

All 8 state hospitals likely to stay open



State Sen. Donald Samuelson

By Sam Newlund
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The likelihood that one of Minnesota's eight state hospitals will be closed by the 1985 Legislature hovered between nil and extremely remote Monday.

"It's not going to happen," said Colleen Wieck, who is leading a study of the hospital system by the State Planning Agency. On reflection, she said, it *could* happen if Gov. Rudy Perpich unexpectedly decided that it must and if the politically divided Legislature for some reason agreed.

But it was hard to find anybody who predicted such a move, despite the yearlong, statewide furor over the possibility.

"I don't know of any legislator, anyone from the governor's office — I don't know of anyone anywhere with authority — who's asking for a hospital to be closed," said Sen. Donald Samuelson, DFL-Brainerd. Besides representing Brainerd State Hospital's district, Samuelson is chairman of the Senate Finance subcommittee, which appropriates money for the hospitals.

His counterpart in the House, Rep. Bob Anderson, IR-Ottertail, said he has heard of "no organized sentiment (for closings) nor have I heard of any individual sentiment."

John Clawson, the new assistant human services commissioner who leads the hospital system, was slightly more cautious. Asked whether the study group would recommend

shrinking the hospitals without closing any one, he said:

"If you wanted me to put my house payment on it, I would guess that's the way they're going to go."

According to Wieck, it's virtually certain that this group, an interagency board of state officials, will recommend "Option 2" to Perpich and the Legislature. This option, one of several considered, would be the "downsizing" of the hospital system — possibly with sizable staff layoffs — without changing the mission of any one institution.

In varying combinations, the eight hospitals serve primarily the mentally ill, retarded and chemically de-

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pendent.

State Planning Director Tom Triplet, a close aide to the governor, said there has been "absolutely no final decision." But "over the short term," he said, "perhaps the most we could do is a downsizing."

The state Department of Human Services, which runs the hospitals, already has proposed in its budget to reduce staff rosters by cutting 644 jobs in services for the retarded and adding 175 for the mentally ill. (Wieck said these figures have changed to 694 and 125, a net reduction of 569.)

The cuts for the retarded are meant to dovetail with reductions in the number of retarded patients. The reductions are expected partly because of a court decree requiring further reductions and partly because the department hopes to move additional patients into community alternatives. But it's uncertain how many of the 644 or so would be laid off and how many of their jobs simply would disappear by resignations, retirements and deaths.

Other options, besides closure, included leaving the system as it is, putting the state into the business of running community-based programs for the retarded while decentralizing the hospitals, and using hospitals as

regional mental health centers.

On Dec. 21 the interagency board is to receive the State Planning Agency's report and make its recommendations. The report will include data on hospital buildings, the economic impact of a closing, the effect on the staff and energy costs.

Among findings in the agency's draft report:

■ Hospitals at Anoka and Fergus Falls have the highest percentage of resident buildings 70 years old or older. Anoka, Faribault, Fergus Falls and Cambridge hospitals have the lowest overall rating for physical condition. Brainerd, Moose Lake, St. Peter and Willmar are in the best physical shape.

■ The economies of Moose Lake and Cambridge are the most dependent on their state hospitals; Anoka's is the least dependent.

■ On Oct. 1, hospital rosters totaled 5,912 employees, including 4,750 full-time. Of the total, 65 percent were women. Seventy percent of all employees earned less than \$10 an hour. A total of 369 employees were eligible for retirement. The rate at which people normally leave for various reasons would facilitate a downsizing, but layoffs still might be necessary.