

Governor's Planning Council on Developmental Disabilities

Minneapolis Planning Agency

370 Centennial Building

679 Cedar Street

St. Paul, Minnesota 55155

ACTIVITY: RESIDENTIAL FACILITIES MANAGEMENT
Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACCOMPLISHMENTS AND GOALS:

These responsibilities support the state residential facilities in providing high quality, effective, and appropriate care and treatment to patients and residents so that they may return and independently function successfully in the community or in less restrictive treatment settings.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Number of physical plant improvement projects supervised	101	150	160	140
Number of Residential Facilities Manual regulations published	30	35	35	35
Number of contracts reviewed	183	185	190	195
Number of Special Review Board hearings coordinated	31	35	35	35
Number of handgun application reviews	8,934	9000	9000	9000

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity.

ACTIVITY OBJECTIVE:

To provide support services for administrative and programmatic functions of the 8 Regional Treatment Centers (RTCs) and 2 State Nursing Homes (SNHs) in order to optimize the rehabilitative and habilitative potential of mentally ill, mentally retarded, chemically dependent, aged and infirm individuals within a humane environment which includes necessary life-sustaining services.

EFFECTIVENESS MEASURES:	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Percent of state facilities licensed and/or certified	100	100	100	100
Percent of state facilities accredited	90	90	100	100
Number of buildings in compliance with Life Safety Code	211	215	219	219
Number of Special Review Board hearings scheduled within 45 days of petition being filed	119	105	110	118
Number of technical assistance contacts related to the Mental Health commitment process	800	800	800	800

ACTIVITY DESCRIPTION:

Residential Facilities Management (RFM): 1) reviews, develops, and implements policies and procedures by which state residential facilities provide treatment and protect the rights, dignity, physical and mental well-being of the residents and patients; 2) coordinates operating and capital improvement budget preparations and monitors expenditures to use resources effectively to meet care and treatment objectives; 3) assists state residential facilities to meet applicable accreditation, certification, and licensure requirements and with program reviews conducted by the Department of Human Services (DHS); 4) plans, develops, and monitors the provision of care and active treatment of geriatric patients with behavior problems that cannot be adequately treated in community nursing homes or alternative services; 5) monitors state residential facilities treatment programs, physical plant needs, staffing requirements, forms development and management, and provides coordination for matters concerning *Welsch vs. Levine* and other litigation; 6) prepares population census and other management reports pertinent to the operation of state residential facilities; 7) facilitates cost effective delivery of services in both state residential facilities and communities where they are located through shared services agreements; 8) coordinates computer development at the state residential facilities to meet operating systems needs which includes development of uniform patient identification and medical records systems; 9) coordinates the statutorily required Special Review Board function which governs the transfer, provisional discharge, and discharge of special category patients.

ACTIVITY: STATE REGIONAL TREATMENT CENTERS
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To assist those persons with mental illness, mental retardation and related conditions, chemical dependency, and psycho-geriatric rehabilitation or treatment needs to achieve the maximum degree of self-sufficiency that is consistent with their individual capabilities in the least restrictive setting.

ACTIVITY DESCRIPTION:

This is a budget activity. It is an aggregation of the 8 management activities that follow: Anoka Metro Regional Treatment Center, Brainerd Regional Human Services Center, Cambridge Regional Human Services Center, Faribault Regional Center, Fergus Falls Regional Treatment Center, Moose Lake Regional Treatment Center, St. Peter Regional Treatment Center, Security Hospital, Willmar Regional Treatment Center, and Rochester State Hospital. The detailed description, statistics and budget requests of these management activities appear on the individual sheets that follow.

One Regional Treatment Center (Anoka) serves mentally ill (MI) and chemically dependent (CU) persons only; two Regional Centers (Cambridge and Faribault) serve mentally retarded (MR) persons only; five Regional Treatment Centers (Brainerd, Fergus Falls, Moose Lake, St. Peter and Willmar) serve all three disability groups. In addition, the Minnesota Security Hospital serves mentally ill and dangerous persons. In carrying out this activity, each Regional Center focuses on the local relationships and established needs within the service area and on program directions as established by the Department, pursuing program directions locally as guided by the two primary principles of least restrictive and most normal environment and the development of client self-sufficiency skills. The most efficient and effective services are provided within the resources available. Services are delivered in a manner which ensures the least restrictive environment, minimizes the likelihood of physical harm to self or others, and reinforces patient and resident self-sufficiency goals by maximizing individual patient/resident potential for return to a more normal community environment.

Issues that will have a major influence on the budget for the Regional Treatment Centers during the next biennium include post-Welsch directions, consolidated chemical dependency funding, improved staffing levels for mental health programs, expansion of shared service agreements, state-operated residential services in conjunction with continuation of the mental retardation waiver initiative, Consent Decree compliance determination, and regionalization of services. Efforts will be made to create multi-purpose programs at Faribault and Cambridge to serve additional disability groups, improve cost accounting procedures, clean up asbestos, and explore better use of alternative energy sources.

ACTIVITY GENERATES NON-DEDICATED REVENUE <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
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ACTIVITY STATISTICS:	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Average Daily Population-Total	3725	3674	3428	3332
Mentally ill	1262	1275	1294	1308
Mentally retarded	1883	1716	1556	1443
Chemically dependent	580	583	578	581
Admissions-Total	8644	8752	8898	8976
Mentally ill	2744	2796	2858	2904
Mentally retarded	167	131	126	123
Chemically dependent	5733	5825	5914	5949
Discharges-Total	8797	8943	9005	9027
Mentally ill	2694	2792	2810	2829
Mentally retarded	358	341	288	252
Chemically dependent	5745	5810	5907	5942

LEGISLATIVE ISSUES:

Legislation is being proposed to amend the Shared Services Act, to reflect the change in the names of the state hospitals in statute, to clarify payment provisions for patient workers and to continue authorization of State Operated Community Services (SOCS) for mentally retarded persons.

BASE-LEVEL REVIEW:

State regional treatment center populations were selected for base-level review.

EXPLANATION OF BUDGET REQUEST:

The same level of funding is requested for this activity except for the changes detailed on the following pages.

ACTIVITY: ANOKA METRO REGIONAL TREATMENT CENTER
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To meet or make documented progress toward individual program goals for persons with mental illness or chemical dependency treatment needs at a level which complements the program alternatives in the service area and is consistent with industry standards and state/federal regulations. The primary purpose is to safeguard, treat, habilitate/rehabilitate patients during as short a period of hospitalization as possible and to assist their reintegration into community life.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Chemical Dependency</u>				
Average length of stay (days)				
Primary treatment	32.2	31.0	30.0	29.0
Extended treatment	111.1	110.0	100.0	90.0
Percent readmissions	25.5	25.5	25.5	25.5
Percent readmissions within 6 months	5.0	5.0	5.0	5.0
Percent clients completing treatment	62.8	63.0	63.0	63.0
<u>Mental Illness</u>				
Average length of stay (days)	161.0	155.0	145.0	140.0
Percent readmissions	60.0	56.0	53.0	51.0
Percent readmissions within 6 months	28.0	22.0	21.0	20.0

ACTIVITY DESCRIPTION:

The Anoka-Metro Regional Treatment Center (A-MRTC) provides inpatient care, treatment and rehabilitation for mentally ill (MI) citizens of Anoka, Dakota, Hennepin, Ramsey, Sherburne and Washington counties and for chemically dependent (CD) citizens of Anoka, Dakota, Hennepin and Sherburne counties.

Within parameters established by the Department of Human Services (DHS), the Center has organized its programs to complement local agency resources according to locally identified population needs. Guiding patient care principles are provision of the least restrictive, most normal environment possible; assurance of personal safety; and enhancement of individual self-sufficiency. Available resources are used effectively and efficiently to return the patient to the community as soon as possible. No community agency provides the services which this treatment center provides.

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
/7 Yes /17 No					

ACCOMPLISHMENTS AND GOALS:

MI length-of-stay was decreased for discharged patients by 29% between F.Y. 1985 and F.Y. 1986. In F.Y. 1986 this facility admitted 1264 people, discharged 1254, and diverted 52 with mental illness to other DHS facilities for admission. The facility utilization level for the year was 93% of capacity. The facility diverted 116 CD patients to other state facilities.

Goals for the 1987-89 Biennium are: to attempt to reduce MI patient diversion to out-of-area facilities through efforts to decrease the length-of-stay average below 150 days for discharged patients; to upgrade the living and treatment environment and to provide better safety and security. A chief objective is to enhance and fully integrate within the MI Program a patient participation motivational system.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Average Daily Population-Total</u>				
Mentally ill	312	314	314	314
Chemically dependent	234	234	234	234
	78	80	80	80
<u>Admissions-Total</u>				
Mentally ill	1264	1290	1355	1420
Chemically dependent	431	440	455	470
	833	850	900	950
<u>Discharges-Total</u>				
Mentally ill	1254	1290	1355	1420
Chemically dependent	420	440	455	470
	834	850	900	950

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity.

ACTIVITY: BRAINERD RHSC
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To meet or make documented progress toward individual program goals for persons with mental illness, chemical dependency, psycho-geriatric rehabilitation or adolescent treatment needs at a level consistent with industry standards and state/federal regulations. The primary purpose is to safeguard, treat, habilitate/rehabilitate patients and residents and to assist their reintegration into community life.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Mental Retardation*</u>				
Percent of residents placed	13.0	12.0	10.0	10.0
Percent in continued placement				
3 months after placement	97.0	96.0	95.0	94.0
1 year after placement	97.0	96.0	95.0	94.0
<u>Chemical Dependency</u>				
Average length of stay (days)	30.0	30.0	28.0	28.0
Percent readmissions	36.0	34.0	32.0	32.0
Percent readmissions within 6 months	1.0	8.0	8.0	8.0
Percent clients completing treatment	65.0	67.0	69.0	70.0
<u>Mental Illness*</u>				
Average length of stay (days)	41.0	36.0	34.0	32.0
Percent readmissions	57.0	51.0	46.0	41.0
Percent readmissions within 6 months	56.0	51.0	46.0	41.0

*Does not include MLC which is in transition from Rule 34 to Rule 5.

ACTIVITY DESCRIPTION:

The Brainerd Regional Human Services Center (BRHSC) provides inpatient care, treatment, rehabilitation and developmental services for mentally ill, chemically dependent, and mentally retarded citizens of north central Minnesota. Brainerd Regional Human Services Center provides services to mentally ill and chemically dependent from 12 counties and serves the mentally retarded from 14 counties. The developmental disabilities program includes a 15-bed statewide program for deaf-blind children and also includes the Minnesota Learning Center (MLC), a 48-bed statewide residential treatment center for emotionally disturbed/behaviorally disordered adolescents. The chemical dependency program provides treatment to Native Americans based on cultural beliefs.

ACCOMPLISHMENTS AND GOALS:

BRHSC successfully completed a "Look Behind" audit conducted by the Health Care Finance Administration (HCFA). The Center satisfied the audit requirements for the provision of "active treatment" which was the critical element in assuring that federal reimbursement

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<u>17</u> Yes <u>17</u> No					

ACCOMPLISHMENTS AND GOALS (Contd.):

for the cost of care would continue. Over 100 hours of consultation has been provided to community agencies and increased emphasis on community involvement will continue as BRHSC plans to involve the public schools in the education of emotionally disturbed adolescents and explores the establishment of shared services agreements for CD counseling, laundry and food services.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Average Daily Population-Total</u>	411	386	367	363
Mentally Ill	64	65	68	70
Mentally Retarded	239	219	199	187
MLC Rule 5	24	26	38	42
MLC Rule 34	21	12	0	0
Chemically Dependent	63	64	62	64
<u>Admissions-Total</u>	1328	1311	1337	1350
Mentally Ill	473	485	505	520
Mentally Retarded	45	34	33	31
Chemically Dependent	763	749	753	753
MLC-Rule 5	35	43	46	46
MLC-Rule 34	12	0	0	0
<u>Discharges-Total</u>	1345	1338	1334	1324
Mentally Ill	474	484	491	491
Mentally Retarded	72	82	67	53
Chemically Dependent	749	738	742	742
MLC-Rule 5	15	26	34	38
MLC-Rule 34	35	8	0	0

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity except for the changes detailed on the following change pages.

ACTIVITY: CAMBRIDGE REGIONAL HUMAN SERVICES CENTER
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To meet or make documented progress toward individual habilitation and training goals for persons exhibiting mental retardation. The primary purpose is to enhance the individual's ability to achieve the highest degree of self sufficiency consistent with industry standards and state/federal regulations. Integration into community life as soon as possible is our ultimate goal.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Mental Retardation				
Percent of residents placed	12.7	15.0	13.0	12.0
Percent in continued placement				
3 months after placement	100.0	95.0	95.0	95.0
1 year after placement	100.0	90.0	90.0	90.0

ACTIVITY DESCRIPTION:

The Cambridge Regional Human Services Center (CRHSC) provides residential, rehabilitation, developmental, and health care services for mentally retarded citizens of east central Minnesota. The Center directly operates 7 specialized residential and day training programs for severely or profoundly retarded people who have additional functional problems such as physical disability, and for mildly retarded people who have persistent, severe behavior problems such as assault and battery and property destruction. Short-term residential respite services are also provided.

In carrying out this activity, the Center focuses on the local relationships and established needs within the service area and on program directions as established by the Department, pursuing program directions locally, as guided by the two primary principles of least restrictive and most normal environment and the development of client self-sufficiency skills. The most efficient and effective services are provided within the resources available. Services are delivered in a manner which ensures the least restrictive environment, minimizes the likelihood of physical harm to self or others, and reinforces resident self-sufficiency goals by maximizing individual resident potential for return to a more normal community environment.

ACCOMPLISHMENTS AND GOALS:

During the F.Y. 1985-87 biennium, Cambridge Regional Human Services Center has been extensively surveyed by both federal and state agencies. The result of the surveys and the corrective actions taken have resulted in full certification for the Center. Reorganization of staff, households, and day programs have established a more sensitive and efficient organization that is prepared to meet future challenges.

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACCOMPLISHMENT/GOALS (Contd.):

Special emphasis is now being placed on the development of 6 state operated community homes to demonstrate that the more severely disabled and profoundly retarded can live in the community utilizing the expertise of state employees.

The Center will focus on developing closer relationships with the community, offering its specialized skills and services to agencies. Shared services contracts will be explored and developed by the Center as the need for its services are identified in cooperation with our region's county social service agencies, planning councils, and other agencies.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Average Daily Population-Total	406	371	337	309
Admissions-Total	20	12	12	12
Regular	7	-0-	-0-	-0-
Respite	13	12	12	12
Discharges-Total	72	50	46	40
Regular	59	38	34	28
Respite	13	12	12	12

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity.

ACTIVITY: FARIBAULT REGIONAL CENTER
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To meet or make documented progress toward individual program goals for persons exhibiting mental retardation at a level which complements alternative programs in the service area, and is consistent with industry standards and state/federal regulations. The primary purpose is to safeguard, treat, habilitate/rehabilitate residents during as short a period of hospitalization as possible and to assist their reintegration into community life.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Mental retardation				
Percent of residents placed	5	5	5	5
Percent in continued placement				
3 months after placement	100	90	90	90
1 year after placement	98	85	85	85

ACTIVITY DESCRIPTION:

The Faribault Regional Center (FRC) provides inpatient evaluation and individualized training for mentally retarded persons in a 13 county area in southeastern Minnesota. Services integrate residential living, training in activities of daily living, behavior therapy, day activities or vocational training, recreation, and health services. Clients are predominantly severely or profoundly retarded adults with needs for long-term care and supervision.

In carrying out this activity, the Center focuses on the local relationships and established needs within the service area and on program directions as established by the Department, pursuing program directions locally as guided by the two primary principles of least restrictive and most normal environment and the development of client self sufficiency skills. The most efficient and effective services are provided within the resources available. Services are delivered in a manner which ensures the least restrictive environment, minimizes the likelihood of physical harm to self or others, and reinforces patient and resident self sufficiency goals by maximizing individual patient/resident potential for return to a more normal community environment.

ACCOMPLISHMENTS AND GOALS:

The facility has lowered its operating overhead costs through the use of shared service agreements and has offered the same opportunity to state and other agencies it serves. Telecommunication and radio-paying services are provided to eight state agencies located in Faribault. Bakery products are supplied to the State Academies for the Deaf and Blind and St. Peter Regional Treatment Center. Laundry services are provided to the two State Academies, two State Veterans Homes, Oak Terrace Nursing Home, and four private

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACCOMPLISHMENTS AND GOALS (Cont'd):

providers of health care and educational services. During the past year professional staff have been called on to render various types of expert service within the receiving district, most of which was previously served by Rochester State Hospital. A more formal study was conducted to establish regional needs and service gaps. As a result, current plans include extending shared service agreements to assist community homes and parents by providing consultative and assistive services in the region to help insure appropriate and effective habilitation for retarded citizens and to reduce operating costs of these facilities. The regional center also is participating in a pilot program for State operated community services. It opened one home in Faribault in early F.Y. 1987 to serve 4 residents and will open 4 more such homes in the next few months in other counties of the receiving area.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Average Daily Population-Total	627	590	560	530
Admissions-Total	15	17	17	17
Regular	13	15	15	15
Respite	2	2	2	2
Discharges-Total	45	55	47	47
Regular	43	53	45	45
Respite	2	2	2	2

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity.

ACTIVITY: FERGUS FALLS REGIONAL TREATMENT CENTER
Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To treat, rehabilitate, habilitate, and care for clients seeking the services of the Fergus Falls Regional Treatment Center (FFRTC) so that the debilitating effects of mental illness, chemical dependency, and mental retardation are prevented or reduced and functional skills in community living are developed, increased, and enhanced, thus assisting the client to successfully return to community living.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Mental Retardation				
Percent of residents placed	9.2	9.0	9.0	9.0
Percent in continued placement				
3 months after placement	96.0	96.0	96.0	96.0
1 year after placement	94.0	94.0	94.0	94.0
Chemical Dependency				
Average length of stay (days)				
Primary treatment	30.9	30.0	29.0	28.0
Extended treatment	94.7	94.0	94.0	93.0
Adolescent treatment	63.1	62.0	62.0	61.0
Percent readmissions	39.0	39.0	38.0	37.0
Percent readmissions within 6 months	14.0	14.0	13.0	12.0
Percent clients completing treatment	60.0	62.0	64.0	66.0
Mental Illness				
Average length of stay (days)				
Regular (Extended Care)	545.3	520.0	510.0	500.0
Crisis treatment (Acute)	37.1	27.0	26.0	25.0
Percent readmissions	64.0	62.0	61.0	61.0
Percent readmissions within 6 months	17.0	16.0	15.0	14.0

ACTIVITY DESCRIPTION:

FFRTC provides inpatient and outpatient care, treatment, rehabilitation, and habilitation services to mentally ill (MI), chemically dependent (CD), and mentally retarded (MR) clients, the majority of whom are residents of 17 northwest counties of Minnesota. This facility also offers special adolescent, women's and extended CD services to many clients from counties statewide.

FFRTC provides a range of acute and extended care inpatient programs. Outpatient and other treatment opportunities are developed by contractual and shared service agreements with other human services agencies. Such agreements are designed to support community programs. These cooperative services are needed to expand opportunity for client

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACTIVITY DESCRIPTION (Contd.):

treatment choice, and improve the availability and cost effectiveness of services for residents of northwestern Minnesota.

ACCOMPLISHMENTS AND GOALS:

Through shared services agreements FFRTC has developed new outpatient programs, consultative services to schools and the courts, and cooperative day programming for the mentally ill. These services have not only expanded services in the area but also improved coordination among human services agencies. The goals for F.Y. 1988-89 are to: 1) provide a range of effective treatment programs for MI, CD, and MR designed to return clients to their home communities as soon as possible; 2) establish at least one appropriate state-operated community-based service for each disability group (based on the unique needs of the region) to increase the accessibility of services to residents of northwest Minnesota; 3) participate with county social services to develop, implement, and expand formal aftercare services for the MI, CD and MR; 4) expand shared services agreements to provide to counties, human service provider agencies, families, and individuals, the technical expertise in MI, MR, and CD which is not available in small rural communities.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Average Daily Population-Total	436	428	409	395
Mentally Ill	99	100	102	102
Mentally Retarded	200	183	162	148
Chemically Dependent	137	145	145	145
Admissions-Total	1895	2016	2079	2079
Mentally Ill	390	405	420	420
Mentally Retarded	9	9	9	9
Chemically Dependent	1496	1602	1650	1650
Discharges-Total	1976	2032	2079	2079
Mentally Ill	404	400	400	400
Mentally Retarded	43	38	29	29
Chemically Dependent	1529	1594	1650	1650

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity.

ACTIVITY: MOOSE LAKE REGIONAL TREATMENT CENTER
 Program: REIMBURSEMENT & FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To provide appropriate services to our clients so that the debilitating effects of mental illness, mental retardation, chemical dependency, and the aging process are prevented or reduced, and clients are assisted in reaching or maintaining their optimal level of functioning in a safe and humane environment.

EFFECT/IMPACT MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Mental Retardation</u>				
Percent of residents placed	4	9	10	10
Percent in continued placement				
3 months after placement	100	100	100	100
1 year after placement	89	100	100	100
<u>Chemical Dependency</u>				
Average length of stay (days)				
Primary treatment	35	30	28	28
Extended treatment	140	140	140	140
Percent readmissions	40	35	30	25
Percent readmissions within 6 months	10	10	10	10
Percent clients completing treatment	55	60	70	70
<u>Mental Illness</u>				
Average length of stay (days)	112	107	102	95
Percent readmissions	60	57	54	51
Percent readmissions within 6 months	22	20	18	17
<u>Geriatrics</u>				
Average length of stay (days)	1400	1350	1400	1400
Percent readmissions	60	60	65	65
Percent readmissions within 6 months	40	40	40	40

ACTIVITY DESCRIPTION:

Moose Lake Regional Treatment Center (MLRTC) serves the mentally ill, chemically dependent, mentally retarded, and geriatric clients in northeastern Minnesota. The Center provides primarily in-patient or residential treatment. In each of the above disabilities highly specialized programs have been developed in response to the type of clients coming to the Center. All of the clients coming for treatment have acute or chronic problems exacerbated by at least two major problems. Alternate treatments have been ineffective or unavailable.

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACCOMPLISHMENTS AND GOALS:

MLRTC's two major goals are to: 1) provide quality services at a competitive cost; 2) develop flexibility and versatility in offering a wide range of services to meet identified needs of northeastern Minnesota and in specialized areas statewide. Programs will not be limited to residential treatment, but may include such services as outpatient clinics, technical assistance, and training.

Accomplishments include meeting recognized treatment standards (JCAH Accreditation), Life Safety Code compliance, formalized Quality Assurance Program, and positive consumer/agency satisfaction. A comprehensive cost report system for all RTCs has been developed and piloted at MLRTC. This provides an accurate assessment of results (output) in relation to money spent (input). A demand exists for additional services such as outpatient therapy, technical assistance, case management, and training. MLRTC has attempted to assist clients, families, county agencies, and other providers in securing appropriate and effective treatment services.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Average Daily Population-Total</u>				
Mentally Ill	435	419	426	453
Mentally Retarded	69	70	70	70
Chemically Dependent	96	89	86	83
Geriatric	165	150	150	150
	105	110	120	130
<u>Admissions-Total</u>				
Mentally Ill	1691	1703	1713	1728
Mentally Retarded	298	305	300	300
Chemically Dependent	3	3	3	3
Geriatric	1350	1350	1350	1350
	40	45	60	75
<u>Discharges-Total</u>				
Mentally Ill	1711	1718	1706	1706
Mentally Retarded	293	310	300	300
Chemically Dependent	9	10	6	6
Geriatric	1365	1350	1350	1350
	44	48	50	50

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity.

ACTIVITY: ST PETER REGIONAL TREATMENT CENTER
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

The primary purpose of St. Peter Regional Treatment Center is to treat, habilitate, and rehabilitate patients and residents in a safe and humane environment during as short a period of hospitalization as possible, and to assist their reintegration into community life.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Mental Retardation</u>				
Percent of residents placed	26.7	27.0	28.0	29.0
Percent of residents placed in continued placement				
3 months after placement	100.0	100.0	100.0	100.0
1 year after placement	100.0	100.0	100.0	100.0
<u>Chemical Dependency</u>				
Average length of stay (days)	37.9	36.0	35.0	34.0
Percent readmissions	32.8	30.0	28.0	28.0
Percent readmissions within 6 months	16.1	15.0	14.0	13.0
Percent clients completing treatment	64.2	65.0	66.0	66.0
<u>Mental Illness</u>				
Average length of stay (days)	188.9	187.0	186.0	186.0
Percent readmissions	50.5	45.0	40.0	38.0
Percent readmissions within 6 months	31.6	27.0	22.0	20.0

ACTIVITY DESCRIPTION:

The Mental Illness, Chemical Dependency, and Mental Retardation Divisions of St. Peter Regional Treatment Center (SPRTC) provide inpatient care, treatment, rehabilitation, and developmental services for mentally ill, chemically dependent, and mentally retarded citizens of Southern Minnesota. The Mental Illness and Chemical Dependency Divisions provide services to the mentally ill and chemically dependent from 19 counties, and the Mental Retardation Division serves the mentally retarded from 11 counties.

During the past year the St. Peter Regional Treatment Center has developed and implemented new services to meet the needs of hearing-impaired persons. The Mental Retardation Division has also implemented a new program which serves mentally retarded persons who are also mentally ill.

In carrying out these activities, the Regional Treatment Center is focusing on the local relationships and established needs within the service area. Programs provided reflect the needs of the Region and, in the least restrictive environment, deliver quality care designed to meet the individualized needs of each patient/resident.

ACTIVITY GENERATES
 NON-DEDICATED REVENUE
☒ Yes ☒ No

ESTIMATE
 F.Y. 1985

ESTIMATE
 F.Y. 1986

ESTIMATE
 F.Y. 1987

ESTIMATE
 F.Y. 1988

ESTIMATE
 F.Y. 1989

ACCOMPLISHMENTS AND GOALS:

Accomplishments during F.Y. 1986 include: implementation of a program serving the hearing impaired; development of a dual diagnosis program which serves mentally retarded persons who are also mentally ill; sponsorship of two workshops, one in the area of Chemical Dependency and the other in Mental Retardation, attended by community participants as well as Center staff; and significant progress in the installation of a management information system.

Goals for F.Y. 1988-89: Major emphasis and priority is placed on strategic planning, an on-going, responsive process which, by the Fall of 1986, will define a comprehensive 3 year set of goals and objectives for SPRTC. The goals and objectives of the plan will include focus in the marketing of SPRTC expertise and the resulting development of shared services contracts in areas which project the Center as a regional mental health authority. Finally, in order to plan and manage effectively, accurate data is absolutely essential. To this end, continued efforts to establish an effective management information system will be a major priority.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Average Daily Population-Total</u>	366	362	342	320
Mentally Ill	152	158	160	160
Mentally Retarded	161	150	127	104
Chemically Dependent	53	54	55	56
<u>Admissions-Total</u>	853	872	888	902
Mentally Ill	301	310	315	320
Mentally Retarded	39	38	37	36
Chemically Dependent	523	524	536	546
<u>Discharges-Total</u>	872	892	918	930
Mentally Ill	322	325	328	331
Mentally Retarded	43	49	60	59
Chemically Dependent	507	518	530	540

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity except for the changes detailed on the following change pages.

ACTIVITY: SECURITY HOSPITAL
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

The primary purposes are to provide quality forensic services to the court system and to safeguard, treat, and habilitate/rehabilitate mentally ill and dangerous patients during a short period of hospitalization as feasible and to assist their reintegration into community life. Services provided must meet National standards and State/Federal regulations.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Adjudicated Offenders				
Average Length of Stay (days)				
Hold Orders	35.5	35.0	33.0	30.0
Evaluation	62.4	60.0	60.0	60.0
Treatment	362.8	360.0	350.0	350.0
Percentage of Readmissions	35.6	34.0	33.0	32.0

ACTIVITY DESCRIPTION:

The Minnesota Security Hospital provides both forensic services to the courts and in-patient care, treatment, and rehabilitation services to adjudicated offenders from all 37 Minnesota counties. Since 1982, Minnesota Security Hospital has also provided evaluation and treatment services to women from throughout Minnesota. The hospital is composed of 9 treatment units including the Nationally recognized Intensive Treatment Program for Sexual Aggressives (IIPSA).

In carrying out these activities, the hospital focuses on patient treatment needs and protection of the community. Services are provided by professional staff who are clinically qualified to work with this specialized population group of mentally ill and dangerous patients and the treatment programs focus on individual needs and community protection.

ACCOMPLISHMENTS AND GOALS:

Major accomplishments during F.Y. 1986 include development and implementation of a Protective Anti-Aggressive Device (PAAU) program which provides a less restrictive alternative to seclusion for the seriously ill patient; expanded consultative services provided to Regional Treatment Centers and Courts regarding specialized treatment for seriously ill patients; sponsorship of a major workshop on "The Dangerous Patient" attended by legal authorities and clinical professionals.

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACCOMPLISHMENTS AND GOALS (Contd.):

For F.Y. 1988-89, major goals focus on the general SPRC campus wide effort directed toward strategic planning, marketing, shared services contract development and management information system enhancement.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Average Daily Population-Total	222	222	223	224
Admissions-Total	292	300	310	318
Forensic Evaluation	148	153	158	161
Psychiatric Treatment	144	147	152	157
Discharges-Total	281	289	299	307

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity except for the changes detailed in the following change pages.

ACTIVITY: WILLMAR REGIONAL TREATMENT CENTER
Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE: To provide specialized regional health services that meet identified consumer and patient/resident needs in adult mental illness, mental retardation, chemical dependency, adolescent mental illness, geriatric rehabilitation, and other related specialty health services in a manner which meets or exceeds consumer expectations and industry, state, and federal standards and regulations.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Mental Retardation				
Percent of residents placed	20.0	10.0	5.0	5.0
Percent in continued placement				
3 mos. after placement	95.0	95.0	95.0	95.0
1 year after placement	90.0	90.0	90.0	90.0
Chemical Dependency				
Average length of stay	39.4	38.0	35.0	35.0
Clients completing treatment (days)	55.0	53.0	48.0	45.0
Primary treatment	34.0	34.0	27.0	25.0
Extended treatment	91.0	88.0	73.0	71.0
Percent readmissions	39.0	38.0	35.0	32.0
Percent readmissions within 6 months	11.0	10.0	12.0	13.0
Percent client completing treatment	56.0	60.0	65.0	67.0
Mental Illness				
Average length of stay (days)	237.1	225.0	215.0	200.0
Percent readmissions	54.0	54.0	54.0	54.0
Percent readmissions within 6 months	23.0	22.0	20.0	18.0

ACTIVITY DESCRIPTION:

Willmar Regional Treatment Center (WRTC) provides specialty health services including treatment, rehabilitation, and developmental services based on established needs for consumers primarily of southwestern Minnesota. Services are provided to mentally ill and chemically dependent clients from 23 counties, mentally retarded from 18 counties, and on a statewide basis, 3 specialized services including: 1) Adolescent Treatment Program; 2) Protective Component for Adolescents; 3) Methadone Withdrawal Services.

ACCOMPLISHMENTS AND GOALS:

Anticipating change and positioning for it was the theme of WRTC accomplishments during the biennium 1985-87. The facility successfully achieved full compliance/recognition of quality programs by all national and state accrediting bodies, developed campus-wide quality assurance mechanisms, reduced length of stay for mental illness and chemical dependency programs, successfully met/exceeded Hirsch/Levine Consent Decree require-

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACCOMPLISHMENTS/GOALS (Contd.)

ments, developed programs involving the community for sheltered work, expanded its management information system, developed an extensive region-wide county service needs assessment and patient/consumer satisfaction surveys, and implemented a strategic, long-range planning process.

The 1987-89 biennium goals will be directed toward continuing emphasis on program effectiveness, efficiency, diversification, regional consumer needs, and a refined strategic planning process as WRTC moves pro-actively in its development as a highly skilled specialty regional health center. Potential program diversification outside traditional WRTC service areas includes outreach, behavior consultations, public education, aftercare and follow-up, screening and evaluation, day and vocational programs, shared service agreements, and more specialized inpatient programs.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Average Daily Population-Total				
Mentally Ill	510	482	450	444
Mentally Retarded	254	250	240	240
Chemically Dependent	133	102	85	82
Adolescents	84	90	86	86
	39	40	39	36
Admissions-Total				
Mentally Ill	1286	1231	1187	1150
Mentally Retarded	409	400	385	375
Chemically Dependent	24	18	15	15
Adolescents	778	750	725	700
	75	63	62	60
Discharges-Total				
Mentally Ill	1241	1279	1221	1170
Mentally Retarded	362	405	390	380
Chemically Dependent	39	49	33	18
Adolescents	761	760	735	710
	79	65	63	62

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity.

ACTIVITY: ROCHESTER STATE HOSPITAL
Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACTIVITY OBJECTIVE:

To provide payments as mandated by the Workers Compensation Act or bargaining unit agreements, to former Rochester State Hospital employees for Workers' Compensation benefits.

ACTIVITY DESCRIPTION:

The Rochester State Hospital provided treatment and evaluations for persons who were mentally ill, chemically dependent or mentally retarded. The catchment area included 12 southeast Minnesota counties. The hospital closed on July 1, 1982.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Number of Worker Compensation clients	14	14	14	14
Number of early retirees	5	2	0	0

EXPLANATION OF BUDGET REQUEST:

The same level of funding is requested for this activity.

ACTIVITY: STATE NURSING HOMES
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To provide quality care and active treatment of elderly patients, who, because of their behavior problems, cannot be placed or retained in community facilities.

ACTIVITY DESCRIPTION:

The state nursing homes (hereafter SNHs), established in 1962 (H.S. 251.011) are licensed and certified to provide long-term care of geriatric patients. The distinctive function of SNHs is to specialize in the care and treatment of elderly when their behavior prevents admission or retention in community facilities, and to cooperate with counties in their efforts to maintain such persons in their community. The Department of Human Services (DHS) geriatric program policy, June 1985, limits SNH admissions and retention to such persons, and directs the development of active treatment to increase their chances of community placement.

Seventy-eight percent of SNH populations have behaviors that range from socially unacceptable to the most severe behavioral dependencies in the assaultive and self-injurious behavior category. The number of patients with assaultive and self-injurious behaviors increased from 154 in 1982 to 223 in 1986. Population with such behaviors increased from 24.1% in 1982 to 34.9% in 1986.

SNH staff have been trained in the therapeutic management of severe behaviors, and have residents grouped according to nursing and behavioral needs. By and large these efforts are effective for the majority of behavior problems that are not ordinarily acceptable to other nursing homes. There has, however, been a significant increase in the number of assaultive and self-injurious behaviors which threatens the progress made with the majority of residents. Such behaviors indicate that separate treatment programs are needed in order to contain and reverse this trend.

This budget activity supports DHS planning and program management of 2 state nursing homes and 5 geriatric units in state regional facilities. This is a budget activity. It is an aggregation of the following management activities: Ah-Gwah-Ching Nursing Home and Oak Terrace Nursing Home.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Total ICF & SNF beds	693	693	693	693
Average resident age	71.5	71.5	71.5	71.5
Average daily population	641	645	645	645

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

LEGISLATIVE ISSUES:

Legislation is being proposed which: 1) permits Ah-Gwah-Ching Nursing Home to utilize Hall Pavilion for special programs to prepare residents for community placement, and 2) designates both SNHs as regional care centers to assist counties plan for the maintenance of behaviorally disabled elderly in their community; provide services.

BASE-LEVEL REVIEW:

The State Nursing Homes were selected for base-level review.

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity except for the changes detailed on the following change pages.

ACTIVITY: AH-GWAH-CHING NURSING HOME
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

The primary purpose is to serve the state's geriatric population through: giving nursing home care to elderly persons with severe behavior problems when they cannot be managed in community settings; providing psycho-geriatric treatment to meet their special needs and facilitate their return to the community; assisting the community to retain their behaviorally maladjusted elderly by providing technical assistance and shared services, according to the new Department of Human Services (DHS) Geriatric Program Policy; and by providing effective chemical dependency treatment to long-term chronic alcoholics through the Lakeside Center.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Geriatric:</u>				
Number of discharges to less restrictive alternatives	19.0	21.0	23.0	25.0
<u>Chemical Dependency:</u>				
Average length of stay	121.0	120.0	122.0	123.0
Percent readmissions	11.0	13.0	15.5	18.0
Percent readmissions within 6 months	11.0	13.0	15.5	18.0
Percent clients completing treatment	32.0	32.0	40.0	48.0

*Total % of readmissions since program opened 2/14/83 to 6/30/86 is 21%.

ACTIVITY DESCRIPTION:

Ah-Gwah-Ching (AGC) is a 383 bed multi-purpose facility with 179 skilled beds, 164 intermediate beds, and 40 Rule 35 chemical dependency beds providing services for the geriatric population and the chronic chemically dependent population of the entire state or Minnesota. The behavior problems which our clients show include physical and verbal assaultiveness, sexually inappropriate behavior, socially inappropriate behavior, and chronic alcoholism. The services provided include behavior management, rehabilitation, nursing home care, and treatment for the chronic, long-term chemically dependent resident.

ACCOMPLISHMENTS AND GOALS:

During the past year Ah-Gwah-Ching has continued to improve the effectiveness and efficiency of its programs and departments as we prepare for and adapt to the changes occurring as a result of the new Geriatric Program Policy. As evidence of those changes, the number of residents discharged from Ah-Gwah-Ching to less restrictive alternatives has increased by 58% over the last 2 years. A quality assurance program was developed and computerization of resident records was begun. The Maintenance Department moved which provided us with a larger resident canteen and auditorium. This continued development of the Mall Area has enabled us to put greater emphasis on participatory rather than passive activities for our residents. To enable

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACCOMPLISHMENTS AND GOALS (Contd.):

more effective programming we refined the IPP process. Finally, we have successfully met and exceeded all standards established by the licensing and certifying agencies.

The goals for the F.Y. 1987-89 biennium are to strengthen the state's mental health delivery system for the geriatric segment of the population by offering more active treatment and a greater array of services based on regional need through: 1) development and implementation of new programs for selected groups within Ah-Gwah-Ching's present population to expedite return of residents to community setting, and 2) entering into the Chemical Dependency Consolidated Fund program with Lakeside Center.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
<u>Geriatric:</u>				
TCF beds	164	164	164	164
SNF beds*	179	179	179	179
Average resident age	73	73	73	73
Average daily population	318	320	320	320
<u>Chemical Dependency:</u>				
Number of beds	40	40	40	40
Average resident age	58	54	53	52
Average daily population	19	22	25	30

*The 179 SNF beds include 72 Medicare certified beds.

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity except for the change detailed on the following change page.

ACTIVITY: OAK TERRACE NURSING HOME
 Program: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 Agency: HUMAN SERVICES, DEPARTMENT OF

1987-89 Biennial Budget

ACTIVITY OBJECTIVE:

To provide medical and rehabilitative treatment which allows adult clients with behavior disabilities untreated in the community to function in the least restrictive environment, which supports community placement and which fully utilizes all financial, human and facility resources available.

EFFECTIVENESS MEASURES:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Number of placements made to less restrictive alternatives	17	19	21	23

ACTIVITY DESCRIPTION:

Oak Terrace Nursing Home (OTNH) is a 350 bed facility, accredited by JCAH, established in 1962 as a skilled nursing facility (SNF). It is licensed by the Minnesota Health Department and certified as a Medicare and Medicaid provider, as well as for VA Contract acts.

Oak Terrace has as its mission the providing of rehabilitative treatment of adult clients who have behavioral management disabilities within a setting which is protective and yet the least restrictive placement in which the person can successfully live. Oak Terrace differs from community nursing homes in that its purpose is to care for elderly clients with severe behavior problems that prevent admission to, and often causes referral from, community nursing homes and other facilities.

ACCOMPLISHMENTS AND GOALS:

During the current biennium, this facility has further identified its role in caring for those individuals with behavioral problems that can not be treated in community based nursing facilities. Efforts have also been directed to better utilization of financial and human resources in order to deliver the needed program services to the client. Internal reorganization has allowed for improved supervision and more effective program services.

In implementing the F.Y. 1987-89 biennial budget, Oak Terrace will be addressing the goals of providing for nursing care and active treatment programs for elderly patients with severe behavioral problems who cannot be placed elsewhere because of these problems. Oak Terrace will also assist in the development of program standards for the psychogeriatric residents of the nursing homes and regional facilities. To procure the

ACTIVITY GENERATES NON-DEDICATED REVENUE	ESTIMATE F.Y. 1985	ESTIMATE F.Y. 1986	ESTIMATE F.Y. 1987	ESTIMATE F.Y. 1988	ESTIMATE F.Y. 1989
<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ACCOMPLISHMENTS AND GOALS (Contd.):

necessary professional and direct care staff in order to improve programming services for the current and projected population, develop outpatient programs, and develop and implement a mobile assessment capability in the community through the use of shared service agreements is a goal established by this facility for this biennium.

Oak Terrace also intends to continue to provide technical assistance to counties and the consumer community in maintaining behaviorally disordered clients in the community. Oak Terrace also intends to develop its role as a regional care center and to develop and implement programs and services that are appropriate to that role and function. To develop improved delivery of medical care through the review and evaluation of medication usage, contracted vendors, and other third party sources is a goal important to the continued improvement in delivering health care services to the facility.

ACTIVITY STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
ICF beds	0.0	0.0	0.0	0.0
SNF beds	350.0	350.0	350.0	350.0
Average resident age	70.0	70.0	70.0	70.0
Average daily population	323.0	325.0	325.0	325.0

EXPLANATION OF BUDGET REQUEST:

The SAME level of funding is requested for this activity except for the change detailed on the following change page.

STATE HOUSE CHANGE REQUEST

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: OAK TERRACE NURSING HOME
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

STATISTICS:

Number of discharges to less restrictive alternatives

F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
17	19	19	21

RATIONALE:

The increase of behaviorally oriented clients calls for increased programming, increased staff to meet the programming needs, and professionally trained staff to deliver programs and services. The increased staff will allow more direct resident contact and enable movement of residents back to nursing homes in the community where they can effectively reside.

Governor's Planning Council on Developmental Disabilities

Minnesota State Planning Agency

300 Cantonment Building

653 Cedar Street

St. Paul, Minnesota 55155

Request Title: ACTIVE TREATMENT PROGRAM EXPANSION

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	1-0-	0-	\$270.0	21.0

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
 Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds and positions to design and implement three 25-bed behavioral rehabilitation units for elderly residents with assaultive and self-injurious behavior (level 4 of the Quality Assurance & Review behavior (QAR) assessment form). The funding requested in F.Y. 1989 is for only 6 months to adjust for the phased-in hiring of these new positions. The 21 positions will not increase the overall staff complement for the state facilities beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the staff complement for mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of RTCs whose positions may be eliminated because of reductions in the mental retardation population of the RTCs.

DESCRIPTION/BACKGROUND:

Oak Terrace Nursing Home currently has 118 residents in QAR behavior level 4. This represents 37 percent of the 81.8 percent that are behavior levels 0-4. The establishment of and staffing for these three units would allow concentration on residents with behavior level 4 problems and increase potential for community placement.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: AN-GWAI-CHING NURSING HOME
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: ACTIVE TREATMENT PROGRAM EXPANSION

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General fund	\$-0-	-0-	\$254.2	20.0

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
 Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds and positions to design and implement three 25-bed behavioral rehabilitation units for elderly residents with assaultive and self-injurious behavior (level 4 of the QA & R behavior assessment form). The funding requested in F.Y. 1989 is for only 6 months to adjust for the phased-in hiring of these new positions. The 20 positions will not increase the overall staff complement for the state facilities beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the staff complement for mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of RTCs whose positions may be eliminated because of reductions in the mental retardation population of the RTCs.

DESCRIPTION/BACKGROUND:

The current population of the nursing home includes 105 residents in the level 4 behavioral category. The additional positions will allow us to develop a more comprehensive individualized program for these residents which will result in their discharge to a less restrictive environment in the community.

The funding request consists of \$250,000 for salaries/fringe, \$2,000 for travel and \$2,200 for supplies/equipment.

STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Number of discharges to less restrictive alternatives	19	21	20	30

RATIONALE:

The increase of behaviorally oriented clients calls for increased programming, increased staff to meet the programming needs, and professionally trained staff to deliver programs and resident contact and enable movement of residents back to nursing homes in the community where they can effectively reside.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE NURSING HOMES
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
Agency Request				
General Fund	\$490.0	-0-	\$330.0	-0-
Governor's Recommendation				
Request requires statutory change: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Statutes Affected: None				

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds to maintain the basic infrastructure of the regional treatment centers' physical plants. The objective of this request is to secure additional resources necessary to establish a systematic repair and replacement program designed to maintain the integrity of the agency's physical plants at optimal cost to the state.

DESCRIPTION/BACKGROUND:

The agency operates 2 nursing homes with approximately 30 buildings and other major structures consisting of approximately 650,000 gross square feet. In past budget requests, repair and replacement funding was requested on a square footage basis. The objective of these requests was to fund routine, day-to-day facility maintenance activities. Non-routine, more expensive repair and replacement projects such as roof replacement, power plant equipment repairs, road maintenance, etc., were requested on a project basis through the capital improvement budget process.

The 1988-89 budget instructions direct state agencies to request all repair and replacement funding as part of the operating budget. This request reflects the agency's evaluation of the funding required to establish and maintain a systematic program for repair and replacement projects that are distinguished (in accordance with budget instructions) by the following:

DESCRIPTION/BACKGROUND (Cont.):

- 1) Projects do not involve program improvement or expansion;
- 2) Projects do not significantly extend the life or enhance the value of existing facilities;
- 3) Projects are for predictable, recurring expenditures related to facility maintenance, i.e., roof repair and replacement, tuckpointing, window replacement, road repair, floor covering and furniture replacement, etc.

The following statistics show that the legislature appropriated on average of \$302.0 from the general fund in the capital budget for repair and replacement projects over the last 3 years. Although calculations based on this data indicates a significant increase in the average annual expenditure for repair and replacement projects, the average annual dollar amount request is significantly less than that of the average regional center's request.

STATISTICS:

	F.Y. 1985	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Annual Appropriations for Repair and Replacement Projects					
Capital Budget	\$245.0	\$660.0	-0-	-0-	-0-
Repair and Replacements	-0-	-0-	-0-	\$490.0	\$330.0

Deterioration of the basic infrastructure of the agency's residential facilities is becoming an increasing problem. Even though capital budget appropriations have included funds for specific maintenance projects, general repairs and replacements essential to protecting and preserving the state's extensive investments in physical plant assets have not been addressed on a systematic basis. Subsequently, many of the agency's buildings and related facility components (i.e., roads, roofs, walls, ceilings, heating systems, elevators, water and sewer systems, furnishings, etc.) are worn, in dire need of repair, and in some cases, inadequate for current utilization.

This request is designed to reverse this trend of deterioration and reduce overall, long-range repair and replacement costs. Approval of this request will provide the resources required to establish a systematic asset management program. This will enable the agency to plan and implement future repairs and replacements necessary to maintain efficient and effective plan operations which are supportive of program objectives for the care and treatment of clients.

CHANGE REQUEST

☒ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: SECURITY HOSPITAL

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: TRANSITIONAL "LIVING UNITS" FOR MSH PATIENTS

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	\$172.3	9.0	\$451.1	18.0

Governor's Recommendation

Request requires statutory change: ☒ Yes ☒ No

Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds and positions to develop two (2) specialized community facilities, 1 each year of the biennium, to meet the needs of specific patients from the Minnesota Security Hospital (MSH). The funding requested in both F.Y. 1988 and F.Y. 1989 is for only 6 months, except for the annualized cost in F.Y. 1989 of the F.Y. 1988 request, to adjust for the phased-in hiring of these new positions. The 18 positions will not increase the overall staff complement for the RTCs beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the staff complement for mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of RTCs whose positions may be eliminated because of reductions in the mental retardation population of the RTCs.

DESCRIPTION/BACKGROUND:

Minnesota Security Hospital provides care and treatment to men and women from all 87 counties, conducts court ordered competency evaluations, offers the only sex offender treatment program in the state and serves as a "Relief Valve" for the RTCs when they have a dangerous and/or assaultive patient who is a threat to himself or others. Average occupancy exceeds 90%. Periodically in order to accept a dangerous patient from one of the open RTCs, we must "trade patients" with that RTC and transfer a patient who is not fully prepared. As previously noted, we also have patients who are "Persona Non Grata" and even when these patients are ready for an open RTC, neither the RTC or the home community wants them back.

DESCRIPTION/BACKGROUND (Contd.):

Traditionally many MSH patients are transferred to open Regional Treatment Centers (RTC's) and from there eventually back to their home community. However, there are patients who no longer present a behavioral or a security risk but who need additional preparation before they are ready for transfer. Among this group are a few patients who, because of their history, are considered "Persona Non Grata" by their home community and/or open RTC.

These facilities would provide a highly structured and carefully staged program designed to prepare selected patients for a successful return to community living. Program supervision would be provided by the MSH Medical Director. Selection of patients for the Transitional Unit would be limited to those individuals who are capable of learning and applying independent living skills, accepting increasing levels of responsibility, while consistently demonstrating an ability to control their emotions and behavior. Transfer to these units would require the approval of the MSH Medical Director. Patients who have a Mentally Ill and Dangerous commitment would also require the approval of the Special Review Board. The purpose is to establish intensive transition units whose dual charge would be to maximize the patients' chances of success when they are transferred to an open RTC, or to the community, and to create and maintain a "follow through" network which provides ongoing monitoring of each discharged patient. This program would expand services currently offered by MSH. Psychiatric, medical, nursing, psychological, recreational, and clerical assistance could be provided with existing staff. The funding request includes \$119,000 for salaries/fringe, \$16,900 for equipment, and \$36,360 for operating expenses in F.Y. 1988; and, \$358,600 for salaries/fringe, \$2,500 for equipment, and \$90,000 for operating expenses in F.Y. 1989.

RATIONALE:

The patients who would receive extensive preparation assistance in the Transition Units would normally reside at MSH. In addition to better transition preparation, these units would free up space for other patients at MSH and produce significant savings. This program has widespread support from the RTCs because it provides a means whereby an MSH patient would be intensively groomed before return to the RTC. Communities also will appreciate this service as part of a complete transition program for those patients where strong concerns exist about a return to the home community.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: SECURITY HOSPITAL
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: MINNESOTA SECURITY HOSPITAL STAFFING

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	\$364.2	15.0	647.5	25.0

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
 Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funding and positions at the Minnesota Security Hospital to improve program effectiveness and to provide for additional safety and security for patients and staff. The funding requested in F.Y. 1988 is for only 9 months, and the funding requested in F.Y. 1989 is for only 6 months, except for the annualized cost in F.Y. 1989 of the F.Y. 1988 request, to adjust for the phased-in hiring of these new positions. The positions will not increase the overall staff complement for the RTCs beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the staff complement for mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of RTCs whose positions may be eliminated because of reductions in the mental retardation population of the RTCs.

DESCRIPTION/BACKGROUND:

The Minnesota Security Hospital provides treatment and evaluation in a secure setting for the most difficult mentally ill persons in the State of Minnesota. Identified staffing needs are based on comparison of like forensic units in other states and guidelines developed in relation to patient behaviors and related patient needs. Achievement of appropriate staffing will significantly improve treatment capabilities and equally important will provide an added and necessary safety factor for patients and employees.

STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Clients Served	222	222	223	224

RATIONALE:

Current staffing at the Minnesota Security Hospital has serious implications for safety and treatment of patients as well as staff protection. Additionally standards of the Joint Commission on Accreditation of Hospitals require additional staffing to improve quality of care and treatment. Additional staff will provide for a significant increase in treatment quality, shorten length of stay, and enhance security.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: ST. PETER HTC
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: ST. PETER HTC - DUAL DIAGNOSIS

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General fund	\$ -0-	-0-	\$209.4	16.0

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
 Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds and positions to enhance the Mental Retardation (MR) program that serves Dual Diagnosis clients (MR/MI and MR/MI aggressive) from Southern Minnesota plus Hennepin County. The funding requested in F.Y. 1989 is for only 6 months to adjust for the phased-in hiring of these new positions. The 16 positions will not increase the overall staff complement for the RTCs beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the staff complement for mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of RTCs whose positions may be eliminated because of reductions in the mental retardation population of the RTCs.

DESCRIPTION/BACKGROUND:

In May, 1983 a brief survey of the Minnesota Valley Social Adaptation Center (MVSAC) receiving district counties plus Hennepin County indicated the need for services for clients who have the dual diagnosis of MR/MI and MR/MI aggressive. The totals reveal there are 260 Dual Diagnosis clients who are in need of specialized services. Additionally, admission figures indicate that for the past 18 months all admissions to MVSAC (a total of 26 - 12 in the first 6 months of the year) have been people who are primarily Dual Diagnosis and are from the Metro area. A survey of our population of 160 clients indicates there are 34 people who are MR/MI and MR/MI aggressive. We anticipate that we would receive an additional 20 clients, 10 from other RTCs plus 10 clients from community referrals.

DESCRIPTION/BACKGROUND (Contd.):

All requests for admission have been for clients with multiple problems. Most of these requests have been from Hennepin and Ramsey counties. The funding request includes \$184,400 for salaries/fringe, \$5,000 for training, and \$20,000 for supplies and equipment.

STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Number of Clients Served	34	54	54	54

RATIONALE:

National statistics indicate that 25% of those incarcerated in the criminal justice system are mentally retarded. This program would address the needs of this special population by providing active treatment rather than jail. In the catchment area of Southern Minnesota the facility is the only residential and specialized programs vendor with the professional staff and services capable of serving this type of client. Additionally, the SPRIC campus is the only facility in Minnesota with professional staff expertise in all the areas of mental illness, chemical dependency, corrections (offenders) and mental retardation.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: ST. PETER HIC
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: HEARING IMPAIRED TREATMENT UNIT - MENTALLY ILL (MI)				
Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	\$270.9	15.0	\$360.6	15.0
Governor's Recommendation				
Request requires statutory change: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Statutes Affected: None				

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds and positions to design and implement a 12 bed program that will serve the acute and long-term needs of mentally ill and hearing impaired persons. The funding requested in F.Y. 1988 is for only 9 months to adjust for the phased-in hiring of these new positions. These 15 positions will not increase the overall staff complement for the HICs beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of HICs whose positions may be eliminated because of reductions in the mental retardation population of the HICs.

DESCRIPTION/BACKGROUND:

No state facility in Minnesota provides a contained unit to serve the special treatment needs of mentally ill-hearing impaired adults. This program would be designed to provide multidisciplinary expertise and a total communication/treatment environment whereby all staff in the program would become proficient in the use of manual communication. Our objective would be to continue providing consultative services to other facilities in the state system where Mentally Ill (MI), Chemically Dependent (CD) or Mentally Retarded (MR) hearing impaired patients/residents reside. However, to achieve maximum treatment benefits for the mentally ill hearing impaired, they should live in a setting in which communication is not a barrier to therapy and habilitation. Simply integrating services on existing units has not proven to be therapeutically

DESCRIPTION/BACKGROUND (Contd.):

beneficial to the hearing impaired. The hearing impaired require specialized methods of intervention which often run contrary to psychotherapeutic approaches used for hearing patients. This program would take referrals from the 87 counties of Minnesota. Within the state facility system there currently are at least 25-30 MI, CD and MR hearing impaired persons needing a specialized treatment setting. However, over 80% of the referrals for inpatient treatment in the past 12 months have come directly from the community. It is projected that at least 100 hearing impaired persons would need inpatient services over the next 5 years. The funding request includes \$268,900 in F.Y. 1988 and \$350,600 in F.Y. 1989 for salaries/fringe, and \$2,000 each year for supplies and equipment.

STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Number of clients to be served	15	20	22	23
Average Daily Census	11	11	11	11

RATIONALE:

There are pressing humane, as well as legal bases for the establishment of a specialized unit for hearing impaired persons who need treatment and habilitation because of mental illness. Section 504 of the Federal Rehabilitation Act of 1973 (amended in 1978) mandates that physical accessibility to and appropriate treatment facilities and care for handicapped persons must be available to these persons. M.S. 256C.25 requires state facilities to provide interpreter services when necessary to deliver services to hearing impaired people who are unable to communicate through usual aural methods. Minnesota Human Rights Act, M.S. 363, Subd. 34 requires "program access". Program access means the use of auxiliary aids or services to ensure full and equal use of or benefit from goods, services and privileges. With the addition of staff with specialized skills in working with the hearing impaired, we believe that we can offer the services and programs they require. Our intent is to deliver a level of treatment and care which is consistent with that received by mentally ill hearing persons.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: CAMBRIDGE RHSC

PROGRAM: REIMBURSEMENTS AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: DUAL DIAGNOSTIC (MR/MI) PROGRAM

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	\$ -0-	-0-	\$207.4	16.0
Governor's Recommendation				

Request requires statutory change: ☐ Yes ☒ No

Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The Department requests the above funds and positions to provide a highly structured 12 bed program for persons with mental retardation and mental illness. The funding requested in F.Y. 1989 is for only 6 months to adjust for the phased-in hiring of these new positions. The 16 positions will not increase the overall staff complement for the RTCs beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the staff complement for mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of RTCs whose positions may be eliminated because of reductions in the mental retardation population of the RTCs.

DESCRIPTION/BACKGROUND:

A target population of persons who are mentally retarded and mentally ill has been identified by various social service agencies and CRHSC. These individuals are in the moderate to mild range of mental retardation and are diagnosed with mental illness. A typical individual will display deficits in independent living skills, severe maladaptive behavior disorders and emotional disorders. This population is currently in crisis in community programs due to lack of necessary resources and staff possessing the expertise to serve their complex needs.

DESCRIPTION/BACKGROUND (Contd.):

The program would be located in Cottage 14 which is accessible to the physically handicapped and was recently renovated in 1979. The primary objective of the program would be to provide comprehensive habilitation and training for individuals with mental retardation and mental illness who have been excluded from community programs due to the lack of adequate resources.

STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Program Bed Capacity	N/A	N/A	N/A	12
Number of New Patients Served	N/A	N/A	N/A	12
Number of Patients Served in Vocational Programs	N/A	N/A	N/A	12
Psychiatric Services Available (Hours per week)	N/A	N/A	N/A	10

RATIONALE:

The needs of the MR/MI population differ significantly from those of single disability groups. This requires specialized service delivery systems as well as staff trained and experienced in working with this special population. These resources are not readily available in the community setting and more than likely will not exist in sufficient numbers to provide for this population in the foreseeable future.

CRHSC has an existing, renovated building (Cottage 14) to house the program and a significant pool of professional and para-professional staff trained and experienced in working with this population.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: BRAINERD REGIONAL HSC
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: ESTABLISHMENT OF PSYCHO-GERIATRIC UNIT

	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
Agency Request				
General Fund	\$ -0-	-0-	\$130.5	10.0

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
 Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds and positions to establish an 8 bed residential psychiatric unit for older adults suffering from mental illness or other behavior disturbances such as assaultiveness or self-injury. The objective is to modify and stabilize the psychiatric disorder so that the individual may be returned to his/her community or community facility as quickly as possible. The funding requested in F.Y. 1989 is for only 6 months to adjust for the phased-in hiring of these new positions. The 10 positions will not increase the overall staff complement for the RTCs beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the staff complement for mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of RTCs whose positions may be eliminated because of reductions in the mental retardation population of the RTCs.

DESCRIPTION/BACKGROUND:

Individuals currently residing in nursing homes or in their own home cannot be appropriately treated for acute MI as demonstrated by assaultive and self-injurious behaviors. Therefore, they need to be committed or informally admitted to RTCs equipped to provide this care. Treatment can be provided so that the unacceptable behaviors are modified or stabilized allowing the individual to return to the community living environment.

DESCRIPTION/BACKGROUND (Cont.):

BRHSC population of mentally retarded clients has been reduced to a point where former residential buildings are, or will be, unoccupied. One unit within a building will be utilized to accommodate the clients. In order to license beds in the existing building, however, remodeling would have to be completed to provide the normalized environment, privacy and reasonable security needed by such clients. F.Y. 1989 figures include \$107,000 for salaries/fringe, \$20,000 for furnishings and supplies and \$3,500 for remodeling. Capital improvement funds amounting to \$150,000 will also be needed for remodeling.

RATIONALE:

The Commissioner of Human Services has the authority under M.S. 245.0312 to create multi-purpose programs in all RTCs. BRHSC has staff expertise and experience to deal effectively with severe behavioral problems associated with the older adult psychiatric client.

Recent reports on the mental health needs of our elderly population suggests that an increased demand for services will continue in this area for some time into the foreseeable future. Studies also indicate that, given proper treatment, many can improve in activities of daily living, alertness, cooperation, and mental clarity. An 8-bed program for psycho-geriatric clients located at Brainerd could effectively offer both "back up services" for this catchment area and, at the same time, offer services closer to the individual's home community.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: STATE OPERATED COMMUNITY RESIDENTIAL SERVICES

	F.Y. 1988		F.Y. 1989	
Agency Request	Amount	Positions	Amount	Positions
General fund	\$595.0	-0-	\$175.0	-0-

Governor's Recommendation

Request requires statutory change: ☒ Yes ☐ No

Statutes Affected: M.S. 252

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds to initiate and provide 7 state operated ICF/MR group homes, 1 each in the receiving areas of the regional treatment centers (RITCs) at Brainerd, Cambridge, Faribault, Fergus Falls, Moose Lake, St. Peter, and Willmar. The homes will be staffed by employees of the RITCs. The objective is to advance community integration of the residents and preserve employment of staff experienced in the care and treatment of such individuals.

DESCRIPTION/BACKGROUND:

During the past 6 years, the RITCs in conjunction with county social service agencies, have extensively placed developmentally disabled individuals into less restrictive community residences. As a by-product of this effort the RITCs have experienced a change in their population so that a majority of residents remaining present either severe physical limitations or behavioral problems as well as mental retardation. The vast majority of privately operated ICF/MR group homes do not currently possess the staffing and training resources necessary to care for and treat most individuals who remain in the RITC mental retardation programs. Staff now working at the RITCs have both the skills and experience to treat severely involved residents.

DESCRIPTION/BACKGROUND (Contd.):

Each of these ICF/MR groups homes would receive 6 mentally retarded residents from their respective RITC who require special care because of physical or behavioral problems. This will provide an opportunity for employees no longer needed in the larger RITC based programs to continue their employment and utilize the skills they have developed in caring for such residents. Present employees would be offered the opportunity to move with the residents to the group home location and continue their employment. This approach also has the advantage of making available back-up resources of the RITC when necessary to manage medical and behavioral crises.

Funding is requested to establish 7 ICF/MR group homes at an estimated cost of \$85,000 per home. The first year request per home consists of \$50,000 start up/operating expenses, \$15,000 Life Safety Code modifications, and \$20,000 for handicapped accessibility.

RATIONALE:

This initiative is consistent with the state's effort to develop community services to include mentally retarded individuals who have been difficult to place and to reduce RITC occupancy. These individuals will reside in settings more conducive to habitation and integration with the general population. Models for the care of persons with multiple handicaps will be demonstrated in each of the several communities where the ICF/MR group homes are located and where few such models currently exist. The experience and skills of long-term state employees will be retained, along with personal relationships that have been established between residents and care givers. The continuity of care that will occur in making this transition means that residents will be assured of stable environments and relationships which, in turn, will improve the prospects for successful placement.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: INFORMATION SYSTEMS IN STATE RESIDENTIAL FACILITIES				
	F.Y. 1988		F.Y. 1989	
Agency Request	Amount	Positions	Amount	Positions
General Fund	\$1,850.0	2.0	\$ 950.0	2.0
Governor's Recommendation				
Request requires statutory change: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Statutes Affected:				

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds and positions in order to implement a single, integrated information system for use at all state residential facilities.

DESCRIPTION/BACKGROUND:

The Department of Human Services (DHS) has identified a high priority need for development of coordinated and modern information systems at the regional treatment centers and state nursing homes. A recent 6-month agency study concluded that the state regional centers are operating in an uncoordinated, cumbersome systems environment. The study further recommended a series of management controls that must be put in place to better protect the state's interests including: uniform resident identification that allows us to track repeat admissions; easy to use medical records system; accounts receivable and accounts payable systems; and better management reports for legislators, facility administrators, and central office management. Development of this system will be closely coordinated with community social services and mental health information.

The results of the agency study suggest that an estimated \$2,800,000 will be spent on this project in the next biennium.

DESCRIPTION/BACKGROUND (Contd.):

	F.Y. 1987	F.Y. 1988	F.Y. 1989
Needs Analysis	\$75,000		
Computer Hardware		\$75,000	\$75,000
Package Software		\$25,000	\$15,000
Systems Analysis	200,000	\$50,000	200,000
TOTALS	\$75,000	\$1,050,000	\$950,000

The figures are based on the purchase of the necessary application software package and the use of outside analysis to supplement the 7 full time additional employees that are also requested here. These employees are permanent staff and would be available to help maintain the system after they have helped to install it. A phased approach will be used in the installation of the system with the basic system completed in the first quarter of F.Y. 1989. The effort involves installation at all 10 state residential facilities and central office.

This project is in keeping with the overall department plan to upgrade the entire human services delivery system so as to improve productivity, control and compatibility, to reduce redundancy, and, most important, to ensure the maximum delivery of services for the resources available. This request would allow the facilities to purchase a comprehensive software package and appropriate new computers.

RATIONALE:

The state residential facilities represent one of the major health care delivery systems in the state. With an annual budget in excess of \$150 million the need for information systems investment to implement basic managerial and financial controls is an important DHS priority. The current fragmented systems are inadequate to support the increasing independence of these facilities. Additionally, current systems hardware is at the end of its production cycle with support services less available.

The state residential facilities often lack basic data on which to do adequate planning and effectively manage increasingly specialized programs. The expanded emphasis on continuity of programming from the residential facilities to the community also points to the importance of information in evaluating our performance and carefully targeting client needs.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: FUNDING OF SERVICE WORKER PROGRAM

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	\$900.0	-0-	\$950.0	-0-

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
 Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests funding to provide salary dollars necessary to support 44 service worker positions currently employed by the regional treatment centers.

DESCRIPTION/BACKGROUND:

The service worker positions were established to employ handicapped persons. The service workers perform tasks at their level of ability at the state operated facilities. The department must hold other positions vacant and generate salary savings to fund the service worker positions. These positions are not considered to be part of the regional treatment centers' complement.

RATIONALE:

It is the State's policy to employ handicapped persons. The facilities and the service workers have both benefited from this policy. It is not, however, fiscally and programmatically effective to continue to fund service worker positions by holding other positions vacant.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: REGIONAL TREATMENT CENTERS' CONTINGENCY APPROPRIATION FOR CONSOLIDATED
CHEMICAL DEPENDENCY TREATMENT PROGRAM

	F.Y. 1988		F.Y. 1989	
Agency Request	Amount	Positions	Amount	Positions
General Fund	\$2,000.0	-0-	-0-	-0-

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No

Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The agency requests the establishment of a \$2.0 million dollar contingency appropriation for the 1987-89 biennium under the jurisdiction of the Legislative Advisory Committee for the regional treatment centers participating in the Consolidated Chemical Dependency Treatment Fund.

DESCRIPTION/BACKGROUND:

Laws of 1986, Ch. 394 provides for the establishment of the Consolidated Chemical Dependency Treatment Fund effective 7-1-87. The general fund appropriation for the regional treatment centers is reduced by the amount attributable to chemical dependency programs and this amount is reappropriated to the Commissioner of Human Services for transfer to the chemical dependency fund.

RATIONALE:

The future viability of regional treatment center based chemical dependency programs will be based solely on the ability to provide quality services at a competitive market price. Although the regional treatment centers are strategically positioned from a program expertise standpoint to meet this challenge, they are potentially vulnerable to unforeseen contingencies and short-term market fluctuations which could jeopardize their financial solvency in the initial years of transition to the competitive services model.

RATIONALE (Contd.):

Traditionally, costs for regional treatment center chemical dependency services have been funded by direct appropriations with all collections for services rendered being returned to the General Fund. The centers were not afforded an opportunity to accumulate retained earnings as a means of providing for future contingencies. As a result, the regional centers are about to enter into a competitive marketing setting without the benefit of financial reserves to meet unforeseen contingencies which may arise.

Similarly, the regional centers will not have the capacity under the Consolidated Chemical Dependency Treatment Fund to borrow money, sell stocks or bonds as a means of generating operating capital. It is reasonable to expect that the competitive model will result in some experimentation with alternative vendors and shifting market shares amongst public and private chemical dependency vendors. The regional centers will need some staying power ability to withstand these initial adjustments until the market matures and becomes more predictable and stable.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: LAUNDRY EQUIPMENT FOR REGIONAL TREATMENT CENTERS

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund - Equipment	\$874.7	-0-	\$0.0	-0-
General Fund - Salaries	(\$101.2)	(5.5)	(\$134.9)	(5.5)
Governor's Recommendation				
Request requires statutory change: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Statutes Affected: H.S. 246				

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds to purchase 17 items of labor saving equipment for the five RTC laundries. After installation, reduce laundry staffing by 5.5 positions. Establish a 6/10 of a cent per pound charge for laundry equipment depreciation and charge this amount to all served facilities - state and private. Establish a revolving account into which the equipment depreciation charges would be placed. Use proceeds to purchase all future laundry equipment needed and thereby eliminate future legislative requests.

DESCRIPTION/BACKGROUND:

The DHS Laundry Committee was established in 1975. The Committee was charged with creating and installing a cost accounting system, developing and applying staffing and productivity formulas, identifying equipment needs, producing quarterly and yearly reports, and maintaining an ongoing cost comparison with commercial laundry service. Those tasks have been accomplished. In early 1986 the Committee was asked to review the condition of equipment in the five laundries. Seventeen items have been identified which are near the end of their projected "useful life." Labor saving replacements have been identified and informal quotations received. Estimated purchase price is \$874.7 with trade-ins. Estimated "useful life" of the new equipment is 20 years. Installation of this equipment would permit a reduction of 5.5 positions. Estimated payback period from salary savings is 6.5 years after equipment installation. The 17 equipment items

DESCRIPTION/BACKGROUND (Cont.):

consist of 10-400 lb. washers, 3-200 lb. washers, 1 washroom conveyor, 2 spreader/feeders, and 1 folder/crossfolder. Staff reductions would occur at BHSC - 2.0, CRHSC - 1.0, FRC - 1.5, SPRC - 0.5, and WRTC - 0.5. Equipment depreciation charges are currently included in the cost per pound of processed laundry.

Legislation is also needed to retain the equipment depreciation charges in a revolving account which would be used exclusively for the purchase of laundry equipment in future bienniums.

This funding request includes:

Laundry Equipment	F.Y. 1988	F.Y. 1989
BHSC - 6 items	\$322.6	\$00.0
CRHSC - 1 item	34.0	
FRC - 6 items	350.4	
SPRC - 3 items	124.8	
WRTC - 1 item	43.4	
Sub-total	\$875.2	
Less Trade-ins	6.5	
TOTAL	\$868.7	

The anticipated savings are computed as follows:

Base Salary Plus Fringe Benefits -	\$24,534
First Year Savings = 9 months x 5.5 x \$24,534	= \$101.2
Second Year Savings = 12 months x 5.5 x \$24,534	= \$134.9
Projected Savings in 6.5 years	= \$877.1
Projected Savings Next 13.5 years	\$1,821.2

RATIONALE:

The most recent comparison with commercial laundry service occurred in January, 1985 when a private company was asked to provide a quotation for laundry service for FRC and SPRC. Their 1-25-85 letter reads in part, "due to your variety and volume our costs would be prohibitive...we are not equipped to launder portions of your inventory..." the projected payback period for this one-time purchase and projected savings after the payback period appear above. With an estimated "useful life" of 20 years, salary savings of \$1.8 million would be realized. If permission is granted to retain the laundry equipment depreciation charge, no further requests to the Legislature will be needed.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

RATIONALE:

The amount to be transferred is estimated based on existing expenditures adjusted in accord with Regional Treatment Center programs for all client groups served.

Request Title: TRANSFER TO CONSOLIDATED CHEMICAL DEPENDENCY TREATMENT FUND				
	F.Y. 1988		F.Y. 1989	
Agency Request	Amount	Positions	Amount	Positions
General Fund	(\$17,520.1)	(329.0)	(\$17,520.1)	(329.0)
Governor's Recommendation				
Request requires statutory change: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Statutes Affected: None				

STATEMENT OF REQUEST/OBJECTIVE:

The department requests a decrease in the regional treatment centers' appropriation reflecting the transfer of this amount of money to the Consolidated Chemical Dependency Fund as required by Laws of Minnesota 1986, Ch. 394.

DESCRIPTION/BACKGROUND:

The regional treatment centers located at Anoka, Brainerd, Fergus Falls, Moose Lake, St. Peter, and Willmar, will be affected by the appropriations transfer to the Consolidated Fund. Beginning 7-1-87 a chemical dependency fund for CD programs in state operated facilities will be established and separate accounts will be maintained for each state operated facility providing CD services.

Payments for CD services will be made from the Consolidated Fund and deposited in the separate accounts of the state operated facilities providing those services. The payments from the Consolidated Fund will become the sole means of state financial support and maintenance for CD programs provided by state operated facilities.

The Consolidated CD Fund creates incentives for the counties to place clients needing CD services in the most appropriate level of care and to utilize the most cost effective providers of care and treatment. Through competition for clients with all other (public and private) providers, the state operated facilities will have incentives to provide quality, cost effective, CD services while containing their costs.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE NURSING HOMES

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: HEARING IMPAIRED SERVICE FUND

	F.Y. 1988		F.Y. 1989	
Agency Request	Amount	Positions	Amount	Positions
General Fund	\$17.4	-0-	\$13.0	-0-

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No

Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests an appropriation to establish a hearing impaired service fund for the state Nursing Homes. The fund will be used to ensure increased delivery of effective, accessible services to hearing impaired persons residing in the state Nursing Homes by providing for training and adaptive equipment, as well as specialized consultant and interpreter services.

DESCRIPTION/BACKGROUND:

The Federal Rehabilitation Act mandates that services provided by the state facilities be accessible to hearing impaired persons. This agency has been sued with regard to the lack of accessible, effective treatment services for hearing impaired persons within the state facility system. This appropriation will assist in ensuring that the agency is better able to provide the services as required by law with the intent of creating a cost-effective, quality service delivery system for hearing impaired persons.

RATIONALE:

The agency currently has a single state facility program designated to serve hearing impaired persons. There are more than 500 hearing impaired persons residing in the state facilities. A single program is insufficient to effectively meet the needs of the vast number of hearing impaired individuals needing accessible treatment services.

RATIONALE (Cont'd.):

Individual facility budget needs have been difficult to predict based on: the lower incidence of hearing impairment; the transient nature of clientele served; the variety of individual communication needs; and the additional costs in providing accessible services to hearing impaired persons. This appropriation will be a vital step in assuring that the agency avoids any future legal actions while ensuring the development of a comprehensive, statewide system of accessible and cost-effective services.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS
PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: REPAIRS AND REPLACEMENTS

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	\$2,635.0	-0-	\$1,995.0	-0-

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funds to maintain the basic infrastructure of the regional treatment centers' physical plants. The objective of this request is to secure additional resources necessary to establish a systematic repair and replacement program designed to maintain the integrity of the agency's physical plants at optimal cost to the state.

DESCRIPTION/BACKGROUND:

The agency operates 8 regional centers with approximately 200 buildings and other major structures consisting of approximately 5.5 million gross square feet of space. In past budget requests, repair and replacement funding was requested on a square footage basis. The objective of these requests was to fund routine, day-to-day facility maintenance activities. Non-routine, more expensive repair and replacement projects such as roof replacement, power plant equipment repairs, road maintenance, etc., were requested on a project basis through the capital improvement budget process.

The 1988-89 budget instructions direct state agencies to request all repair and replacement funding as part of the operating budget. This request reflects the agency's evaluation of the funding required to establish and maintain a systematic program for repair and replacement projects that are distinguished (in accordance with budget instructions) by the following:

DESCRIPTION/BACKGROUND (Contd.):

- 1) Projects do not involve program improvement or expansion;
- 2) Projects do not significantly extend the life or enhance the value of existing facilities;
- 3) Projects are for predictable, recurring expenditures related to facility maintenance, i.e., roof repair and replacement, touchpointing, window replacement, road repair, floor covering and furniture replacement, etc.

The following statistics show that the legislature appropriated an average of approximately \$2.3 million from the general fund in the capital budget for repair and replacement projects over the last 3 years. Calculations based on this data indicate that this request would only increase the average annual "general fund" expenditure for repair and replacement projects by approximately 1.4%.

STATISTICS:

	F.Y. 1985	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
Annual Appropriations for Repair and Replacement Projects					
Capital Budget	\$4,205.4	\$2,645.5	-0-	-0-	-0-
Repair and Replacements	-0-	-0-	-0-	\$2,635.0	\$1,995.0

RATIONALE:

Deterioration of the basic infrastructure of the agency's residential facilities is becoming an increasing problem. Even though capital budget appropriations have included funds for specific maintenance projects, general repairs and replacements essential to protecting and preserving the state's extensive investments in physical plant assets have not been addressed on a systematic basis. Subsequently, many of the agency's buildings and related facility components (i.e., roads, roofs, walks, ceilings, heating systems, elevators, water and sewer systems, furnishings, etc.) are worn, in dire need of repair, and in some cases, inadequate for current utilization.

This request is designed to reverse this trend of deterioration and reduce overall, long-range repair and replacement costs. Approval of this request will provide the resources required to establish a systematic asset management program. This will enable the agency to plan and implement future repairs and replacements necessary to maintain efficient and effective plan operations which are supportive of program objectives for the care and treatment of clients.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS
 PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION
 AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: HEARING IMPAIRED SERVICE FUND

	F.Y. 1988		F.Y. 1989	
Agency Request	Amount	Positions	Amount	Positions
General fund	\$76.0	-0-	\$52.0	-0-

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
 Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests an appropriation to establish a hearing impaired service fund for the state Regional Treatment Centers. The fund will be used to ensure increased delivery of effective, accessible services to hearing impaired persons residing in the state Regional Treatment Centers by providing for training an adaptive equipment, as well as specialized consultant and interpreter services.

DESCRIPTION/BACKGROUND:

The Federal Rehabilitation Act mandates that services provided by the state regional treatment centers be accessible to hearing impaired persons. This agency has been sued with regard to the lack of accessible, effective treatment services for hearing impaired persons within the state facility system. This appropriation will assist in ensuring that the agency is better able to provide the services as required by law with the intent of creating a cost-effective, quality service delivery system for hearing impaired persons.

RATIONALE:

The agency currently has a single state regional treatment center designated to serve hearing impaired persons. There are more than 500 hearing impaired persons residing in the state facilities. A single program is insufficient to effectively meet the needs of the vast number of hearing impaired individuals needing accessible treatment services.

RATIONALE (Contd.):

Individual facility budget needs have been difficult to predict based on: the lower incidence of hearing impairment; the transient nature of clientele served; the variety of individual communication needs; and the additional costs in providing accessible services to hearing impaired persons. This appropriation will be a vital step in assuring that the agency avoids any future legal actions while ensuring the development of comprehensive, statewide system of accessible and cost-effective services.

CHANGE REQUEST

1987-89 Biennial Budget

☐ Agency ☐ Program ☒ Activity

ACTIVITY: STATE REGIONAL TREATMENT CENTERS

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request TYPE: MENTAL RETARDATION STAFF ENRICHMENT

	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
Agency Request				
General Fund	\$737.6	77.0	\$1,952.3	131.0

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No

Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests the above funding and positions to improve staffing ratios in the State Regional Treatment Centers (RITCs) based on the Accreditation Council for Services for Mentally Retarded and Other Developmentally Disabled Persons (ACMR/DDO) standards. The positions requested will not increase the overall staff complement for the RITCs beyond F.Y. 1987 levels due to a corresponding reduction being proposed in the staff complement for the mental retardation programs. The funding requested is adjusted for the phased in hiring of these new positions. Every attempt will be made to fill these positions with current qualified employees of the RITCs whose positions may be eliminated because of reductions in the mental retardation population of the RITCs.

DESCRIPTION/BACKGROUND:

The decline over the next biennium in the MR population would result in 349 positions in excess of the required Welsh staffing levels. However, in recognition of the population to be served, the Department proposes to enhance its MR staffing level by 131 positions over the Welsh requirements.

The nationally recognized staffing standards of ACMR/DDO provide for three categories of on-duty living unit staff according to the program needs of the clientele.

An analysis of the MR population over the next biennium reveals that 95.9% of the RITC residents would require ACMR/DDO Category I staffing ratios of 1:4 on the first shift,

DESCRIPTION/BACKGROUND (Contd.):

1:4 on the second shift, and 1:8 on the third shift. These ratios are established for units serving residents who are severely or profoundly retarded, physically handicapped, have behavioral deficits, or otherwise require considerable guidance and supervision.

Categories II and III permit reduced ratios for residents with fewer handicaps requiring lesser degrees of supervision and guidance. Over the next biennium the MR population of the RITCs in Categories II and III is expected to be 3% and 1% respectively.

The department's intent is to enrich the MR staffing by 131 positions to achieve ratios based on the specific needs of the residents.

RATIONALE:

The higher staff to resident ratios of ACMR/DDO will improve the care, treatment and training of MR residents by increasing the number of staff to:

- 1) provide ongoing active treatment in the most normal and least restrictive environment utilizing contemporary treatment modalities;
- 2) assist counties, families, and service providers in planning for and achieving appropriate placements out of the RITCs;
- 3) better protect the rights, dignity and well-being of the residents served.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request Title: MN POSITION REDUCTION

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	(\$1,966.9)	(205.0)	(\$5,252.8)	(349.0)

Governor's Recommendation

Request requires statutory change: ☒ Yes ☐ No

Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests a reduction in funds for mental retardation (MR) positions in order to maintain staffing at levels required by the Melsch Consent Decree as adjusted for the continued decline in the MR population over the next biennium.

DESCRIPTION/BACKGROUND:

The staffing standards set forth in the Melsch Consent Decree are currently regarded as the measure of the staffing levels necessary to provide quality care and treatment to MR residents. These staffing levels have been achieved gradually over several years since the court order was issued through a combination of increases in MR staff and a simultaneous reduction in the MR population in Regional Treatment Centers (RITCs). During the next biennium, the MR population will continue to decline so that the staff complement will exceed the staffing levels necessary to comply with the Consent Decree. The population reductions beyond the Consent Decree are attributable to implementation of the federal Title XIX waiver for MR persons which carries with it a commitment to demonstrate budgetary savings in the MR program from RITCs.

STATISTICS:

	F.Y. 1986	F.Y. 1987	F.Y. 1988	F.Y. 1989
MR Melsch population at fiscal year end*	1,806	1,616	1,487	1,370

*The Melsch population includes, in addition to those persons who are physically present, individuals who are absent due to visits, medical leave, camping or provisional discharge, or who have a comparable temporary absence which would not require a formal readmission to permit a person to return to the RITC. It does not include the population at Minnesota Learning Center.

RATIONALE:

This request is made in order to meet the dual obligations of: 1) staffing MR programs at levels required by the Consent Decree; 2) managing the facility operations in an efficient, cost effective manner that is necessary in order to generate the savings contemplated by the Title XIX waiver.

CHANGE REQUEST

☐ Agency ☐ Program ☒ Activity

1987-89 Biennial Budget

ACTIVITY: STATE REGIONAL TREATMENT CENTERS

PROGRAM: REIMBURSEMENT AND FACILITIES ADMINISTRATION

AGENCY: HUMAN SERVICES, DEPARTMENT OF

Request TYPE: MENTAL ILLNESS STAFF

Agency Request	F.Y. 1988		F.Y. 1989	
	Amount	Positions	Amount	Positions
General Fund	\$-0-	-0-	\$864.6	57.0

Governor's Recommendation

Request requires statutory change: ☐ Yes ☒ No
Statutes Affected: None

STATEMENT OF REQUEST/OBJECTIVE:

The department requests funding for an additional 57 positions for mental illness programs in the regional treatment centers (RITCs) to improve program effectiveness and assist in returning clients to the community. The funding requested in F.Y. 1989 is for only 6 months to adjust for the phased-in hiring of these new positions. The 57 positions will not increase the overall staff complement for the RITCs beyond F.Y. 1987 levels due to corresponding reduction being proposed in the staff complement for mental retardation programs. Every attempt will be made to fill these positions with current qualified employees of RITCs whose positions may be eliminated because of reductions in the mental retardation population of the RITCs.

DESCRIPTION/BACKGROUND:

Although there are no JCAH or other national standards which can be used to determine specific staffing patterns for mental illness programs, approximately 5 years ago the RITCs collectively developed a method for calculating staffing needs, which was patterned after experiences of other states such as New York and Michigan, and is based on natural groupings of patients and related treatment requirements which are staff specific. As a result, residential programs for mentally ill individuals are divided into five relatively discrete groupings of patients. The behavior descriptors for these five areas are as follows:

LEVEL I: High risk patients who present immediate concern regarding self injurious behavior and acting out towards others.

DESCRIPTION/BACKGROUND (Cont'd):

LEVEL II: Patients who show frequent disruptive behavior and present a rather chronic suicide and elopement risk.

LEVEL III: Patients whose acute symptoms are coming under control but have significant social deprivations and self control deficits.

LEVEL IV: Patients who are essentially stabilizing and are actively being considered for placement in the community pending available support resources, funding, and appropriate facilities.

LEVEL V: Patients who are elderly who show a high degree of organic involvement as well as inappropriate physical behavior generally related to their organicity.

Staffing ratios for each of the five levels are based on the number of staff required to ensure a safe, therapeutic and properly supervised environment, and the number of clinical staff necessary to provide the indicated treatments. The staffing ratios range from 1.502 staff for each patient in Level I to .722 staff for each patient in Level IV. The staffing ratios are predicated on a 24-hour a day, seven day a week program and do not include support staff requirements. In addition, the staffing ratios do not apply to the Adolescent Program at the Willmar Regional Treatment Center or the Security Hospital Program at St. Peter Regional Treatment Center.

RATIONALE:

Staffing requirements for mental illness programs are reviewed on an annual basis. The most recent review was conducted in August, 1986, and indicated that there has been an overall increase in the number of individuals classified in Levels I, II and V which are the most difficult patients to treat. Similarly, there has been a modest reduction in the number of individuals classified in Levels III and IV.

Furthermore, the staffing review revealed that the current staffing level for mental illness programs (879 FTE positions) is approximately 80% of the 1,102 FTE positions which would be required to achieve full adherence with established staffing standards. However, rather than requesting legislative approval for an additional 223 staff positions, the Department proposes to reduce the need for additional staff to 57 positions by reducing the average daily census for Level III and IV clients by 50% (134 Level III patients and 64 Level IV patients) during the 1987-89 biennium.

Therefore, the Department is requesting 12 positions (2 positions for each of the six RITCs providing mental illness programs) to focus on Level III and Level IV patients who resist transition to community services or who accept placement in a RITC program because they do not have access to professional services for counseling, therapy and medical management. In addition, the Department requests 45 positions to achieve compliance with staffing standards established for mental illness programs based on a reduced number of Level III and Level IV clients.