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**DEPARTMENT
OF
PUBLIC
WELFARE**

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**STATE
INSTITUTIONS
INFORMATIONAL
BROCHURE**

hospitals - state

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FACTS ON STATE HOSPITALS

STATE HOSPITALS

	Actual FY 1977	Actual & Estimated FY 1978	Estimated FY 1979	Requested FY 1980	Requested FY 1981
Expenditures	<u>\$85,337,810</u>	<u>\$95,041,694</u>	<u>\$102,980,352</u>	<u>\$104,219,221</u>	<u>\$102,298,957</u>
Revenue -					
Medicare	\$ 1,011,103	\$ 1,859,922	\$ 1,701,963	\$ 1,797,848	\$ 1,893,733
MA	51,755,893	56,878,912	61,803,789	65,285,693	68,767,597
Other*	<u>6,085,123</u>	<u>6,603,484</u>	<u>7,494,248</u>	<u>7,916,459</u>	<u>8,338,670</u>
Total	<u>\$58,852,119</u>	<u>\$65,342,318</u>	<u>\$71,000,000</u>	<u>\$75,000,000</u>	<u>\$79,000,000</u>
Population					
MI	1,482	1,376	1,375	1,375	1,375
MR	3,085	2,895	2,800	2,700	2,600
CD	587	638	630	630	630
Security	139	167	154	165	165
Sex Offender	--	--	36	36	36
Total	<u>5,293</u>	<u>5,076</u>	<u>4,995</u>	<u>4,906</u>	<u>4,806</u>
Staff					
Direct	3,864	4,108	4,108	4,128	4,128
Indirect	<u>1,452</u>	<u>1,346</u>	<u>1,346</u>	<u>1,326</u>	<u>1,326</u>
Total	<u>5,316</u>	<u>5,454</u>	<u>5,454</u>	<u>5,454</u>	<u>5,454</u>

*County and Court fees

NURSING HOMES

	<u>Actual FY 1977</u>	<u>Actual & Estimated FY 1978</u>	<u>Estimated FY 1979</u>	<u>Requested FY 1980</u>	<u>Requested FY 1981</u>
Expenditures	<u>\$8,965,809</u>	<u>\$9,379,032</u>	<u>\$11,172,755</u>	<u>\$11,278,621</u>	<u>\$11,080,204</u>
<u>Revenue</u>					
Individual	\$ 916,568	\$ 982,655	\$ 1,054,440		
MA	5,807,738	6,224,878	6,725,122		
Other*	<u>40,000</u>	<u>45,000</u>	<u>50,000</u>		
Total	<u>\$6,764,306</u>	<u>\$7,252,533</u>	<u>\$ 7,829,562</u>		
Population	702	705	730		
Staff					
Direct	421	428	428		
Indirect	<u>189</u>	<u>189</u>	<u>189</u>		
Total	<u>610</u>	<u>617</u>	<u>617</u>		

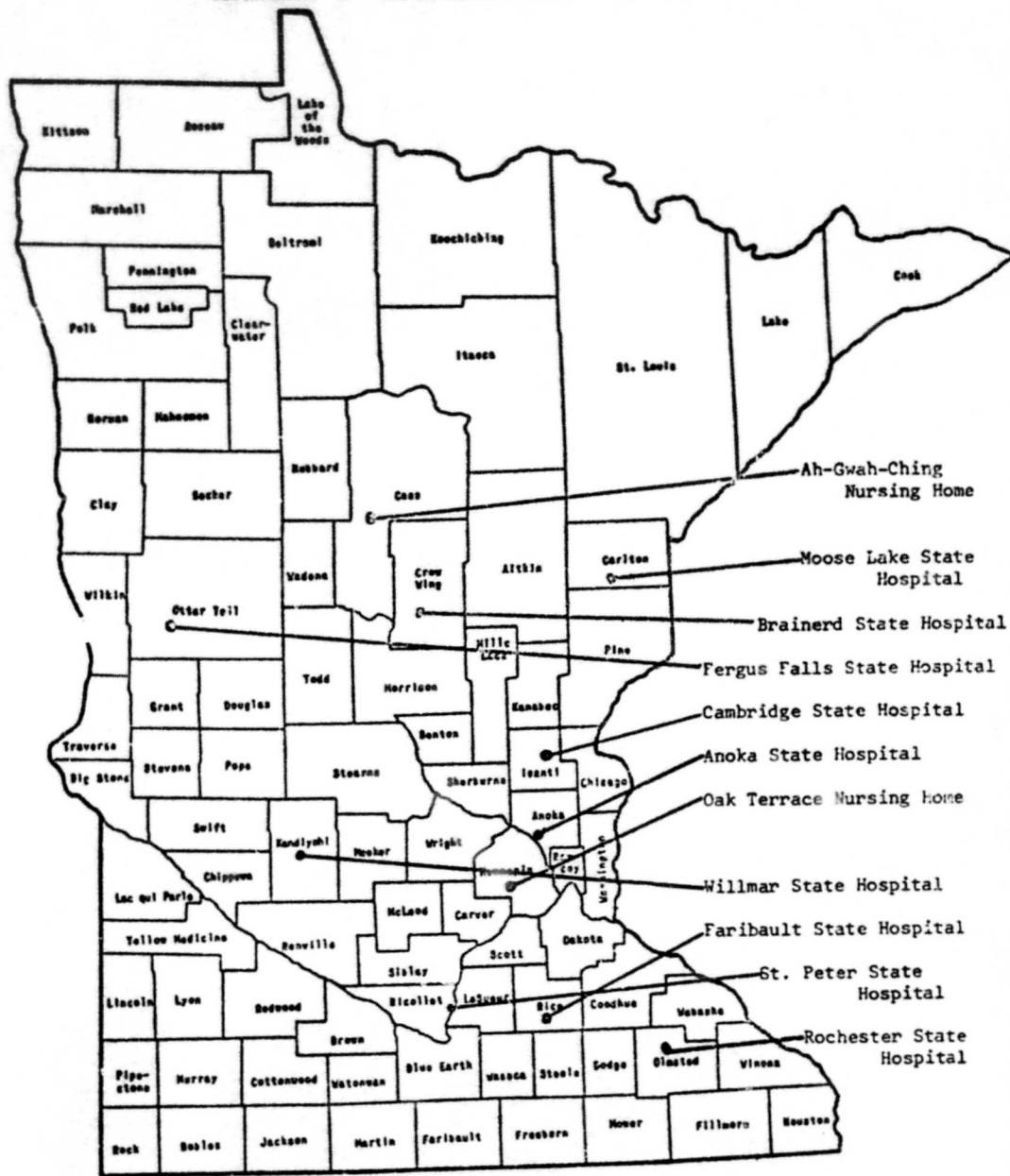
2 SCHOOLS

Expenditures	<u>\$3,321,126</u>	Transferred to the Department of Education on July 1, 1977.
Population	245	
Staff	223.5**	

*County and Court fees

**Does not include 10.5 positions for the
Regional Library for the Blind

DEPARTMENT OF PUBLIC WELFARE INSTITUTION LOCATIONS



POPULATION OF STATE WELFARE FACILITIES AS OF NOVEMBER 30 EACH YEAR 1968-1978

Institution	1968	1969	1970	1971	1972	1973	1974	1975	1976	1977	Oct. 1978
Anoka State Hospital	553	477	442	436	450	396	357	349	365	373	410
Brainerd State Hospital	1214	1080	967	874	879	748	651	653	662	637	602
Cambridge State Hospital	1243	1145	1019	885	813	738	677	632	608	582	561
Faribault State Hospital	2014	1798	1600	1571	1466	1220	1107	1027	928	863	836
Fergus Falls State Hospital	640	587	597	596	554	547	517	498	554	580	594
Hastings State Hospital	422	385	347	290	240	265	223	184	123	119	0*****
Moose Lake State Hospital	671	629	537	447	439	452	425	451	498	499	490
Rochester State Hospital & Social Adaptation Center	540	688	688	669	634	630	569	502	557	519	561
St. Peter State Hospital, MVSAC & Security Hospital	702	764	845	794	714	672	632	590	567	604	588
Willmar State Hospital	674	628	584	542	534	631	602	577	635	609	616
Lake Owasso Childrens Home	121	110	95	77	77	75	73	60	***		
Ah-Gwah-Ching Nursing Home	480	479	468	467	462	458	432	386	356	368	366
Glen Lake State Sanatorium	43	39	37	29	22	18	16	2	**		
Oak Terrace Nursing Home	322	322	322	319	325	319	322	334	333	338	332
Braille & Sight Saving School	90	75	75	76	66	40	65	59	55	****	
School for the Deaf	276	275	280	253	259	237	214	195	179	****	
Gillette State Hospital	66	60	47	58	46	28	*				
† Totals	<u>10,171</u>	<u>9,541</u>	<u>8,950</u>	<u>8,383</u>	<u>7,980</u>	<u>7,474</u>	<u>6,882</u>	<u>6,499</u>	<u>6,420</u>	<u>6,091</u>	<u>5,956</u>

POPULATION-INSTITUTIONS FOR MENTALLY ILL, MENTALLY RETARDED AND CHEMICALLY DEPENDENT

Year	Mentally Ill	Mentally Retarded	Chemically Dependent	Total
1965 (1/31)	6,701	6,080	289	13,070
1970 (6/30)	3,223	4,696	371	8,290
1976 (6/30)	1,665	3,198	582	5,445
1977 (6/30)	1,695	3,032	612	5,339
1978 (6/30)	1,667	2,854	610	5,131

*DPW's responsibility for Gillette Childrens Hospital ceased with the creation of the Gillette Hospital Authority by the Legislature in May of 1973.

**Last TB patient discharged 4/5/76; since then Oak Terrace has been functioning as a nursing home facility only.

***Effective June 1, 1976, responsibility for Lake Owasso was transferred to the Ramsey County Welfare Department.

****Effective July 1, 1977, responsibility for the operation of the Braille and Deaf Schools was transferred to the Department of Education.

*****Hastings State Hospital closed May 1, 1978.

ALLOCATION OF BUILDING FUNDS
(Laws 1978, Chapters 791 and 792)

Anoka State Hospital

New Construction	\$ 150,000
Life Safety	140,000
Remodeling	65,000
Other Plant Repairs - Renovations	8,500
Air Conditioning	130,000
Demolition	100,000
	<u>\$ 593,500</u>

Brainerd State Hospital

Life Safety	\$ 51,000
Remodeling	615,000
Other Plant Repairs - Renovations	142,100
Furniture	30,000
Carpeting	20,000
Air Conditioning	45,000
	<u>\$ 903,100</u>

Cambridge State Hospital

Life Safety	\$ 204,000
Remodeling	575,000
Other Plant Repairs - Renovations	212,350
Furniture	90,000
Carpeting	32,000
	<u>\$1,113,350</u>

Faribault State Hospital

Life Safety	\$ 232,500
Remodeling	435,000
Other Plant Repairs - Renovations	38,550
Furniture	20,000
Carpeting	20,000
Air Conditioning	275,000
	<u>\$1,021,050</u>

Fergus Falls State Hospital

Life Safety	\$ 324,000
Remodeling	105,000
Other Plant Repairs - Renovations	50,000
Furniture	35,000
Carpeting	20,000
	<u>\$ 534,000</u>

Moose Lake State Hospital

Life Safety	\$ 120,000
Remodeling	330,000
Other Plant Repairs - Renovations	100,000
Furniture	40,000
Carpeting	10,000
Air Conditioning	30,000
	<u>\$ 630,000</u>

Rochester State Hospital

Life Safety	\$ 377,000
Remodeling	100,000
Other Plant Repairs - Renovations	95,000
Furniture	40,000
Carpeting	10,000
Air Conditioning	85,000
	<u>\$ 707,000</u>

St. Peter State Hospital

New Construction	\$8,700,000
Life Safety	100,000
Remodeling	250,000
Other Plant Repairs - Renovations	50,000
Furniture	30,000
Carpeting	10,000
Air Conditioning	125,000
	<u>\$9,265,000</u>

Willmar State Hospital

Life Safety	\$ 70,000
Remodeling	85,000
Other Plant Repairs - Renovations	173,500
Furniture	30,000
Carpeting	10,000
	<u>\$ 368,500</u>

NURSING HOMES

Ah-Gwah-Ching Nursing Home

Life Safety	\$ 209,000
Remodeling	125,000
Other Plant Repairs - Renovations	15,000
Furniture	25,000
	<u>\$ 374,000</u>

Oak Terrace Nursing Home

Life Safety	\$ 172,500
Remodeling	15,000
Other Plant Repairs - Renovations	65,000
Furniture	10,000
	<u>\$ 262,500</u>

SUMMARY OF EXPENDITURES
YEAR ENDING JUNE 30, 1978

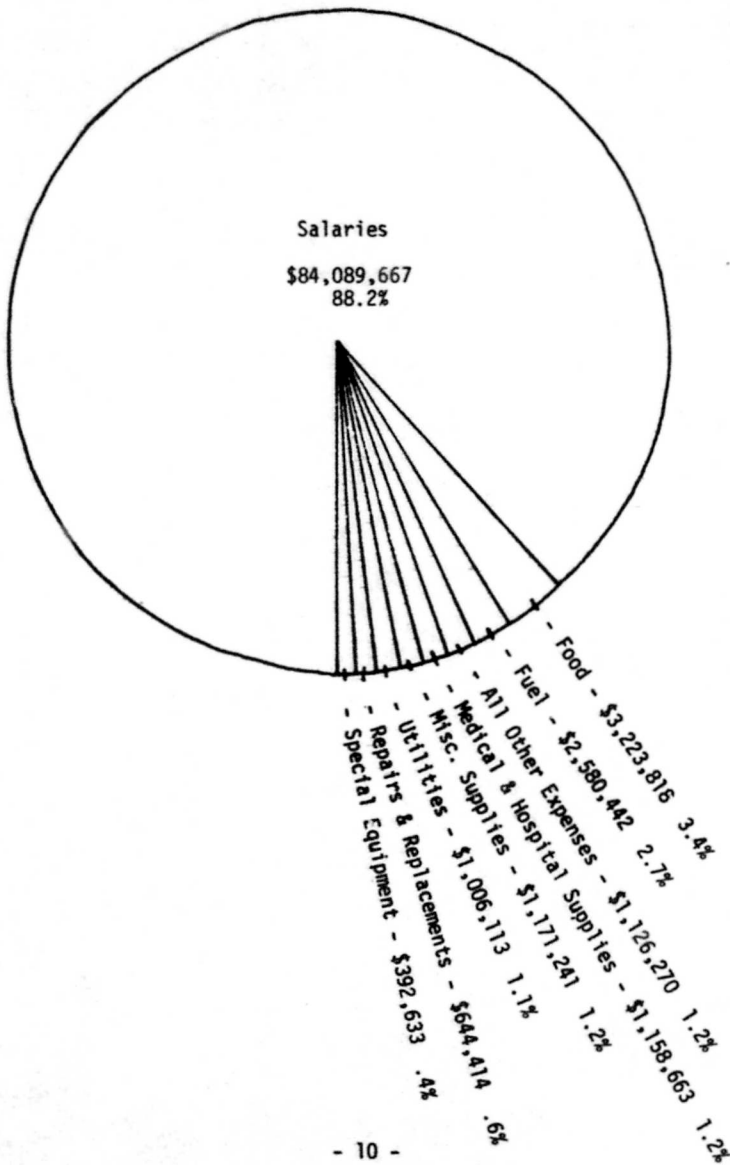
<u>Institutions</u>	<u>Salaries</u>	<u>Current Expense</u>	<u>Repairs and Replacements</u>	<u>Special Equipment</u>	<u>Total</u>
Anoka	\$5,736,058	\$ 741,539	\$ 42,958	\$ 26,147	\$ 6,546,702
Brainerd	10,492,744	1,282,180	70,632	47,912	11,893,468
Cambridge	8,982,002	1,101,912	60,213	30,854	10,174,981
Faribault	13,733,263	1,698,428	97,565	29,666	15,558,922
Fergus Falls	8,266,533	1,072,178	86,860	33,043	9,458,614
Hastings	2,577,772	331,862	13,340	- 0 -	2,922,974
Moose Lake	7,139,403	913,919	60,346	30,289	8,143,957
Rochester	8,322,883	1,094,500	72,139	63,881	9,553,403
St. Peter	7,566,651	1,055,955	82,924	53,245	8,758,775
Security Hospital	2,214,879	16,178	- 0 -	30,042	2,261,099
Willmar	<u>9,057,479</u>	<u>957,896</u>	<u>57,437</u>	<u>47,554</u>	<u>10,120,366</u>
Subtotal	\$84,089,667	\$10,266,547	\$ 644,414	\$ 392,633	\$95,392,261
<u>Nursing Homes</u>					
Ah-Gwah-Ching	\$4,172,763	\$ 533,621	\$ 23,571	\$ 20,597	\$4,750,552
Oak Terrace	<u>4,271,421</u>	<u>679,046</u>	<u>35,288</u>	<u>26,408</u>	<u>5,012,163</u>
Subtotal	\$8,444,184	\$1,212,667	\$ 58,859	\$ 47,005	\$9,762,715
GRAND TOTAL	<u>\$92,533,851</u>	<u>\$11,479,214</u>	<u>\$ 703,273</u>	<u>\$ 439,638</u>	<u>\$105,155,976</u>

STATE HOSPITALS

SUMMARY OF EXPENDITURES

Year Ending June 30, 1978

Total: \$95,393,261

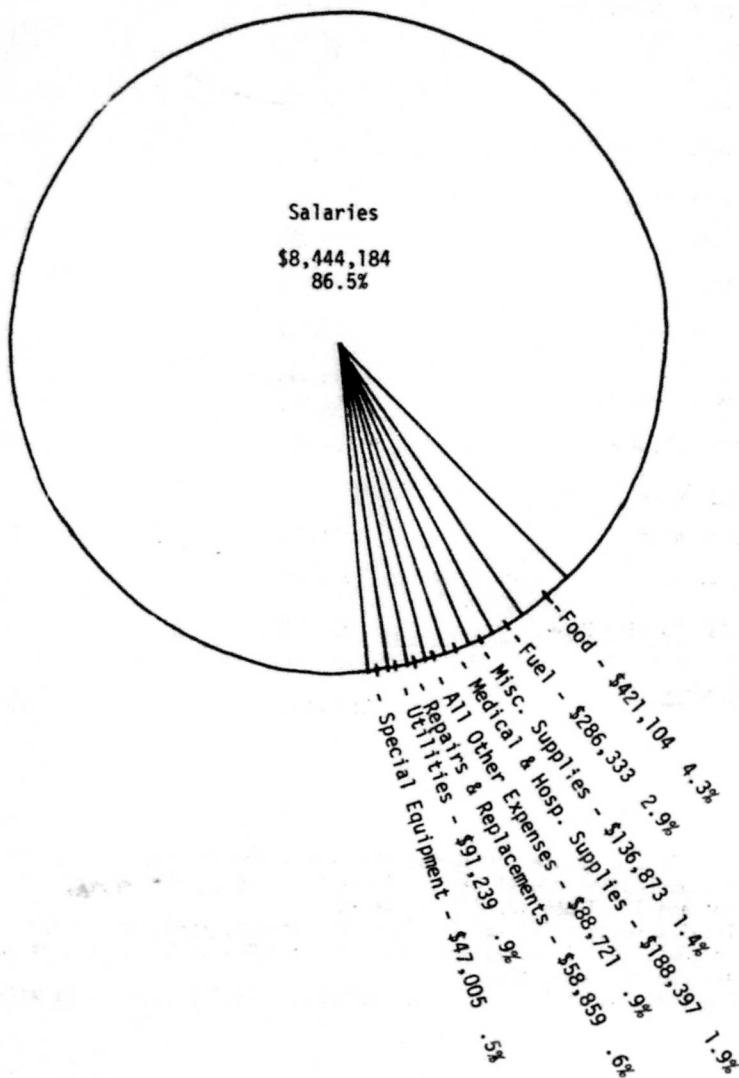


NURSING HOMES

SUMMARY OF EXPENDITURES

Year Ending June 30, 1978

Total: \$9,762,715



SQUARE FOOTAGE AND ACREAGE OF CAMPUSES

<u>State Hospitals</u>	<u>Square Feet</u>	<u>Acreage</u>
Anoka (new building)	550,398* 45,000	254
Brainerd	735,217	198
Cambridge	700,741	245
Faribault	941,889	175**
Fergus Falls	825,101	160***
Moose Lake	544,656	175
Rochester	788,759	169.3
St. Peter	803,222	620
Willmar (new building)	539,996**** <u>60,000</u>	158
Total-State Hospitals	6,534,979	2,154.30
<u>Nursing Homes</u>		
Ah-Gwah-Ching	441,772	240
Oak Terrace	<u>250,270</u>	<u>75</u>
Total-Nursing Homes	692,042	315
GRAND TOTAL	<u>7,227,021</u>	<u>2,469.30</u>

*This is the square footage as the campus now exists.

The new building will replace Burns Building (50,390 sq. ft.) and Cottage 2 (17,866 sq. ft.) at Anoka.

**Total acreage - 760 sq. ft. (includes forest, farmland and day camp).

***In addition, 128 acres are leased to Lake Region Rehab. and 24 acres are used for dump site.

****New building will replace the Auditorium (16,400 sq. ft.) at Willmar.

DEPARTMENT OF PUBLIC WELFARE
LAND AND BUILDINGS DECLARED SURPLUS
JANUARY 1, 1973 THROUGH JULY 31, 1978

<u>Institution</u>	<u>Type of Building</u>	<u>Square Footage</u>	<u>Acres</u>	<u>Status</u>	<u>If Sold - Selling Price</u>
<u>ANOKA STATE HOSPITAL</u>	Farm buildings (milk house, barn, 4 silos, slaughter house, farm house, garage)	15,146		Demolished	\$
	Pumping Station	756		Demolished	
	Staff House #5 and garage	2,799		Sold	1,984.50
	Staff House #1 and garage	2,767		Sold	3,820.00
	Staff House #2 and garage	2,763		Sold	3,650.00
	Staff House #3 and garage	3,036		Sold	9,800.00
	Staff House #4 and garage	2,763		Sold	4,130.00
	Surplus Property - NE 1/4 of SE 1/4 of Sec. 9, Twnsp. 31, Range 24, lying NE of Trunk Hwy #10 in Coon Rapids, Mn., Co. of Anoka		10.5	To be transferred to D.N.R. 5/1	
<u>BRAINERD STATE HOSPITAL</u>	No buildings declared surplus.				
<u>CAMBRIDGE STATE HOSPITAL</u>	Patients' Residence (Cottage #7)	19,288		Demolished	27,650.00
	Staff House #5W (incl. lot)	3,120		Sold	12,000.00
	Staff House #3N	2,484		Sold	41,800.00
	Staff House #4E	1,200		Sold-11/5/77	
	Staff House 2C (as of Nov. 1, 1978)	2,000			
<u>FARIBAULT STATE HOSPITAL</u>	Farm Building #70 - Piggery	None recorded		Demolished	
	" " #86 - Bull Pen	" "		"	
	" " #87 - Sick Bay	" "		"	
	" " #89 - Barn	" "		"	
	" " #91 - Maternity Barn	" "		"	
	" " #104 - Slaughter House	" "		"	
	" " #105 - Farrowing House	" "		"	
	" " #106 - Barn	" "		"	
	" " #107 - Barn	" "		"	
	" " #108 - Farrowing House	" "		"	
	" " #109 - Barn	" "		"	
	Chippewa Building	70,114		Demolished	
	Iris Cottage	12,262		Demolished	
	Sioux Cottage	12,879		Demolished	

<u>Institution</u>	<u>Type of Building</u>	<u>Square Footage</u>	<u>Acres</u>	<u>Status</u>	<u>If Sold - Selling Price</u>
<u>FARIBAULT</u>	Daisy Cottage	12,262		Demolished	\$
<u>CONTINUED</u>	Staff House #71, garage (incl. lot)	2,656		Sold	27,200.00
	Staff House #73, garage (incl. lot)	2,656		Sold	26,300.00
	Staff House #75, garage (incl. lot)	2,748		Sold	34,000.00
	Staff House #98, garage (incl. lot)	2,333		Sold	34,750.00
	Staff House #100, garage (incl. lot)	3,062		Sold	30,150.00
	Staff House #102, garage (incl. lot)	2,515		Sold	25,200.00
	Superintendent's Residence #1	8,362		Razed by 7/31	1.00
	Vacant Lot, Lot 5, Block 1		80' x 155'	Sold	4,600.00
	Vacant Lot, Lot 8, Block 1		89' x 155'	Sold	5,125.00
	Vacant Lot, Lot 9, Block 1		102' x 155'	Sold	7,100.00

<u>FERGUS FALLS</u>	Cottages B & C - Bldg.43	5,298		Pending	
<u>STATE</u>	Cottage D - Bldg. #44	3,922		"	
<u>HOSPITAL</u>	Cottage E - Bldg. #7	2,624		"	
	Cottage A - Bldg. #39	3,024		"	
	East Detach	60,025		Pending action by Adm.	
	Staff House #40 (as of 7/15/78)	2,352			
	Staff House #46 " " "	2,612			
	Staff House #47 " " "	3,171			

NOTE: Staff house #40A was declared surplus in 1974, but has since been utilized for program purposes. Hence, it has been removed from our surplus list.

<u>HASTINGS</u>	Cottage 3 - Resident Unit	21,100		Demolished	
<u>STATE</u>	Bldg. 5 - Sewing Clothing Room	17,594		Demolished	
<u>HOSPITAL</u>	Bldg. 7 - Resident - Program	20,637		Demolished	
	Bldg. 8 - Resident - Program	16,919		Demolished	
	Bldg. 9 - Rehabilitation Center	16,919		Demolished	
	Bldg. 6 - Fire House	81		Demolished	
	Bldg. 17 - Root Cellar	3,786		Demolished	
	Bldg. 18 - Root Cellar	1,738		Demolished	
	Bldg. 35 - Storage Shed	775		Demolished	
	Bldg. 39 - Fire House	144		Demolished	
	Bldg. 42 - Hog Barn	2,414		Demolished	
	Bldg. 36 - Farm House	1,506		Sold	2,650.00
	Building 4	17,313		Pending	(Vets Home)

<u>Institution</u>	<u>Type of Building</u>	<u>Square Footage</u>	<u>Acres</u>	<u>Status</u>	<u>If Sold - Selling Price</u>
<u>HASTINGS</u>					
<u>Continued</u>					
	Building 14	2,552		Sold	\$ 4,651.00
	Building 15	2,552		Sold	4,699.00
	Building 16	2,552		Sold	1,780.00
	Bldg. #2 (as of 1/3/78)	16,683		<u>Not</u> to be demolished	
	Bldg. #37 (as of 2/1/78)	2,000		To be demolished	
	Bldg. #38 (as of 2/1/78)	3,344		To be demolished	
	Bldg. #41 (as of 2/1/78)	8,725		To be demolished	
	Acreage		69.4		
<u>MOOSE LAKE</u>	Beach House	209		Demolished	
<u>STATE</u>	Staff House 40	3,402		Sold	3,506.00
<u>HOSPITAL</u>	Staff House 41	2,820		Pending	
	Staff House 42	2,986		Sold	31,200.00
	Staff House 43 (incl. lot)	2,988		Sold	25,000.00
	Staff House 44 (incl. lot)	2,820		Sold	20,500.00
	Staff House 45	3,326		Sold	30,250.00
	Staff House 46 (incl. lot)	3,326		Sold	28,000.00
<u>ROCHESTER</u>	Isolation House	2,672		Demolished	
<u>STATE</u>	3-White (wooden) Buildings	11,744		Demolished	
<u>HOSPITAL</u>	East Home	9,860		Demolished	
	Staff House #43	940		Sold	1,352.00
	Staff House #44	940		Sold	1,144.00
	Staff House #45	1,189		Sold	2,756.00
	Staff House #46	1,189		Sold	3,304.00
	Old Laundry #61	1,880		Demolished	
	Paint Shop 18	1,728		Remolished	
	P. S. #4	40,808		Pending action by Adm.	
<u>ST. PETER</u>	Building 88 - Corn Crib	1,718		Sold	410.00
<u>STATE</u>	Building 86 - Hog House	6,126		Demolished	
<u>HOSPITAL</u>	Building 46 - Staff House	1,863		Sold	420.00
	Building 47 - Staff House	2,348		Demolished	
	Building 42 - Staff House	2,484		Sold	13,900.00
	Building 43 - Staff House	2,484		Sold	12,500.00
	Building 44 - Staff House	2,484		Sold	11,200.00
	Building 45 - Staff House	1,602		Sold	6,200.00
	Building 40 - Staff House	1,346		Sold	14,000.00

<u>Institution</u>	<u>Type of Building</u>	<u>Square Footage</u>	<u>Acres</u>	<u>Status</u>	<u>If Sold - Selling Price</u>
<u>ST. PETER</u>					
<u>STATE HOSP.</u>	Liberty Hall (#14)	18,006		Demolished	
<u>CONTINUED</u>	Greenhouse - Bldg. #85	6,966		Sold	\$ 425.00
	Wooden Shed	320		Demolished	
	Bldg. 30	16,755		To be demolished	
	Bldg. 35	8,499		Pending	
<u>WILLMAR STATE</u>	Hog House	none		Demolished	
<u>HOSPITAL</u>	Chief Engineer's Staff House	1,728		Sold	2,155.00
	Old Barn	8,000		Demolished	
	Farm Manager's Residence	1,728		Sold	410.00
	Staff House (Doctor's Residence)	2,600		Sold	8,560.40
	Staff House R-3 (as of Oct. 1, 1978)	2,600			
	Staff House R-6 " " "	2,900			
<u>AH-GWAH-</u>	Chicken Coop	none		Demolished	
<u>CHING</u>	Staff House #44	2,156		Sold	1,560.00
<u>NURSING</u>	Staff House #46 and garage	2,184		Sold	2,654.29
<u>HOME</u>	Staff House #48 (to be removed from premises)	2,184		Sold	750.00
	Staff House #49	2,884		Sold	125.00
<u>OAK TERRACE</u>	Building #2 - Staff House	2,880		Sold	50.00
<u>NURSING</u>	Building #3 - Staff House and garage	3,232		Sold	225.00
<u>HOME</u>	*Nurses Home #1	74,001**		Pending	
	*Superintendent's Residence - #4	4,590		Pending	
<u>SCHOOL FOR</u>	Building #5 - Health Clinic	3,500		Demolished	
<u>THE DEAF</u>					
		<u>717,330</u>	<u>79.9***</u>		<u>\$535,596.19</u>

*These buildings had been declared surplus, but are now being leased to Hennepin County - Alanon and Nexus, Inc.

**Square footage was listed as 40,148 sq. ft. for Nurses Home #1, this is actually square footage of one building. #1 is a double building with total square footage of 74,001, per American Appraisal.

***Does not include three vacant lots, which were sold, at Faribault.

AH-GWAH-CHING NURSING HOME

HISTORY

On April 21, 1903 the State Legislature enacted a law establishing the Minnesota Sanatorium for Consumptives. The State Board of Control authorized purchase of real estate for a sanatorium site.

Between 1906 and 1907 a site was chosen - three miles south of Walker above Shingobee Bay of Leech Lake. Land clearing began. Construction was begun and the first two admissions were made on December 28, 1907.

Since that time and up to 1962, 13,000 tuberculous patients were admitted and treated at the hospital. In the 1940's a gradual decline in population started. In 1956 and following, a few nontuberculous elderly were admitted. In 1961 the Legislature changed the purpose of the Minnesota State Sanatorium from a tuberculous facility to a geriatric facility. By law, the Sanatorium became a nursing home on January 1, 1962.

On July 1, 1973 the State Fire Marshal recommended that the home's licensed capacity be no more than 456 beds in order to alleviate overcrowding in some areas. The Minnesota Health Department invoked further restrictions on floor ratio to bed in the mid-70's to meet Medicaid standards for skilled and intermediate care facilities. This will result in an eventual licensed capacity of 390.

Residents and patients come from almost all counties of the State in direct proportion to the population of the counties.

FUNCTION

Ah-Gwah-Ching primarily cares for a geriatric population. Younger residents may be admitted based on the decision of the Admission Committee and State regulations.

Residents are generally referred from a setting where they can no longer reside because of need for nursing care, assistance because of disorientation, long-term institutionalization, and assistance with inappropriate behaviors or habits.

Referrals are accepted from doctors, nursing homes, welfare departments, state hospitals and detoxification centers. In some few cases, the courts may commit patients for care.

Ah-Gwah-Ching Nursing Home
Receiving Area
Transfer patients from other
state institutions



Ah-Gwah-Ching Nursing Home continued

STATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 311

Population, September, 1978 average - 364

AVERAGE POPULATION - 15-Year Period

Fiscal Year

1963-64	422
1964-65	422
1965-66	422
1966-67	427
1967-68	469
1968-69	479
1969-70	477
1970-71	471
1971-72	465
1972-73	458
1973-74	451
1974-75	426
1975-76	386
1976-77	363
1977-78	369

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>	<u>Discharges (incl. deaths)</u>
1973-74	46	67
1974-75	23	61
1975-76	34	43
1976-77	72	76
1977-78	72	72

EXPENDITURES

	<u>FY</u> <u>1974</u>	<u>FY</u> <u>1975</u>	<u>FY</u> <u>1976</u>	<u>FY</u> <u>1977</u>	<u>FY</u> <u>1978</u>
Salaries	\$2,254,856	\$2,699,807	\$3,338,419	\$3,758,853	\$4,172,763
Current Exp.	371,305	453,083	504,093	527,701	533,621
Rep. & Repl.	17,588	17,425	21,958	23,724	23,571
Spec. Equip.		27,337	14,500	22,824	20,597
Total	<u>\$2,643,749</u>	<u>\$3,197,652</u>	<u>\$3,878,970</u>	<u>\$4,333,102</u>	<u>\$4,750,552</u>
Per Capita Costs	\$5,862.00	\$7,506.00	\$10,049.00	\$11,937.00	\$12,874.00

ANOKA STATE HOSPITAL

HISTORY

Anoka State Hospital was first occupied in 1900 and was the fourth hospital built in Minnesota to care for the mentally ill. Following much competition between the towns of Hastings and Anoks for location of the new facility, the Legislature finally accorded each town an institution designated as "transfer asylums" as opposed to the existing "receiving" hospitals at St. Peter, Rochester, and Fergus Falls.

By June, 1930, the population had risen to 1060 and it continued to rise annually to a maximum in 1954, when the population was approximately 1500, 1000 of which were women. It was originally approved by the American Hospital Association in 1940. Anoka received its first psychiatrist in 1935, first social worker in 1948, and first psychologist in 1949.

In 1948, Anoka was designated as the center for treatment of tuberculosis among the mentally ill. Eventually tuberculosis patients were relocated from cottage areas into the "main" building then renamed the Burns Building. In 1951, Anoka changed status from "transfer" hospital to "receiving" hospital with the construction and occupancy of the last building built for patient occupancy, the Miller Building. In December, 1967, the tuberculosis treatment center was closed out. At present, plans are underway to construct the new building for chemically dependent patients, which was authorized in 1976.

By legislative mandate: (1) the medical-surgical program was discontinued the last of June, 1971; (2) the Minnesota Residential Treatment Center, a program for emotionally disturbed children between the ages of 5 and 12, was discontinued at the end of July, 1972. This unit transferred here from Lino Lakes in April, 1970. By Department of Public Welfare directive, the Adolescent Center, formerly located in the Miller Building, was discontinued in March of 1973, after eight years of operation. This unit's treatment program was for boys and girls, ages 13-18, with emotional problems and character disorders. This directive was based on a lack of referrals to the program and increase in community agencies who specialized in treating these problems.

FUNCTION

PROGRAMS FOR THE MENTALLY ILL

Adult Psychiatric

Four programs provide treatment of patients in an open setting. All patients are seen on admission and evaluated as to their ability to function in the open hospital. If not, they are admitted to the program with the least restrictive setting.

Each program has a treatment team led by a program director who is responsible for developing an individualized treatment plan for each patient that identifies treatment goals and specific methods for achieving them. All programs stress the involvement of the patient in planning and implementing treatment.

Anoka State Hospital continued

Behavior Modification Ward - Cottage 3 - 48 beds

This program was implemented to provide services to patients with specific behaviors occurring frequently that interfere with their ability to function in the admitting wards. The program director is certified in behavior modification and develops individual programs for patients to extinguish undesirable behavior through the use of behavior modification techniques such as giving rewards of staff time, points for earning passes, buying from a ward store containing personal items when behavior is absent for a specific period of time or performing tasks of daily living. The patient may be directly discharged from this program or transferred back to one of the general programs when the specific behaviors have been modified.

Intensive Treatment Center - Vail 1 - 44 beds

ITC is a program developed to offer services to patients who have need of management and control because they are unable to care for themselves. They may be confused, wander away, or have behaviors, although not dangerous, that make it impossible to be managed on an open ward. The program focuses on skills of daily living and close psychiatric supervision to improve the behavior so the patient may return to the open hospital or be discharged to the community.

Crisis Intervention Center - Miller North - 20 beds

CIC is a program developed to offer services to the patient in crisis who needs management and control while treatment is being planned and implemented. A psychiatrist sees patients each day and evaluates the patient's ability to handle privileges and his/her movement to the open hospital. A maximum of 21 patients with a high staff ratio is maintained.

Fairweather Program - Burns 1 - 25 beds

The Fairweather Program is for chronically mentally ill persons between the ages of 18 and 55. This program strives to help its residents overcome dependency by engaging each person in an active program aimed at self-support and self-management away from the hospital.

Residents of the Fairweather Program are provided with social and vocational training to help them learn to work and live together in relative stability, earn a living, and share the life of the community. Residents are discharged in a group from Anoka State Hospital to live and work together in a group home (lodge). Lodge members train in the Fairweather Program at Anoka State Hospital for an average of eight months before moving into a lodge group in the community. There are now six lodges in Minneapolis. Lodge members work between 15 and 30 hours per week to pay for their living expenses.

Relationship Therapy Unit - Cottage 2 - 40 beds

This program is oriented to short and long term patients who require a less structured program and who can benefit from an insight oriented approach. Individual and group therapy, in addition to other therapies generally available off the ward, is emphasized in a therapeutic milieu. Family therapy is offered on a limited basis.

Step Level Programs - Vail 2 & 3 - 84 beds

These two programs emphasize group responsibilities and behavioral feedback similar to the Fairweather Program. Specific step levels are defined for each patient in a group feedback session which presents written "notes" regarding behavior. As each patient progresses up the numbered levels the patient gains

Anoka State Hospital continued

more privileges and freedom. In addition, they must assume more responsibility for themselves and at higher levels for other patients in their group. When a patient attains the top level, the staff is required to complete discharge planning in a specific period of time.

PROGRAMS FOR THE CHEMICALLY DEPENDENT

Primary Care - Nurses Dorm - 45 beds

Primary care is a program of four to six weeks duration. This program is geared to educate the resident about chemical abuse, gain his acceptance of his dependency and of the means to maintain sobriety. The program features lectures, films, and group sharing. The Alcoholics Anonymous philosophy is stressed along with 12 steps of Alcoholics Anonymous. Evening AA meetings are conducted by outside groups. In addition, there is individual counseling, occupational and recreational therapy. An individualized aftercare plan is prepared with each patient, concerned persons and community agencies.

Extended Care - Cottage 4 - 45 beds

Extended care is a program of three to four months duration. The program is intended for the person whose previous treatment has not been effective and whose chemical dependency has virtually brought life to a standstill. The aim is sobriety and the regaining of the ability to function in society. The Alcoholic Anonymous philosophy and the 12 steps of Alcoholics Anonymous are used in the program. Daily program activities include participation in a step level system of responsibilities and privileges, group therapy, peer group meetings, industrial therapy and recreational therapy. Off grounds events are used to demonstrate constructive use of leisure time. Weekly AA meetings are conducted by alumni or community groups. A comprehensive aftercare plan is prepared, typically involving halfway house residency.

MEDICAL SERVICES

Infirmary - Burns 2 - 25 beds

Psychiatric medicine is provided on a geriatric infirmary ward. Patients are "hospitalized" on this ward from the psychiatric or chemical dependency programs for physical problems requiring more intensive medical and nursing care. Each patient has an individualized treatment plan including psychiatric as well as physical care needs. Licensed nursing coverage is provided on a 24-hour per day basis.

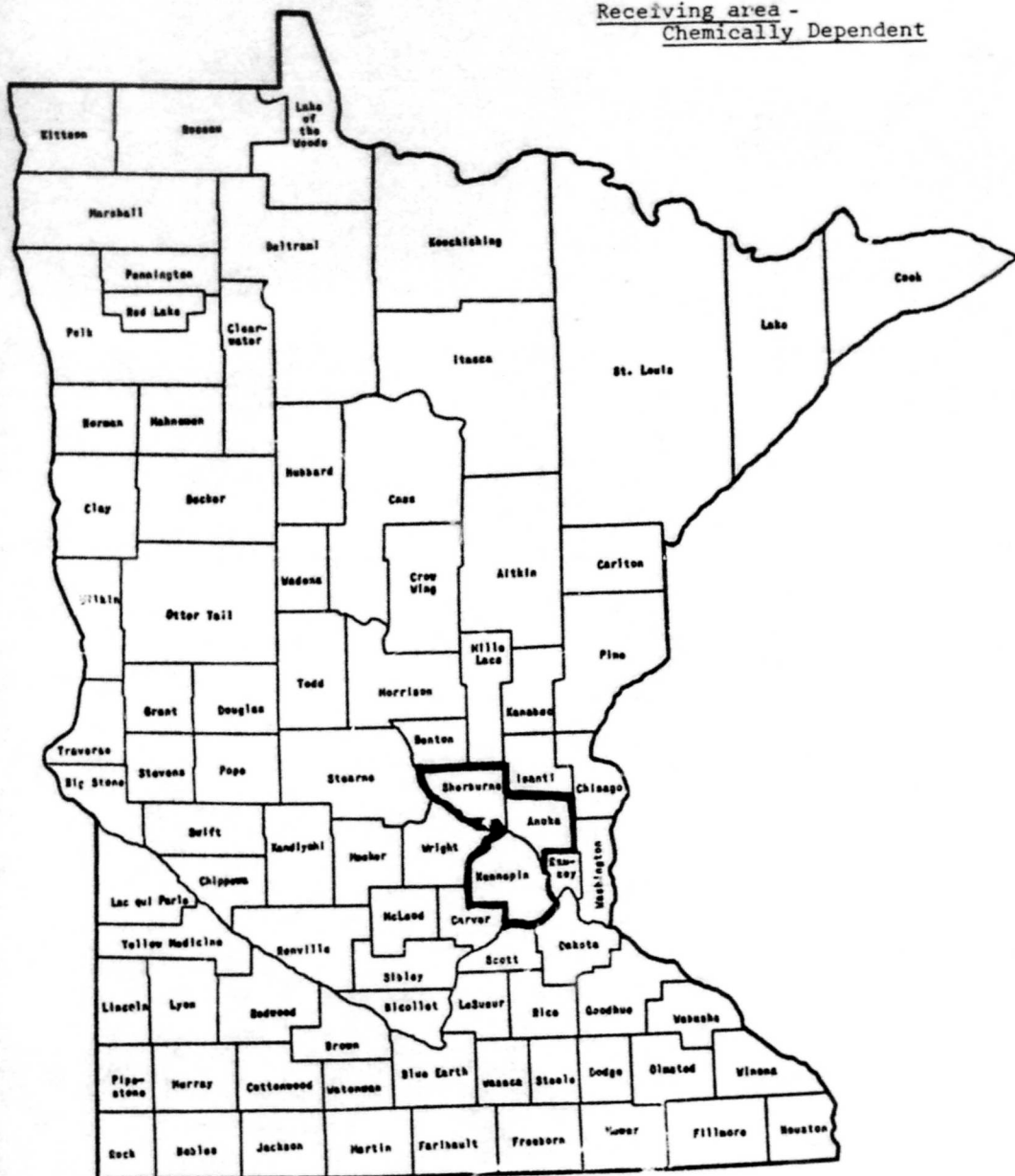
Clinics - Burns 3

The Central Medical Services Clinic expedites health care of all patients in the hospital. This clinic provides for physical examinations, special procedures, specific nursing procedures, medical and emergency needs and routine and emergency laboratory procedures.



Anoka State Hospital

Receiving area -
Chemically Dependent



Anoka State Hospital continued

STATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 364

Population, September, 1978 average - 342

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>MI</u>	<u>Fiscal Year</u>	<u>MI</u>	<u>CD</u>	<u>Total</u>
1963-64	910	1970-71	435	11	446
1964-65	840	1971-72	335	86	421
1965-66	771	1972-73	297	143	440
1966-67	675	1973-74	274	117	391
1967-68	599	1974-75	255	103	358
1968-69	563	1975-76	255	83	338
1969-70	476	1976-77	246	76	322
		1977-78	248	88	336

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>			<u>Discharges</u>		
	<u>MI</u>	<u>CD</u>	<u>Total</u>	<u>MI</u>	<u>CD</u>	<u>Total</u>
1973-74	582	949	1531	584	997	1581
1974-75	502	904	1406	505	938	1443
1975-76	534	842	1376	526	864	1390
1976-77	487	710	1197	521	698	1219
1977-78	497	686	1183	490	689	1179

EXPENDITURES

	<u>FY</u> <u>1974</u>	<u>FY</u> <u>1975</u>	<u>FY</u> <u>1976</u>	<u>FY</u> <u>1977</u>	<u>FY</u> <u>1978</u>
Salaries	\$3,812,680	\$4,237,979	\$4,775,300	\$5,054,533	\$5,736,058
Curr. Expense	512,326	599,928	612,444	795,423	741,539
Rep. & Repl.	29,245	50,170	36,371	51,275	42,958
Spec. Equip.	21,871	4,296	35,937	4,709	26,147
Total	\$4,376,122	\$4,892,373	\$5,460,052	\$5,905,045	\$6,546,702
Per Capita Costs	\$11,192.00	\$13,666.00	\$16,154.00	\$18,341.00	\$19,484.00

BRAINERD STATE HOSPITAL

HISTORY

In September, 1958, the first building on the Brainerd State Hospital campus was opened and 88 residents from a 28-county receiving area were transferred from Cambridge and Faribault State Hospitals. By 1967, the campus was completed as it stands today.

In July, 1970, the Minnesota Learning Center was established as a part of Brainerd State Hospital because of the closing of Owatonna State School by legislative action.

The establishment of programs for mentally ill and chemically dependent in January, 1971, made Brainerd the first institution to become a multi-service facility.

In 1971 also, a number of retarded residents were transferred to Fergus Falls and Moose Lake State Hospitals in a move toward regionalization and smaller receiving areas which would place residents nearer their home counties.

The goal at Brainerd is to increase self-dependence for each resident or patient in all program units. The program unit is defined as a functional grouping of residents based on some common program needs, and of such size that it can deliver individually-planned services to help the residents and patients. Individual needs are assessed on a regular basis to assure that appropriate resources are utilized to best meet these needs.

FUNCTION

Recognizing and accepting an unconditional positive regard for human life and for the dignity and worth of all individuals, whether mentally retarded, multiple handicapped, mentally ill, or subject to chemical dependency, it is the function of Brainerd State Hospital to treat and train as many as possible of the variety of our residents with the aim of returning them to their communities with ability to function better than they have in the past in a "normal" environment.

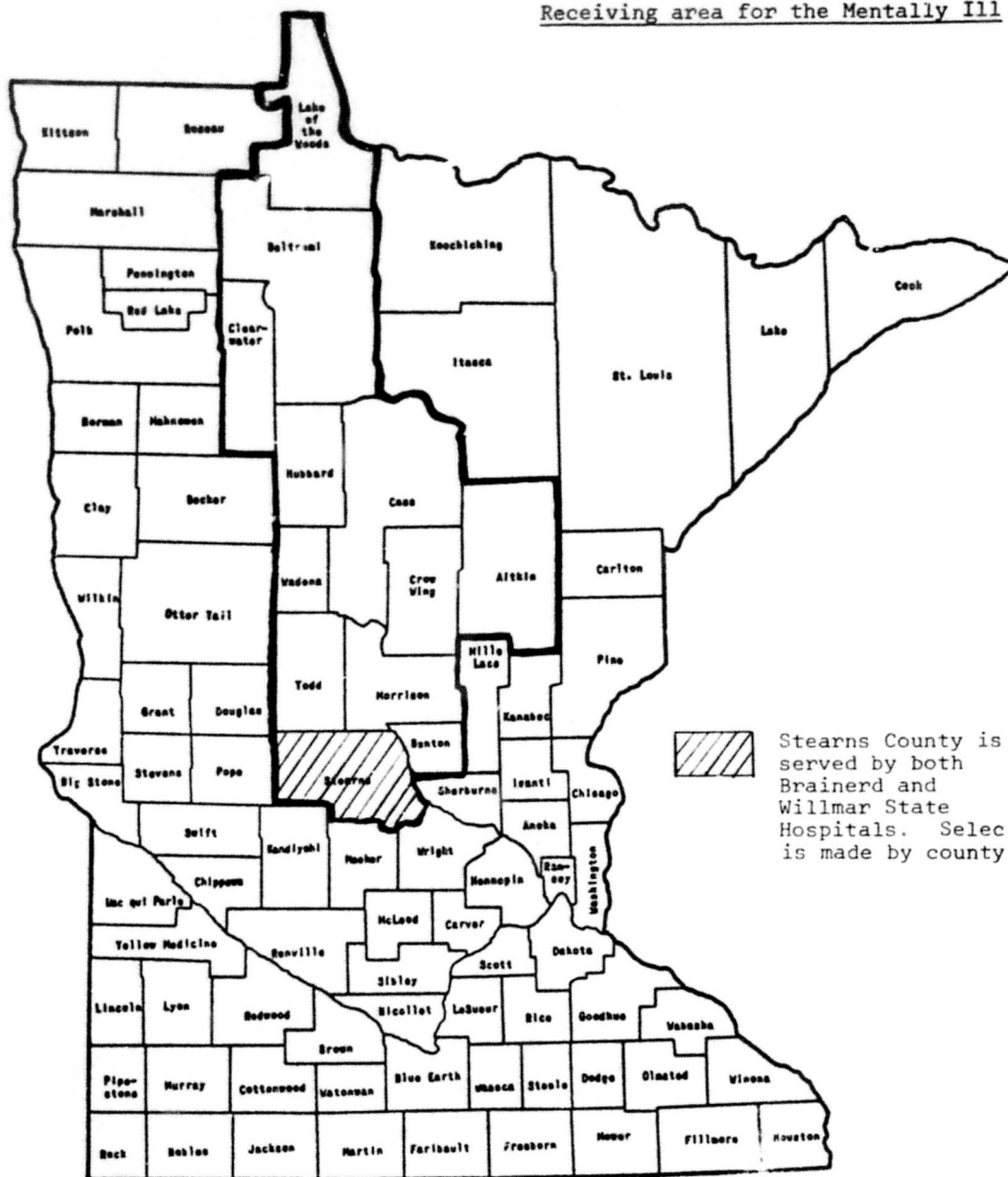
AREA SERVED

Maps of areas served are shown on the following pages.

(The Minnesota Learning Center serves the educable retarded with behavior problems from the entire state.)

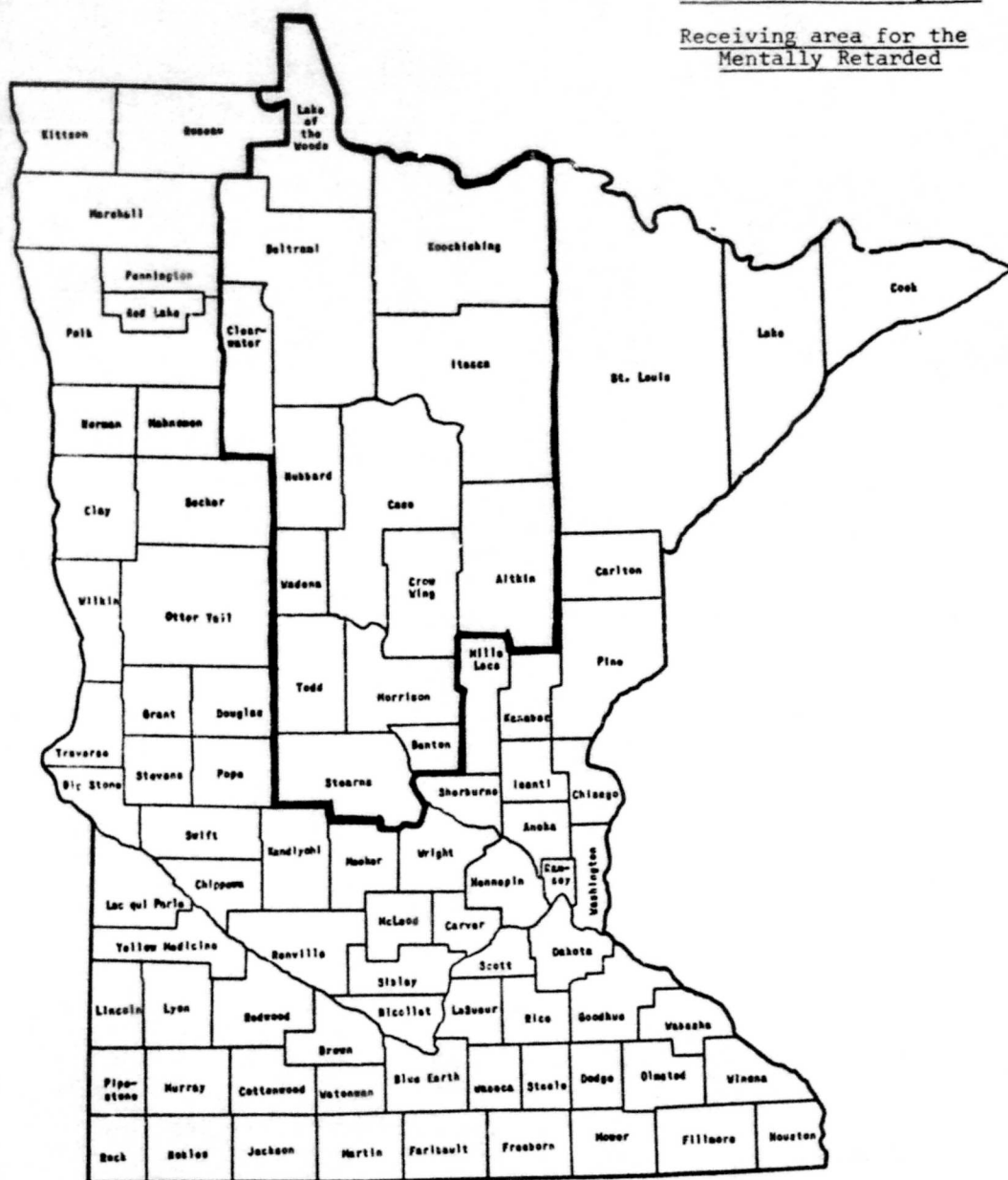
Brainerd State Hospital

Receiving area for the Mentally Ill



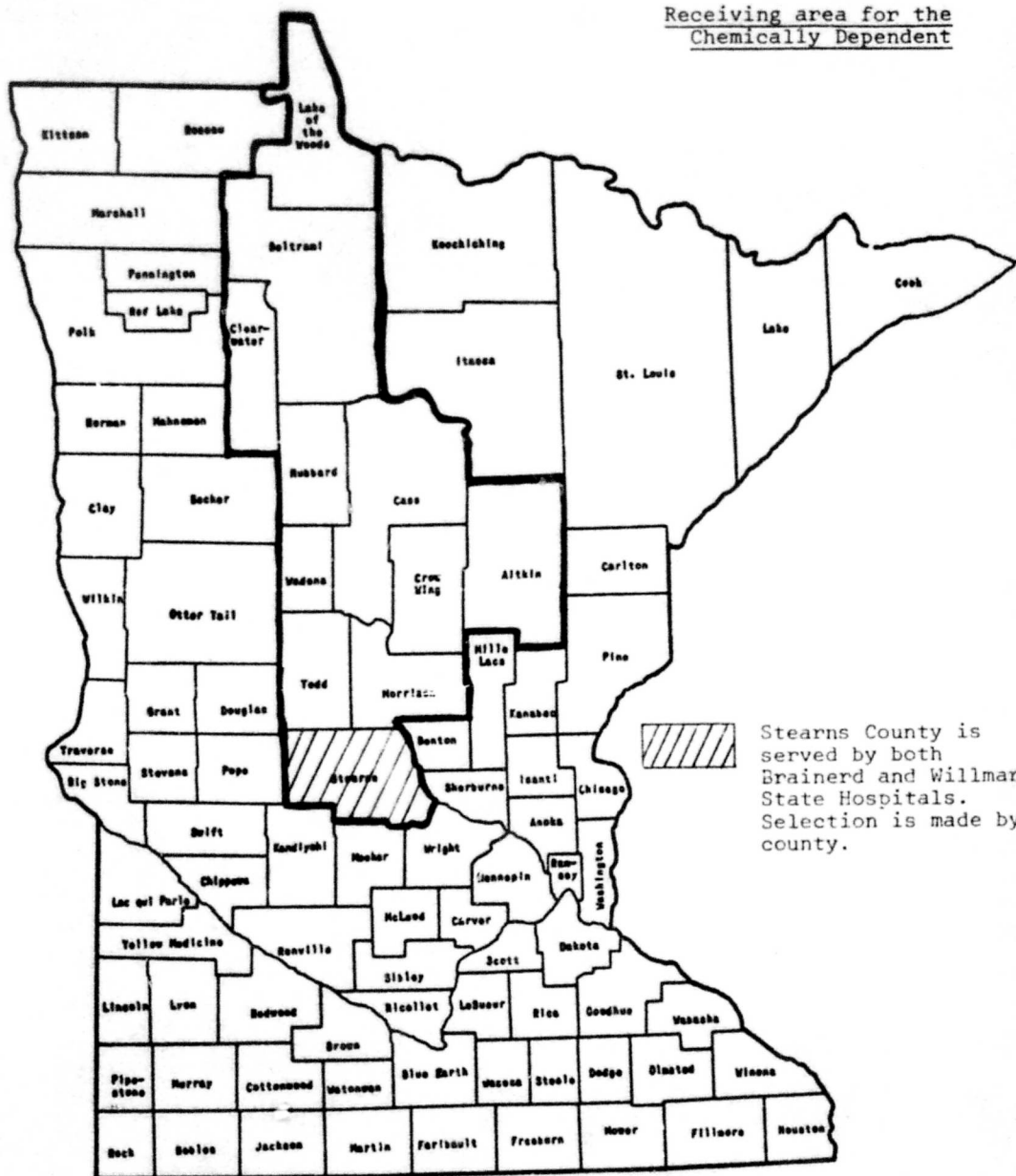
Brainerd State Hospital

Receiving area for the
Mentally Retarded



Brainerd State Hospital

Receiving area for the
Chemically Dependent



Stearns County is
served by both
Brainerd and Willmar
State Hospitals.
Selection is made by
county.

Brainerd State Hospital continuedSTATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 697

Population, September, 1978 average - 566*

*Includes Minnesota Learning Center

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>MI</u>	<u>MR*</u>	<u>CD</u>	<u>Total</u>
1963-64		906		
1964-65		945		
1965-66		1149		
1966-67		1294		
1967-68		1290		
1968-69		1246		
1969-70		1205		
1970-71	44	956	18	1018
1971-72	58	831	33	922
1972-73	61	762	35	858
1973-74	50	655	42	747
1974-75	40	589	37	666
1975-76	49	581	36	666
1976-77	58	562	42	662
1977-78	67	511	42	620

*Includes Minnesota Learning Center

ADMISSIONS AND DISCHARGES

Fiscal Year	Admissions					Discharges						
	MI	BSH	MR	MLC	CD	Total	MI	BSH	MR	MLC	CD	Total
1973-74	286	71		62	392	811	298	192		84	384	958
1974-75	254	113		92	373	832	248	120		93	379	840
1975-76	296	65		91	432	884	272	85		104	447	908
1976-77	307	29		96	537	969	315	61		85	526	987
1977-78	278	36		80	585	979	254	64		82	560	960

EXPENDITURES

	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>	<u>FY 1978</u>
Salaries	\$6,158,315	\$6,788,873	\$8,029,111	\$8,934,650	\$10,492,744
Curr. Expense	848,708	950,257	1,046,718	1,303,074	1,282,180
Rep. & Repl.	40,641	55,251	80,831	50,275	70,632
Spec. Equip.	35,229	2,807	64,441	13,029	47,912
Total	\$7,082,893	\$7,797,188	\$9,221,101	\$10,301,028	\$11,893,468
Per Capita Costs	\$9,482.00	\$11,707.00	\$13,845.00	\$15,560.00	\$19,183.00

CAMBRIDGE STATE HOSPITAL

HISTORY

Cambridge State Hospital was known as the Colony for Epileptics until 1949, at which time the State Legislature changed the name to Cambridge State School and Hospital. In 1967 the State Legislature changed the name to Cambridge State Hospital.

In 1919 the first authorization for the institution was given by the Legislature and a legislative committee was appointed to select the site for the "Colony for Epileptics". In 1923 a law was enacted authorizing the purchase of the land. The present site was purchased and construction started. The first cottage was completed on June 1, 1925, and five males with epilepsy were transferred to the institution from Faribault State Hospital. Since that time, the facility has expanded to include people who are mentally retarded and now has 13 residential buildings and 4 program buildings in addition to the Administration Building, laundry, garage, warehouse, auditorium, and power plant. In 1961, the resident population was 2,008 and was the highest on record. As of 1976, the licensed capacity is 680 beds.

The residents of this facility are people who are mentally retarded for whom no other community treatment resource is now available. These people have all degrees of mental and physical handicaps. Approximately 92% of the residents are severely or profoundly retarded and are people who are incapable of independently caring for their own needs. Many of the adult residents are admitted through a court commitment. In addition, a number of residents are here on an informal basis. No distinction is made by the treatment staff concerning services available to the individual regardless of their admission status.

The control of the Lake Owasso Children's Home was transferred from Cambridge State Hospital back to Ramsey County effective June 30, 1976.

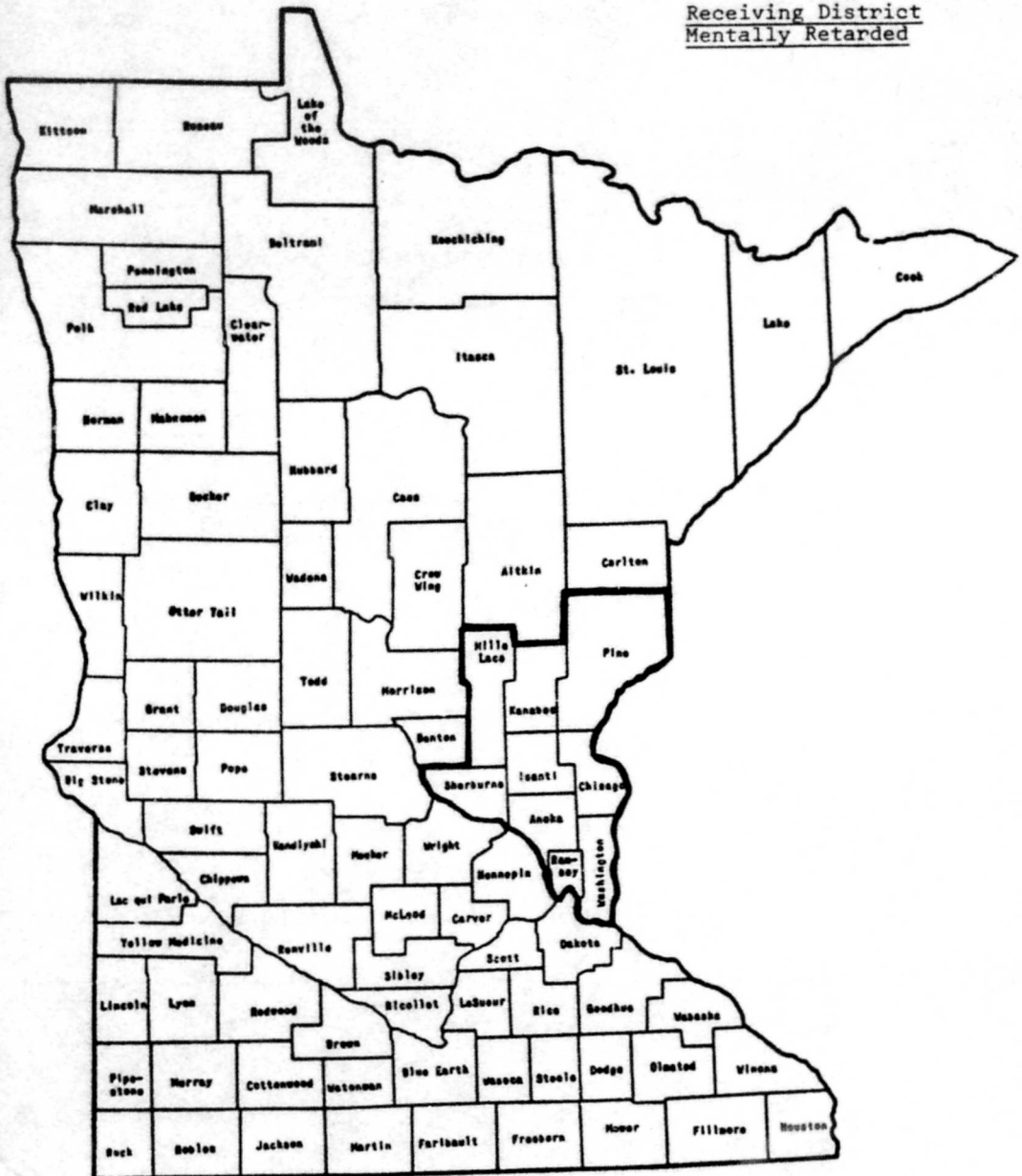
FUNCTION

The Cambridge State Hospital serves a 9-county area including Ramsey, Anoka, Washington, Sherburne, Mille Lacs, Kanabec, Isanti, Chisago, and Pine County. It provides to the region it serves a resource that addresses itself to the needs of those people who have a primary diagnosis of mental retardation and who may also be epileptic, emotionally disturbed, socially maladjusted, and physically handicapped.

There is a full renovation program in progress and by July of 1979 the institution will have a capacity of 590 beds with individual households of no more than 16 persons per household and 4 people per bedroom.

Cambridge State Hospital

Receiving District
Mentally Retarded



Cambridge State Hospital continued

STATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 704

Population, September, 1978 average - 556

AVERAGE POPULATION 15-Year Period

<u>Fiscal Year</u>	<u>Cambridge</u>	<u>Lake Owasso</u>	<u>Fiscal Year</u>	<u>Cambridge</u>	<u>Lake Owasso*</u>
1963-64	1,825	125	1970-71	1,004	90
1964-65	1,747	122	1971-72	887	77
1965-66	1,569	124	1972-73	816	73
1966-67	1,483	123	1973-74	735	75
1967-68	1,360	112	1974-75	672	70
1968-69	1,235	118	1975-76	628	61
1969-70	1,137	108	1976-77	603	--
			1977-78	576	--

*To Ramsey County by contract (6-3-76)

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>			<u>Discharges</u>		
	<u>Cambridge</u>	<u>Lake Owasso</u>	<u>Total</u>	<u>Cambridge</u>	<u>Lake Owasso</u>	<u>Total</u>
1973-74	68	6	74	138	10	148
1974-75	65	2	67	109	12	121
1975-76	49	0	49	65	65*	130
1976-77	35	-	35	56	-	56
1977-78	41	-	41	55	-	55

*To Ramsey County by contract (6-3-76)

EXPENDITURES

	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>	<u>FY 1978</u>
Salaries	\$5,933,240	\$6,689,344	\$7,595,382	\$8,574,699	\$8,982,002
Curr. Expense	801,432	944,195	1,002,481	1,116,783	1,101,912
Rep. & Repl	54,577	71,236	67,172	62,681	60,213
Spec. Equip.	25,943	34,605	29,580	36,979	30,854
Total	\$6,815,192	\$7,739,380	\$8,694,615	\$9,791,142	\$10,174,981
Per Capita Costs	\$8,414.00	\$10,430.00	\$12,619.00	\$16,237.00	\$17,665.00

FARIBAULT STATE HOSPITAL

HISTORY

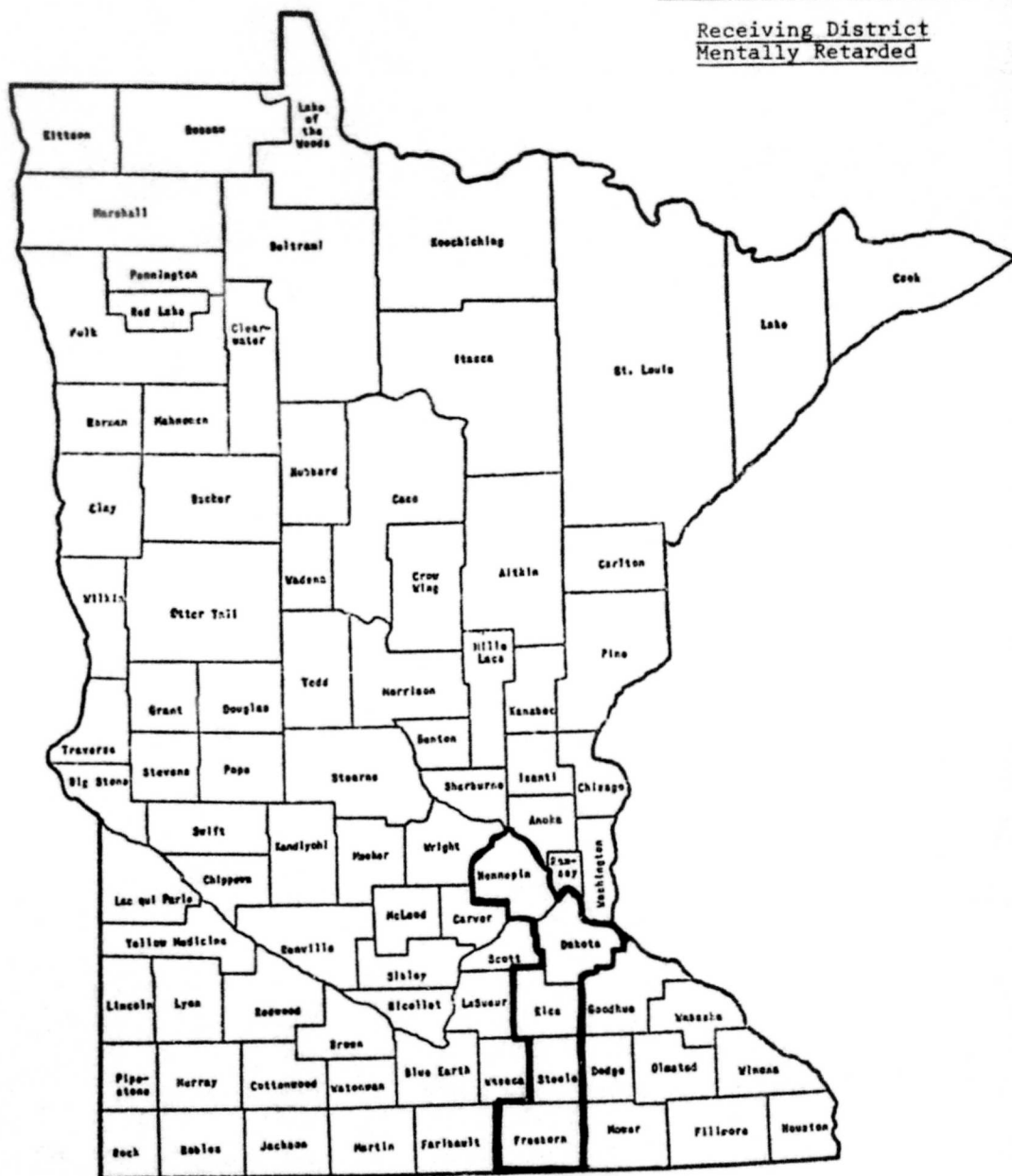
Faribault State Hospital is a public residential facility serving the mentally retarded. Established in 1881 following a two-year experimental program under the administration of the Minnesota Deaf School, it served the entire state until the mid-1950's with a peak population of 3355 in 1955. Presently, 55 percent are from Hennepin County. Its current receiving district comprises five primary counties: Hennepin, Dakota, Rice, Steele and Freeborn, but with individuals from 53 other counties still in residence.

FUNCTION

1. Serves as a regional resource center for the purpose of reducing the dependencies of mentally retarded individuals.
2. Provides care, treatment, and training in an effort to rehabilitate and return persons to as normal a life as possible.
3. Assists families to cope with the problems of mental retardation.
4. Fosters public understanding and involvement in the problems of mental retardation.
5. Promotes the development and appropriate use of a full range of community services for the mentally retarded.
6. Conducts and encourages research into the causes, prevention, and treatment of mental retardation.

Faribault State Hospital

Receiving District
Mentally Retarded



Faribault State Hospital continuedSTATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 892

Population, September, 1978 average - 842

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>		<u>Fiscal Year</u>	
1963-64	2839	1970-71	1592
1964-65	2691	1971-72	1539
1965-66	2640	1972-73	1443
1966-67	2539	1973-74	1207
1967-68	2355	1974-75	1099
1968-69	1996	1975-76	1021
1969-70	1757	1976-77	911
		1977-78	856

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>	<u>Discharges</u>
1973-74	54	220
1974-75	35	119
1975-76	41	95
1976-77	24	127
1977-78	28	53

EXPENDITURES

	<u>FY</u> <u>1974</u>	<u>FY</u> <u>1975</u>	<u>FY</u> <u>1976</u>	<u>FY</u> <u>1977</u>	<u>FY</u> <u>1978</u>
Salaries	\$8,829,632	\$9,966,554	\$11,484,347	\$12,563,166	\$13,733,263
Curr. Expense	1,288,331	1,454,971	1,616,245	1,818,172	1,698,428
Rep. & Repl.	62,732	83,277	98,775	94,799	97,565
Spec. Equip.	34,300	48,086	29,418	12,388	29,666
Total	\$10,214,995	\$11,552,888	\$13,228,785	\$14,488,525	\$15,558,922
Per Capita Costs	\$8,463.00	\$10,512.00	\$12,957.00	\$15,904.00	\$18,176.00

FERGUS FALLS STATE HOSPITAL

HISTORY

The hospital serves a 17-county area in northwestern and west central Minnesota. It is the third oldest of Minnesota's state hospitals with the first residents entering the psychiatric treatment program at the hospital in July of 1890. Since that date, the hospital has provided residential mental health services for about 50,000 citizens from northern Minnesota.

In 1969, the hospital became a multi-purpose treatment campus when, in addition to its psychiatric services, treatment programs were opened to help persons with chemical dependency problems and individuals with developmental disabilities caused by mental retardation.

All of the treatment programs at the hospital are fully accredited by the Joint Commission on Accreditation of Hospitals, a national accreditation body. The residential programs at the hospital also meet all state and federal licensure requirements. Mr. Robert F. Hoffmann, MHA, is the Chief Executive Officer for the hospital.

FUNCTION

Drug Dependency Rehabilitation Center

The Center is the hospital's largest admissions program. Its Primary, Hope, Liv, Free Way and Admissions Medical units provide individualized treatment opportunities for adolescents and adults which are designed to help each person to learn to live a healthy and rewarding life without reliance on the use of alcohol or other drugs. A Family Program offers members of the resident's family an opportunity to learn about their role in the chemical dependency treatment process during a short stay at the Center. The Center operates an Alcohol Counselor Training Program which has received scholastic accreditation. The Center's treatment programs work in close cooperation with area Alcoholics Anonymous Chapters, community chemical dependency services, and other helping persons such as area pastors.

Psychiatric Center

The Center is the second largest admissions program at the hospital. Its Psychiatric and Crisis Treatment Unit (PACT), The Cottage Unit, Psychiatric Extended Treatment Unit (PET), and Medical Rehabilitation Unit provide individualized treatment and residential care services for adolescents and adults who are suffering from emotional problems. The Center's treatment programs are designed to meet both the emotional and physical care needs of each resident in an environment which provides a maximum opportunity to learn to successfully deal with those problems in living which each person is experiencing. The Center works in close cooperation with area mental health services.

State Regional Residential Center

The Center is the hospital's largest treatment program with an average daily resident population of about 300 persons. It offers a varied and specialized program of residential care, treatment, and education services for youth and adults with developmental disabilities caused by mental retardation. The goal of the Center is to provide the opportunity for each resident to develop to the

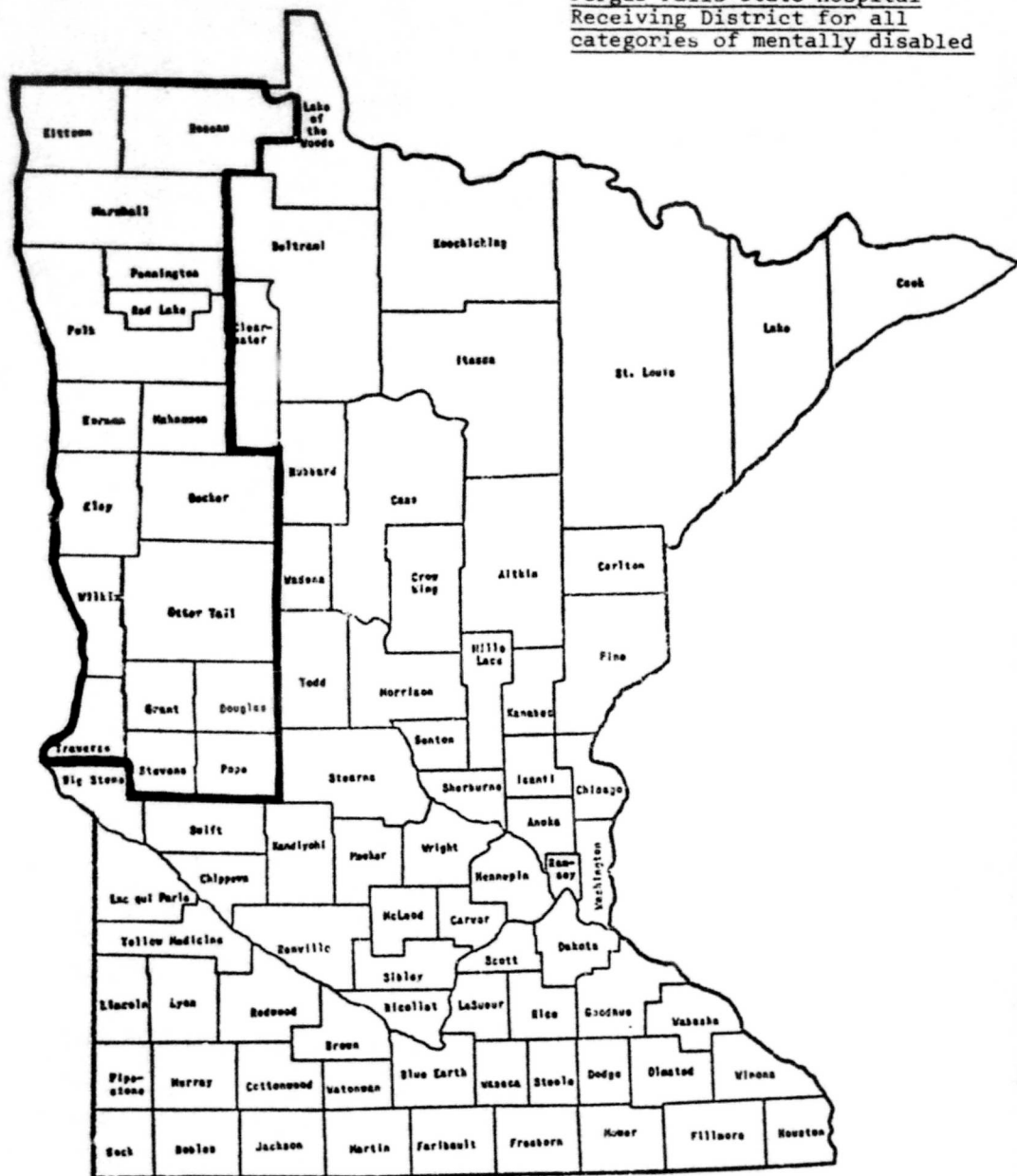
Fergus Falls State Hospital continued

maximum of their ability. The Center operates the following residential units: Youth Achievement Center, Adult Achievement Center, Community Training Achievement Center, and Achievement Center for the Physically Handicapped. The Center is currently involved in a major remodeling effort which is improving the quality of life opportunities for the residents of the Center by changing large residential units into small and more home-like living areas. The Center also operates an Adult School Program which provides students with classroom programming, Evaluation and Training Center shop facilities, and a Speech and Hearing Clinic. The Center provides the supervision for specialized Occupational Therapy and Physical Therapy clinical services for the hospital along with other specialized medical services such as neurological evaluations. The Center works in close cooperation with area programs serving mentally retarded citizens.

Community Programs Serving at Hospital

Fergus Falls School District 544 provides specialized public education services for school age residents of the hospital's State Regional Residential Center and the Free Way Unit of the Drug Dependency Rehabilitation Center. The hospital has a large Foster Grandparent Program which provides individualized services for residents of the State Regional Residential Center. The Student Live-In Program which the hospital operates in conjunction with the Fergus Falls Community College enables college students to live and work at the hospital and to learn about the hospital's programs.

Fergus Falls State Hospital
Receiving District for all
categories of mentally disabled



Fergus Falls State Hospital continued

STATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 550

Population, September, 1978 average - 550

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>MI</u>	<u>MR</u>	<u>CD</u>	<u>Total</u>
1963-64	1389			1389
1964-65	1303			1303
1965-66	1159			1159
1966-67	981			981
1967-68	777			777
1968-69	610	55		665
1969-70	431	118	45	594
1970-71	312	204	47	563
1971-72	221	291	58	570
1972-73	167	319	72	558
1973-74	141	315	72	528
1974-75	130	297	79	506
1975-76	133	294	89	516
1976-77	132	289	105	526
1977-78	131	288	128	547

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>			<u>Total</u>	<u>Discharges</u>			<u>Total</u>
	<u>MI</u>	<u>MR</u>	<u>CD</u>		<u>MI</u>	<u>MR</u>	<u>CD</u>	
1973-74	327	31	504	862	330	40	545	915
1974-75	316	26	566	908	338	39	523	900
1975-76	277	25	656	958	335	24	642	1001
1976-77	313	35	885	1233	320	35	876	1231
1977-78	390	28	925	1343	361	40	944	1345

EXPENDITURES

	<u>FY</u> <u>1974</u>	<u>FY</u> <u>1975</u>	<u>FY</u> <u>1976</u>	<u>FY</u> <u>1977</u>	<u>FY</u> <u>1978</u>
Salaries	\$4,370,824	\$5,016,902	\$5,978,760	\$6,860,166	\$8,266,533
Curr. Expense	620,644	653,073	779,261	905,885	1,072,178
Rep. & Repl.	46,955	106,143	70,015	67,219	86,860
Spec. Equip.	11,248	21,152	42,186	27,862	33,043
Total	\$5,049,671	\$5,797,270	\$6,870,222	\$7,861,132	\$9,458,614
Per Capita Costs	\$9,564.00	\$11,457.00	\$13,314.00	\$14,945.00	\$17,292.00

HASTINGS STATE HOSPITAL

HISTORY

Founded in 1900 to provide custodial care for mentally ill patients transferred from other Minnesota state hospitals, Hastings State Hospital grew in size to a peak of 1100 patients. Later, this hospital was the first to discontinue use of physical restraints, to develop geographic units, to implement regional coordination, to open regional service for drug dependency, and was in the forefront in developing partial hospitalization and adolescent treatment services.

CLOSURE ACTION

In accordance with Laws of Minnesota for 1977, Chapter 453, Section 17, Hastings State Hospital was closed on May 1, 1978. The legislative directive for closing Hastings State Hospital authorized the Commissioner of Public Welfare to transfer patients and patient records to other state hospitals or to provide for alternate care. In addition, all employees of Hastings State Hospital were offered continued employment in the Department of Public Welfare, or voluntary transfers to other state agencies, with no reduction in salary or other benefits.

Intake at Hastings State Hospital for persons with mental illness and/or chemical dependency was closed on January 15, 1978, and February 1, 1978, respectively. Rochester, Moose Lake, and Anoka State Hospitals began intake from the Hastings State Hospital catchment area on the day following the dates mentioned above.

During the period between January 1, 1978 and April 15, 1978, 117 persons in treatment at Hastings State Hospital for mental illness were relocated. Of these, 23 were discharged to their own homes or to relatives, 36 were transferred to other Department of Public Welfare institutions, and 61 were relocated to other public or private facilities. All persons in treatment for chemical dependency at Hastings State Hospital during the period between January 1, 1978 and April 14, 1978, completed their treatment programs and were discharged from the hospital.

The Department of Public Welfare is conducting a one-year follow-up study on patients and employees who were directly affected by the closure action. The purpose of the study is to determine (both positively and negatively) the impact of terminating a governmental operation the size of Hastings State Hospital. The follow-up study was begun late in March of 1978 and it is anticipated it will be completed on May 1, 1979.

Hastings State Hospital continued

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>MI</u>	<u>MR</u>	<u>CD</u>	<u>Total</u>
1963-64	676			676
1964-65	651			651
1965-66	589			589
1966-67	461			461
1967-68	349			349
1968-69	307	33	58	398
1969-70	275	44	62	381
1970-71	220	63	58	341
1971-72	168	53	61	282
1972-73	150	33	66	249
1973-74	144	51	62	257
1974-75	126	53	56	235
1975-76	103	58	54	173
1976-77	74	--	54	128
1977-78	42	--	37	79

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>			<u>Total</u>	<u>Discharges</u>			<u>Total</u>
	<u>MI</u>	<u>MR</u>	<u>CD</u>		<u>MI</u>	<u>MR</u>	<u>CD</u>	
1973-74	320	19	532	871	319	9	503	831
1974-75	311	1	502	814	324	15	524	863
1975-76	335	1	525	861	358	43*	510	911
1976-77	271	1	502	774	310	--	513	823
1977-78	136	--	297	433	171	--	343	514

EXPENDITURES

	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>	<u>FY 1978</u>
Salaries	\$2,393,334	\$2,736,190	\$2,883,033	\$2,708,621	\$2,577,772
Current Expense	384,611	448,739	423,764	401,357	331,862
Rep. & Repl.	21,674	40,225	21,066	29,667	13,340
Spec. Equip.	735	17,470	21,794	8,245	- 0 -
Total	\$2,800,354	\$3,242,624	\$3,349,657	\$3,147,890	\$2,922,974**
Per Capita Costs	\$10,896.00	\$13,798.00	\$19,362.00	\$24,593.00	\$37,000.00

*Unit Closed 1-15-76

**Reflects 10 mos. expenditures.

MOOSE LAKE STATE HOSPITAL

HISTORY

Established by an act of the Legislature in 1935, the Moose Lake State Hospital opened in May of 1938, with its first patients being transferred from other state hospitals. On August 16, 1938, the first patients were directly admitted from the Probate Courts. The late 30's and early 1940's represented a predominantly custodial mode of care. The war years were a definite handicap in the recruitment of qualified personnel and the advancement of any real program. The early 1950's saw such departments as psychology, social service, chaplaincy, rehabilitation and the like, become a definite part of the organization of this hospital.

The late 1950's and 1960's marked the greatest advancement of the hospital. The introduction of chemotherapy made a more open hospital a reality and helped eliminate restraints and the overall use of seclusion. While programs advanced, the main building complex is now 40 years old. Major changes in the physical plant affecting the overall program of the hospital were made in 1949 and 1950, with the addition of the occupational therapy building, auditorium and library and two geriatric cottages. There have been many smaller projects during this time that have greatly enhanced the overall functioning and appearance of the hospital. These projects have been: installation of kitchenettes, improving toilet facilities, showers, and overall kitchen facilities as well as the overall approach of improving the appearance of the facility in keeping with the humanistic approach.

More recently, extensive remodeling on some living units has been completed and they are in the process of completing the remaining units so that the entire hospital will meet all current regulations and provide a more normalized and modern environment.

FUNCTION

Moose Lake State Hospital is a regional center providing specialized services for the mentally ill, the chemically dependent, and the mentally retarded -- see maps for area served. Moose Lake's role as a regional treatment center is to receive patients who require treatment in a more structured, intensive setting, restore them to the appropriate level of functioning, and return them to society where they can become active members of their local community once more.

In order to accomplish this overall role that has been established for the Moose Lake State Hospital, considerable work and effort must go into establishing close working relationships and ties to the community mental health centers, the county welfare departments, and the private facilities that are found throughout our service region.

In order to carry out the overall role that has been established for the hospital, there are presently in operation programs for each disability group. The Chemical Dependency program is designed to concentrate on three categories of problems. The Acclimation Program deals with the problems related to withdrawal from long or heavy use of chemicals and provides a basis

MOOSE LAKE STATE HOSPITAL continued

for the client to gain an initial introduction to treatment. The Primary Treatment Program is intensive and short-term, with the overall goal of helping the client deal with all chemicals in a responsible manner. The Long-Term Program is designed to help the individual who has had repeated failures or needs habilitation or rehabilitation in order to lead a more satisfactory life.

Treatment of mental illness also has three distinctive programs. The Admission Program provides an initial assessment and evaluation, treats the acute but generally short-term emotional disorders. The Life Adjustment Center Program is designed to help individuals with chronic emotional disorders and those who may lack basic skills for leading a normal life in society. The program for the Geriatric is especially developed for those persons who have problems unique to the age group of 65 years of age and older.

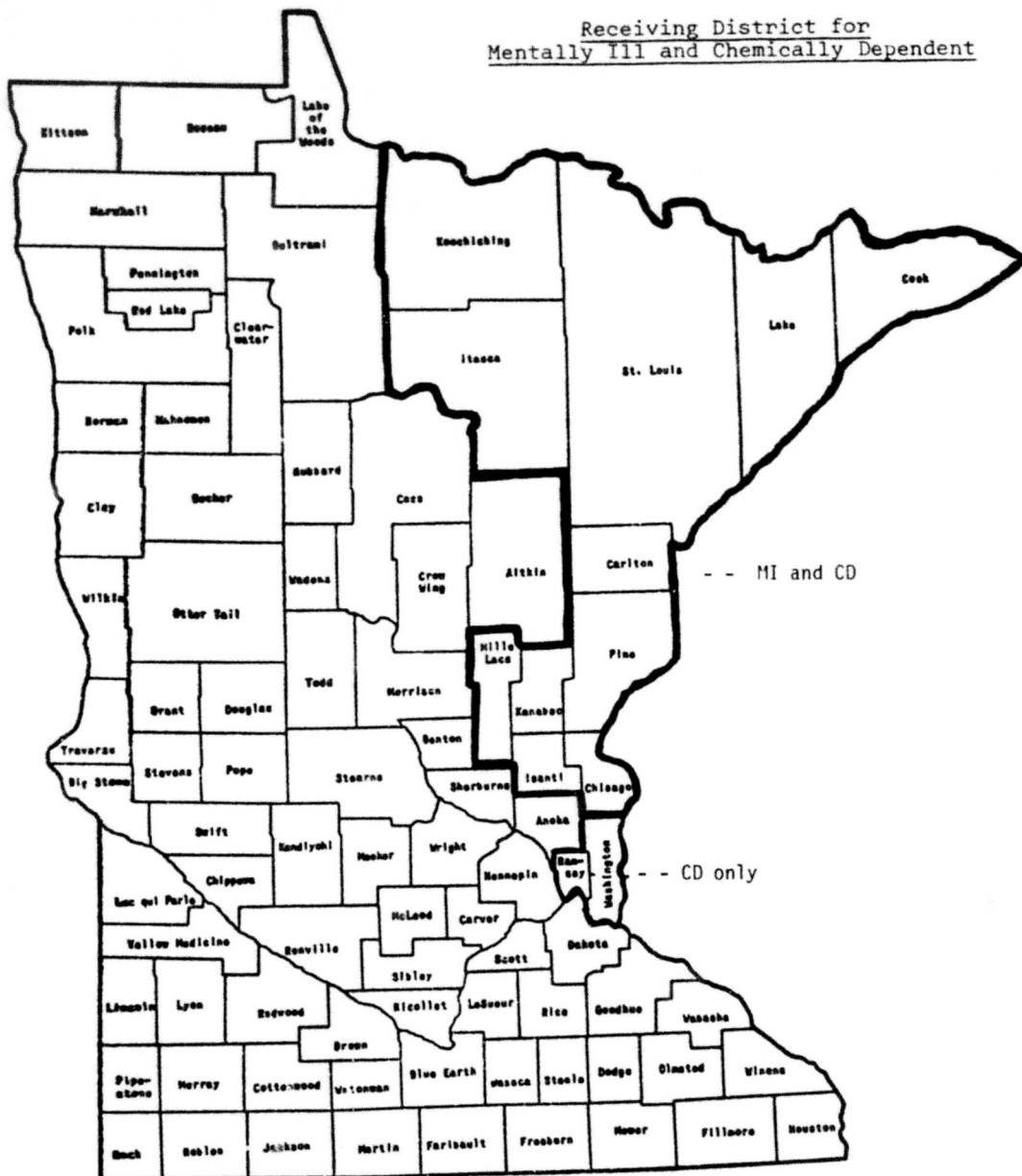
The Mental Retardation Program utilizes a wide array of program techniques directed toward carrying out an individualized program plan that has been developed for each resident. This program is developed for individuals who are 18 and older. The overall goal is to provide the most normalized environment possible with an emphasis on providing a broad range of learning experiences. Living units are organized into apartments and the individuals in each apartment are usually within the same level of functioning. The intent of this program is to help each person reach an optimum level of functioning and be able to progress to the least structured environment possible.

The hospital provides a wide range of programs and service. These services include medical, dental, psychological, social service, occupational, physical, recreational and industrial therapy, education and vocational programs, chaplaincy, volunteer, laboratory service, x-ray, pharmacy, housekeeping, dietary, public information, maintenance repair, as well as business and medical record maintenance, at an all-inclusive per diem rate.

Basic to the philosophy in operation of Moose Lake State Hospital, has been the feeling that if programs are to be therapeutic and beneficial, they must be geared to a strong foundation of treatment on the living unit closely linked to the overall services provided in the rest of the hospital. The entire hospital complex serves as the treatment facility, and every attempt has been made to keep the physical plant as current and up-to-date as possible. Coupled with this is the firm belief that to be effective, constant evaluation and consideration should be given to the proper utilization of living quarters and floor space in order to guarantee the most effective and efficient operation possible.

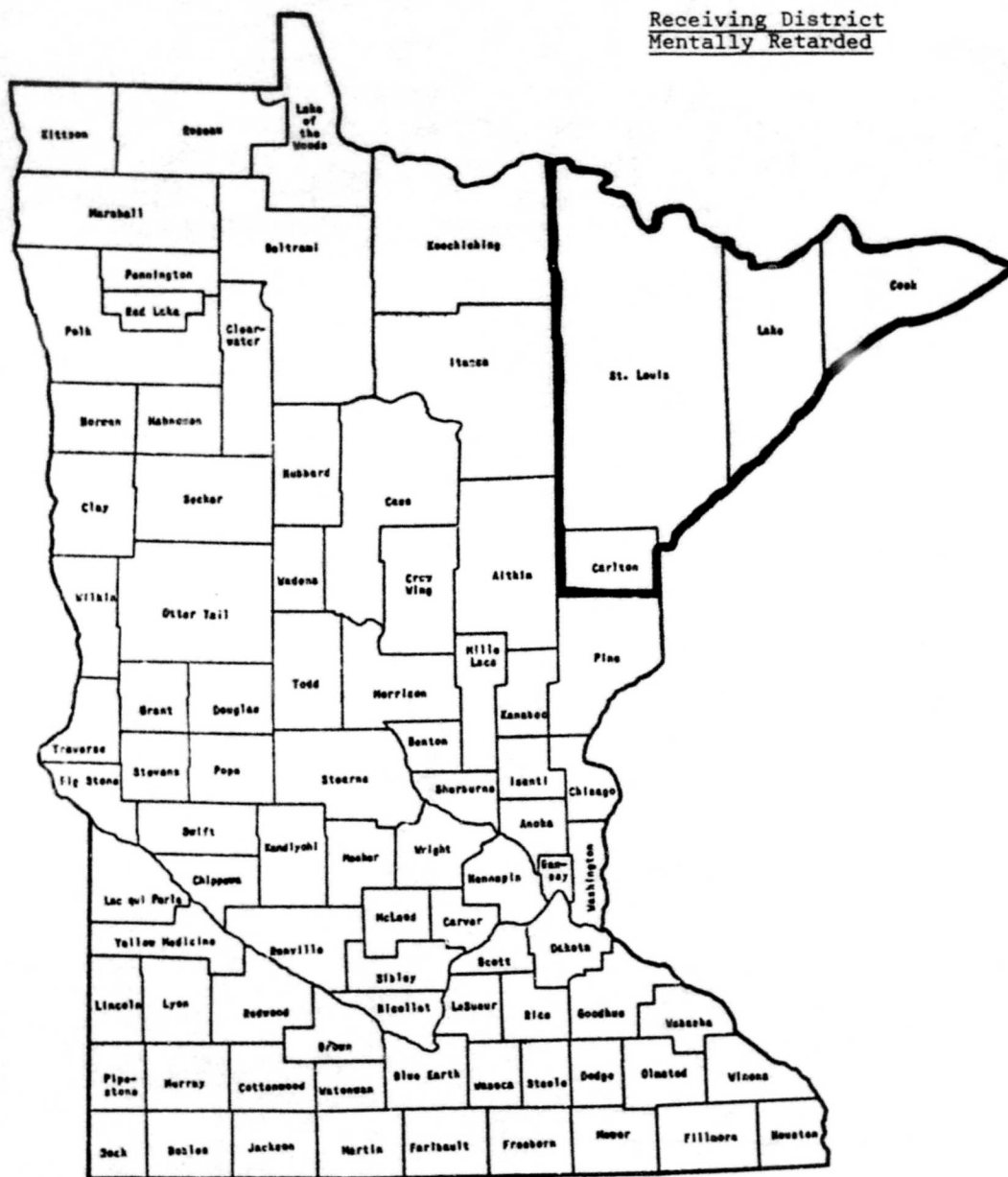
Moose Lake State Hospital

Receiving District for
Mentally Ill and Chemically Dependent



Moose Lake State Hospital

Receiving District
Mentally Retarded



Moose Lake State Hospital continued

STATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 480

Population, September, 1978 average - 472

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>MI</u>	<u>MR</u>	<u>CD</u>	<u>Total</u>
1963-64	847		60	907
1964-65	825		53	878
1965-66	799		59	858
1966-67	782		56	838
1967-68	717		59	776
1968-69	598		61	659
1969-70	541	26	64	631
1970-71	404	51	76	531
1971-72	297	62	87	446
1972-73	265	68	87	420
1973-74	226	123	84	433
1974-75	191	158	81	430
1975-76	184	146	127	457
1976-77	179	148	138	465
1977-78	155	143	158	456

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>				<u>Discharges</u>			
	<u>MI</u>	<u>MR</u>	<u>CD</u>	<u>Total</u>	<u>MI</u>	<u>MR</u>	<u>CD</u>	<u>Total</u>
1973-74	331	118	564	1013	342	16	579	937
1974-75	313	39	589	941	336	53	575	934
1975-76	316	18	1225	1559	286	17	1164	1467
1976-77	349	5	1219	1573	341	18	1245	1604
1977-78	274	7	1495	1776	266	18	1474	1758

EXPENDITURES

	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>	<u>FY 1978</u>
Salaries	\$3,519,089	\$4,305,324	\$5,013,493	\$6,085,741	\$7,139,403
Curr. Expense	538,409	609,459	784,110	878,788	913,919
Rep. & Repl.	50,549	28,448	61,063	44,585	60,346
Spec. Equip.	20,248	5,875	23,606	25,493	30,289
Total	\$4,128,295	\$4,949,106	\$5,882,272	\$7,034,607	\$8,143,957
Per Capita Costs	\$9,534.00	\$11,510.00	\$12,871.00	\$15,128.00	\$17,860.00

OAK TERRACE NURSING HOME

HISTORY

Glen Lake State Sanatorium and Oak Terrace Nursing Home were created by the State Legislature in 1961.

Appropriate State officials were authorized to lease the Glen Lake Sanatorium facilities from Hennepin County for a period of thirty-five years, beginning January 1, 1962.

The Minnesota State Tuberculosis Sanatorium program at Ah-Gwah-Ching (Walker, Minnesota) was merged with the Hennepin County tuberculosis program at Glen Lake.

An initial amount of \$400,000 was appropriated for remodeling, repair and building rehabilitation.

Glen Lake State Sanatorium provided statewide services for inpatient tuberculosis care until Spring, 1976, when its patient census reached zero because the responsibility for tuberculosis care had been transferred to general hospitals and outpatient clinics.

Since then, the tuberculosis care program of Glen Lake State Sanatorium has been discontinued, awaiting repeal of statutory provisions relating to it.

The 1965 State Legislature authorized the renovation of the Sanatorium's Children's Building #6 for use as a training and rehabilitation center for retarded adolescents under the sponsorship of the Public School Districts of the Twin Cities Metropolitan area.

The Cooperative School Rehabilitation Center was established in temporary quarters (West Cottage) on July 1, 1965. The first students were enrolled in September. Building renovation was completed in January, 1966, allowing the project to move into its permanent facilities. The Center provided relatively long-term personal social development and vocational training aimed at preparing seriously retarded young people for employment and other adult roles and responsibilities.

Approximately 100 students were enrolled in the Center during the school year 1966-67. There were about 350 students in the school in each subsequent year until the school term ending June, 1978. In addition, Building #7 was used as a headquarters and library for special teachers of students with hearing and vision problems. In August, 1978, the three buildings used by the school (#6, #7 and #16) were vacated and the program was moved to other locations.

In March, 1977, the Superintendent's Residence was leased to Alano as a counseling center for alcoholics and their families.

Also in March, 1977, the Nurses' Residence was leased to Nexus, Incorporated, a rehabilitative program for released felons.

OAK TERRACE NURSING HOME continued

FUNCTION

The medical care program of Oak Terrace Nursing Home (350 beds) is designed to provide skilled nursing care for geriatric patients who are discharged provisionally for this purpose from the State mental hospitals and from the institutions for the retarded. A significant number of young and middle-aged adults from the community are admitted for physical rehabilitation services, reality orientation, and remotivation.

The program makes use of the resources of the State Department of Public Welfare and also works with other community agencies. The Hennepin County Welfare Department has assigned one of its employees to the program, who acts as a liaison between the Nursing Home and other counties.

Geriatric patients requiring surgical or medical care which cannot be provided by the Oak Terrace medical staff may be transferred to Hennepin County Medical Center on a temporary basis. Geriatric patients who improve to the point where they no longer require maximum nursing care may be discharged to boarding or nursing homes in the community.

Oak Terrace Nursing Home is accredited for long-term care by the Joint Commission on Accreditation of Hospitals. It is also certified as a provider of extended care services under Medicare (Titles XVIII and XIX), and licensed by the Minnesota State Department of Health.

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Oak Terrace Nursing Home continued

STATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 306

Population, September, 1978 average - 334

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>Sanatorium</u>	<u>Nursing Home</u>	<u>Total</u>
1963-64	97	253	350
1964-65	79	287	366
1965-66	57	294	351
1966-67	47	303	350
1967-68	51	301	352
1968-69	51	317	368
1969-70	37	321	358
1970-71	35	320	355
1971-72	30	322	352
1972-73	22	325	347
1973-74	18	322	340
1974-75	12	321	333
1975-76	2	331	333
1976-77	-	339	339
1977-78	-	336	336

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>			<u>Discharges (incl. deaths)</u>		
	<u>Sanatorium</u>	<u>Nursing Home</u>	<u>Total</u>	<u>Sanatorium</u>	<u>Nursing Home</u>	<u>Total</u>
1973-74	45	51	96	49	54	152
1974-75	27	64	91	41	56	97
1975-76	5	39	44	10	40	50
1976-77	-	40	40	-	32	32
1977-78	-	36	36	-	48	48

EXPENDITURES

	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>	<u>FY 1978</u>
Salaries	\$2,723,556	\$3,078,974	\$3,672,326	\$3,944,039	\$4,271,421
Curr. Expense	439,077	516,093	589,099	649,493	679,046
Rep. & Repl.	37,258	34,794	49,789	32,736	35,288
Spec. Equip.	31,536	- 0 -	21,339	6,439	26,408
Total	\$3,231,427	\$3,629,861	\$4,332,553	\$4,632,707	\$5,012,163

Per Capita Costs (Daily basis)

TB	\$63.56	\$78.92	\$78.92	--	--
Nursing Home	\$21.97	\$25.41	\$34.00	\$37.44	\$40.87

ROCHESTER STATE HOSPITAL

HISTORY

The Rochester State Hospital was authorized for construction in 1876. It was to be an asylum for inebriates, financed by liquor license fees. After three years of overwhelming opposition to the law by saloonkeepers and others, the asylum was never opened. In 1879, with an operating farm and a vacant patient admission building, the asylum was designated as the Second Hospital for the Insane.

The original hospital building lay in an east-to-west direction where the Religious Activity Center is now located. Additions to the original building and other buildings were constructed as the demands for space grew with the rising patient population.

A self-contained and self-providing hospital for many years, little was offered to the patients except care, custody and work. Attendants lived in the hospital and supervised the patients at work. Economically, costs of operation were very low. A peak population of 1,800 patients was reached in 1954.

In 1949 an ambitious hospital reconstruction program was launched. Ten new buildings were constructed including seven patient buildings, a service building, power plant and slaughter house. Eleven staff residences and a 25-stall garage were constructed for employees. The building program was stopped in 1961 because of the decline in patient population.

Farm land and buildings no longer needed by the hospital have been reassigned to other state departments such as the Department of Natural Resources and Rochester Community College. Land that is not being farmed has been declared surplus and either sold or given for other public uses such as parks, playgrounds and construction of schools.

FUNCTION

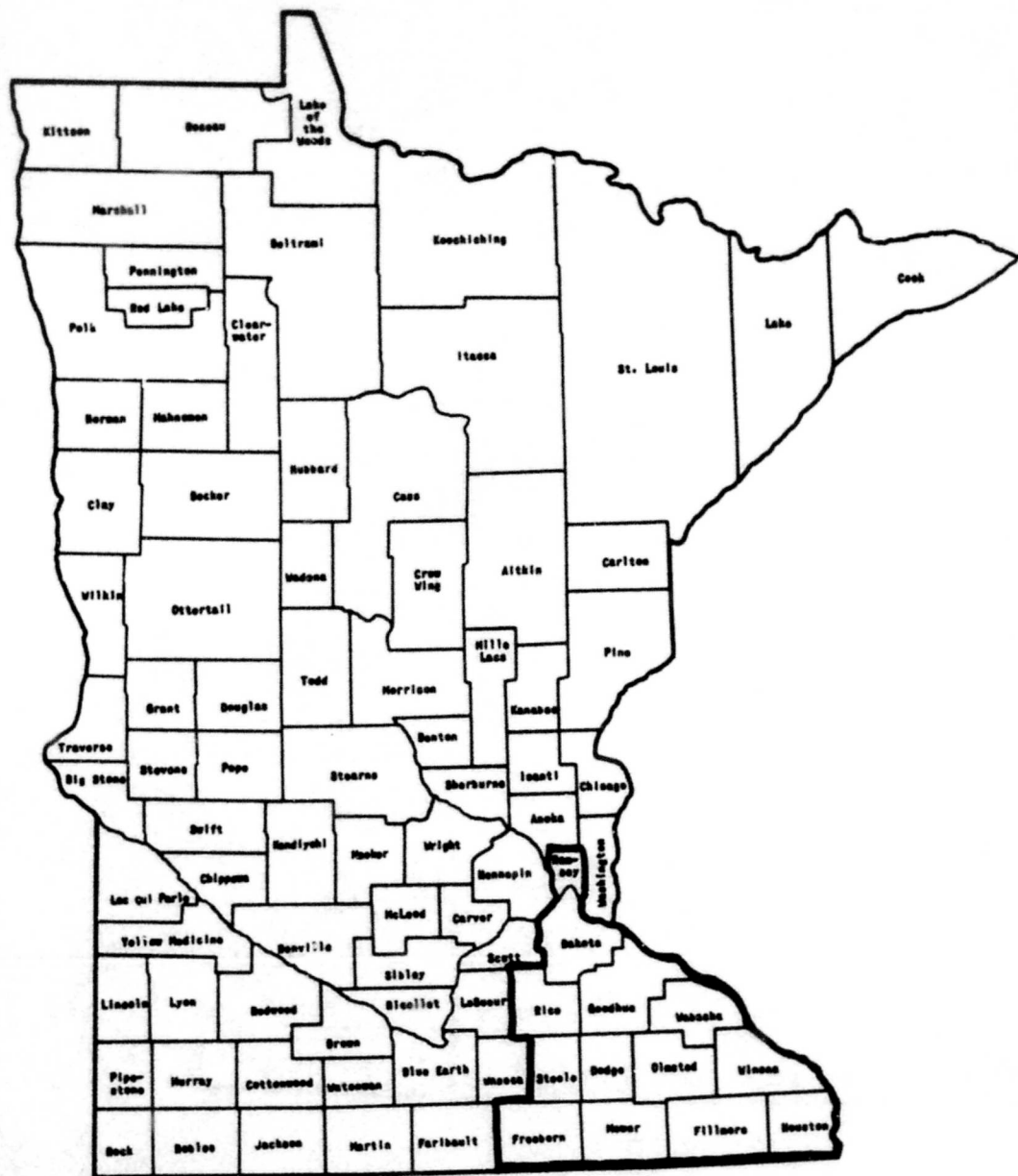
The hospital has developed into a multi-purpose health service agency serving the twelve counties of southeastern Minnesota. Programs are offered to the mentally ill, adolescent, chemically dependent, medically indigent and the mentally retarded. In addition, this hospital serves as the state-wide surgical center in cooperation with the Mayo Clinic, offering all types of surgical care except open heart and organ transplant.

Current programs foster the utilization of community resources to augment the hospital-based services. Coordination of these programs and resources is vital to effective treatment programs.

This hospital continues to provide services to the population of the southeastern region of Minnesota. Present buildings are being updated to meet the demand for programs. Systems are being replaced and/or updated to meet current state health and Fire Marshal regulations as well as federal regulations.

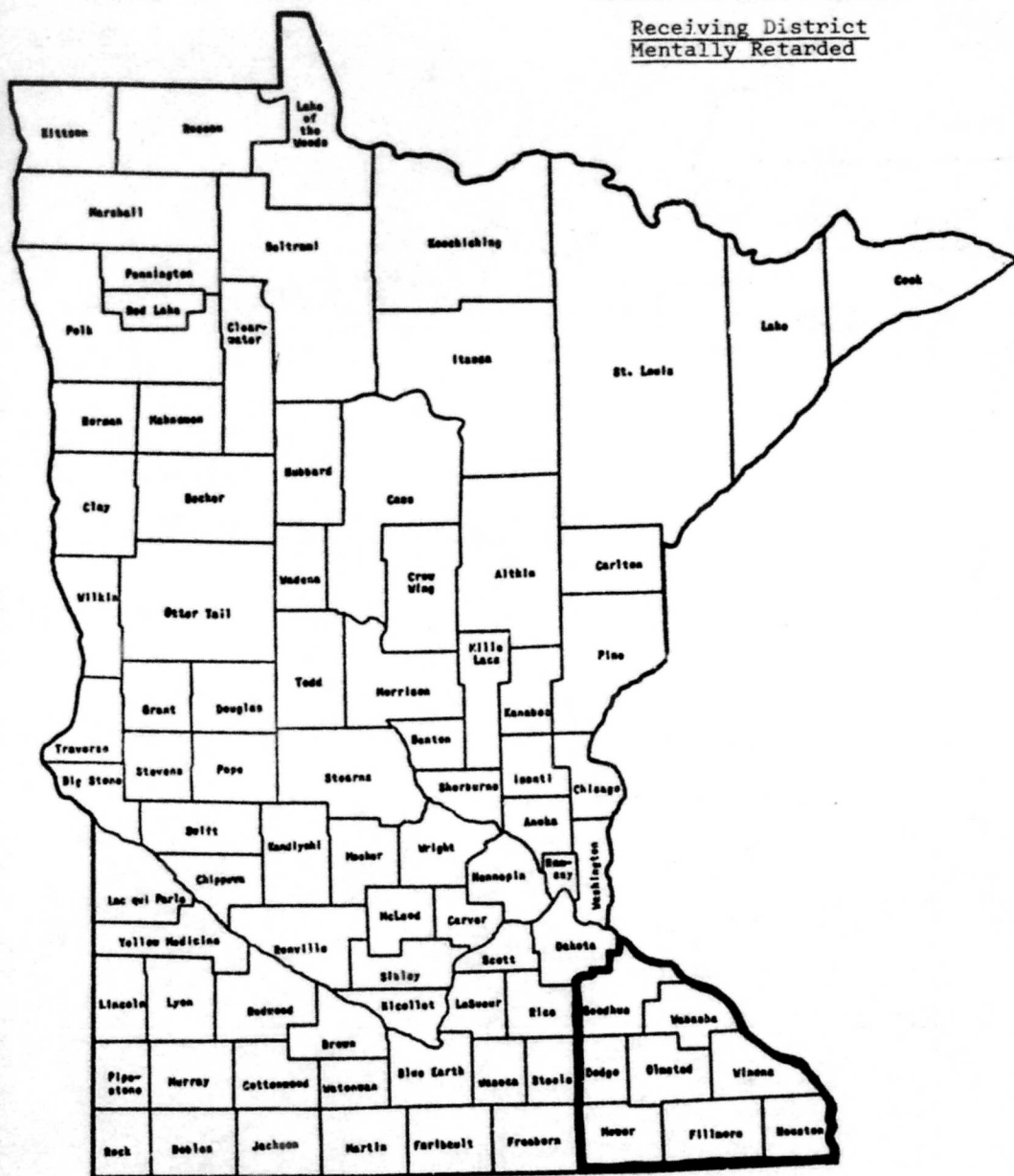
Rochester State Hospital

Receiving District for Mentally
Ill and Chemically Dependent



Rochester State Hospital

Receiving District
Mentally Retarded



Rochester State Hospital continued

STATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 537

Population, September, 1978 average - 458

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>MI</u>	<u>MR</u>	<u>CD</u>	<u>Total</u>
1963-64	1095			1095
1964-65	920			920
1965-66	736			736
1966-67	649			649
1967-68	640			640
1968-69	648	12		660
1969-70	662	14		676
1970-71	603	78		681
1971-72	573	93		666
1972-73	482	133		615
1973-74	451	179		630
1974-75	360	173	36	569
1975-76	308	166	32	506
1976-77	300	160	32	492
1977-78	267	151	38	456

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>			<u>Total</u>	<u>Discharges</u>			<u>Total</u>
	<u>MI</u>	<u>MR</u>	<u>CD</u>		<u>MI</u>	<u>MR</u>	<u>CD</u>	
1973-74	887	17		904	902	5		907
1974-75	655	5	361	1021	669	12	347	1028
1975-76	722	0	415	1201	725	12	411	1173
1976-77	796	18	405	1219	823	18	428	1269
1977-78	761	21	485	1267	753	26	474	1253

EXPENDITURES

	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>	<u>FY 1978</u>
Salaries	\$5,267,446	\$6,141,291	\$6,244,504	\$7,535,401	\$8,322,883
Curr. Expense	878,551	1,049,601	1,037,354	1,065,571	1,094,500
Rep. & Repl.	59,729	84,408	63,872	91,457	72,139
Spec. Equip.	91,524	15,599	79,543	6,041	63,881
Total	\$6,297,250	\$7,290,899	\$7,425,273	\$8,698,470	\$9,553,403
Per Capita Costs	\$9,980.00	\$12,814.00	\$14,674.00	\$17,680.00	\$20,950.00

ST. PETER STATE HOSPITAL

HISTORY

The St. Peter State Hospital was opened in 1866. It was the first institution for the mentally ill in the State of Minnesota.

It has at various times received patients from all the counties in Minnesota.

Until 1911, there was no other institution on the campus at St. Peter. In that year, Minnesota Security Hospital was established to house mentally ill and dangerous men.

In 1967, the Legislature directed that a unit for the mentally retarded be established at St. Peter. Minnesota Valley Social Adaptation Center came into existence in August, 1968.

A Chemical dependency Unit was established at St. Peter State Hospital in 1970.

FUNCTION

There are several processes through which individuals are admitted to this hospital. They may be legally committed to the hospital by a county court; they may voluntarily seek hospitalization by requesting admission; they may be transferred from other hospitals throughout the State of Minnesota; or an individual who has the legal authority, such as a general guardian, may request admission for the person for whom he/she is guardian.

Treatment planning begins with an individual's assignment to a treatment plan for an assessment and evaluation of his problems and strengths by medical, psychiatric, psychological, nursing, social and rehabilitative services.

A written individual treatment plan outlining problems, strengths, goals and plan of problem-solving services to achieve goals is created by the team with the patient at the inception of treatment. The anticipated period of hospitalization is also included in plan. Reassessments are made with the patient and the plan of treatment is modified as indicated by progress.

When goals established for discharge are attained, a pre-discharge meeting is held with the patient's family and community agencies as appropriate.

The hospital has five separate units. Shantz Unit, Community North Unit, and Community South Unit have a general psychiatric population up to 110 patients. These are heterogenous geographic units, catchment area based. Patients are assigned to subunits along a continuum from intensive need to little or no need for structured psychiatric intervention and/or supervision. The Pexton Unit provides a special group care program for up to 66 older persons with both mental and physical problems and minimal self-care abilities. A structured program combination of training in self-care and simple activities is used to improve mental and physical health and increase socialization. Results effected in this unit, with patients who have not responded to other programs, are impressive.

ST. PETER STATE HOSPITAL continued

The Johnson Chemical Dependency Unit has a capacity of 58 beds and offers three programs. A short 28-day cycle schedule of lectures and group sessions with emphasis on the Alcoholic Anonymous Program, and an extended care program for chronic recidivists. This program offers a special rehabilitation program. The third program works with discharged patients through aftercare and follow-up.

MINNESOTA SECURITY HOSPITAL

The Minnesota Security Hospital was first opened for use in 1911, charged by the Legislature with detention of men who were "dangerously and criminally insane". In the past, the primary purpose of the institution was to offer custodial care within a security setting.

It was not until 1963 that a professional staff was appointed to work exclusively at Minnesota Security Hospital. Since 1963 there has been an evolving increase in the capability of the professional and technical staff.

With this increase in capability and credibility in the eyes of the courts and other state institutions, we have seen a dramatic increase in the number of admissions to the Minnesota Security Hospital, for evaluations only, and for both evaluation and treatment.

The Sex Offender Treatment program at Minnesota Security Hospital (one of the few such programs in the United States) is being used by the courts with increasing frequency for pre-sentencing examinations, as well as for treatment.

The Sex Offender Treatment program is a long-term program (anticipated lengths of stay from three to seven years) and has contributed in part to an increase in census to the point where the institution is now crowded well beyond its licensed capacity.

In addition, the courts are also sending an increasing number of persons to Minnesota Security Hospital under Rule 20 of the Minnesota Rules of Criminal Procedure, in those instances where the court decides that security is required during the period of examination to determine competency. Consequently the population of the hospital has experienced a tremendous increase and overcrowding has been a problem during the past year necessitating expansion to a "satellite" unit on the second floor of Shantz Hall - a building usually utilized by St. Peter State Hospital.

The 1978 Legislature appropriated \$8.7 million to construct a new 165 bed unit, excluding the sex offender program which will probably continue as a separate unit. Thus, plans are in process for the construction of a new facility with completion date expected in late 1980. The new facility will be located on top of the hill near the hospital's park area. Plans for the old building have not been finalized although housing of patients is not expected due to the condition of the building and lack of meeting fire safety codes.

In summary, Minnesota Security accepts on a state-wide basis, men whose mental, emotional and behavioral problems require a secure setting while examination and/or treatment takes place.

MINNESOTA VALLEY SOCIAL ADAPTATION CENTER

PHILOSOPHY

The Minnesota Valley Social Adaptation Center is a state-operated facility serving the needs of mentally retarded citizens in South-Central Minnesota. The Center, one of nine such facilities in Minnesota, specifically serves the counties of Waseca, Watonwan, Blue Earth, Nicollet, Martin, Faribault, Brown, Sibley, LeSueur, Scott, and Carver, and is located in St. Peter, Minnesota.

The chief function of the Social Adaptation Center is to provide a total living situation that offers opportunities for individual development in ways that will add a dimension of independence to the daily living of the residents. By the use of total resources and talents, the Center strives toward the goal of reducing dependencies. Minnesota Valley provides a developmental continuum of training that will lead to adaptation, thus allowing each resident the chance to enhance his/her life through a process that includes normalization and provides a consistent, meaningful rhythm of life. Additionally, the esteem a resident attaches to him/herself is basic to the welfare of that individual; consequently, it is necessary to make every attempt to work with the self-image and self-concepts of each resident.

Beginning with a realistic and professional diagnosis an individual program plan evolves which is also an evaluation and re-evaluation tool. Each resident's abilities and needs are assessed. A training program is designed for each resident that provides them meaningful, normal, and worthwhile experiences that are relevant and allow for daily success. Further, the entire staff continually re-evaluates its goals and directs their objectives toward becoming more aware of the needs of the residents and developing more effective methods to provide meaningful services.

The staff at the Center understand that to bring a resident to increased independence can only be accomplished by totally centering all services in a creative and cooperative manner around the residents. Parents and/or concerned others are partners with the staff in the habilitation and care provided.

To accomplish these goals, the Center is organized into four different services: Residential Living, Health, Structured Program, and Community Services. Each service provides a needs assessment, a comprehensive developmental program and ongoing progress evaluations for every resident in the Center on an annual basis. It is the responsibility of each Service to assure that every resident is provided an individual program plan that will meet his/her needs.

MISSION

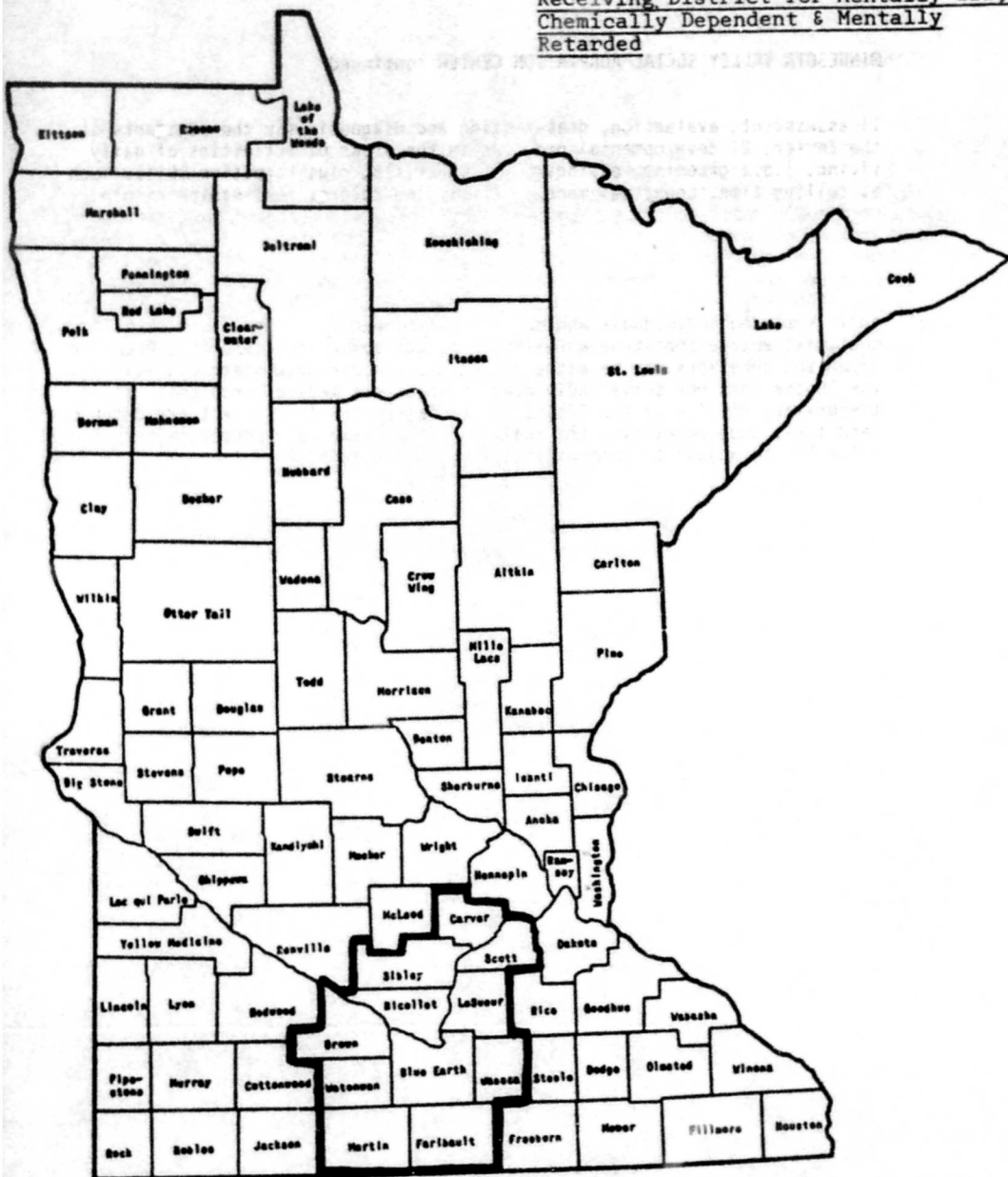
The mission of the Minnesota Valley Social Adaptation Center is to provide developmental, social adaptation, residential and health services to mild, moderate, severe and profoundly mentally retarded citizens of all ages. As a resource for Region IX, Carver and Scott counties, the Center provides:

MINNESOTA VALLEY SOCIAL ADAPTATION CENTER continued

1) assessment, evaluation, goal-setting and diagnosis for the residents at the Center; 2) developmental programs in the areas of activities of daily living, i.e., grooming, eating, dressing skills, plus cognitive skills such as telling time, counting money, identifying colors, and reading simple words; 3) vocational programs to prepare residents for sheltered work, work activities, and competitive employment; 4) parental relief programs, providing temporary care (usually two days to two weeks) for parents of retarded citizens who are living at home. The Center can both programmatically and residentially serve up to 230 residents at any time. These persons are mentally retarded individuals who demonstrate a need for specialized programming that will enable them to eventually return to community living. Identified dependent behaviors may be either behavioral and/or developmental; however, the Center does not serve individuals with severe medical problems. It is the primary mission of the Social Adaptation Center to reduce these dependent behaviors, thus developing the individual to a level of independence that will allow him to adjust to community living in some form.

St. Peter State Hospital

Receiving District for Mentally Ill,
Chemically Dependent & Mentally
Retarded



The Minnesota Security Hospital located on the St. Peter State Hospital campus serves adult males with problems warranting a secure treatment setting from all counties in the state.

St. Peter State Hospital continuedSTATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 633

Population, September, 1978 average - 559

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>MI</u>	<u>CD</u>	<u>Total SPSH</u>	<u>MSH</u>	<u>MVSAC</u>	<u>Campus Total</u>
1963-64	1588		1588	201		1789
1964-65	1398		1398	186		1584
1965-66	1235		1235	150		1385
1966-67	1044		1044	143		1187
1967-68	688		688	138		826
1968-69	376		376	144	163	683
1969-70	295		295	142	339	776
1970-71	279	28	307	131	374	809
1971-72	256	34	290	114	371	775
1972-73	226	35	261	107	353	721
1973-74	207	38	245	106	319	670
1974-75	176	34	210	108	291	609
1975-76	158	31	189	108	278	585
1976-77	157	40	197	139	237	573
1977-78	150	42	192	167	208	567

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>					<u>Discharges</u>				
	<u>MI</u>	<u>CD</u>	<u>MSH</u>	<u>MVSAC</u>	<u>Total</u>	<u>MI</u>	<u>CD</u>	<u>MSH</u>	<u>MVSAC</u>	<u>Total</u>
1973-74	165	366	145	18	694	170	364	150	82	766
1974-75	186	353	179	54	772	200	362	163	54	779
1975-76	159	308	175	21	663	153	301	164	45	663
1976-77	160	400	130	20	710	209	398	59	55	721
1977-78	150	373	169	17	705	131	375	115	42	663

EXPENDITURES

	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>	<u>FY 1978</u>
<u>SPSH-MVSAC</u>					
Salaries	\$4,821,520	\$5,325,176	\$6,030,404	\$6,912,006	\$7,566,651
Curr. Expense	779,214	843,187	961,226	1,073,884	1,055,955
Rep. & Repl.	59,910	74,164	69,675	91,460	82,924
Spec. Equip.	21,225	15,435	27,720	32,681	53,245
<u>MSH</u>					
Salaries	\$1,105,058	\$1,208,870	\$1,415,673	\$1,304,862	\$2,214,879
Curr. Expense				10,573	16,178
Spec. Equip.	- 0 -	- 0 -	6,222	3,757	30,042
Total	\$6,786,927	\$7,466,832	\$8,510,920	\$9,429,223	\$11,019,874
Per Capita Costs	\$10,130.00	\$12,261.00	\$14,549.00	\$16,456.00	\$19,435.00

WILLMAR STATE HOSPITAL

HISTORY

The Willmar State Hospital was established in 1907 for the care and treatment of the alcoholic patient. The first alcoholic patient was received in the hospital in 1912. By 1917 the program at Willmar was expanded to include the treatment of mentally ill patients transferred to the Willmar State Hospital from other state institutions. In 1951 the hospital was assigned a receiving district for referral of mentally ill patients from the 17 southwestern counties of the state. The hospital continues to receive and treat mentally ill patients from the same 17-county area, plus three additional counties. Major treatment programs now include mental illness, chemical dependency, adolescent mentally ill, and mental retardation. Each of the hospital's four programs is accredited by the Joint Commission on Accreditation of Hospitals and licensed by the State of Minnesota. Community involvement, in addition to residential treatment programs, includes sponsorship or participation in training programs for clinical chaplains, licensed practical nurses, and occupational therapists. The mission or role of the hospital has, since its inception, been characterized by slow evolution reflecting the needs and impressions of the contemporary society as reflected by legislative action.

FUNCTION

The following services are provided residents of Willmar State Hospital:

General Psychiatric Care and Treatment

Four area mental health-mental retardation programs (Mental Health Centers) at Luverne, Marshall, Willmar, and St. Cloud are located in the hospital's receiving district. Patients in the hospital are assigned into a geographic model of clinical care in separate units identified for each of the four area programs. A total psychiatric treatment program is offered to all patients including diagnosis and clinical care, social service, psychological service, chaplaincy services, and other therapies as indicated. It is expected that all patients admitted to the hospital will return to their home communities within a relatively short period of time. Care and treatment is provided in an open setting employing as many of the current treatment techniques as are feasible. Admission to the hospital is by personal application, by referral from a physician or agency, or by a probate court action.

Chemical Dependency Program (Alcoholic and Addictive Personalities)

This program consists of approximately 120 hospital beds. The treatment program is organized using trained counselors on alcoholism, the mainstay in group and individual therapy. Treatment consists primarily of lectures and group and individual counseling.

The entire alcohol program is A.A. oriented, but at the same time, a multi-disciplined effort is made to treat each patient as an individual in terms of his or her needs at the hospital, post-treatment planning, and length of hospitalization.

WILLMAR STATE HOSPITAL continued

Adolescent Treatment Program

The Adolescent Treatment Unit is a specialized psychiatric program at the Willmar State Hospital for the residential treatment of emotionally disturbed adolescents between the ages of 12 and 17. This unit has an assigned bed capacity of 50 beds and the program is designed specifically for the adolescent who needs a unique combination of group living experiences and an individual therapy program within a structured environment. The unit also includes a self-contained special education program as well as an educational program providing attendance at community schools where feasible. Adolescents are admitted directly to the unit following a referral from community agencies and a preadmission interview with the unit staff.

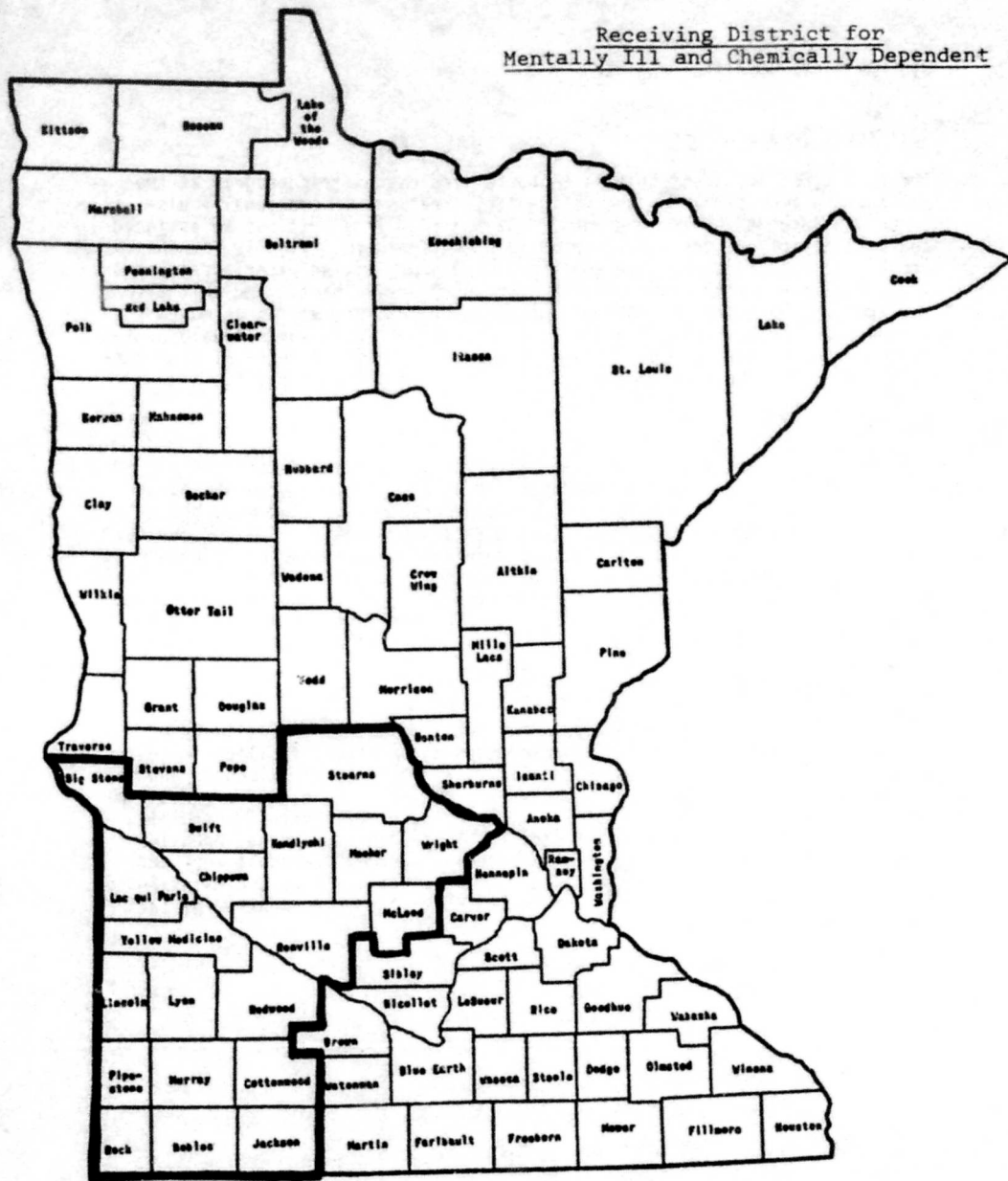
Medical

This service takes care of the diagnostic studies and short-term therapy of elderly patients from the Willmar State Hospital receiving area who have been unable to adjust to nursing or convalescent homes or who need short-term intensive medical care to prepare them for return to their families or other placement. This program also provides services for the chemically dependent patient needing medical care. Medical service is also provided for the long-term patients who are housed on the geographic units. Consultant physician service is also provided for the physical problems found on all hospital units. Dental service is also provided by a resident dentist.

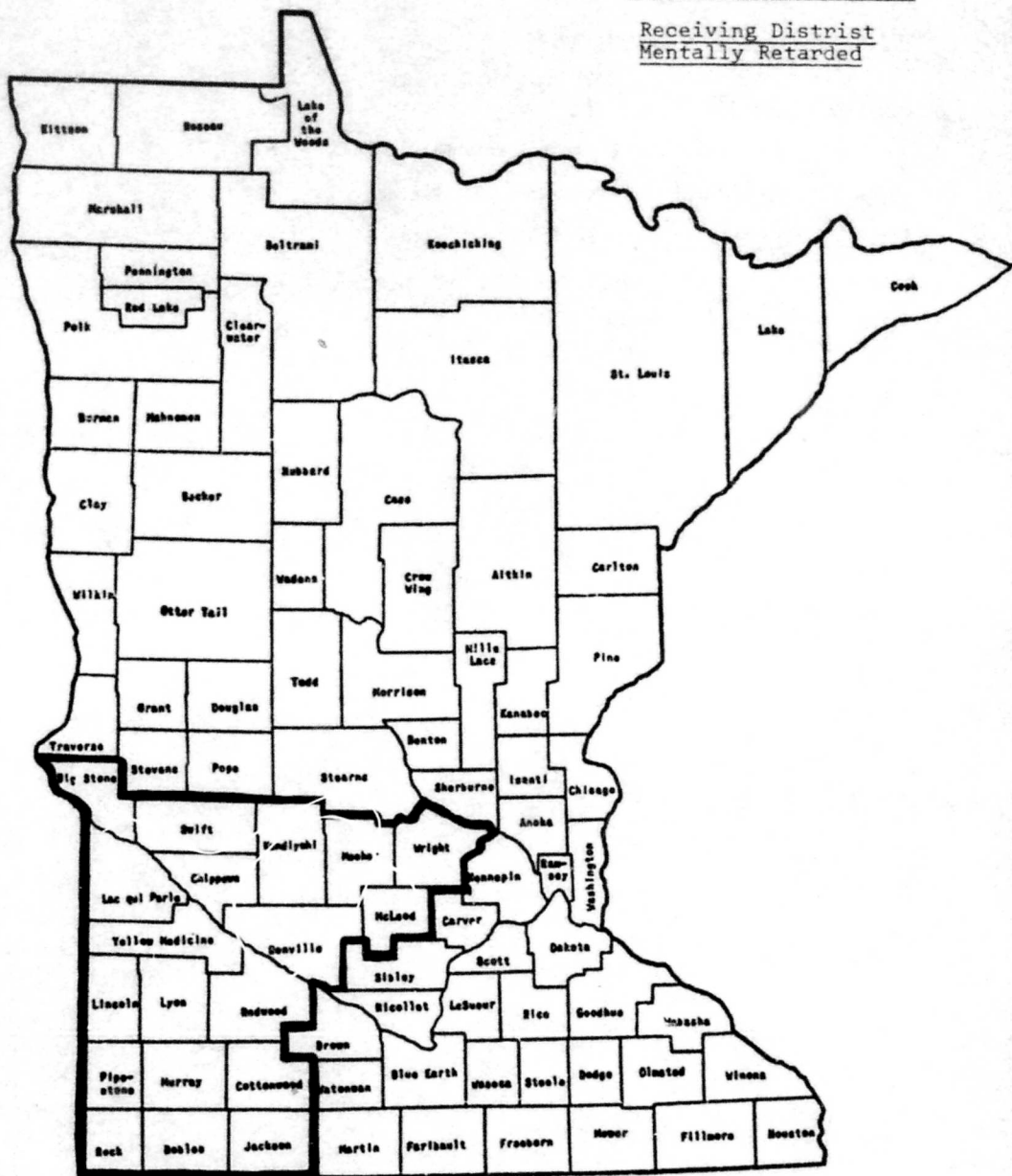
Mental Retardation

The Glacial Ridge Training Center is the focal point for the delivery of essential services to mentally retarded persons and their families in southwestern Minnesota. The Center's facilities and program are licensed and meet all existing standards of care. Services provided include, but are not limited to, short- and long-term residency, parental relief, intensive training programs on an intervention basis (toileting, feeding, dressing, behavior control, etc.), family education, TMR school programs, and adult work activities. The residential portion of the program has 178 beds and maintains a fixed number of vacant beds for crisis and short-term placements from the southwestern communities.

Receiving District for
Mentally Ill and Chemically Dependent



Receiving Distrist
Mentally Retarded



Willmar State Hospital continuedSTATISTICAL AND FINANCIAL DATA

Approved complement, September 1, 1978 - 597

Population, September, 1978 average - 594

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>	<u>MI</u>	<u>MR</u>	<u>CD</u>	<u>Total</u>
1963-64	566		227	793
1964-65	548		221	769
1965-66	566		225	791
1966-67	558		234	792
1967-68	542		224	766
1968-69	458		217	675
1969-70	401		214	615
1970-71	375		206	581
1971-72	358		183	541
1972-73	367	12	155	534
1973-74	351	142	114	607
1974-75	330	139	129	598
1975-76	328	161	111	601
1976-77	336	175	100	611
1977-78	316	162	105	583

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>			<u>Total</u>	<u>Discharges</u>			<u>Total</u>
	<u>MI</u>	<u>MR</u>	<u>CD</u>		<u>MI</u>	<u>MR</u>	<u>CD</u>	
1973-74	469	169	949	1587	443	45	947	1435
1974-75	399	50	798	1247	415	55	851	1321
1975-76	460	54	887	1401	411	22	845	1278
1976-77	395	50	936	1381	439	61	973	1473
1977-78	347	32	902	1281	349	41	900	1290

EXPENDITURES

	<u>FY</u> <u>1974</u>	<u>FY</u> <u>1975</u>	<u>FY</u> <u>1976</u>	<u>FY</u> <u>1977</u>	<u>FY</u> <u>1978</u>
Salaries	\$4,530,971	\$5,525,857	\$6,508,880	\$7,684,591	\$9,057,479
Curr. Expense	633,071	736,999	808,556	924,190	957,896
Rep. & Repl.	46,439	44,026	46,278	56,229	57,437
Spec. Equip.	37,913	11,083	48,085	14,838	47,554
Total	\$5,248,394	\$6,317,965	\$7,411,799	\$8,679,848	\$10,120,366
Per Capita Costs	\$8,661.00	\$10,565.00	\$12,332.00	\$14,206.00	\$17,359.00

BRAILLE AND SIGHT SAVING SCHOOL

HISTORY

The Braille and Sight Saving School was established in 1866. Since its inception, the School (formerly known as the School for the Blind), has enrolled approximately 1600 students.

In 1907, summer sessions for visually handicapped adults were established. These were held continuously until 1965, with the exception of 1962. More than 800 adults have attended these sessions. These summer sessions have now been discontinued. The summer of 1973 marked the first program on the Minnesota Braille and Sight Saving School campus for visually handicapped children who attend public schools. Thirty-three students attended and over fifty applied to participate. In addition, the University of Minnesota taught courses in the Education of the Visually Handicapped on the Minnesota Braille and Sight Saving school campus.

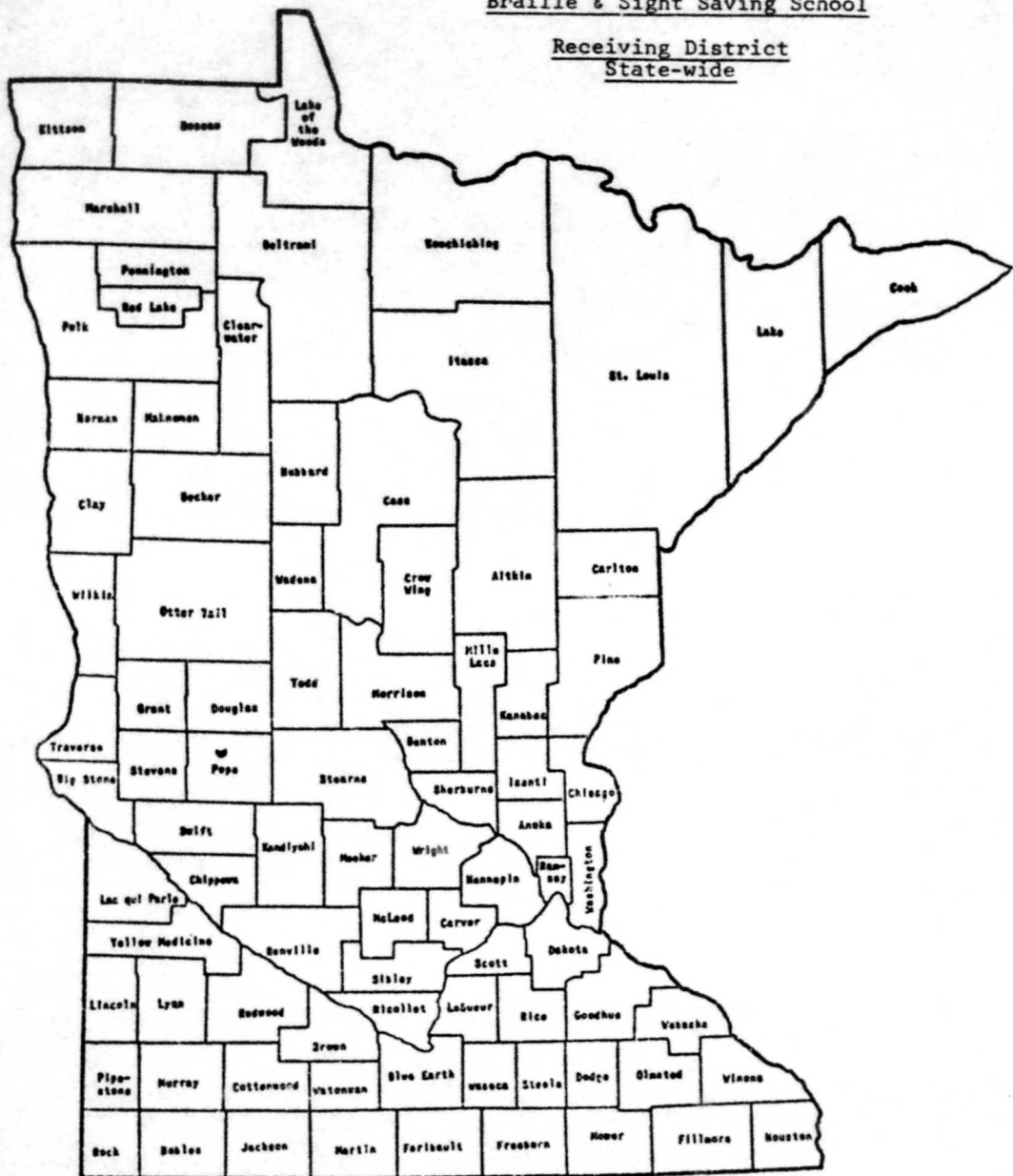
In 1931, a tri-state library was established on this campus to serve visually handicapped readers from North and South Dakota and Minnesota. The library ceased serving South and North Dakota in 1970 and 1973 respectively. The library has expanded services to include physically handicapped readers and now serves 7420 readers.

The Braille and Sight Saving School was originally established as the Department for the Blind and the Deaf in 1866 and remained so until 1874. At this time, authorities sought a new location for the blind since problems had long existed in the operation of a dual school. By 1879, the two departments had been completely separated. Several states have since followed Minnesota's lead in this respect and one as recently as 1973.

Effective July 1, 1977, the responsibility for the operation of this school was transferred to the Department of Education.

Braille & Sight Saving School

Receiving District
State-wide



Braille & Sight Saving School continued

Effective July 1, 1977, the responsibility for the operation of this school was transferred to the Department of Education.

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>		<u>Fiscal Year</u>	
1962-63	87	1969-70	74
1963-64	87	1970-71	73
1964-65	88	1971-72	77
1965-66	86	1972-73	69
1966-67	100	1973-74	68
1967-68	98	1974-75	61
1968-69	89	1975-76	58
		1976-77	56

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>	<u>Discharges</u>
1972-73	10	5
1973-74	13	14
1974-75	9	16
1975-76	6	13
1976-77	7	12

It must be remembered that fiscal years and school years do not coincide.

EXPENDITURES

	<u>FY</u> <u>1974</u>	<u>FY</u> <u>1975</u>	<u>FY</u> <u>1976</u>	<u>FY</u> <u>1977</u>
Salaries	\$ 677,708	\$ 833,408	\$ 909,150	\$ 931,252
Current Expense	46,564	48,109	65,335	67,011
Rep. & Replacements	8,010	14,263	14,034	11,688
Special Equipment	11,499	- 0 -	15,999	398
Total	\$ 743,781	\$ 895,780	\$1,004,518	\$1,010,349
Per Capita Costs	\$10,938.00	\$14,685.00	\$17,319.00	\$18,042.00

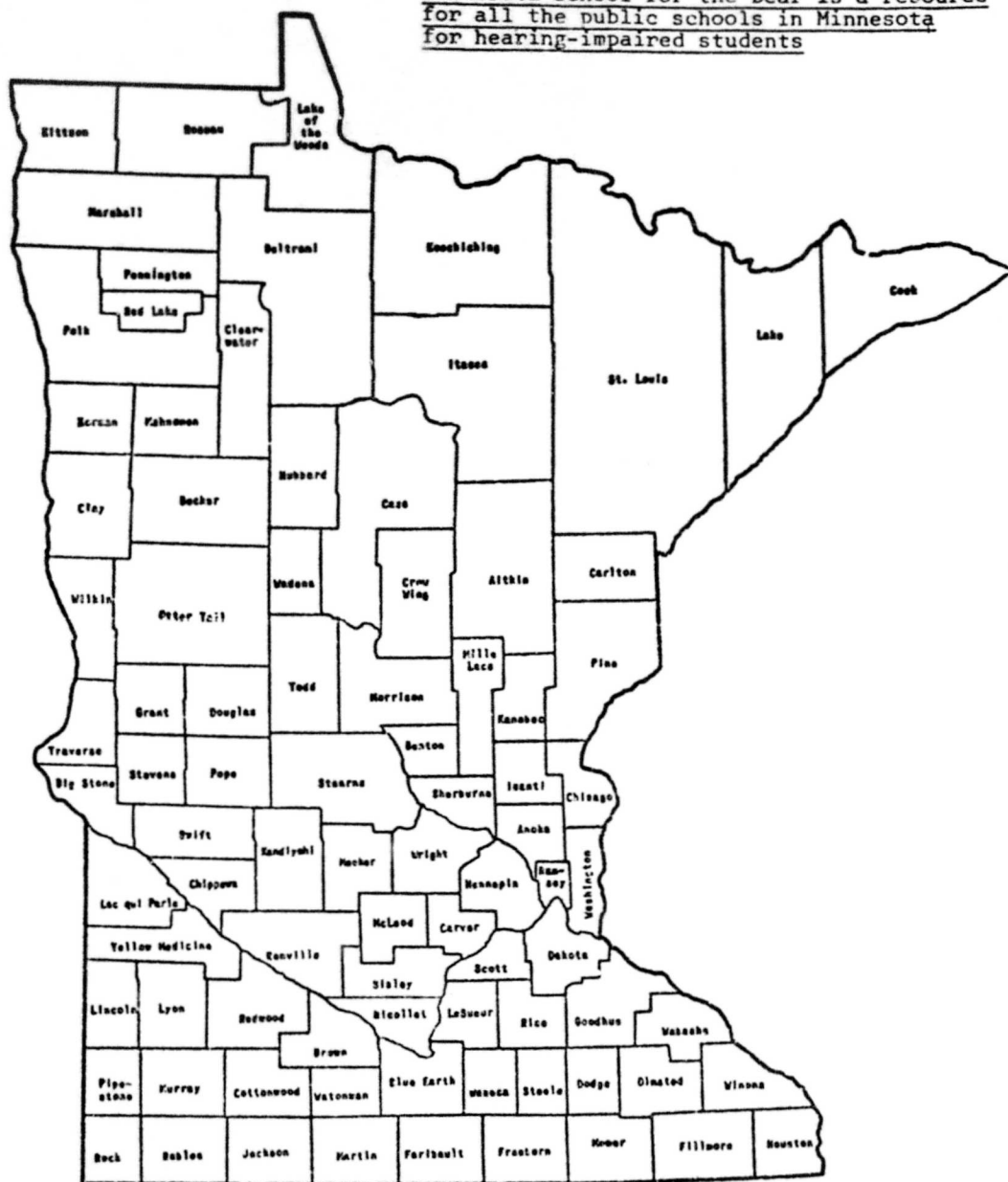
MINNESOTA SCHOOL FOR THE DEAF

HISTORY

The Minnesota School for the Deaf was founded in 1863 by the State Legislature. It is now in its 115th year of service to the hearing handicapped children of the state between the ages of 5 and 20.

Effective July 1, 1977, the responsibility for the operation of the School for the Deaf was transferred to the Department of Education.

Minnesota School for the Deaf is a resource
for all the public schools in Minnesota
for hearing-impaired students



Minnesota School for the Deaf continued

Effective July 1, 1977, the responsibility for the operation of this school was transferred to the Department of Education.

AVERAGE POPULATION - 15-Year Period

<u>Fiscal Year</u>		<u>Fiscal Year</u>	
1962-63	265	1969-70	266
1963-64	267	1970-71	275
1964-65	287	1971-72	248
1965-66	283	1972-73	248
1966-67	297	1973-74	228
1967-68	278	1974-75	209
1968-69	270	1975-76	194
		1976-77	183

ADMISSIONS AND DISCHARGES

<u>Fiscal Year</u>	<u>Admissions</u>	<u>Discharges</u>
1972-73	31	36
1973-74	21	39
1974-75	21	30
1975-76	21	52
1976-77	14	26

EXPENDITURES

	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>
Salaries	\$1,411,262	\$1,596,467	\$1,778,859	\$1,918,424
Current Expense	155,327	181,827	197,668	209,752
Rep. & Replacements	13,711	34,119	26,883	31,558
Special Equipment	25,428	3,710	16,659	913
Total	\$1,605,728	\$1,816,123	\$2,020,069	\$2,160,647
Per Capita Costs	\$7,043.00	\$8,690.00	\$10,413.00	\$11,807.00