |  |  |  |  |  |  | 限度量 | 月40ℓ |  |  |  | 1回1,000円 | 月10ℓ |  | 月4ℓ |  | 月1,200円 | 所得制限 |  |  |  |  | ○ |  |  |  |  | ○ |
|       | 清須市                               | 類似団体                   |  |   |     |          | 近隣団体  |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   | 津島市                    | 知立市  | 豊明市   | 田原市 | 愛西市      | 北名古屋市 | 瀬戸市 | 日進市 | 小牧市                               | 尾張旭市                  | 春日井市  |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
| 対象者   | 療育手帳                              | A                      | ○  |   |     |          | ○     | ○   |     | ○                                 |                       | ○   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   | B                      | ○  |   |     |          | ○     | ○   |     | ○                                 |                       | ○   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       | 身体障害者手帳                           | 1級                     | ○  |   |     |          | ○     | ○   |     | ○                                 |                       | ○   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   | 2級                     | ○  |   |     |          | ○     | ○   |     | ○                                 |                       | ○   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   | 3級                     | ○  |   |     |          | ○     | ○   |     | ○                                 |                       | ○   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       | 精神障害者保健福祉手帳                       | 1級                     | ○  |   |     |          | ○     | ○   |     | ○                                 |                       | ○   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
| 2級    |                                   | ○                      |  |   |     | ○        | ○     |     | ○   |                                   | ○                     |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
| 3級    |                                   | ○                      |  |   |     | ○        | ○     |     | ○   |                                   | ○                     |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
| 助成内容  | 助成範囲                              | 購入費の5割                 |  |   |     | 年12,000円 |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       | 限度量                               | 月40ℓ                   |  |   |     | 1回1,000円 | 月10ℓ  |     | 月4ℓ |                                   | 月1,200円               |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       | 所得制限                              |                        |  |   |     | ○        |       |     |     |                                   | ○                     |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
| 9     | 老人福祉車購入費補助金<br>(高齢福祉課)            | 24年度 (決算)<br>316       | <b>【事業概要】</b><br>65 歳以上の歩行困難な老人が老人福祉車の購入に要する経費に対し補助金を交付し、もって老人福祉の増進を図ることを目的とする。<br><b>【見直しの視点】</b><br>補助制度の必要性   | 現状維持  |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   | 25年度 (決算見込み)<br>198    |  |   |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   | 26年度 (当初)<br>265       |  | <p>○ 類似団体及び近隣団体の中では、北名古屋市以外に同様の事業を実施している団体はないが、<b>毎年度、一定程度の利用件数があるため、補助制度自体は適正に機能していると思われる。</b></p> <p>○ また、本事業は、<b>高齢者の外出機会拡大の効果</b>が期待され、<b>介護予防的側面も持ち合わせている</b>と考えられる。</p> <p>○ よって、<b>本事業については現状維持とする。</b></p> <p>《検証》</p> <p>① 他団体比較 (制度概要)</p> <p>類似団体及び近隣団体の中では、<b>北名古屋市のみの事業を実施している。</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>補助対象者</th> <th>補助金額</th> <th>その他</th> </tr> </thead> <tbody> <tr> <td>清須市</td> <td>市内に居住する 65 歳以上の者で、外出の際に杖等を必要とするもの</td> <td>購入費の 1/2 (上限 5,000 円)</td> <td>・補助を受けた翌年度から起算して <b>4 年 度を経過するまでの間は申請不可</b></td> </tr> <tr> <td>北名古屋市</td> <td>市内に居住する 65 歳以上の者で、外出の際に歩行に支障があるもの</td> <td>同上</td> <td>・補助を受けた <b>当該年度は申請不可</b><br/>・杖の購入に対する補助制度もあり (購入費の 1/2 (上限 1,500 円))</td> </tr> </tbody> </table> <p>② 利用件数 (過去 3 年度間)</p> <p>平成 23 年度 : 41 件    平成 24 年度 : 64 件    平成 25 年度 : 40 件</p>  |     | 補助対象者    | 補助金額  | その他 | 清須市 | 市内に居住する 65 歳以上の者で、外出の際に杖等を必要とするもの | 購入費の 1/2 (上限 5,000 円) | ・補助を受けた翌年度から起算して <b>4 年 度を経過するまでの間は申請不可</b> | 北名古屋市 | 市内に居住する 65 歳以上の者で、外出の際に歩行に支障があるもの | 同上 | ・補助を受けた <b>当該年度は申請不可</b><br>・杖の購入に対する補助制度もあり (購入費の 1/2 (上限 1,500 円)) |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       | 補助対象者                             | 補助金額                   | その他  |   |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
| 清須市   | 市内に居住する 65 歳以上の者で、外出の際に杖等を必要とするもの | 購入費の 1/2 (上限 5,000 円)  | ・補助を受けた翌年度から起算して <b>4 年 度を経過するまでの間は申請不可</b>  |   |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
| 北名古屋市 | 市内に居住する 65 歳以上の者で、外出の際に歩行に支障があるもの | 同上                     | ・補助を受けた <b>当該年度は申請不可</b><br>・杖の購入に対する補助制度もあり (購入費の 1/2 (上限 1,500 円))   |   |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |
|       |                                   |                        |  | (他団体比較は清須市調べ)   |     |          |       |     |     |                                   |                       |   |       |                                   |    |  |     |     |     |     |       |     |     |     |      |      |     |      |   |   |  |  |  |   |   |  |   |  |   |   |   |  |  |  |   |   |  |   |  |   |         |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |             |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |    |   |  |  |  |   |   |  |   |  |   |      |      |        |  |  |  |          |  |  |  |  |  |  |     |      |  |  |  |          |      |  |     |  |         |      |  |  |  |  |   |  |  |  |  |   |

| No.       | 事業名<br>(所管課)   | 事業費 (千円)   | 事業概要及び見直しの視点  | 見直し内容 (案)  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|-----------|--|--|---|--|--------|-------------------------|--------|---------|---------|--|----------------------|------|-----|--|--|--|-----|--------------------------|---|-----|-----|--------------------------------|--|-----|-----|-----------|----------------------|-----|-----|--|--|--|-------|-----------------------|--|---|-----|--|--------|--|-----|--|---|--|-----|--|--|--|------|------|---|--|------|---|---|--|--|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|--------|--|--|---|--|---|--|--|---|---|---|---|--------|--|--------|---------|------|--------|-------------------------|--------|---------|---------|------------------|--------|------|------|--|--|---|--|---|---|---|---|---|--|---|--|
| 10        | 老人住宅改善費補助金<br>(高齢福祉課)  | 24年度 (決算)  | <b>【事業概要】</b><br>老人が住宅における環境整備及び改善に要する経費に対し補助金を交付し、もって福祉の向上を図ることを目的とする。<br><b>【見直しの視点】</b><br>補助限度額の見直し                                   | <b>現状維持</b><br>○ 補助金額については、対象経費を 1/2 としているものの、上限額が高く、補助水準としては高い状況にある。<br>○ しかしながら、住宅改善工事は多額の費用を要することから、低所得者層に限定し、介護給付で補いきれない費用を助成する制度の趣旨は妥当であることから、本事業については現状維持とする。  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           |  | 25年度 (決算見込み)   |   |  | 1,237  |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 26年度 (当初) | 1,002  |  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           |  | <b>【見直しの視点】</b><br>補助限度額の見直し   |   | <b>＜検証＞ 他団体比較 (制度概要)</b> <table border="1"> <thead> <tr> <th></th> <th>対象者</th> <th>補助金額</th> <th>介護保険</th> </tr> </thead> <tbody> <tr> <td>清須市</td> <td>所得税非課税世帯に属している65歳以上の高齢者で、介護保険による認定を受けている方(非該当と判定された方を含む)</td> <td>対象経費の1/2<br/>(上限30万円)</td> <td>○</td> </tr> <tr> <td>津島市</td> <td></td> <td></td> <td></td> </tr> <tr> <td>知立市</td> <td>介護保険の住宅改修費の給付を受けることができる人</td> <td>[市民税非課税世帯]<br/>上限15万円<br/>[市民税課税世帯]<br/>上限10万円</td> <td>○</td> </tr> <tr> <td>豊明市</td> <td>要介護認定又は要支援認定を受けている者若しくはそれに準ずる者</td> <td>[市民税非課税世帯]<br/>上限10万円<br/>[市民税課税世帯]<br/>上限5万円</td> <td>○</td> </tr> <tr> <td>田原市</td> <td>65歳以上の高齢者</td> <td>対象経費の1/2<br/>(上限20万円)</td> <td>※</td> </tr> <tr> <td>愛西市</td> <td></td> <td></td> <td></td> </tr> <tr> <td>北名古屋市</td> <td>介護保険の被保険者で、要支援又は要介護の方</td> <td>上限15万円<br/>(対象者の全世帯の<br/>市民税所得割額が10<br/>万円以上の場合<br/>1/2の額)</td> <td>○</td> </tr> <tr> <td>瀬戸市</td> <td></td> <td></td> <td></td> </tr> <tr> <td>日進市</td> <td></td> <td></td> <td></td> </tr> <tr> <td>小牧市</td> <td>①65歳以上の虚弱な高齢者であって生計を一にする世帯全員の市民税が非課税の方<br/>②介護保険の要介護(要支援)認定者であって生計を一にする世帯全員の市民税が非課税の方で介護保険住宅改修費の支給を上限額(18万円)まで受けていない方</td> <td>①対象経費の9割<br/>(上限20万円)<br/>②対象経費の9割<br/>(上限10万円)</td> <td></td> </tr> <tr> <td>尾張旭市</td> <td></td> <td></td> <td></td> </tr> <tr> <td>春日井市</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |        | 対象者                     | 補助金額   | 介護保険    | 清須市     | 所得税非課税世帯に属している65歳以上の高齢者で、介護保険による認定を受けている方(非該当と判定された方を含む) | 対象経費の1/2<br>(上限30万円) | ○    | 津島市 |  |  |  | 知立市 | 介護保険の住宅改修費の給付を受けることができる人 | [市民税非課税世帯]<br>上限15万円<br>[市民税課税世帯]<br>上限10万円 | ○   | 豊明市 | 要介護認定又は要支援認定を受けている者若しくはそれに準ずる者 | [市民税非課税世帯]<br>上限10万円<br>[市民税課税世帯]<br>上限5万円 | ○   | 田原市 | 65歳以上の高齢者 | 対象経費の1/2<br>(上限20万円) | ※   | 愛西市 |  |  |  | 北名古屋市 | 介護保険の被保険者で、要支援又は要介護の方 | 上限15万円<br>(対象者の全世帯の<br>市民税所得割額が10<br>万円以上の場合<br>1/2の額) | ○ | 瀬戸市 |  |        |  | 日進市 |  |   |  | 小牧市 | ①65歳以上の虚弱な高齢者であって生計を一にする世帯全員の市民税が非課税の方<br>②介護保険の要介護(要支援)認定者であって生計を一にする世帯全員の市民税が非課税の方で介護保険住宅改修費の支給を上限額(18万円)まで受けていない方 | ①対象経費の9割<br>(上限20万円)<br>②対象経費の9割<br>(上限10万円) |  | 尾張旭市 |      |   |  | 春日井市 |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           | 対象者  | 補助金額   | 介護保険  |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 清須市       | 所得税非課税世帯に属している65歳以上の高齢者で、介護保険による認定を受けている方(非該当と判定された方を含む)   | 対象経費の1/2<br>(上限30万円)   | ○   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 津島市       |  |  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 知立市       | 介護保険の住宅改修費の給付を受けることができる人   | [市民税非課税世帯]<br>上限15万円<br>[市民税課税世帯]<br>上限10万円  | ○   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 豊明市       | 要介護認定又は要支援認定を受けている者若しくはそれに準ずる者   | [市民税非課税世帯]<br>上限10万円<br>[市民税課税世帯]<br>上限5万円   | ○   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 田原市       | 65歳以上の高齢者  | 対象経費の1/2<br>(上限20万円)   | ※   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 愛西市       |  |  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 北名古屋市     | 介護保険の被保険者で、要支援又は要介護の方  | 上限15万円<br>(対象者の全世帯の<br>市民税所得割額が10<br>万円以上の場合<br>1/2の額)   | ○   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 瀬戸市       |  |  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 日進市       |  |  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 小牧市       | ①65歳以上の虚弱な高齢者であって生計を一にする世帯全員の市民税が非課税の方<br>②介護保険の要介護(要支援)認定者であって生計を一にする世帯全員の市民税が非課税の方で介護保険住宅改修費の支給を上限額(18万円)まで受けていない方 | ①対象経費の9割<br>(上限20万円)<br>②対象経費の9割<br>(上限10万円)   |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 尾張旭市      |  |  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 春日井市      |  |  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           |  | <b>＜参考＞ 補助対象工事</b><br>居室、浴室、便所等の使用の確保及びこれらの安全のために必要な設備の取付工事<br>(手すりの取付け、段差解消、洋式便所への取替え 等)  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 11        | 介護用品支給費<br>(高齢福祉課)   | 24年度 (決算)  | <b>【事業概要】</b><br>介護用品を使用している在宅寝たきり高齢者等に対して、介護用品を支給することにより、その介護者の負担を軽減し、もって福祉の向上に資することを目的とする。<br><b>【見直しの視点】</b><br>対象者の見直し(要介護3)及び所得制限の導入 | <b>見直し実施 (所得制限の導入)</b><br><b>[効果額：11,794千円 実施時期：平成27年度]</b><br>○ 対象者の見直しについては、要介護3の者を対象としている団体は少ないものの、本市は寝たきり及び認知症の者に限定していることから、介護者の負担軽減という制度の趣旨を鑑み、現状維持とする。<br>○ 一方、所得制限については、多くの団体において設けており、介護者の負担軽減といった点についても、収入によって線引きを行うことは合理性があることから、所得制限を導入する。<br>○ 所得制限の基準としては、他団体がいずれも市民税非課税世帯としていることから、同様の基準とする。   |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           |  | 25年度 (決算見込み)   |   |  | 15,471 |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 26年度 (当初) | 17,394   |  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           |  | <b>＜参考＞ 制度の仕組み</b><br>① 対象者の申請に基づき、市が介護用品支給利用券(月額7,000円以内)を交付する。<br>② 利用券受給者は、市と契約した市内薬局で利用券と引き換えに紙おむつ、尿とりパット、介護用使い捨て手袋、清拭タオル等の支給を受ける。後日、薬局は市へ料金の請求をする。  |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           |  | <b>＜検証＞ 他団体比較 (制度概要)</b> <table border="1"> <thead> <tr> <th rowspan="2">対象者</th> <th rowspan="2">区分</th> <th rowspan="2">清須市</th> <th colspan="5">類似団体</th> <th colspan="5">近隣団体</th> </tr> <tr> <th>津島市</th> <th>知立市</th> <th>豊明市</th> <th>田原市</th> <th>愛西市</th> <th>北名古屋</th> <th>瀬戸市</th> <th>日進市</th> <th>小牧市</th> <th>尾張旭市</th> </tr> </thead> <tbody> <tr> <td rowspan="4">介護保険事業</td> <td>要支援</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>○</td> <td></td> <td></td> </tr> <tr> <td>要介護1・2</td> <td></td> <td></td> <td></td> <td>○</td> <td></td> <td></td> <td></td> <td>○</td> <td></td> <td></td> </tr> <tr> <td>要介護3</td> <td>○</td> <td></td> <td></td> <td>○</td> <td>○</td> <td></td> <td></td> <td>○</td> <td></td> <td>○</td> </tr> <tr> <td>要介護4・5</td> <td>○</td> </tr> <tr> <td colspan="2">介護保険事業</td> <td></td> <td>○</td> <td></td> <td>○</td> <td></td> <td></td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> </tr> <tr> <td colspan="2">支給額(円)</td> <td>月7,000</td> <td>年75,000</td> <td>現物支給</td> <td>月6,000</td> <td>年20,000<br/>～<br/>年70,000</td> <td>月6,250</td> <td>年75,000</td> <td>年10,000</td> <td>月5,000<br/>(9割まで)</td> <td>月6,000</td> <td>現物支給</td> </tr> <tr> <td colspan="2">所得制限</td> <td></td> <td>○</td> <td></td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td></td> <td>○</td> <td></td> </tr> </tbody> </table> |   | 対象者  | 区分     | 清須市                     | 類似団体   |         |         |  |                      | 近隣団体 |     |  |  |  | 津島市 | 知立市                      | 豊明市   | 田原市 | 愛西市 | 北名古屋                           | 瀬戸市  | 日進市 | 小牧市 | 尾張旭市      | 介護保険事業               | 要支援 |     |  |  |  |       |                       |  | ○ |     |  | 要介護1・2 |  |     |  | ○ |  |     |  | ○  |  |      | 要介護3 | ○ |  |      | ○ | ○ |  |  | ○ |  | ○ | 要介護4・5 | ○ | ○ | ○ | ○ | ○ | ○ | ○ | ○ | ○ | ○ | 介護保険事業 |  |  | ○ |  | ○ |  |  | ○ | ○ | ○ | ○ | 支給額(円) |  | 月7,000 | 年75,000 | 現物支給 | 月6,000 | 年20,000<br>～<br>年70,000 | 月6,250 | 年75,000 | 年10,000 | 月5,000<br>(9割まで) | 月6,000 | 現物支給 | 所得制限 |  |  | ○ |  | ○ | ○ | ○ | ○ | ○ |  | ○ |  |
| 対象者       | 区分   | 清須市  | 類似団体  |  |        |                         |        | 近隣団体    |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           |  |  | 津島市   | 知立市  | 豊明市    | 田原市                     | 愛西市    | 北名古屋    | 瀬戸市     | 日進市  | 小牧市                  | 尾張旭市 |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 介護保険事業    | 要支援  |  |   |  |        |                         |        |         | ○       |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           | 要介護1・2   |  |   |  | ○      |                         |        |         | ○       |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           | 要介護3   | ○  |   |  | ○      | ○                       |        |         | ○       |  | ○                    |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           | 要介護4・5   | ○  | ○   | ○  | ○      | ○                       | ○      | ○       | ○       | ○  | ○                    |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 介護保険事業    |  |  | ○   |  | ○      |                         |        | ○       | ○       | ○  | ○                    |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 支給額(円)    |  | 月7,000   | 年75,000   | 現物支給   | 月6,000 | 年20,000<br>～<br>年70,000 | 月6,250 | 年75,000 | 年10,000 | 月5,000<br>(9割まで)   | 月6,000               | 現物支給 |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
| 所得制限      |  |  | ○   |  | ○      | ○                       | ○      | ○       | ○       |  | ○                    |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |
|           |  | (注) 春日井市(近隣団体)は同様の事業を実施していない。<br>(他団体比較は清須市調べ)   |   |  |        |                         |        |         |         |  |                      |      |     |  |  |  |     |                          |   |     |     |                                |  |     |     |           |                      |     |     |  |  |  |       |                       |  |   |     |  |        |  |     |  |   |  |     |  |  |  |      |      |   |  |      |   |   |  |  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |        |  |  |   |  |   |  |  |   |   |   |   |        |  |        |         |      |        |                         |        |         |         |                  |        |      |      |  |  |   |  |   |   |   |   |   |  |   |  |

| No.      | 事業名<br>(所管課)           | 事業費 (千円)                   | 事業概要及び見直しの視点  | 見直し内容 (案)  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|----------|------------------------|----------------------------|---|--|----------------------|---------|------|------|-----|------|--------|-------|----|--|------|-----|-------|----|---|---------------|-----|-------|----|----|----|-----|-------|------|------|-----|-----|-------|---|-----|------|------|-------|----|---|---------------|------|-------|-------|-----|----|-------------------|-----|-------|------|--------|----------------------|-----|-------|----|---|-----|-----|------------|---|------|------|----------|------|------------|---|--|--|----------|------|----------|---|--|--|------------|-------|----------|---|--|--|------------|-------|--|-------|--|--|--|
| 12       | 老人無料入浴制度補助金<br>(高齢福祉課) | 24年度 (決算)                  | <b>【事業概要】</b><br>公衆浴場の利用費を無料とすることで、老人の利用を促進し、老人のコミュニケーションを図るとともに、健康の増進及び福祉の向上を目的とする。<br><b>【見直しの視点】</b><br>補助制度のあり方の見直し   | <b>現状維持</b><br>○ 現在の補助の仕組みは、均等補助と入浴者補助の二本立てとなっており、入浴者補助は1人当たり入浴料の50%となっていることから、利用状況が大きく異なる両施設(憩温泉・二川湯)間において、負担の面で不均衡が生じている。<br>○ しかしながら、補助制度の見直し方法次第では、利用者数、ひいては事業者に大きな影響を及ぼすことから、現時点では現状維持とする。<br>○ 今後、事業者を交えて補助制度のあり方を検討するとともに、あわせて、地区別の利用者の分布にも偏りがあることから、市営入浴施設(※)のあり方も含めて、見直しに向けた検討を進める。<br>※ 清洲総合福祉センター、新川福祉センター  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        | 25年度 (決算見込み)               |   |  | 26年度 (当初)            |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        | 3,053<br>3,002<br>2,960    |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        |                            | <b>《参考》 制度の仕組み</b><br>① 利用者の申請に基づき、市が老人無料入浴利用券を交付する(1月当たり2枚を限度)。<br>② 利用者は入浴の際、公衆浴場事業主(愛知県公衆浴場業生活衛生同業組合に加盟する市内の公衆浴場)に利用券を渡す。後日、事業主は市へ補助金を申請する。<br><b>均等補助 : 年500,000円</b><br><b>入浴者補助 : 1人当たり入浴料(390円) × 50%</b>  | <b>《検証》</b><br><b>① 施設別利用状況(平成25年度実績)</b><br>憩温泉: 8,470人 二川湯: 1,795人<br><b>② 利用者分析(平成25年度の利用券交付者数)</b> [単位: 人]   |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        |                            |   | <table border="1"> <thead> <tr> <th colspan="2"></th> <th colspan="4">地区別</th> <th colspan="2">年齢別(計)</th> </tr> <tr> <th colspan="2">地区</th> <th>西枇杷島</th> <th>新川</th> <th>清洲</th> <th>春日</th> <th>計</th> <th>率(%)</th> </tr> </thead> <tbody> <tr> <th rowspan="4">年齢別</th> <th>65歳~</th> <td>72</td> <td>23</td> <td>10</td> <td>0</td> <td>105</td> <td>16.9</td> </tr> <tr> <th>70歳~</th> <td>117</td> <td>57</td> <td>7</td> <td>1</td> <td>182</td> <td>29.4</td> </tr> <tr> <th>75歳~</th> <td>111</td> <td>47</td> <td>6</td> <td>3</td> <td>167</td> <td>26.9</td> </tr> <tr> <th>80歳~</th> <td>117</td> <td>44</td> <td>4</td> <td>1</td> <td>166</td> <td>26.8</td> </tr> <tr> <th colspan="2">地区別(計)</th> <td>417</td> <td>171</td> <td>27</td> <td>5</td> <td>620</td> <td></td> </tr> <tr> <th colspan="2">率(%)</th> <td>67.3</td> <td>27.6</td> <td>4.4</td> <td>0.8</td> <td></td> <td></td> </tr> </tbody> </table> |                      |         | 地区別  |      |     |      | 年齢別(計) |       | 地区 |  | 西枇杷島 | 新川  | 清洲    | 春日 | 計 | 率(%)          | 年齢別 | 65歳~  | 72 | 23 | 10 | 0   | 105   | 16.9 | 70歳~ | 117 | 57  | 7     | 1 | 182 | 29.4 | 75歳~ | 111   | 47 | 6 | 3             | 167  | 26.9  | 80歳~  | 117 | 44 | 4                 | 1   | 166   | 26.8 | 地区別(計) |                      | 417 | 171   | 27 | 5 | 620 |     | 率(%)       |   | 67.3 | 27.6 | 4.4      | 0.8  |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        | 地区別                        |   |  |                      | 年齢別(計)  |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 地区       |                        | 西枇杷島                       | 新川  | 清洲   | 春日                   | 計       | 率(%) |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 年齢別      | 65歳~                   | 72                         | 23  | 10   | 0                    | 105     | 16.9 |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 70歳~                   | 117                        | 57  | 7  | 1                    | 182     | 29.4 |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 75歳~                   | 111                        | 47  | 6  | 3                    | 167     | 26.9 |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 80歳~                   | 117                        | 44  | 4  | 1                    | 166     | 26.8 |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 地区別(計)   |                        | 417                        | 171   | 27   | 5                    | 620     |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 率(%)     |                        | 67.3                       | 27.6  | 4.4  | 0.8                  |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 13       | 遺児手当支給費<br>(子育て支援課)    | 24年度 (決算)                  | <b>【事業概要】</b><br>父子又は母子家庭もしくは、父又は母に重度の障害のある家庭の児童を監護又は養育している者に手当を支給し、児童の健全育成と福祉の推進を図る。<br><b>【見直しの視点】</b><br>支給額及び支給期間の見直し   | <b>現状維持</b><br>○ 支給額について、他団体平均を上回っている状況である。<br>○ 支給期間については、県遺児手当と同様に期間制限を設けている団体は少ない。<br>○ 支給額を他団体平均並みに見直す余地はあるが、本事業のみの水準比較ではなく、母子福祉施策全体の水準や、他の福祉分野との均衡等を総合的に勘案した上で結論を出すこととし、今回は現状維持とする。   |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        | 25年度 (決算見込み)               |   |  | 26年度 (当初)            |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        | 46,625<br>47,585<br>49,420 |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        |                            | <b>《参考》 愛知県遺児手当</b><br>① 支給額 1年目~3年目 月額4,350円<br>4年目~5年目 月額2,175円<br>② 所得制限(児童扶養手当の所得制限と同様)   | <b>《検証》 他団体比較(制度概要)</b>  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        |                            | <table border="1"> <thead> <tr> <th colspan="2"></th> <th>月支給額(円)</th> <th>所得制限</th> <th>期間制限</th> <th>その他</th> </tr> </thead> <tbody> <tr> <td rowspan="6">類似団体</td> <td>清須市</td> <td>5,000</td> <td>○</td> <td></td> <td></td> </tr> <tr> <td>津島市</td> <td>2,000</td> <td>○</td> <td>○</td> <td>支給開始から5年間のみ支給</td> </tr> <tr> <td>知立市</td> <td>2,400</td> <td></td> <td></td> <td></td> </tr> <tr> <td>豊明市</td> <td>2,500</td> <td>○</td> <td></td> <td></td> </tr> <tr> <td>田原市</td> <td>2,500</td> <td>○</td> <td></td> <td></td> </tr> <tr> <td>愛西市</td> <td>2,500</td> <td>○</td> <td>○</td> <td>支給開始から5年間のみ支給</td> </tr> <tr> <td rowspan="6">近隣団体</td> <td>北名古屋市</td> <td>5,000</td> <td>○</td> <td></td> <td>所得限度額以上の場合月2,500円</td> </tr> <tr> <td>瀬戸市</td> <td>2,000</td> <td></td> <td></td> <td>義務教育就学中の者が対象(遺児就学手当)</td> </tr> <tr> <td>日進市</td> <td>3,500</td> <td></td> <td></td> <td></td> </tr> <tr> <td rowspan="2">小牧市</td> <td>小学生以下2,000</td> <td rowspan="2">○</td> <td rowspan="2"></td> <td rowspan="2"></td> </tr> <tr> <td>中学生3,000</td> </tr> <tr> <td rowspan="2">尾張旭市</td> <td>中学生以上4,000</td> <td rowspan="2">○</td> <td rowspan="2"></td> <td rowspan="2"></td> </tr> <tr> <td>小学生2,500</td> </tr> <tr> <td rowspan="2">春日井市</td> <td>中学生3,750</td> <td rowspan="2">○</td> <td rowspan="2"></td> <td rowspan="2"></td> </tr> <tr> <td>小学生以下2,000</td> </tr> <tr> <td rowspan="2">支給額平均</td> <td>中学生3,000</td> <td rowspan="2">○</td> <td rowspan="2"></td> <td rowspan="2"></td> </tr> <tr> <td>中学卒以上4,000</td> </tr> <tr> <td colspan="2">支給額平均</td> <td>2,567</td> <td colspan="3">県遺児手当と同様のスキーム(18歳以下を対象に一律の額を支給)により事業を実施する以下の団体の平均(津島市、知立市、豊明市、田原市、愛西市、日進市)</td> </tr> </tbody> </table> |  |                      | 月支給額(円) | 所得制限 | 期間制限 | その他 | 類似団体 | 清須市    | 5,000 | ○  |  |      | 津島市 | 2,000 | ○  | ○ | 支給開始から5年間のみ支給 | 知立市 | 2,400 |    |    |    | 豊明市 | 2,500 | ○    |      |     | 田原市 | 2,500 | ○ |     |      | 愛西市  | 2,500 | ○  | ○ | 支給開始から5年間のみ支給 | 近隣団体 | 北名古屋市 | 5,000 | ○   |    | 所得限度額以上の場合月2,500円 | 瀬戸市 | 2,000 |      |        | 義務教育就学中の者が対象(遺児就学手当) | 日進市 | 3,500 |    |   |     | 小牧市 | 小学生以下2,000 | ○ |      |      | 中学生3,000 | 尾張旭市 | 中学生以上4,000 | ○ |  |  | 小学生2,500 | 春日井市 | 中学生3,750 | ○ |  |  | 小学生以下2,000 | 支給額平均 | 中学生3,000 | ○ |  |  | 中学卒以上4,000 | 支給額平均 |  | 2,567 | 県遺児手当と同様のスキーム(18歳以下を対象に一律の額を支給)により事業を実施する以下の団体の平均(津島市、知立市、豊明市、田原市、愛西市、日進市) |  |  |
|          |                        | 月支給額(円)                    | 所得制限  | 期間制限   | その他                  |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 類似団体     | 清須市                    | 5,000                      | ○   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 津島市                    | 2,000                      | ○   | ○  | 支給開始から5年間のみ支給        |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 知立市                    | 2,400                      |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 豊明市                    | 2,500                      | ○   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 田原市                    | 2,500                      | ○   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 愛西市                    | 2,500                      | ○   | ○  | 支給開始から5年間のみ支給        |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 近隣団体     | 北名古屋市                  | 5,000                      | ○   |  | 所得限度額以上の場合月2,500円    |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 瀬戸市                    | 2,000                      |   |  | 義務教育就学中の者が対象(遺児就学手当) |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 日進市                    | 3,500                      |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 小牧市                    | 小学生以下2,000                 | ○   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          |                        | 中学生3,000                   |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 尾張旭市                   | 中学生以上4,000                 | ○   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 小学生2,500 |                        |                            |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 春日井市     | 中学生3,750               | ○                          |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 小学生以下2,000             |                            |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 支給額平均    | 中学生3,000               | ○                          |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
|          | 中学卒以上4,000             |                            |   |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |
| 支給額平均    |                        | 2,567                      | 県遺児手当と同様のスキーム(18歳以下を対象に一律の額を支給)により事業を実施する以下の団体の平均(津島市、知立市、豊明市、田原市、愛西市、日進市)  |  |                      |         |      |      |     |      |        |       |    |  |      |     |       |    |   |               |     |       |    |    |    |     |       |      |      |     |     |       |   |     |      |      |       |    |   |               |      |       |       |     |    |                   |     |       |      |        |                      |     |       |    |   |     |     |            |   |      |      |          |      |            |   |  |  |          |      |          |   |  |  |            |       |          |   |  |  |            |       |  |       |  |  |  |

(他団体比較は清須市調べ)

| No.        | 事業名<br>(所管課)                   | 事業費 (千円)   | 事業概要及び見直しの視点   | 見直し内容 (案)  |            |   |                                    |             |                    |   |             |  |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
|------------|--------------------------------|--|--|--|------------|---|------------------------------------|-------------|--------------------|---|-------------|--|------|--|--|--|--|-----|-----|-----|-----|-----|-------|-----|-----|-----|------|------|------|--------------------------------|-------------|------------|----------------------------------|------------|---|------------------------------------|-------------|------------|---|-------------|--|----------|---------|--|---------|-----------------------|---------|---------|-----------------|--|---------|-------------------------------|--|---------|------------|------|--|------|------|-----|------|------|--|--------------------|------|--|------|
| 14         | 樋門の操作 (用排水路事務費の一部)<br>(土木課)    | 24年度 (決算)  | <b>【事業概要】</b><br>台風やゲリラ豪雨などの降雨時に、道路冠水や人命と財産への被害を未然に防止、あるいは最小限に留めるために、樋門管理人による樋門等の操作を行う。<br><b>【見直しの視点】</b><br>出水時 (災害時) 対応の見直し | <b>現状維持</b><br><br>○ <b>樋門管理人による出水時対応には、運用上の課題があるものの、市民の防災意識を醸成し、自助・共助・公助の適切な連携を図るためには、本制度のように市民自らが参加する防災体制が重要であるため、現状維持とする。</b>   |            |   |                                    |             |                    |   |             |  |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
|            |                                | 3,817<br>25年度 (決算見込み)<br>3,421<br>26年度 (当初)<br>3,820   |  |  |            |   |                                    |             |                    |   |             |  |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
|            |                                | <b>《参考》 樋門管理人による樋門操作</b><br>① 樋門管理人は、地区ごとに農業者 (多くは兼業) から選出された63名。<br>② 樋門管理人には、管理する樋門等の種別ごとに市から謝礼金が支払われている。なお、謝礼金の支払いについては、実績の有無に関わらず支給している。<br>③ 樋門は市内に大小合計で187箇所ある。<br>④ 市は樋門管理人に対して毎年説明会を実施し、台風接近時等に樋門の開放を依頼。 |  | <b>《検証》 運用上の課題</b><br>① 樋門管理人は兼業農家が多く、平日に対応できないケースがある。<br>② 樋門管理人が樋門操作時に <b>事故</b> にあう懸念がある。(市負担で1人当たり15,100円の保険に加入している。)<br>③ <b>迅速に対応できないケースもあり、土木課職員が現場対応に当たっている。</b>   |            |   |                                    |             |                    |   |             |  |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
| 15         | 私立高等学校授業料補助金<br>(学校教育課)        | 24年度 (決算)  | <b>【事業概要】</b><br>私立高等学校などに在籍する生徒に対して授業料の補助を行うことにより、保護者負担の公私間格差是正を図り、私立学校教育の振興に寄与する。<br><b>【見直しの視点】</b><br>支給額の見直し              | <b>現状維持</b><br><br>○ <b>支給額について、他団体平均を上回っているものの、公私間格差の実態を踏まえた水準の検討が必要であるため、今回は現状維持とする。</b>   |            |   |                                    |             |                    |   |             |  |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
|            |                                | 2,988<br>25年度 (決算見込み)<br>3,024<br>26年度 (当初)<br>3,420   |  |  |            |   |                                    |             |                    |   |             |  |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
|            |                                | <b>《検証》 他団体比較 (制度概要)</b>   |  | <table border="1"> <thead> <tr> <th rowspan="2">補助内容</th> <th rowspan="2">清須市</th> <th colspan="5">類似団体</th> <th colspan="5">近隣団体</th> </tr> <tr> <th>津島市</th> <th>知立市</th> <th>豊明市</th> <th>田原市</th> <th>愛西市</th> <th>北名古屋市</th> <th>瀬戸市</th> <th>日進市</th> <th>小牧市</th> <th>尾張旭市</th> <th>春日井市</th> </tr> </thead> <tbody> <tr> <td>所得要件</td> <td>当該年度の市町村民税課税総所得金額が世帯合計で410万円以下</td> <td>平成22年度に事業廃止</td> <td>市内在住所得要件なし</td> <td>市内在住当該年度の市民税所得割額が世帯合計で271,500円未満</td> <td>市内在住所得要件なし</td> <td>当該年度10月1日市内に住所あり、かつ市民税課税総所得が500万円を超えない他</td> <td>市内在住当該年度の市町村民税課税総所得金額が世帯合計で500万円以下</td> <td>平成22年度に事業廃止</td> <td>市内在住所得要件なし</td> <td>市内住所を要する。区分所得基準は、県と同様<br/>甲Ⅰ・甲Ⅱ<br/>20,000円<br/>乙Ⅰ 12,000円、乙Ⅱ<br/>10,000円</td> <td>平成23年度に事業廃止</td> <td>市内在住愛知県私立学校授業料軽減補助金の区分が「乙Ⅰ・乙Ⅱ」、又はそれに準ずる方</td> </tr> <tr> <td>支給額 (年額)</td> <td>18,000円</td> <td></td> <td>12,000円</td> <td>所得に応じて20,000円~50,000円</td> <td>12,000円</td> <td>10,000円</td> <td>13,000円~42,000円</td> <td></td> <td>13,000円</td> <td>20,000円<br/>12,000円<br/>10,000円</td> <td></td> <td>10,000円</td> </tr> <tr> <td>支給実績 (H25)</td> <td>168人</td> <td></td> <td>437人</td> <td>365人</td> <td>97人</td> <td>326人</td> <td>465人</td> <td></td> <td>2年生325人<br/>3年生304人</td> <td>580人</td> <td></td> <td>886人</td> </tr> </tbody> </table> |            | 補助内容                                    | 清須市                                | 類似団体        |                    |   |             |  | 近隣団体 |  |  |  |  | 津島市 | 知立市 | 豊明市 | 田原市 | 愛西市 | 北名古屋市 | 瀬戸市 | 日進市 | 小牧市 | 尾張旭市 | 春日井市 | 所得要件 | 当該年度の市町村民税課税総所得金額が世帯合計で410万円以下 | 平成22年度に事業廃止 | 市内在住所得要件なし | 市内在住当該年度の市民税所得割額が世帯合計で271,500円未満 | 市内在住所得要件なし | 当該年度10月1日市内に住所あり、かつ市民税課税総所得が500万円を超えない他 | 市内在住当該年度の市町村民税課税総所得金額が世帯合計で500万円以下 | 平成22年度に事業廃止 | 市内在住所得要件なし | 市内住所を要する。区分所得基準は、県と同様<br>甲Ⅰ・甲Ⅱ<br>20,000円<br>乙Ⅰ 12,000円、乙Ⅱ<br>10,000円 | 平成23年度に事業廃止 | 市内在住愛知県私立学校授業料軽減補助金の区分が「乙Ⅰ・乙Ⅱ」、又はそれに準ずる方 | 支給額 (年額) | 18,000円 |  | 12,000円 | 所得に応じて20,000円~50,000円 | 12,000円 | 10,000円 | 13,000円~42,000円 |  | 13,000円 | 20,000円<br>12,000円<br>10,000円 |  | 10,000円 | 支給実績 (H25) | 168人 |  | 437人 | 365人 | 97人 | 326人 | 465人 |  | 2年生325人<br>3年生304人 | 580人 |  | 886人 |
| 補助内容       | 清須市                            | 類似団体   |  |  |            |   |                                    | 近隣団体        |                    |   |             |  |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
|            |                                | 津島市  | 知立市  | 豊明市  | 田原市        | 愛西市                                     | 北名古屋市                              | 瀬戸市         | 日進市                | 小牧市   | 尾張旭市        | 春日井市                                     |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
| 所得要件       | 当該年度の市町村民税課税総所得金額が世帯合計で410万円以下 | 平成22年度に事業廃止  | 市内在住所得要件なし   | 市内在住当該年度の市民税所得割額が世帯合計で271,500円未満   | 市内在住所得要件なし | 当該年度10月1日市内に住所あり、かつ市民税課税総所得が500万円を超えない他 | 市内在住当該年度の市町村民税課税総所得金額が世帯合計で500万円以下 | 平成22年度に事業廃止 | 市内在住所得要件なし         | 市内住所を要する。区分所得基準は、県と同様<br>甲Ⅰ・甲Ⅱ<br>20,000円<br>乙Ⅰ 12,000円、乙Ⅱ<br>10,000円 | 平成23年度に事業廃止 | 市内在住愛知県私立学校授業料軽減補助金の区分が「乙Ⅰ・乙Ⅱ」、又はそれに準ずる方 |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
| 支給額 (年額)   | 18,000円                        |  | 12,000円  | 所得に応じて20,000円~50,000円  | 12,000円    | 10,000円                                 | 13,000円~42,000円                    |             | 13,000円            | 20,000円<br>12,000円<br>10,000円   |             | 10,000円                                  |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |
| 支給実績 (H25) | 168人                           |  | 437人   | 365人   | 97人        | 326人                                    | 465人                               |             | 2年生325人<br>3年生304人 | 580人  |             | 886人                                     |      |  |  |  |  |     |     |     |     |     |       |     |     |     |      |      |      |                                |             |            |                                  |            |   |                                    |             |            |   |             |  |          |         |  |         |                       |         |         |                 |  |         |                               |  |         |            |      |  |      |      |     |      |      |  |                    |      |  |      |

| No.   | 事業名<br>(所管課)                               | 事業費 (千円)  | 事業概要及び見直しの視点   | 見直し内容 (案)   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|---|--|---|--|---|-----------|---------------|-----------------------------------|---|----------------|---|----------------------------------|---|---------------------------------|--|--|--|--|-----|-----|-----|-----|-----|------|-----|-----|-----|------|------|-----|-----------------------------|----------------|-----------|----------------|-----------|---------------|-----------|---|----------------|-----------|-----------|-----------|------|----------------------|--|--------|--------|-------------|--------|-----------------------------------|--------|--------|--------|--------|----------------------------------|--------|------------|--------------------|------------------------------------|--------|-------|----------|----------|----------------------------------|-------|---------------------------------|-------|--------|--------|--------|--------|----------------------|--------|--------|--------|--------|--------|--------|--------|---------------------------------|--------|--------|--------|--------|-------|--------------------|---|-------|-------|-------|-------|---|-------|-------|-------|-------|-------|-------|-------|---------------------|---|----|----|---|---|---------|-------|-------|----|-------|-------|-------|-------|----------------------|--------|--------|--------|---|---|---------------------------------|-------|-------|----|-------|-------|---------------------------------|--------|------------|---|---|-------|---|---|---|-------|---|---|-------|---|---|------|------------|---|---|-------|---|---|---|-------|---|---|-------|---|---|-------|------------|---|---|-------|---|---|---|-------|---|-----|-------|---|---|---------|-----|---|---|-------|---|---|---|-------|---|-------|-------|---|---|-------------|-----|---|--------|---|---|---|---|-------|---|-------|-------|---|---|--|--|--|--|--|--|--|--|--|--|--|---------------------------|---|---|
| 16  | 要・準要保護児童生徒<br>援助費<br>(学校教育課)               | 24年度 (決算)   | <b>【事業概要】</b><br>経済的な理由によって、就学が困難な児童生徒の保護者に対し、必要な援助を行うことにより、義務教育の円滑な実施を図る。<br><b>【見直しの視点】</b><br>支給額及び支給項目の見直し | <b>現状維持</b><br>○ 支給額については、団体間で大きな差異はなく、本市は国の要保護児童生徒援助費補助金の単価に準じている。<br>○ また、支給項目についても、本市は標準的な支給項目のみにとどまっている。<br>○ 国においては、子供の貧困対策という観点から、各市町村における就学援助の活用・充実を図る方針を打ち出しており、現時点で、制度を縮小する方向で見直すことは適当ではないため、支給額及び支給項目は現状維持とする |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|   |  | 25年度 (決算見込み)  |  |   | 26年度 (当初) |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 29,744  | 30,115                                     | 32,658  |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| <b>《参考》 制度の仕組み</b>  |  |   |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| <table border="1"> <thead> <tr> <th>区分</th> <th>定義</th> <th>補助対象品目</th> </tr> </thead> <tbody> <tr> <td>要保護者<br/><b>【国庫補助事業】</b></td> <td>生活保護法に規定する要保護者</td> <td>学用品費、体育実技用具費、新入学児童生徒学用品費等、通学用品費、通学費、修学旅行費、校外活動費、クラブ活動費、生徒会費、PTA会費、医療費、学校給食費</td> </tr> <tr> <td>準要保護者<br/><b>【単独事業】</b></td> <td>市町村教育委員会が生活保護法に規定する要保護者に準ずる程度に困窮していると認める者</td> <td>自治体により異なる</td> </tr> </tbody> </table>  |  |   |  |   | 区分        | 定義            | 補助対象品目                            | 要保護者<br><b>【国庫補助事業】</b>                 | 生活保護法に規定する要保護者 | 学用品費、体育実技用具費、新入学児童生徒学用品費等、通学用品費、通学費、修学旅行費、校外活動費、クラブ活動費、生徒会費、PTA会費、医療費、学校給食費 | 準要保護者<br><b>【単独事業】</b>           | 市町村教育委員会が生活保護法に規定する要保護者に準ずる程度に困窮していると認める者 | 自治体により異なる                       |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 区分  | 定義   | 補助対象品目  |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 要保護者<br><b>【国庫補助事業】</b>   | 生活保護法に規定する要保護者                             | 学用品費、体育実技用具費、新入学児童生徒学用品費等、通学用品費、通学費、修学旅行費、校外活動費、クラブ活動費、生徒会費、PTA会費、医療費、学校給食費 |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 準要保護者<br><b>【単独事業】</b>  | 市町村教育委員会が生活保護法に規定する要保護者に準ずる程度に困窮していると認める者  | 自治体により異なる   |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| <b>《検証》他団体比較 (制度概要)</b>   |  |   |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| <table border="1"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">清須市</th> <th colspan="5">類似団体</th> <th colspan="6">近隣団体</th> </tr> <tr> <th>津島市</th> <th>知立市</th> <th>豊明市</th> <th>田原市</th> <th>愛西市</th> <th>北名古屋</th> <th>瀬戸市</th> <th>日進市</th> <th>小牧市</th> <th>尾張旭市</th> <th>春日井市</th> </tr> </thead> <tbody> <tr> <td>給食費</td> <td>小 実費 32,260<br/>中 実費 35,540</td> <td>実費 32,260</td> <td>実費 35,540</td> </tr> <tr> <td>学用品費</td> <td>小 11,420<br/>中 22,320</td> <td>(注2) 11,420<br/>小1年:11,420<br/>小2年~:13,650</td> <td>11,420</td> <td>11,420</td> <td>11,420</td> <td>11,420</td> <td>11,100<br/>1年:10,500<br/>2年~:12,500</td> <td>11,420</td> <td>11,420</td> <td>11,420</td> <td>11,420</td> <td>11,420</td> <td>11,420</td> </tr> <tr> <td>(注1) 通学用品費</td> <td>小 2,230<br/>中 2,230</td> <td>2,230<br/>中1年:22,320<br/>中2年~:24,550</td> <td>2,230</td> <td>2,230</td> <td>2,230</td> <td>2,230</td> <td>2,170<br/>1年:21,600<br/>2年~:24,000</td> <td>2,230</td> <td>2,230</td> <td>2,230</td> <td>2,230</td> <td>2,230</td> <td>2,230</td> </tr> <tr> <td>新入学用品費</td> <td>小 20,470<br/>中 23,550</td> <td>20,470</td> <td>20,470</td> <td>20,470</td> <td>20,470</td> <td>20,470</td> <td>19,900</td> <td>19,900</td> <td>20,470</td> <td>20,470</td> <td>20,470</td> <td>20,470</td> <td>20,470</td> </tr> <tr> <td>校外活動費</td> <td>小 1,550<br/>中 2,240</td> <td>—</td> <td>1,550</td> <td>1,550</td> <td>1,550</td> <td>1,550</td> <td>—</td> <td>1,510</td> <td>1,550</td> <td>1,550</td> <td>1,550</td> <td>1,550</td> <td>2,200</td> </tr> <tr> <td>野外活動費</td> <td>小 3,570<br/>中 11,010</td> <td>—</td> <td>実費</td> <td>実費</td> <td>—</td> <td>—</td> <td>上限4,000</td> <td>3,470</td> <td>3,570</td> <td>実費</td> <td>3,570</td> <td>3,570</td> <td>4,000</td> </tr> <tr> <td>修学旅行費</td> <td>小 21,190<br/>中 52,290</td> <td>20,000</td> <td>20,000</td> <td>20,000</td> <td>—</td> <td>—</td> <td>上限6,000<br/>上限15,000<br/>上限45,000</td> <td>5,840</td> <td>6,010</td> <td>実費</td> <td>6,010</td> <td>6,010</td> <td>1年:2,000<br/>2年:12,000<br/>25,000</td> </tr> <tr> <td>クラブ活動費</td> <td>小 —<br/>中 —</td> <td>—</td> <td>—</td> <td>2,710</td> <td>—</td> <td>—</td> <td>—</td> <td>2,630</td> <td>—</td> <td>—</td> <td>2,710</td> <td>—</td> <td>—</td> </tr> <tr> <td>生徒会費</td> <td>小 —<br/>中 —</td> <td>—</td> <td>—</td> <td>4,570</td> <td>—</td> <td>—</td> <td>—</td> <td>4,440</td> <td>—</td> <td>—</td> <td>4,570</td> <td>—</td> <td>—</td> </tr> <tr> <td>PTA会費</td> <td>小 —<br/>中 —</td> <td>—</td> <td>—</td> <td>5,450</td> <td>—</td> <td>—</td> <td>—</td> <td>5,300</td> <td>—</td> <td>400</td> <td>5,450</td> <td>—</td> <td>—</td> </tr> <tr> <td>体育実技用具費</td> <td>中 —</td> <td>—</td> <td>—</td> <td>3,380</td> <td>—</td> <td>—</td> <td>—</td> <td>3,290</td> <td>—</td> <td>1,200</td> <td>3,380</td> <td>—</td> <td>—</td> </tr> <tr> <td>転入学生生徒学用品費等</td> <td>中 —</td> <td>—</td> <td>23,550</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>4,070</td> <td>—</td> <td>1,200</td> <td>4,190</td> <td>—</td> <td>—</td> </tr> <tr> <td></td> <td>(兼通)7,510円<br/>(別通)51,940円</td> <td>—</td> <td>—</td> </tr> </tbody> </table> |  |   |  |   |           | 清須市           | 類似団体                              |   |                |   |                                  | 近隣団体                                      |                                 |  |  |  |  | 津島市 | 知立市 | 豊明市 | 田原市 | 愛西市 | 北名古屋 | 瀬戸市 | 日進市 | 小牧市 | 尾張旭市 | 春日井市 | 給食費 | 小 実費 32,260<br>中 実費 35,540  | 実費 32,260      | 実費 35,540 | 実費 35,540      | 実費 35,540 | 実費 35,540     | 実費 35,540 | 実費 35,540                               | 実費 35,540      | 実費 35,540 | 実費 35,540 | 実費 35,540 | 学用品費 | 小 11,420<br>中 22,320 | (注2) 11,420<br>小1年:11,420<br>小2年~:13,650   | 11,420 | 11,420 | 11,420      | 11,420 | 11,100<br>1年:10,500<br>2年~:12,500 | 11,420 | 11,420 | 11,420 | 11,420 | 11,420                           | 11,420 | (注1) 通学用品費 | 小 2,230<br>中 2,230 | 2,230<br>中1年:22,320<br>中2年~:24,550 | 2,230  | 2,230 | 2,230    | 2,230    | 2,170<br>1年:21,600<br>2年~:24,000 | 2,230 | 2,230                           | 2,230 | 2,230  | 2,230  | 2,230  | 新入学用品費 | 小 20,470<br>中 23,550 | 20,470 | 20,470 | 20,470 | 20,470 | 20,470 | 19,900 | 19,900 | 20,470                          | 20,470 | 20,470 | 20,470 | 20,470 | 校外活動費 | 小 1,550<br>中 2,240 | — | 1,550 | 1,550 | 1,550 | 1,550 | — | 1,510 | 1,550 | 1,550 | 1,550 | 1,550 | 2,200 | 野外活動費 | 小 3,570<br>中 11,010 | — | 実費 | 実費 | — | — | 上限4,000 | 3,470 | 3,570 | 実費 | 3,570 | 3,570 | 4,000 | 修学旅行費 | 小 21,190<br>中 52,290 | 20,000 | 20,000 | 20,000 | — | — | 上限6,000<br>上限15,000<br>上限45,000 | 5,840 | 6,010 | 実費 | 6,010 | 6,010 | 1年:2,000<br>2年:12,000<br>25,000 | クラブ活動費 | 小 —<br>中 — | — | — | 2,710 | — | — | — | 2,630 | — | — | 2,710 | — | — | 生徒会費 | 小 —<br>中 — | — | — | 4,570 | — | — | — | 4,440 | — | — | 4,570 | — | — | PTA会費 | 小 —<br>中 — | — | — | 5,450 | — | — | — | 5,300 | — | 400 | 5,450 | — | — | 体育実技用具費 | 中 — | — | — | 3,380 | — | — | — | 3,290 | — | 1,200 | 3,380 | — | — | 転入学生生徒学用品費等 | 中 — | — | 23,550 | — | — | — | — | 4,070 | — | 1,200 | 4,190 | — | — |  |  |  |  |  |  |  |  |  |  |  | (兼通)7,510円<br>(別通)51,940円 | — | — |
|   | 清須市  | 類似団体  |  |   |           |               | 近隣団体                              |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|   |  | 津島市   | 知立市  | 豊明市   | 田原市       | 愛西市           | 北名古屋                              | 瀬戸市                                     | 日進市            | 小牧市   | 尾張旭市                             | 春日井市                                      |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 給食費   | 小 実費 32,260<br>中 実費 35,540                 | 実費 32,260   | 実費 35,540  | 実費 35,540   | 実費 35,540 | 実費 35,540     | 実費 35,540                         | 実費 35,540                               | 実費 35,540      | 実費 35,540   | 実費 35,540                        | 実費 35,540                                 |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 学用品費  | 小 11,420<br>中 22,320                       | (注2) 11,420<br>小1年:11,420<br>小2年~:13,650                                    | 11,420   | 11,420  | 11,420    | 11,420        | 11,100<br>1年:10,500<br>2年~:12,500 | 11,420                                  | 11,420         | 11,420  | 11,420                           | 11,420                                    | 11,420                          |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| (注1) 通学用品費  | 小 2,230<br>中 2,230                         | 2,230<br>中1年:22,320<br>中2年~:24,550  | 2,230  | 2,230   | 2,230     | 2,230         | 2,170<br>1年:21,600<br>2年~:24,000  | 2,230                                   | 2,230          | 2,230   | 2,230                            | 2,230                                     | 2,230                           |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 新入学用品費  | 小 20,470<br>中 23,550                       | 20,470  | 20,470   | 20,470  | 20,470    | 20,470        | 19,900                            | 19,900                                  | 20,470         | 20,470  | 20,470                           | 20,470                                    | 20,470                          |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 校外活動費   | 小 1,550<br>中 2,240                         | —   | 1,550  | 1,550   | 1,550     | 1,550         | —                                 | 1,510                                   | 1,550          | 1,550   | 1,550                            | 1,550                                     | 2,200                           |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 野外活動費   | 小 3,570<br>中 11,010                        | —   | 実費   | 実費  | —         | —             | 上限4,000                           | 3,470                                   | 3,570          | 実費  | 3,570                            | 3,570                                     | 4,000                           |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 修学旅行費   | 小 21,190<br>中 52,290                       | 20,000  | 20,000   | 20,000  | —         | —             | 上限6,000<br>上限15,000<br>上限45,000   | 5,840                                   | 6,010          | 実費  | 6,010                            | 6,010                                     | 1年:2,000<br>2年:12,000<br>25,000 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| クラブ活動費  | 小 —<br>中 —                                 | —   | —  | 2,710   | —         | —             | —                                 | 2,630                                   | —              | —   | 2,710                            | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 生徒会費  | 小 —<br>中 —                                 | —   | —  | 4,570   | —         | —             | —                                 | 4,440                                   | —              | —   | 4,570                            | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| PTA会費   | 小 —<br>中 —                                 | —   | —  | 5,450   | —         | —             | —                                 | 5,300                                   | —              | 400   | 5,450                            | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 体育実技用具費   | 中 —  | —   | —  | 3,380   | —         | —             | —                                 | 3,290                                   | —              | 1,200   | 3,380                            | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 転入学生生徒学用品費等   | 中 —  | —   | 23,550   | —   | —         | —             | —                                 | 4,070                                   | —              | 1,200   | 4,190                            | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|   |  |   |  |   |           |               |                                   |   |                |   | (兼通)7,510円<br>(別通)51,940円        | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| (注1) 小1と中1は対象外 (全団体共通)<br>(注2) 学用品費と通学用品費を合算の上、ひとつの項目として運用  |  |   |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 17  | 成人式記念品費<br>(生涯学習課)                         | 24年度 (決算)   | <b>【事業概要】</b><br>成人の日を記念し、新成人を祝い、励ますために成人式を開催する。その際に新成人に対して実行委員会で決めた記念品を贈呈する。<br><b>【見直しの視点】</b><br>記念品の単価見直し  | <b>見直しを実施 (記念品の単価見直し)</b><br><b>[効果額: 180千円 実施時期: 平成26年度]</b><br>○ 他団体の平均を上回っている記念品単価について、現在の1,800円から1,500円へ毎年段階的に引き下げる。  |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|   |  | 25年度 (決算見込み)  |  |   | 26年度 (当初) |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 860   | 854  | 1,080   |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| <b>《参考》 記念品の選定方法</b><br>① 新成人で組織する実行委員会が予算の範囲内(上限1,800円)で選定する。<br>② 市の特産品から「土田南瓜カレー」(300円)を購入している。  |  |   |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| <b>《検証》他団体比較 (制度概要)</b>   |  |   |  |   |           |               |                                   |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| <table border="1"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">清須市</th> <th colspan="5">類似団体</th> <th colspan="6">近隣団体</th> </tr> <tr> <th>津島市</th> <th>知立市</th> <th>豊明市</th> <th>田原市</th> <th>愛西市</th> <th>北名古屋</th> <th>瀬戸市</th> <th>日進市</th> <th>小牧市</th> <th>尾張旭市</th> <th>春日井市</th> </tr> </thead> <tbody> <tr> <td>記念品</td> <td>H25 USB、タンブラー、土田南瓜カレー(500個)</td> <td>ペンセット<br/>タンブラー</td> <td>—</td> <td>ペン、手鏡、<br/>記念写真</td> <td>アルバム</td> <td>クオカード<br/>記念写真</td> <td>—</td> <td>クオカード、アルバム、書籍、<br/>ネームペン、お祝い菓子などから1点及び2点</td> <td>アクリルフォ<br/>フレーム</td> <td>タンブラー</td> <td>名入3色ボールペン</td> <td>—</td> <td>—</td> </tr> <tr> <td></td> <td>H24 USB、タンブラー(500個)、土田南瓜カレー(500個)※カレーは選品あり</td> <td>ロックグラス</td> <td>—</td> <td>マグカップ<br/>手鏡</td> <td>アルバム</td> <td>アトラクション<br/>費</td> <td>—</td> <td>—</td> <td>電動歯ブラシ</td> <td>—</td> <td>筆、ボールペン、<br/>シャープペン<br/>(名入)のいずれ1品</td> <td>—</td> <td>—</td> </tr> <tr> <td>単価</td> <td>H25 1,800円/人</td> <td>810円/人</td> <td>—</td> <td>1,200円/人</td> <td>2,000円/人</td> <td>1,800円/人</td> <td>—</td> <td>1,605円/人<br/>(複数会場では個々に選定、金額は平均)</td> <td>—</td> <td>700円/人</td> <td>500円/人</td> <td>500円/人</td> <td>—</td> </tr> <tr> <td></td> <td>H24 —</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>1,475円/人<br/>(複数会場では個々に選定、金額は平均)</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> </tr> </tbody> </table>  |  |   |  |   |           | 清須市           | 類似団体                              |   |                |   |                                  | 近隣団体                                      |                                 |  |  |  |  | 津島市 | 知立市 | 豊明市 | 田原市 | 愛西市 | 北名古屋 | 瀬戸市 | 日進市 | 小牧市 | 尾張旭市 | 春日井市 | 記念品 | H25 USB、タンブラー、土田南瓜カレー(500個) | ペンセット<br>タンブラー | —         | ペン、手鏡、<br>記念写真 | アルバム      | クオカード<br>記念写真 | —         | クオカード、アルバム、書籍、<br>ネームペン、お祝い菓子などから1点及び2点 | アクリルフォ<br>フレーム | タンブラー     | 名入3色ボールペン | —         | —    |                      | H24 USB、タンブラー(500個)、土田南瓜カレー(500個)※カレーは選品あり | ロックグラス | —      | マグカップ<br>手鏡 | アルバム   | アトラクション<br>費                      | —      | —      | 電動歯ブラシ | —      | 筆、ボールペン、<br>シャープペン<br>(名入)のいずれ1品 | —      | —          | 単価                 | H25 1,800円/人                       | 810円/人 | —     | 1,200円/人 | 2,000円/人 | 1,800円/人                         | —     | 1,605円/人<br>(複数会場では個々に選定、金額は平均) | —     | 700円/人 | 500円/人 | 500円/人 | —      |                      | H24 —  | —      | —      | —      | —      | —      | —      | 1,475円/人<br>(複数会場では個々に選定、金額は平均) | —      | —      | —      | —      | —     |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|   | 清須市  | 類似団体  |  |   |           |               | 近隣団体                              |   |                |   |                                  |   |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|   |  | 津島市   | 知立市  | 豊明市   | 田原市       | 愛西市           | 北名古屋                              | 瀬戸市                                     | 日進市            | 小牧市   | 尾張旭市                             | 春日井市                                      |                                 |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 記念品   | H25 USB、タンブラー、土田南瓜カレー(500個)                | ペンセット<br>タンブラー  | —  | ペン、手鏡、<br>記念写真  | アルバム      | クオカード<br>記念写真 | —                                 | クオカード、アルバム、書籍、<br>ネームペン、お祝い菓子などから1点及び2点 | アクリルフォ<br>フレーム | タンブラー   | 名入3色ボールペン                        | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|   | H24 USB、タンブラー(500個)、土田南瓜カレー(500個)※カレーは選品あり | ロックグラス  | —  | マグカップ<br>手鏡   | アルバム      | アトラクション<br>費  | —                                 | —                                       | 電動歯ブラシ         | —   | 筆、ボールペン、<br>シャープペン<br>(名入)のいずれ1品 | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
| 単価  | H25 1,800円/人                               | 810円/人  | —  | 1,200円/人  | 2,000円/人  | 1,800円/人      | —                                 | 1,605円/人<br>(複数会場では個々に選定、金額は平均)         | —              | 700円/人  | 500円/人                           | 500円/人                                    | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |
|   | H24 —                                      | —   | —  | —   | —         | —             | —                                 | 1,475円/人<br>(複数会場では個々に選定、金額は平均)         | —              | —   | —                                | —   | —                               |  |  |  |  |     |     |     |     |     |      |     |     |     |      |      |     |                             |                |           |                |           |               |           |   |                |           |           |           |      |                      |  |        |        |             |        |                                   |        |        |        |        |                                  |        |            |                    |                                    |        |       |          |          |                                  |       |                                 |       |        |        |        |        |                      |        |        |        |        |        |        |        |                                 |        |        |        |        |       |                    |   |       |       |       |       |   |       |       |       |       |       |       |       |                     |   |    |    |   |   |         |       |       |    |       |       |       |       |                      |        |        |        |   |   |                                 |       |       |    |       |       |                                 |        |            |   |   |       |   |   |   |       |   |   |       |   |   |      |            |   |   |       |   |   |   |       |   |   |       |   |   |       |            |   |   |       |   |   |   |       |   |     |       |   |   |         |     |   |   |       |   |   |   |       |   |       |       |   |   |             |     |   |        |   |   |   |   |       |   |       |       |   |   |  |  |  |  |  |  |  |  |  |  |  |                           |   |   |