TO: DFW Cabinet

All Medical Services Division Institutions
ATTENTION: Medical Director
ATTENTION: Administrator

Community Programs
ATTENTION: Board Chairman
ATTENTION: Program Director

Daytime Activity Centers
ATTENTION: Board Chairman
ATTENTION: Program Director

Medical Services Division Staff

DFW Training Section

Mental Health Medical Policy Committee

FROM: David J. Vail, M.D., Director
Medical Services Division

SUBJECT: 1969 and 1970

First, I would like to thank all of you for a tremendous performance during 1969. I think we are continuing to make rapid progress; I am especially impressed with the capacity of our system to be creative, to adjust to change, and to respond to new challenges. I hope you will convey my congratulations to all your staff.

Now to 1970:

I propose that during 1970 we implement the following:

1. The multipurpose regional plan for state hospital campuses as discussed at Goals Seminar on December 18, 1969, and further development of metro. These will require extensive dialogue at regional, area, and county levels of operation; in particular, the area level.

2. The Minnesota Hospitalization and Commitment Act generally, with special emphasis on the clarification of issues that are still unclear.

3. The concept of hospital-county contracts for specifying the services to be provided to categories of mentally ill, mentally retarded, and inebriate persons under various circumstances; smoother working of the hospital-county operations generally.
4. Development of more adequate programs at various levels for alcoholics and users of other drugs, including narcotics; and for the institutionalized aged.

5. Clarification of issues related to sex deviancy and development of more adequate programs at various levels for sex offenders pursuant to the provisions of Minnesota Statutes 246.43.

6. Staff development at various levels, especially with regard to improving the capabilities of county welfare department staff and the climate of attitudes within institutions.

7. Strengthening of the structure and function of the state and local humane practices committees, with a view to establishing statutory authority for the committees.

8. The Right to Treatment concept, again with a view to statutory explication; an expansion of treatment modalities generally, in particular operant conditioning and other behavior therapies, and milieu therapy.

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Now the above are general goal statements. They are not listed in priority order as they have more or less equal priority. There is some overlapping and there are no doubt omissions.

I would like for you to spell out in more specific detail the goals that you would set for yourself, or your office, agency, or facility during 1970 within the above framework and how you would proceed to meet those goals.

With regard to the Medical Services Division this request is mandatory. For others to whom this memo is addressed, I ask you to reply at your convenience. I recognize that agencies receiving grants-in-aid will be furnishing accomplishment and goal statements in their annual application for funds.

I would appreciate your reply by February 2, 1970.

Thank you very much.

DJV: mhv