

Most of 33 interest groups back plan for state hospital system

By Sam Newlund
StaffWriter

Interest groups ended nine months of debate Friday still disagreeing on a massive overhaul of Minnesota's state hospital system.

Representatives of nine of the 33 negotiating organizations and communities raised their hands during their last meeting to signal their continued disapproval of the overhaul proposed by the Department of Human Services.

The plan's most dramatic change would be the transfer into community group homes of all but 95 of the 1,400 mentally retarded people living in the hospitals, now called regional treatment centers. The transfers would be completed in six years.

Under ground rules adopted by the group, the "consensus" being sought was defined as unanimous agreement. Therefore, whether the unprecedented negotiations failed or succeeded is a matter of interpretation:

The group failed to reach consensus, but a sizable majority approved the department's plan and pledged to support it in the Legislature.

"No one's really surprised by the results," said Brian McInerney, the department's negotiator.

Indeed, hardly anybody predicted last June when meetings began that all 33 groups with conflicting stakes in the system could agree on anything. But Human Services Commissioner Sandra Gardebring, who called for the negotiations, said she wanted to try.

Although the Legislature makes the final decisions, Gardebring said she wanted to avoid the kind of last-minute legislative decision-making that fails to let regional center employees, the surrounding communities, the advocates, the providers of services and others have their say.

The negotiation results should carry weight in the Legislature, but the department's plan faces a rocky path.

Some key legislators are adamantly opposed, and the plan would mean more money at a time when money is scarce.

Several community groups are expected to push a rival bill to guarantee that all eight regional centers will keep a minimum number of beds. Richard Pemberton, negotiator for Fergus Falls, said the bill would require 475 beds for the retarded, instead of the 95 in the department's plan.

Under the plan, 60 beds would remain at the center in Faribault and 35 at St. Peter. Programs for the retarded at five other centers would be phased out, including the Cambridge center, which, like Faribault, has only retarded residents.

The state would open 105 new community group homes for the retarded and a smaller number for the mentally ill. Anoka Metro Regional Treatment Center would be rebuilt, the Security Hospital at St. Peter would be expanded and regional centers at Moose Lake and Fergus Falls would be renovated or replaced. Oak Terrace Nursing Home in Minnetonka would be closed.

Community representatives from Cambridge, Faribault, Fergus Falls, Brairierd and Willmar were among the dissenters. Dale Thompson, the Cambridge representative, said the Cambridge Regional Human Services Center should be kept open on a small scale. Helen Hoffman, the Faribault delegate, had a similar proposal, including a new program for brain-injured people.

Pemberton, of Fergus Falls, argued that regional centers are not "fortress dungeons" and that dismantling them would be "a tragic mistake." If reductions are to be made, he said, they should fit the individual needs of residents, not a timetable.

Other dissenting groups were the Minnesota Congress of Advocates for the Retarded; Care Providers of Minnesota, a nursing home association; the Association of Residences for the Retarded of Minnesota, and the Association of Minnesota Counties.

Melvin Heckt, president of the advocates' congress, accused the department of "applying tremendous pressure — one might say political bribery," in pushing its plan. He said unions and communities were threatened with loss of jobs, parents were

threatened with distant placements of their retarded children and counties were told to speed up community placements already underway or lose state aid.

Heckt's group has steadfastly opposed massive transfers of retarded people, arguing that they have a right to stay in regional centers and that group homes can't guarantee safety and quality care.

David Kiely, the residential resources delegate, said the group dissents because the department's plan fails to guarantee equality between private providers and the proposed state-operated community homes.

Patricia Conley, lobbyist for the county association, said her group doesn't believe the state will adequately pay for the community programs it will require the counties to setup.

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