Goals for 1970

Following are the general goals which we have set up for ourselves in 1970, this in response to your memo of January 14, 1970, on this same subject.

1. Publish letters of understanding between Faribault State Hospital and other institutions in Southern Minnesota under the control of the Medical Services Division, to establish functional and geographic boundaries for services to be provided.
   a. Consider the Twin Cities metropolitan area participants to be Anoka, Hastings, and Faribault State Hospitals. Objectives would be to define the roles of the participants in providing services for the mentally retarded of that area.
   b. Meeting held with Faribault, St. Peter and Willmar State Hospitals participating. Purpose: To establish areas for which participants would provide mental retardation services and to define the specific services to be provided.
   c. Meeting held between Faribault and Rochester State Hospital to accomplish the same as in "b" above. In all cases, some general understanding is to be reached as to future role of Faribault State Hospital as a multi-purpose hospital.

2. Develop a plan in coordination with county welfare agencies to provide out-patient evaluations and diagnostic services for mentally retarded, and services for autistic children.

3. Re-establish Hospital-Area Mental Health Boards' relationships between Faribault State Hospital and those Boards in the catchment area of this hospital.

4. Design, initiate, conduct and evaluate a series of workshops for county welfare personnel with the objective of informing them of our services and to facilitate placement of patients from this hospital back to the county of residence where appropriate.

5. Define institutionalized aged, assess our position, and develop or refine appropriate programs for that group.

6. Establish an intra-hospital communication system which will foster, encourage, and promote an attitude of progress, a search for knowledge, and improved effectiveness of effort. Such a program will be accomplished by:
   a. Recording responsibilities in writing so that they are clear and easily understood.
b. Defining functional and responsibility relationships of all personnel
to all other personnel, both inside and outside of the hospital.

c. Establishing a method of recording and cataloging policies so that
they are clear, consistent, fair, easily found, and available to all.

d. Providing for an in-hospital means of informal exchange of information—
a house organ by and for the employee.

e. Creating a vehicle for announcement of plans and accomplishments.

to Conducting a training program for managers and supervisors on the art
of management.

g. Establishing a system of selective data analysis on a programmed basis
for the purpose of management control.

7. Develop complete treatment programs in all units and buildings, and a review
system for the evaluation of results on an individual patient basis.

5. Survey and determine program needs for the blind, deaf, and aging.

9. Develop formal and informal affiliations with educational and training institutions
outside of the Faribault State Hospital.

10. Set up a separate functional and dormitory area and service for autistic children.

11. Establish the framework and provide as much known data as is available for an
institutional master plan. Such plan would define program plans and interpret
those plans into material needs over a given period of time.

12. Complete the reorganization of Faribault State Hospital.

13. Make a referral of every patient in the hospital who could conceivably be placed.

14. Construct a 1970 goals plan for the hospital in segments, as contributed by every
Division and Unit.

15. Develop a catalog of resources outside of the hospital.

16. Establish a series of administrative practices and procedures which will contribute
toward improved patient care, treatment, and education, and which are effective,
efficient, and economical.

17. Initiate a program for qualitative and quantitative augmentation of key staff
disciplines.

18. Conduct a review of policies and make recommendations to the central office to
assist in making such policies more feasible (admission and discharge, sterilisation,
right to treatment concept, etc.)