Attached is information relative to the School and Patient Activities Departments, the Librarian and the Chaplain. These are not mentioned in Dr. Paine's report and I believe they may have been omitted through an oversight. If not, you may desire the data for your own information.

Extra copies are included should you wish to distribute them to members of the Survey and Medical Policy Committees. I regret the delay in submitting this data, as well as the comments contained in another memorandum of this date on Dr. Paine's report. I trust the information reaches you in sufficient time and will serve the purpose you intended when requesting it.

EIS:gb

Attach.
STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE
MEDICAL SERVICES DIVISION

REPORT OF PERSONAL INSPECTION

(STATE SCHOOLS FOR THE MENTALLY DEFICIENT)

State Minnesota

Name of School Minnesota School and Colony

Surveyed by Dr. H. L. Paine

Date October 28-29-30, 1954
1. GENERAL STATEMENT

State of

A. Name of school Minnesota School and Colony

1. Location: Town Faribault (pop. 16,000) County Rice P.O.

2. Access: By bus


4. Acreage: (owned 1,217 Under cultivation 660) Character Clay subsoil. Some sandy areas

rented none

5. Year established: 1879 Year opened: Present location since

6. Former names of institution:
   As part of the Minnesota Institute for the Deaf, Dumb and Blind in 1879. In 1881, $25,000.00 was appropriated for a building for mental defectives. In 1887 made a department of the Minnesota Institute for Defectives. In 1905 the name was adopted School for Feeble Minded and Colony for Epileptics. Present name established 1949.

7. Classes of patients received (disorders, ages, convulsives):
   Mental defectives.
   Epileptics with physical disorders.
8. District from which patients are received: The whole state of Minnesota

9. Fiscal year ends: June 30th

10. Rated capacity

11. Method of support: State

12. Reports to: Commissioner of Public Welfare

13. Officially inspected by:

14. Census: Male: 1,613 Female: 1,594 Total: 3,207

15. Convulsives: (if any)

16. Annual admissions: 206

17. Waiting list: 700-800
II. PHYSICAL CONDITIONS

A. General description

1. Lawns, grounds, exercise yards, groves, etc. Acreage of campus 120

2. Arrangement of buildings (rough sketch)
   Included

3. Original buildings (construction)
   Sandstone construction known as the main building.

4. Additions (construction)
   Many separate buildings at first grouped around a circle, now they are placing them to the East. 31 buildings in all that house patients. There are over 60 buildings in all.

5. General state of repair
   Said to be in good state of repair.

6. Lighting
   All electricity is made except for two farm areas, electricity is purchased for these. Current is A. C. Reason- These farm groups are five miles from the main group, also for three residences where it would not pay to construct lines.
7. Heating
   They have reached the limit of boilers and have requested new boilers (replacements).

8. Ventilation
   In old buildings it is by window.
   In some of the new buildings it is "forced".

9. Water supply
   Driven wells on hospital grounds.
   Supply is adequate - elevated tank.

10. Sewage disposal
    Goes through Imhoff tanks and then is released to the river.

11. Fire protection (general and ward)
    From town, 2 miles from fire station. They have their own small chemical wagon which has to be hooked onto a car or truck. Extinguishers and standpipes with hose. Fire marshal has recommended sprinklers.

B. Specific description: arrangements, condition, window guards, floors, cleanliness, etc. (See also supplementary ward sheets attached.)

   Some buildings have metal guards and dentition screens.

1. Day rooms
   Inadequate in all buildings except those built in the last 10 years. Cedar, Maple, Pine, Spruce, Willow, Elm, Hickory.
2. Porches On a few of the older buildings.

3. Dormitories (space per patient)

4. Single rooms (number, floor space, etc.)

5. Bathrooms and water closets

6. Furnishings Varies some are good, some are very poor.

7. Fly screening (especially of kitchens, garbage, dining rooms, sick wards)
   In three newer buildings (Elm, Hickory and Willow).
   There are refrigerated garbage space.

8. Storerooms
   One in basement of main building.

9. Ice houses and refrigeration is inadequate.

10. Power house
    Boilers are not adequate.
    Generation of electricity is not equal to peak load.
11. Laundry
Fair equipment in an old building which is large enough, but not large enough to contain a central linen supply.

12. Shops Adequate but poorly located.

13. Chapel and assembly hall
Assembly hall on first floor of main building - inadequate.
Small chapel at hospital building.

14. Morgue In hospital.
   6 body refrigerated unit.

15. Other buildings
   12 residences for staff.

16. Farm buildings
   Adequate in size but in bad condition. A new dairy barn.
   Separate kitchen in farm dormitory called Walcott, houses 16 patients.
   Another dormitory on farm called Grandview has 75 patients.

17. Crops raised
   Garden crops.
   Storage crops such as oats and corn, alfalfa for the dairy herd.

18. Domestic animals
   235 cows
   12 horses
   550 hogs
   225 chickens
III. GOVERNING BOARD AND OFFICERS

A. Board of Managers or Trustees

1. Name

2. Residence

3. Year appointed

4. Year retires

B. Chief Executive Officer

1. Name Dr. Edward J. Engberg

2. Official title Superintendent

3. Year of birth

4. Year appointed

5. Compensation $10,500 annually

6. Method of appointment

7. Maintenance or allowances Residence and maintenance furnished at $100.00 monthly.

8. Education

9. Previous hospital, professional, and executive experience

10. Teaching and clinical appointments

11. Medical Societies: AMA AAMD APA ACA AN SMS CMS etc.

(Omit if biography is on file.)
<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Date</th>
<th>Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>John F. Arneson, M.D.</td>
<td>Internal Medicine</td>
<td></td>
<td>$3,000</td>
</tr>
<tr>
<td>Lyman R. Critchfield, M.D.</td>
<td>Pediatrics</td>
<td></td>
<td>Not to exceed $600</td>
</tr>
<tr>
<td>Geo. D. Eitel, M.D.</td>
<td>Surgery</td>
<td></td>
<td>Limit $800</td>
</tr>
<tr>
<td>Wm. W. Goldsworthy, D.S.C.</td>
<td>Chiropody</td>
<td></td>
<td>Not to exceed $1,600</td>
</tr>
<tr>
<td>Burton A. Orr, M.D.</td>
<td>Surgery</td>
<td></td>
<td>Not to exceed $2,800</td>
</tr>
<tr>
<td>F. W. Hevenson, M.D.</td>
<td>E. E. N. T.</td>
<td></td>
<td>Not to exceed $1,000</td>
</tr>
<tr>
<td>Dr. Q. B. Merner, M.D.</td>
<td>Radiology</td>
<td></td>
<td>Not to exceed $1,800</td>
</tr>
<tr>
<td>J. Gordon Beaton, M.D.</td>
<td>Internal Medicine</td>
<td></td>
<td>Not to exceed $2,600</td>
</tr>
<tr>
<td>Elmer H. Hill, M.D.</td>
<td>Dermatology</td>
<td></td>
<td>Not to exceed $600</td>
</tr>
<tr>
<td>Hunz Bruhe, M.D.</td>
<td>Pediatrician I</td>
<td>7-1-50</td>
<td>$785.00</td>
</tr>
<tr>
<td>Geo. Kennedy, M.D.</td>
<td>Physician II</td>
<td>12-1-42</td>
<td>$710.00</td>
</tr>
<tr>
<td>Norman Lende, M.D.</td>
<td>II Full time</td>
<td>10-1-47</td>
<td>$710.00</td>
</tr>
<tr>
<td>Bernice Morarity, M.D.</td>
<td>II 9-23-53</td>
<td></td>
<td>$654.00</td>
</tr>
<tr>
<td>Marta Ozolina</td>
<td>II 4-27-54</td>
<td></td>
<td>$640.00</td>
</tr>
</tbody>
</table>
E. Assistant Physicians  None

1. How appointed

2. Quarters
   Good facilities for doctors.
   Residences for physicians with families.
   Apartments for single.

3. Provisions for married men  Yes
   Residences

4. Method of promotion

5. Vacations  Earn 1 day vacation for each month of service after 6 months probationary period. If probationary period is satisfactory 6 days vacation are credited for that period. After 5 years of service 1/2 day is earned each month. When 100 day sick leave limit is reached 13/4 day is earned each month (after approximately 8 1/2 years) limit of

6. Recreations  vacation accumulation is 24 days.
   Available in community such as golf, tennis, bowling, baseball, basketball, football, music, and art.

7. Tenure of office (political interference, frequency of changes, etc.)
   Civil Service status after completion of 6 months probationary period following certification from eligible register by Civil Service Department.

8. Part-time positions
   None

9. Ratio of physicians to patients  1 to 650

IV. MEDICAL WORK

A. General

1. Clinical director (title, other functions)
   Psychiatrist II  position is vacant

2. General plan of organization (special duties, rotation of services, instruction of new physicians, etc.)
3. Staff meetings: (a) Frequency (b) Hours
   Regular hospital staff meetings once a month.
   (c) Conducted by the superintendent

**3a**

4. Case study (methods pursued, blanks used, routine examinations,.history taking, etc.) Use reverse of sheet if necessary.
   Case conference every other week conducted by Dr. Engberg and that is in reference to new admissions and readmissions, also concerns special problems in regard to patients.
   Frequency and type of notes

Frequency of re-examination

(a) Psychiatric

(b) Psychological by referral

(c) Physical

5. Pathological and laboratory work Dr. Bruhe has general supervision.
   We are in need of Medical Technologist II.
   (a) In charge of expert?

   (b) What examinations equipped to make? X-ray, Blood counts, B.S.R.
   Blood sugar, B.M.R., Icterus Index, B.S.F. tests; All blood chemistry done on photoelectric colorimeter, Thymol Turbidity, Urinalysis, Bilirubin Serum Proteins. In need of Centrifuge.

6. Autopsies (number, made by whom, ratio to deaths) Incubator and analytical balance.
   16 made by medical staff
   Ratio 1 to 3.5

7. Number of deaths last fiscal year: Male 26 Female 29 Total 55
   Unusual causes of death:

**3a**. This includes all department heads having to do with therapy;
   Alternating each week are the therapy and non-therapy groups meeting with the superintendent. There is a quarterly conference of the general staff, dentist and all department heads.
8. Medical library and periodicals: In whose charge?
   Yes. Medical staff makes selection
   Miss Catlin, Librarian

9. Relations with similar institutions
   Good

10. Relations with general hospitals, practitioners, etc.
    Good

11. Use of clinical material for medical instruction

12. Research; are productive projects under way?
    None

13. Training for undergraduates
    None

B. Medical specialties

1. Roentgenology, equipment and operation

2. Ophthalmology

3. Laryngology and otology

4. Neurology (cases available, interest)

5. Surgery
6. Acute sick (provision for, proportion of patient population, etc.)
   Average 65 per day – they are hospitalized in the hospital from the entire institution, this is about a 2% average.

7. Contagious diseases (ditto)
   Isolation area in hospital, 8 rooms 1st floor– 8 rooms in the basement (basement area is more than 3' below ground level and should not be used). Isolation rooms in Pine and Spruce (10 each) observation area mostly.
   Isolated on 4th floor of hospital building – male and female housed together. Surgical cases sent to Anoka State Hospital.

9. Syphilis (ditto)
   Blood Wassermanns taken on all new admissions. Spinals done if indicated.

10. Orthopedics
    Simple fractures – reduced – compound and difficult reduction cases transferred to Rochester State Hospital.

11. Physiotherapy None
C. Preventive medicine

1. Smallpox vaccinated on admission revaccinated every 5 years
   (all preventive medicine is for patients and employees)

2. Typhoid fever vaccine given on admission booster shots yearly

3. Diphtheria vaccine given on admission booster shots every 3 years

4. Scarlet fever none

5. Is milk pasteurized and properly handled?
   All milk is pasteurized. Improvement needed in transporting milk to dining rooms and distribution to patients. Grade A pasteurized milk is purchased to supplement production.

6. Who is responsible for sanitation?
   Dr. George Kennedy of the staff.

D. Regulations regarding investigation of accidents and injuries
   Casualty reports made out and sent to nursing office as soon as possible - further investigation as indicated.
E. Dentistry

1. Resident or attending dentist 2 resident

2. If resident, hours 8 daily If attending, how often

3. Number of patients treated last year 8,202

4. Equipment Need dental surgical table and anesthesia machine

5. Procedures Fillings, dentures made and repaired, prophylaxis, extraction treatments, examinations, x-ray and bridges.

V. PSYCHOLOGICAL DEPARTMENT

1. Director (a) Name Arnold A. Madow

(b) Qualifications and experience see supplement

2. Number of assistants and qualifications (juniors and students)

see supplement

3. Laboratory (size, location, light, ventilation, etc.)

4 rooms in south wing of administration building. 3 rooms are office-testing rooms, the fourth a play observation room. All are adequate as to size, light, etc. Testing of new admissions is performed in the hospital, in a room to one side of the medical library.

4. Equipment (testing tables, seating for younger and older subjects one way observation screens for teaching)

3 desks (2 also used as testing tables), 1 testing table, 1 sand table, 1 play table, 1 easel, 1 dictaphone, 1 filing cabinet, 1 equipment

5. Test materials cabinet, 1 set of bookshelves.

See supplement

(a) Intelligence Tests

Language tests of intelligence

Nonlanguage " " "

Performance " " "

(b) Educational tests

Reading tests "

Spelling tests "

Arithmetic tests "

Others "

Supplement"
(c) Vocational training tests

Aptitude tests (mechanical aptitude, etc.)

Interest blanks Supplement attached

(d) Sensory tests (color vision, pressure discrimination, etc.)

visual acuity, audiometer Supplement attached

(e) Other tests (personality, attitude, etc.)

Supplement attached

6. Test instruments and apparatus

(a) Motor ability (dynamometers, etc.)

(b) Tests of handedness, eyedness, etc.

(c) Apparatus (galvanometers and other electrical equipment, electroencephalogram) An audiometer is borrowed from the Minnesota School for the Deaf when needed. Electroencephalography findings are made available by the medical staff.

7. Form of psychological report - types of recommendations Report form is same as that used by the Bureau for Psychological Services, a sample of which is enclosed. See supplement for types of recommendations.

8. Research (published and in progress)

VI. DIETETICS

(1) Organization of department Has charge of food but not personnel. Head cook is not under dietician.

(2) Number of kitchens Equipment Inadequate

4 One large one. One other at hospital.

Two smaller ones, at Grandview and Walcott.

(3) Where are special diets prepared

Hospital kitchen
(4) Number of dining rooms
33 places to which food is sent from main kitchen.
Type
3 for employees. These are really three and dining rooms.
Tables
Wood
Tableware
Plastic for patients, china for employees.

(5) Inspection of food service, by whom
Dietician.

(6) Observations (style of food, methods of handling, condition
when served, choice of items, second helpings, etc.)
Single menu: throughout hospital.
Food is sent in ordinary containers (old) some in vacuum containers.

(7) Feeding the helpless
By employees and trained patients.

(8) Are patients trained in cafeteria service, restaurant service,
family service?
Not in cafeteria service but in the others.

(9) Tray service
Hospital, limited service in infirmary.

(10) Weighing patients, when done
Monthly.

(11) Garbage, disposition
Cooked and used for pigs.

VII. RECEPTION SERVICE

A. Where housed

<table>
<thead>
<tr>
<th>Hospital ward</th>
<th>Number of beds</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>193</td>
</tr>
</tbody>
</table>

B. Organization

1. Medical

2. Number and grades of nurses and attendants in this service 42 aids (P.A. 2 G.N. I, 5 G.N. II, 1 G.N. III, 1 G.N. IV.

3. Average daily census of this service 167

4. Duration of stay of patients in this service
Permanently assigned pts. T.B. pts. 25, crippled and difficult feeding problems and a few crippled adults-49, Beds (this varies)-97. Other beds used for hospitalization from wards. 96 beds (varies)-average 70 per day. New admits, readmits, and returnal pts. 10 per month.
C. Description of method of admitting new patients.
   Isolated upon admittance, length of time varies - Physical examination
   as soon as possible.
   Patients bathed and checked thoroughly when admitted.

D. Arrangements for medical and psychological examinations
   Notify Medical and Psychological department, as soon as admitted.

E. Classification, how made and when
   Case conference - bi-monthly.

VIII. EMPLOYEES

A. Department heads
   1. Number  2. Title  3. Department  4. Salary
   Supplement

B. Trained nurses
      14 3-hospital ward
      1-Instructor
      3-division supervisors
      1-director of Nursing
      Supplement

C. Attendants
   1. Number  2. Organized training  3. Salary
   Supplement
4. **Examinations when hired**

   Physical Examination

5. **Care when sick**

   Personnel Physician

D. **Cottage mothers, matrons, etc.**

   None

E. **Supervisors**

   Refer to department heads

F. **Other employees**

   1. Number  
   2. Type of work  
   3. Salary

   Supplement

G. **Quarters for employees**

   Individual rooms, some with private bath, limited number of small apartments for husband and wife employees. Rooms are in most part in ward buildings, there is one building which provides rooms for approximately 40 women, and 1 area for male employees above the power plant providing rooms for approximately 12, other rooms are in ward building.

H. **Impressions**