POLICY ANALYSIS SERIES

ISSUES RELATED TO STATE HOSPITALS / NO. 6

RESIDENTS/PATIENTS IN MINNESOTA STATE HOSPITALS

I. INTRODUCTION

Minnesota's eight state hospitals serve people with mental illness, mental retardation, and chemical dependency. As part of the study and plan regarding the state hospital system, the people receiving services must be given foremost consideration. While there are many factors which will affect the future of state hospitals (funding changes, demographics, and advancements in technology), one very important factor will be the changing characteristics and service needs of residents/patients. Thus, a major issue to be addressed is, what are the characteristics and needs of state hospital populations that must be considered in planning for the future of state hospitals?

II. METHODOLOGY

The information in this report was provided by the Department of Health (MDH) and the Department of Human Services (DHS). The information was analyzed by the State Planning Agency to illustrate present and historical trends in the size and characteristics of the state hospital population.

Data about mentally ill people were gathered by the Department of Human Services during the fall of 1984. This survey was a replication of a 1982 DHS study of patient levels and staffing needs.

Information about mentally retarded residents comes from the Department of Health Quality Assurance and Review (QAR) file. Data are available for the period of 1977 through 1982. An individual questionnaire is completed annually by QAR surveyors.

The Department of Human Services Chemical Dependency Division maintains a computerized information system on patients with chemical dependency. The Drug Abuse and Alcohol Normative Evaluation System (DAANES) provides comprehensive information on a semiannual basis.

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There are many ways of counting the number of people served by state hospitals, including the following:

- 1. A "census" gives the number of people who are patients or residents in the state hospital on a particular day.
- 2. The "total residents/patients" count includes all people served during a particular period of time.
- 3. The "average daily population" takes into account changes in the population over a year and provides a measure of operational size for a comparison measure.

III. RESULTS

There are five sections of this report presented in the following order: (1) current state hospital population and historical population trends, (2) catchment areas, (3) patients with mental illness, (4) residents with mental retardation, and (5) patients with chemical dependency.

A. <u>Current State Hospital Population and Historical Population Trends</u>

Figure 1 depicts the number of people with mental illness and mental retardation served by state hospitals which grew rapidly and continuously until about 1960. Recent resident/patient population trends indicate that:

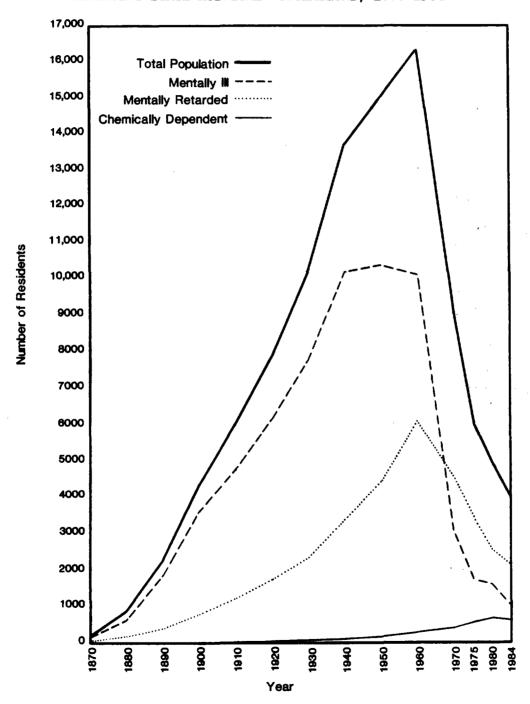
Total state hospital population has dropped from 16,355 in 1960 to 4,006 in 1984, a decline of 75%.

Patients with mental illness dropped from 10,093 in 1960 to 1,230 in 1984, a decline of 88%. Development of new drugs since 1950 enabled many mentally ill people to return to their communities. In addition, greater attention has been paid to patients' rights, and services in the community have developed.

Residents with mental retardation dropped from 6,008 in 1960 to 2,182 in 1984, a decline of 64%. Reduction in the number of residents with mental retardation was required by the Welsch vs. Levine Consent Decree and facilitated by the availability of community-based facilities. Full implementation of the Consent Decree would further reduce the number of residents with mental retardation to 1,850 by 1987.

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FIGURE 1
CHANGES IN MENTALLY ILL, MENTALLY RETARDED, AND CHEMICALLY DEPENDENT STATE HOSPITAL POPULATIONS, 1870-1984



Source: Department of Human Services "Resident Census of State Hospitals at End of Fiscal Years."

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The average daily population of patients with chemical dependency rose from 254 in 1960 to 594 in 1984, an increase of 134%. The average daily population with chemical dependency reached a peak in 1980 with 637 people. The increase in this group of patients is associated with heightened social and legal concern for alcohol and drug abuse.

During FY '84, the total average daily population in Minnesota's eight state hospitals was 4,006 people (Table 1). The average daily population includes:

1,230 (30.7%) people with mental illness;

2,182 (54.5%) people with mental retardation; and

594 (14.8%) people with chemical dependency.

Since FY '78, the total average daily population of persons with mental illness and mental retardation has been gradually decreasing in all state hospitals. Over this same period, the population for patients with chemical dependency has remained approximately the same (see Figure 2 and Table 2). Specifically, the mental retardation population has declined 713 residents over the past six years; the mental illness population has declined 287 patients; and the chemical dependency population has declined 42 patients. The small change in the chemical dependency population since 1978, which may be a characteristic of institutional chemical dependency programs, is supported by the approximately equal number of admissions and discharges experienced by the eight state hospitals over the past six years.

B. <u>Catchment Areas</u>

Most state hospitals serve all three populations (mental retardation, mental illness, and chemical dependency) and have designated service areas (Figures 3 through 5). However, the state hospitals at Cambridge and Faribault serve only persons with mental retardation from their respective catchment areas; the Security Hospital at St. Peter serves persons who have mental illness and are a danger to society from anywhere in the state; and Anoka serves mentally ill patients and chemically dependent patients. Designated state hospital catchment areas also vary in their size and in the number of counties they serve with each service population.

State	Mental	Illness		ntal dation		nical ndency	Total		
Hospital	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
Anoka	237	75.0%	0	0.0%	79	25.0%	316	7.9%	
Brainerd	65	14.4	325	72.2	60	13.3	450	11.2	
Cambridge	0	0.0	483	100.0	0	0.0	483	12.1	
Faribault	0	0.0	712	100.0	0	0.0	712	100.0	
Fergus Falls	99	21.1	231	49.3	139	29.6	469	11.7	
Moose Lake	169 ^a	38.9	107	24.6	159	36.5	435	10.9	
St. Peter	365 ^b	62.0	170	28.9	54	9.1	589	14.7	
Willmar	295 ^C	53.4	154	27.9	103_	18.7	552_	_13.7	
TOTAL	1,230	30.7%	2,182	54.5%	594	14.8%	4,006	100.0%	

Department of Human Services 1985-87 Biennial Source:

Budget.

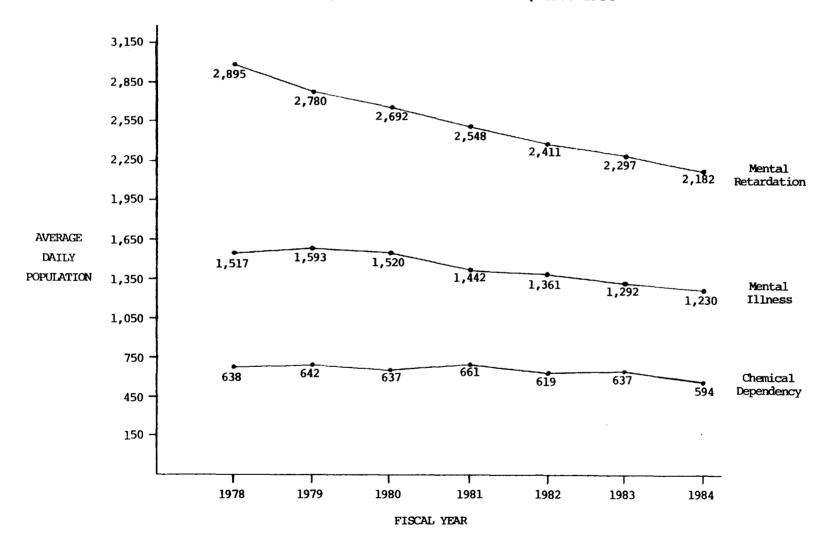
bIncludes 210 in Security Hospital.

^CIncludes 42 in Adolescent Treatment Unit.

^aIncludes 107 in Geriatric Unit.

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FIGURE 2 MINNESOTA STATE HOSPITAL AVERAGE DAILY POPULATION FOR MENTAL RETARDATION, MENTAL ILLNESS, AND CHEMICAL DEPENDENCY, 1978-1984



Source: Department of Human Services, 1984.

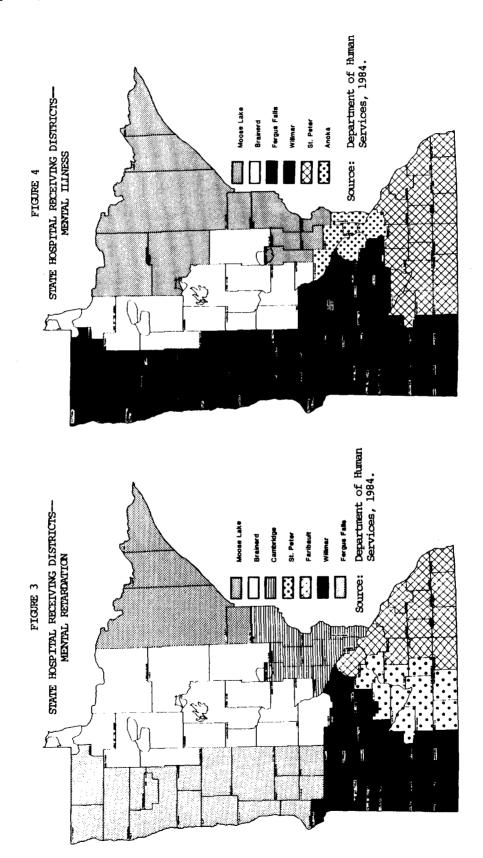
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TABLE 2
NET CHANGES IN STATE HOSPITAL POPULATIONS 1978-1984

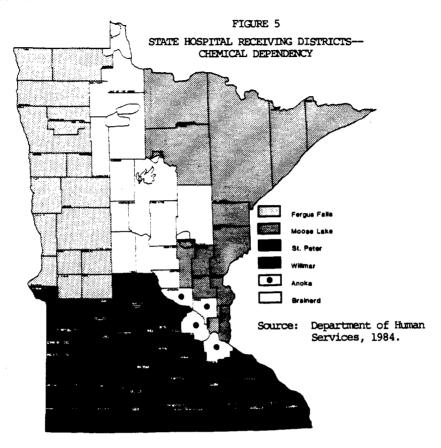
Population	1978	1979	Change (+/-)	1980	Change (+/-)	1981	Change (+/-)	1982	Change (+/-)
Mental Re- tardation	2,895	2,780	-115	2,692	- 88	2,548	-144	2,411	-137
Mental Ill- ness	1,517	1,573	+ 56	1,520	- 53	1,442	- 78	1,361	- 81
Chemical De- pendency	638	642	+ 4	637	- 5	661	+ 24	619	+ 18
TOTAL	5,050	4,995	- 55	4,849	-146	4,651	-198	4,391	- 260
Population	1982	1983	Change (+/-)	1984	Change (+/ -)	Ch	let ange -/-)	Cha	rage ange /-)
Mental Re- tardation	2,411	2,297	-114	2,182	-115	-	713	-	119
Mental Ill- ness	1,361	1,292	- 69	1,230	- 62	-	287	-	48
Chemical De- pandency	619	637	+ 18	594	_ 41		42		7
					-220				

Source: Department of Human Services, 1978-1984.

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1. Patients with Mental Illness (MI)

Patients with mental illness have been classified into five levels of need based upon the severity of their illnesses as presented in Table 3:

Level I patients comprise 9% (91) of the total MI population and exhibit the most severe forms of mental illness. Patients in this category have a high risk of suicide, exhibit assaultive/threatening behaviors against others, and may experience auditory and/or visual hallucinations. They generally are confused and disoriented, can be dangerous, and may have a history of chemical dependency or abuse. Forty-two percent of Level I patients reside at Anoka State Hospital.

Level II patients comprise 27% (256) of the total MI population and exhibit slightly less severe forms of mental illness. Patients in this category are very disruptive, noncompliant, and require protection from exploitation by others. They may attempt suicide, try to escape, experience psychotic episodes, and be chemically dependent or abusive. Thirty-one percent of Level II patients are at Anoka State Hospital.

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Level III patients comprise 39% (386) of the total MI population and are deficient in self-care and social/interpersonal skills. Patients in this category generally show little initiative toward participation in daily activities and have difficulty with self-control. They need monitoring for medical problems and may have episodic substance abuse. Thirty-seven percent of Level III patients are at Willmar State Hospital.

Level IV patients comprise 13% (124) of the total MI popuulation and show somewhat limited capabilities for social interaction, self-care, competitive employment, and the constructive use of leisure time. These individuals need a period of stabilization prior to discharge. Over half (52%) of Level IV patients are hospitalized at Willmar and Anoka State Hospitals.

Level V patients comprise 12% (122) of the total MI population. Patients in this category are frequently confused, disoriented, show limited self-care skills or daily living skills, may be assaultive, have memory loss, and are vulnerable to exploitation. Fifty-three percent of Level V patients are at Fergus Falls and Moose Lake State Hospitals.

TABLE 3

LEVELS OF CARE OF PATIENTS WITH MENTAL ILLNESS IN STATE HOSPITALS

		Level of Care														
	Leve	el I	Leve	l II	Level	III	Leve]	IV	Level V							
State Hospital	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent						
Anoka	38	42%	80	31%	80	21%	31	25%	6	5%						
Brainerd	10	11	25	10	20	5	8	6	1	1						
Fergus Falls	3	3	17	7	21	5	17	14	40	33						
Moose Lake	15	17	54	21	39	10	19	15	42	34						
St. Peter	13	14	35	14	83	22	16	13	8	7						
Willmar	12	13	45	17	143	37	33	27	25	20						
TOTAL	91 (9%)	100%	256 (26%)	100%	386 (39%)	100%	124 (13%)	100%	122 (2%)	100%						

Source: Department of Human Services' Survey of Mentally Ill People, 1984.

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2. Residents with Mental Retardation (MR)

Ninty percent (90%) of the residents in state hospitals are severely or profoundly mentally retarded. Disabilities may show themselves in many different ways. For example, persons with mental retardation may have adequate verbal skills but may be extremely limited in their mobility, vision, and self-care.

In 1982, each state hospital resident with mental retardation was assessed in terms of his/her independence and dependence across 13 skill areas. Table 4 presents the extreme levels of independence and dependence with ratings between the extremes combined into the "other" category. The data presented in the table show the skill levels of all state hospital residents with mental retardation. In terms of extremes of these 13 skill areas, the 2,495 residents can be described as follows:

Orientation: 27% (683) of the residents are aware of events in the world around them; 23% (584) have no apparent awareness.

<u>Self-Preservation</u>: 43% (1,085) are physically and/or mentally unable to do so; 5% (124) of the residents are able to care for and protect themselves.

<u>Communication</u>: 31% (775) of the residents cannot express themselves; 18% (458) of the residents have adequate speech to express themselves.

Toileting: 39% (978) have adequate bowel and bladder control and use restrooms appropriately; 22% (543) are incontinent.

Behavior: 42% (1,064) residents exhibit severe behavior problems; 17% (425) show no behavior problem.

<u>Vision</u>: 61% (1,522) of the residents have normal vision; 7% (166) are blind.

Hearing: 83.0% (2,089) of the residents have normal hearing; 2.7% (69) are deaf.

<u>Walking</u>: 70% (1,757) of the residents walk without assistance; 21% (517) are nonambulatory.

Bathing: 45% (1,113) require complete assistance; 9% (213) of the residents bathe without assistance.

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TABLE 4 SELECTED CHARACTERISTICS OF PERSONS WITH MENTAL RETARDATION SERVED BY MINNESOTA STATE HOSPITALS - FY '82

	State Hospital															
	Brai	nerda	Camb	ridgeb	Faril	oault ^C		qus lls ^d	Moose Lake ^e		St. Peter ^f		Willmar ^g		Totalh	
	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-
Characteristic	ber	cent	ber	cent	ber	cent	<u>ber</u>	cent	ber	cent	ber	<u>cent</u>	ber	cent	ber	cent
Orientation:																
 Fully oriented 	123	38.4	97	19.2	182	25.1	116	40.8	61	32.0	20	10.3	84	32.0	683	27.4
• Other	160	50.0	276	54.5	328	45.1	120	42.3	77 53	40.3	118	60.5	140	53.2	1,228	49.2
 Totally disoriented 	37	11.6	133	26.3	217	29.8	48	16.9	53	27.7	57	29.2	39	14.8	584	23.4
Self-Preservation:																
Independent	16	5.0	29	5.7	11	1.5	20	7.1	3	1.6	15	7.7	30	11.4	124	5.0
• Other	148	46.2	246	48.6	366	50.3	139	48.9	112	58.6	122	62.6	141	53.6	1,286	51.5
 Mentally and physi- 																
cally unable	153	47.8	231	45.7	350	48.2	125	44.0	76	39.8	58	29.7	92	35.0	1,085	43.5
Cooperate .																
Speech: Normal	59	18.4	53	10.5	88	12.1	72	25.4	46	24.1	58	29.8	82	31.1	458	18.3
• Other	167	52.2	271	53.6	367	50.5	137	48.2	111	58.1	87	44.6	113	43.0	1.262	50.6
• Unable to speak	94	29.4	182	35.9	272	37.4	75	26.4	34	17.8	50	25.6	68	25.9	775	31.1
Toileting:	120	40.3		27.0	274	27.6		20.0		27 2	3.00	FF 0	110	44.0	070	30.1
• Independent	138	43.1 36.3	157 203	31.0 40.1	274 290	37.6 40.0	111 122	39.0 43.0	71 72	37.2 37.7	109 52	55.9 26.7	118 100	44.9 41.8	978 974	39.1 39.1
OtherIncontinent bowel	116	36.3	203	40.1	290	40.0	122	43.0	12	3/./	32	20.7	100	41.8	9/4	39.1
and bladder	66	20.6	146	28.9	163	22.4	51	18.0	48	25.1	34	17.4	35	13.3	543	21.8
and blacker	00	20.0	110	20.5	103		31	1010	10	2311	٠.			1313	313	21.0
Behavior:																
 No behavior problem 	63	19.7	94	18.6	119	16.3	54	19.0	30	15.7	22	11.3	43	16.3	425	17.1
• Other	128	40.0	215	42.5	258	35.5	129	45.4	82	42.9	72	36.9	113	43.0	1,006	40.3
• Assulting/self-	129	40.3	197	38.9	350	48.2	101	35.6	79	41.4	101	51.8	107	40.7	1,064	42.6
injurious	129	40.3	197	30.9	330	40.2	101	33.0	19	41.4	101	31.0	107	40.7	1,004	42.0
Vision:																
No impairment	198	61.9	241	47.6	488	67.1	179	63.0	106	55.5	120	61.5	190	72.2	1,522	61.0
• Other	93	29.1	240	47.4	168	23.1	89	31.3	75	39.3	71	36.4	62	23.6	807	32.3
• Blind	29	9.0	25	5.0	71	9.8	16	5.7	10	5.2	4	2.1	11	4.2	166	6.7
Hearing:																
· Normal	271	84.7	422	83.4	635	87.4	232	81.7	134	70.1	153	78.4	242	92.0	2,089	83.8
• Other	42	13.1	79	15.6	59	8.1	51	18.0	49	25.7	28	14.4	20	7.6	337	13.5
• Deaf	7	2.2	5	1.0	33	4.5	1	0.3	8	4.2	14	7.2	1	0.4	69	2.7

1985

	State Hospital															
	1						Fer	qus	Mo	ose				ı		
	Brai	nerda	Camb:	ridgeb	Faril	bault ^C		llsd		ike ^e	St.	Peter ^f	Willmar		Tot	alh
	33.00	Per-	Num-	Per-	Num-	Per-		Per-	Num-	Per-	Num-	Per-	Γ	Per-		
Characteristics	Num- ber	cent	ber	cent	ber	cent	Num- ber	cent	ber	cent	ber	cent	Num- ber	cent	Num- ber	Per- cent
	1001	Care	<u> </u>	cene	Det	<u>caic</u>	<u> </u>	Canc	Der	Care	<u> </u>	<u>care</u>	T.C.L	Care		Ceric
Walking:	220		240	<i>c</i> n o	400	c= =	200	70.0	120	60.1	7.57	00.6	225	~~ ~		50 4
• Independent	220	68.8	340	67.2	492	67.7	208	73.3	130	68.1	161	82.6	206	78.3	1,757	70.4
OtherDoes not walk	29 71	9.1 22.1	40	7.9	62	8.5	16 60	5.6	25 36	13.1	15	7.7	25	9.5	221 517	8.9
· LOES NOT WAIK	/1	22.1	126	24.9	173	23.8	60	21.1	36	18.8	19	9.7	32	12.2	21/	20.7
Bathing:																
• Independent	30	9.4	17	3.4	44	6.1	23	8.0	12	6.3	33	16.9	54	20.6	213	8.5
• Other	119	37.2	226	44.7	373	51.3	141	49.7	75	39.3	108	55.4	110	41.8	1.169	46.9
 Bathed completely 	171	53.4	263	51.9	310	42.6	120	42.3	104	54.4	54	27.7	91	34.6	1,113	44.6
Bed Mobility:																
• Independent	249	77.8	379	74.9	560	77.0	237	83.5	160	83.9	170	87.2	245	93.1	2,000	80.2
· Other	29	9.1	57 57	11.3	58	8.0	20	7.0	11	5.6	8	4.1	6	2.3	198	7.9
· Must be turned		7.1	٠,	11.5	30	•••		,,,		3.0	·	***	·	2.5	1,00	
and positioned	42	13.1	70	13.8	109	15.0	27	9.5	20	10.5	17	8.7	12	4.6	297	11.9
-																
<u>Eating:</u>																
 Independent 	94	29.4	97	19.2	170	23.3	111	39.0	73	38.2	114	58.5	135	51.3	794	31.9
• Other	174	54.4	349	69.0	427	58.8	143	50.4	89	46.6	64	32.8	115	43.7	1,370	54.9
 Completely fed 	52	16.2	60	11.8	130	17.9	30	10.6	29	15.2	17	8.7	13	5.0	331	13.2
Grooming:																
Independent	31	9.7	17	3.4	52	7.2	39	13.7	26	13.6	35	17.9	48	18.2	248	10.0
• Other	149	46.6	196	38.8	337	46.4	132	46.5	63	33.0	100	51.3	117	44.5	1,103	44.2
 Aid in all areas 	140	43.7	293	57.8	338	46.4	113	39.8	102	53.4	60	30.8	98	37.3	1,144	45.8
Dressing:																
Independent	61	19.1	43	8.5	97	13.3	51	18.0	44	23.0	51	26.1	66	25.1	413	16.4
• Other	151	47.2	265	52.4	399	54.9	142	50.0	75	39.3	108	55.4	145	55.1	1,294	51.9
 Dressed completely 	108	33.7	198	39.1	231	31.8	91	32.0	72	37.7	36	18.5	52	19.8	788	31.6

Source: Quality Assurance and Review File.

^eA total of 191 persons were served.

^aA total of 320 persons were served.

^bA total of 506 persons were served.

^CA total of 727 persons were served.

^dA total of 284 persons were served.

f_A total of 195 persons were served.

^gA total of 263 persons were served.

^hDuring FY '82, a total of 2,495 persons with mental retardation were served.

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Bed Mobility: 80% (2,000) of the residents turn and position themselves while in bed; 12% (297) must be turned and positioned while in bed.

Eating: 32% (794) of the residents eat without help; 13%
(331) must be fed.

Grooming: 46% (1,148) of the residents require complete assistance; 10% (248) groom themselves.

<u>Dressing:</u> 32% (798) of the residents must be dressed and undressed; 17% (424) of the residents dress/undress themselves.

Overall, the abilities of residents with mental retardation vary widely over the 13 skill areas assessed. Many residents are quite capable in some skill areas (e.g., walking, transferring, and bed mobility) while quite dependent in other skill areas (e.g., communication, dressing, and grooming).

More up-to-date information on mentally retarded residents is currently being analyzed and will be published later.

Over the period of 1977-1982, resident capability changed somewhat but not dramatically for most skill areas according to Tables 5 and 6. Between 1977 and 1982, the percentage of residents with mental retardation who were at an independence level decreased by 1% to 12% across all skill areas (see Table 5). The 12% decrease was in the skill area of eating; the 1% decrease was in bathing. During the same period, the percentage of residents at the level of total dependence increased by 1% to 20% for all but four skill areas. Hearing did not change, while grooming, bathing, and eating dependence decreased each by 2%. The smallest increase in dependence (1%) occurred in vision and toileting, while the largest percentage increase (20%) was inappropriate behavior. Overall and percentage wise, the resident population with mental retardation became more dependent over FY '77-'82.

Data from the Minnesota Department of Health's 1982 Quality Assurance Review described the percentage of 2,495 state hospital, 3,174 Class A ICF-MR (Intermediate Care Facility for Mentally Retarded), 164 Class A and B ICF-MR, 737 intermediate care facility and skilled nursing facility (ICF and SNF), 325 generic ICF, and 306 SNF residents who are independent and dependent in the following five skill areas: eating, grooming, dressing, walking, and toileting (see Table 7).

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In general, Class A facilities had the most independent residents with MR, followed by Class A and B facilities, generic ICFs, and ICF and SNFs. Class B facilities, SNFs, and state hospitals all had residents with roughly similar levels of independence and dependence over the five skill areas.

TABLE 5

PERCENTAGE OF MR POPULATION INDEPENDENCE BY SKILL AREA OF MINNESOTA STATE HOSPITALS
FOR THE PERIOD OF 1977 - 1982

	Year												
Skill Area	1977	1978	1979	1980	1981	1982	Change (+/-)						
Self-Preservation	88	88	7%	6%	5%	5%	- 3						
Orientation	30%	37%	34%	24%	47%	27%	- 3						
Vision	65%	67%	67%	64%	66%	61%	- 4						
Hearing	86%	86%	87%	86%	87%	84%	- 2						
Grooming	12%	10%	11%	10%	9%	10%	- 2						
Bathing	10%	12%	10%	88	9%	9%	- 1						
Walking	73%	73%	72%	72%	72%	71%	- 2						
Transferring	78%	77%	77%	76%	77%	75%	- 3						
Bed Mobility	84%	84%	82%	84%	83%	80%	- 4						
Eating	44%	36%	34%	29%	32%	32%	- 12						
Dressing	23%	20%	18%	17%	17%	17%	- 6						
Toileting	47%	44%	44%	42%	39%	39%	- 8						
Communication	20%	18%	19%	16%	15%	18%	- 2						
Behavior	28%	24%	18%	18%	20%	17%	- 11						

Source: Quality Assurance and Review File.

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TABLE 6

PERCENTAGE OF MR POPULATION DEPENDENCE BY SKILL AREA OF MINNESOTA STATE HOSPITALS, 1977 - 1982

			Net Chan					
Skill Area	1977	1978	1979	1980	1981	1982	(+/-	
Self-Preservation	41%	39%	42%	43%	40%	44%	+ 3	3
Orientation	19%	24%	20%	15%	12%	23%	+ 4	4
Vision	6%	6%	6%	6%	7%	7%	+]	l
Hearing	3%	2%	2%	3%	2%	3%	(0
Grooming	48%	47%	48%	49%	48%	46%	- 2	2
Bathing	47%	47%	50%	50%	49%	45%	- 2	2
Walking	19%	19%	19%	19%	20%	21%	+ 2	2
Transferring	7%	9%	10%	11%	11%	12%	+ 5	5
Bed Mobility	9%	10%	11%	11%	11%	12%	+ 3	3
Eating	15%	14%	15%	15%	14%	13%	- 2	2
Dressing	28%	30%	30%	30%	31%	32%	+ 4	4
Toileting	21%	20%	21%	18%	19%	22%	+]	L
Communication	26%	24%	24%	31%	28%	31%	+ 5	5
Behavior	23%	28%	30%	39%	40%	43%	+ 20)

Source: Quality Assurance and Review File.

	Skill Area													
	Dress	ing	Groom	uing	Eati	ng	Walk	ing	Toileting					
Type of Setting	Independ- ence ^a	Depend- enceb	Independ- ence ^a	Depend- ence ^b										
State Hospital	17%	32%	10%	46%	32%	13%	71%	21%	39%	22%				
Class A	5 7 %	1%	39%	2%	79%		98%		87%					
Class A and B	47%	5%	41%	88	74%	3%	87%	8%	76%	1%				
Class B	18%	32%	10%	42%	30%	18%	57%	31%	37%	25%				
ICF and SNF	21%	29%	16%	32%	61%	12%	49%	23%	49%	16%				
Generic SNF	40%	12%	33%	16%	80%	3%	72%	10%	66%	3%				
SNF	14%	28%	9%	35%	45%	14%	43%	29%	43%	17%				

Class A = Residents can egress the building on their own in case of emergency.

Class B = Residents cannot egress the building on their own in case of emergency.

ICF = Intermedicate Care Facility.

SNF = Skilled Nursing Facility.

Source: Quality Assurance and Review File.

^aPercentage of facility population independent in this skill area.

Percentage of facility population dependent in this skill area.

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3. Patients with Chemical Dependency (CD)

Patients with a dependency on one or more drugs and/or alcohol spend a relatively short period of time in state hospitals, when compared to persons with mental illness and mental retardation. While the average daily population of patients with chemical dependency in state hospitals during FY '84 was 594, a total of 5,327 patients were served with an average per patient stay of 38 days.

Selected characteristics of the 5,327 patients with chemical dependency served during 1984 are presented in Table 8. In general, most patients with chemical dependency were:

Males (85%);
White (87%);
Less than 30 years old (55%);
Single (48%);
High school education or less (85%);
Admitted informally (95%);
Not involved in criminal activity in the previous six months (51%);
Dependent on alcohol (55%);
Left the program without completing it (42%); and
Indigent and sought free treatment at a reduced fee (79%).

IV. FUTURE PATTERNS

Minnesota's eight state hospitals currently serve over 4,000 persons with mental illness, mental retardation, and chemical dependency (see Table 1). As a whole, each service population presents a unique picture of characteristics and service needs, and these in turn vary dramatically within each service population (see Tables 3 through 7). Each service population's characteristics and needs require a different level, type, and configuration of service.

Drawing general conclusions about the total population served by state hospitals is difficult because of the differences in each service group. Nevertheless, two general trends can be highlighted. First, the average daily state hospital population is declining. The population has dropped by over 1,000 persons since FY '78. Second, the state hospital population (for mental illness and mental retardation categories) is a dependent population in need of supervision and assistance, and it is becoming slightly more dependent over time.

TABLE 8

SELECTED CHARACTERISTICS OF PERSONS WITH CHEMICAL DEPENDENCY SERVED BY MINNESOTA STATE HOSPITALS DURING FY '84

	State Hospital													
	An	oka ^a	Bra	inerd ^b	Fergus	Falls ^C	Moose	Laked	St.	Peter ^e	Wi1	lmar ^f	Tota1 ^g	
	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-
Characteristic	ber	cent	<u>ber</u>	cent	ber	cent	ber	cent	ber	cent	ber	cent	ber	cent
Sex:														
• Males	733	86.7%	512	80.9%	839	79.2%	1,166	88.1%	532	87.1%	751	87.7%	4,533	85.1%
• Females	112	13.3%	121	19.1%	219	20.7%	157	11.9%	79	12.9%	105	12.3%	793	14.9%
Race:														
• White	747	88.4%	450	71.1%	932	88.0%	1,109	83.8%	583	95.4%	827	96.6%	4,648	87.3%
Native American	24	2.8%	174	27.5%	109	10.3%	141	10.7%	11	1.8%	15	1.8%	474	8.9%
• AJ.1 Other	74	8.8%	9	1.4%	18	1.7%	73	5.5%	17	2.8%	14	1.6%	205	3.8%
Acros														
Age: 30 and younger	469	55.5%	360	56.9%	581	54.9%	649	49.1%	411	67.3%	461	53.9%	2,931	55.0%
· 31-59 years old	356	42.1%	242	38.2%	412	38.9%	613	46.3%	179	29.3%	334	39.0%	2,136	40.1%
• 60 and older	20	2.4%	31	4.9%	66	6.2%	61	4.6%	21	3.4%	60	7.0%	259	4.9%
Marital Status:														
• Single	423	50.1%	308	48.7%	471	44.5%	577	43.6%	323	52.9%	452	52.8%	2,554	47.9%
• Divorced, Separated,	123	30110	500	10170	***	111.50	311	13.00	323	32.30		32.00	2,55.	
or Widowed	325	38.5%	186	29.4%	316	29.8%	536	40.5%	184	30.1%	241	28.2%	1,788	33.6%
• Married	97	11.5%	139	22.0%	272	25.7%	210	15.9%	104	17.0%	163	19.0%	985	18.5%
Education:														
• High School or Less	724	85.7%	559	88.3%	871	82.2%	1.173	88.7%	550	90.0%	746	87.1%	4.623	86.8%
• College	120	14.2%	74	11.7%	188	17.8%	150	11.3%	61	10.0%	110	12.9%	703	13.2%
Employment Status:	339	40.1%	117	18.5%	414	39.1%	326	24.6%	274	44.8%	384	44.9%	1,854	34.8%
EmployedUnemployed	339 465	55.0%	414	65.4%	414 454	42.9%	326 851	64.3%	281	44.0%	360	42.1%	2,825	53.0%
Other	41	4.9%	102	16.1%	191	18.0%	146	11.0%	56	9.2%	112	13.1%	648	12.2%
Admission:	011	06.00	C17	07.50	066	01 20	1 264	OF F0	E70	94.6%	806	94.2%	E 042	04 69
InformalOther	811 34	96.0% 4.0%	617 16	97.5% 2.5%	966 93	91.2% 8.8%	1,264 59	95.5% 4.5%	578 33	5.4%	50 50	5.8%	5,042 285	94.6% 5.4%
· Odler	34	4.06	10	2.56	93	0.08	23	4.70	رر	2.70	30	2.08	203	J.70
Arrested or Convicted				_										
in Last 6 Months	385	45.6%	340	53.7%	489	46.2%	578	43.7%	387	63.3%	438	51.2%	2,617	49.1%

1985

TABLE 8 SELECTED CHARACTERISTICS OF PERSONS WITH CHEMICAL DEPENDENCY SERVED BY MINNESOTA STATE HOSPITALS DURING FY '84 (continued)

	State Hospital													
	Ar	oka ^a	Bra	inerd ^b	Fergus	Falls ^C	Moose	Laked	St.	Petere	Wil	lmarf	Tot	:a 19
	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-	Num-	Per-
<u>Characteristic</u>	ber	cent	ber	cent	ber	cent	ber	cent	ber	cent	ber	cent	_ber_	cent
Primary Diagnosis:														
· Alcohol Abuse	55	6.5%	204	32.2%	306	28.9%	29	2.2%	134	21.9%	52	6.1%	780	14.6%
 Alcohol Dependency 	450	53.3%	218	34.4%	511	48.3%	926	70.2%	286	46.8%	528	61.7%	2,910	54.8%
• Drug Abuse	10	1.2%	5	0.8%	6	0.6%	2	0.2%	9	1.5%	3	0.4%	35	0.7%
 Drug Dependency 	14	1.7%	10	1.6%	9	0.8%	16	1.2%	8	1.3%	55	6.4%	112	2.1%
 Alcohol and Drug 														
Abuse	92	10.9%	112	17.7%	136	12.8%	21	1.7%	84	13.7%	30	3.5%	475	8.9%
 Alcohol and Drug 														
Dependency	107	12.7%	60	9.5%	54	5.1%	311	23.5%	14	2.3%	178	20.8%	724	13.6%
• Other	112	13.3%	18	2.8%	5	0.5%	6	0.5%	70	11.5%	3	0.4%	214	4.0%
• Missing	5	0.6%	6	0.9%	32	3.0%	12	0.9%	6	1.0%	7	98.0	68	1.3%
Admission History:														
Not Previously														
Admitted	675	79.9%	413	65.2%	624	58.9%	780	59.0%	450	73.6%	548	64.0%	3,490	65.5%
 Readmission to This 													•	
State Hospital	170	20.1%	220	34.8%	435	41.1%	543	41.0%	161	26.4%	308	36.0%	1,837	34.5%
Discharged:														
Program Completed	451	60.0%	409	70.8%	539	58.6%	578	49.6%	352	64.0%	398	53.3%	2,727	57.9%
 Program not Completed 	301	40.0%	169	29.2%	381	41.4%	588	50.4%	198	36.0%	349	46.7%	1,986	42.1%
Payment:h														
• Free or Reduced Fee														
(State)		86.5%		77.7%		65.6%		78.2%		81.2%		79.9%		77.7%
• County		9.5%		7.5%		8.2%		8.9%		9.9%		8.9%		8.8%

Source: Drug and Alcohol Abuse Normative Evaluation System File (DAANES).

^aA total of 845 persons were served. For "Discharged," N = 752.

 $^{^{\}mathrm{b}}\!\mathrm{A}$ total of 633 persons were served. For "Discharged," N = 578.

^CA total of 1,059 persons were served. For "Discharged, N = 920.

 $^{^{}m d}_{
m A}$ total of 1,323 persons were served. For "Discharged," N = 1,166.

^eA total of 611 persons were served. For "Discharged," N = 550.

fA total of 856 persons were served. For "Dis-charged," N = 747.

^gDuring FY '84, a total of 5,327 persons with chemical dependency were served. For "Discharged," N = 4,713.

hOnly percentage figures are available.

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What future trends will affect each of these groups?

1. Mental Retardation

- a. The <u>Welsch</u> vs. <u>Levine Consent Decree</u> will reduce the number of mentally retarded people in state hospitals from 2,250 to 1,850 by July 1, 1987.
- b. The Title XIX (Medicaid) Home and Community Based Waiver will also reduce the number of mentally retarded people in state hospitals.
- c. Every mentally retarded person has been screened using the Title XIX waiver instrument. The data indicate that 1,313 mentally retarded residents have been recommended for continued placement in state hospitals; 560 are recommended for community ICF-MR placement; 32 for placement with family, foster care, or relatives; 21 for ICF; and 48 in some type of 24-hour supervised out-of-home care.
- d. Because of several reasons, it is not really known how many mentally retarded children are born every year. The following variables affect the incidence level of mental retardation:
 - Increase in teenage pregnancies;
 - (2) Extraordinary life-saving measures for very premature babies;
 - (3) Poor health care practices (diets, drugs, smoking, and health);
 - (4) Limited prenatal care; and
 - (5) Exposure to environmental hazards (lead, etc.).

The number of mentally retarded children is also affected by practices after birth such as diet and early intervention.

TREND LINE: The number of mentally retarded people in state hospitals will continue to decline.

2. Mental Illness

- a. There is no court case at this time affecting the number of mentally ill people in state hospitals.
- b. There is no waiver at this time affecting the number of mentally ill people in state hospitals.

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- c. Information about every mentally ill person in state hospitals is being collected at this time. Analysis has not been completed, but will be published in 1985.
- d. What affects the incidence of mental illness? The New York Times (December 11, 1984) recently reported that there are "high risk" indicators for children who might become schizophrenic. This approach combines both genetic and environmental factors including:
 - (1) Childbirth problems;
 - (2) Poor emotional bonding with mother;
 - (3) Poor motor coordination;
 - (4) Separation from parents;
 - (5) Intellectual deficits;
 - (6) Cognitive defects;
 - (7) Social incompetence; and
 - (8) Confusion and hostility from parent to child.
- e. There are two emerging groups of people experiencing mental illness. The first is young white single men with little education, who are unemployed and have serious problems related to the use of drugs.

The second group is characterized as "psychogeriatric" or older individuals with various conditions such as Alzheimer's.

- f. The Commitment Act makes it more difficult for people to enter state hospitals.
- g. Financing mechanisms such as Diagnostic Related Groupings (DRGs), flat rates for Medicaid and General Assisstance for Medical care put pressure on psychiatric units in hospitals to discharge patients with mental illness. These individuals seek state hospitals' care because of inability to pay.

TREND LINE: The number of mentally ill people in state hospitals will continue at the same level.

3. Chemical Dependency

- a. There is no court case at the time affecting the number of chemically dependent people in state hospitals.
- b. The heightened social and legal awareness of chemical dependency has actually increased the number of people who use state hospitals.

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c. The demographics of the people with chemical dependency seeking services from state hospitals reflect an indigent population with little or no family structure. The use of state hospital chemical dependency units is a function of financing mechanisms and access to services.

TREND LINE: The number of chemically dependent people will continue at the same level unless funding changes.

V. SUMMARY

- 1. In 1960, a peak of 16,355 residents/patients were served in the state hospital system.
- 2. In FY '84, the average daily population of the state hospitals was 4,006 people:
 - 1,230 mentally ill people
 - 2,182 mentally retarded people
 - 594 chemically dependent people
- 3. Mentally ill patients range from the severest forms of illness (9%) to the least severe symptoms (12%). Patients who experience psychotic episodes, attempt suicide, and abuse drugs comprise 26% of the state hospital population; and patients with poor social skills, little initiative, and difficulty controlling emotional control comprise 39% of the population. The remaining 13% have limited social interaction and self-care skills.
- 4. Ninety percent (90%) of the residents in state hospitals are severely or profoundly mentally retarded.
- 5. Mentally retarded residents are highly dependent in areas such as self-preservation (43%), behavior problems (42%), bathing (45%), grooming (46%), and dressing (32%)
- 6. Mentally retarded residents are independent in transferring out of bed (75%), toileting (39%), vision (61%), hearing (83%), and walking (70%).
- 7. Patients with chemical dependency are typically young white males who are single, unemployed, have a high school degree or less, are alcohol dependent, and indigent.

The 1984 Legislature mandated that a study and plan for Minnesota State Hospitals be prepared (Chapter 654, Section 19).

An Institutional Care and Economic Impact Planning Board was created composed of the following state agency heads: Sister Mary Madonna Ashton, Dept. of Health; Barbara Beerhalter, Dept. of Economic Security; Gus Donhowe, Dept. of Finance; Bill Gregg, Dept. of Veterans Affairs; Sandra Hale, Dept. of Administration; Leonard Levine, Dept. of Human Services; Orville Pung, Dept. of Corrections; David Reed, Dept. of Energy & Economic Development; Nina Rothchild, Dept. of Employee Relations; James Solem, Housing Finance Agency; and Tom Triplett, Chair, State Planning Agency.

Responsibility for the studies was given to the Developmental Disabilities Program/Council of the State Planning Agency.

Eight technical papers have been prepared to respond to the legislative requirements. This paper may be cited:

State Planning Agency. (1985, January). <u>Policy Analysis Series Paper No. 6: Residents/patients in Minnesota State Hospitals</u>. St. Paul, MN: Developmental Disabilities Program, State Planning Agency.

"Residents" refer to people with mental retardation who live in state hospitals.

"Patients" refer to people with mental illness and people with chemical dependency who receive services at the state hospitals.

Additional free copies of reports or information about this project can be received from:

Developmental Disabilities Program State Planning Agency 201 Capitol Square Building 550 Cedar St. St. Paul, MN 55101 612-296-4018