

MINUTES

October 27, 1964

Nursing Task Force Meeting on
Mental Retardation

Held at Cambridge State School and Hospital
September 18, 1964

Roll call:

Pauline Goserud, Lake Owasso Children's Home
Winifred Myers, Valeria Blomquist, Carmen Muier, Yvonne Anderson, Leona
Kenney, Phyllis Hunt, Faribault State School and Hospital
Ragna Evenson, 4-County Project
Laura Barron, Lake Owasso Children's Home
Mabyl Johnston, Irene Yenish, Jacqueline Beaulieu, Mildred Stave, Thelma
Engstrom, Brainerd State School and Hospital
Myrtle Kreis, Harriet Anderson, Eva Taylor, Cambridge State School and Hospital
Mr. John Broady, Minnesota Mental Retardation Planning Council
Mrs. Alvira Hiltz, Department of Public Welfare

Excerpts from tape of meeting:

Mrs. Hiltz: The purposes of this meeting are 1) to come up with solutions for some of your problems, 2) to help provide better patient care in our institutions for the mentally retarded, and 3) to find some ways of working through our problems.

I think it is fairly easy to come into a hospital or institution and make rounds and find there are problems or needs of the hospital. It doesn't help just to look and see if the patients are clean. This is not what we need—we need some solutions or methods or some approach to try and help and cope with problems of patient care.

(Mrs. Hiltz described briefly the Community Mental Health Centers, Regional Coordinating Committee and Minnesota Mental Health Planning Council. Copies of the Minnesota Mental Retardation Planning Council were handed out to the members attending the meeting).

Mr. John Broady, Executive Secretary, Minnesota Mental Retardation Planning Council, speaking on council membership.

I believe there are at least one or two or three from Cambridge somewhere in here. I know that there are some from Faribault. Dr. Robb is one of them. Where we are now—the letters are going out with the Governor's signature

asking people to work on these task forces. We have some replies back and as the replies come in and they agree to serve, then the chairman and vice-chairman will get together with the agenda, have an organization meeting, divide the work up into sections that somebody can get hold of and explore.

If you look under your project proposal, under each task force there are a number of general areas it is supposed to cover. Using this as a base, we will break it down into more specifics on just how we are going to go about doing it. The task force will then assign individuals or committees to work on these different facets, getting whatever information is necessary, etc.

There is no reason why the task forces need be limited as there are many people who we know are interested and will certainly be consulted who maybe don't have their name and address on a task force. The thought is that many of the task forces and committees can meet out in the areas at some of the facilities and involve the people in that area and get a broader base of public opinion and expression from groups trying to hold a meeting in the city and expecting people to come all over the state to the city. It is my experience that it is easier to get people in the metropolitan area to go to a meeting outside the area than it is to get them to meet right in their own backyard. It kind of works both ways.

Just in general terms we had thought that a starting place would be gathering together information and material, reports, etc. as to where we are now. There have been committees and committees and advisory committees and studies and this and that that are sitting around and are still pertinent. There are some quite recent and if they are not recent, there are some suggestions and material that is still quite pertinent. I think there are some buildings here that should have been eliminated a number of years ago that are still around. The recommendations come up time and time again, the same ones, and it is a little discouraging if you have to draw up raw material each time to document this. So the notion is that we would find out where we are now in each of these different broad areas.

This goes in both as far as quantity; the federal government has a large number of forms and I have a stack of them, facilities, kinds, types, what they are used for, how they are stamped, stamp ratios and all this that goes into making a survey. On top of that we are expected to make some qualitative judgment. Quantity we can look and see what we have but we have to look at the quality of the programs. This is a very subjective matter that gets into the area of professional opinion. Somebody has to set a standard of quality and there are these around. This is where you get your staff ratios, the salaries, the educational standards and other standards by which you hire your people. The specialities that they are supposed to work in, how they are diversified, etc. Much of this as I have said, is subjective professional opinion and we hope that it can be gleaned from a broad cross section of the professional people in the field. It would be rather unfair for a special educator to pass judgment on the quality of an institution program, for example. Perhaps he doesn't realize or perhaps doesn't know what it is. I am sure there would be some resentment of this, but this is the human element we have to wrestle with.

Now, my particular responsibility in this is coordination. I am not an expert in mental retardation. I have never worked professionally in the field. I do have a retarded child who is here at Cambridge, and this is perhaps my interest here. My background is in probation and parole work with the Ramsey County Probation Office for 15 years. I have some community organization experience, with the Youth Commission and in professional circles in St. Paul.

I will be working with each of the task forces, more with the chairman and vice-chairman probably, setting up the meeting, will be present and take the minutes, will keep the records, will send out the notices to the people if there is a meeting, the time and place and work out all these details. I will be able to bring to the task forces the knowledge as to what the other task forces are doing. Many of these areas overlap, you can see that at a glance. Doing just a great deal of leg work as the committees break up into sub-committees, I will have to work with the sub-chairman, to see that the work is started. I have sent for a great deal of literature from time to time, publications and what not, that pertain to two particular areas and will make this available to the task forces. It's sort of a nebulous job in defining it one, two, three, but I hope you get the gist of it. Right now 150 letters are going out. I am trying to get around to meet the people in the field and visit the facilities, feeling that I might be a little more tied up later, but I just love opportunities to meet in groups like this. I meet a whole cross section of people that I never meet otherwise.

If you would like to be on the task forces, I would like your name and I will get in touch with you. My office is in the Centennial Building. I am with the Department of Education but the Department of Public Welfare handles my budget. I am responsible to Mrs. Luther. This was done intentionally so that the planning council would not be too closely identified with any particular department.

Speaker from the audience: In terms of this regional planning, would you be using something like the regional organization or structure that coordinating committees use?

I've got about 10 or 12 maps in my file that show how different organizations are set up in the State of Minnesota for their own particular reason or purposes. There is very little overlap, or very little coinciding along the same lines. There has been some thought or talk that lines as far as mental retardation is concerned should be very close to those set up for the community mental health centers, that the two are not far apart and some communication would be the same. There is an area of coordination.

Perhaps a great many of the services of the state and federal government that are conducted on a legal basis could be centered in communities and this would be an aid to all them and would be an aid to recruiting. You would have a group of professional people in the community instead of so many of them being isolated, and thirdly the regions would be concerned less with geographic areas and more with the service areas. There are centers around the state that are service areas in terms of people coming to town to buy things, come in for hairsets and haircuts, etc. If they could come to just one place and get a variety of professional services, this would be quite economical. Duluth is the best example of this. It has

a combination of services. There is quite a complex development down in Owatonna and Faribault. Mankato is a little bit far away but there is a state college there and I understand that in state college towns would be good in terms of professional staff. There would be a cultural community there that would appeal to people in a broader way.

A great deal of this whole business appears to me, in the development of services, is going to emerge from the professional thinking of people practicing in the field, whatever the field may be, whether it is nursing, psychology, social work, medicine or anything else. I think too often the professions have been content to not involve themselves in this part of it and suffer with what the legislature, or I should say the community at large in a broad sense prescribes for them.

The legislature by and large is made up of lawyers, businessmen, farmers, etc. I don't know of any social worker in there. There are a few school teachers. I don't know if there are any nurses in the legislature or not. But in this whole area of public service, time, quality, amount and everything else is decided in the legislative halls rather than in the professional circles, and professional people seem to get so wrapped up in their own disciplines that they lose sight of this.

I know in Corrections we always get together around the table and growl that it should be this way and it should be that way, but nobody has really gone to work and tried to influence the political decisions from the inside. Outside pressure groups try to influence political decisions from the inside.

There's been too much emphasis I feel on a particular state service getting a larger piece of the pie in a sense, there's so much money and everybody is out to get his share of it. I think there has to be a meeting where they get together and decide to educate the public that the services are necessary and it's going to cost you money and put people in a frame of mind so they are willing to pay taxes and support more services. This has been the pattern of our civilization, of our society, as they get more sophisticated and refined. You change from the industrial patterns of the labor unions in that area and now we are getting into the whole area of man's concern for his fellow man and the acceptance of responsibility on the part of those who have it so to speak and for those who don't.

When you show parts of the facilities and program that aren't up to snuff, in a professional sense, somebody always takes it "well, you're not competent", you're sticking your own neck on a chopping block.

There is a conservative and a liberal legislator on each of the task forces. Now, to what extent they will involve themselves, I don't know. But at least it gives me an excuse to send them a lot of information as to what is going on in the way of meetings, notices and publications, something the Governor has asked them to serve on.

Many state employees stay away from politics because of the law. The best single effort I think that has been made by the Association for Retarded Children has said that they are not only a special interest group, but representative of the public. They are well organized, state-wide, locally and nationally, and are also well financed. They are quite well known. Mrs. Luther has said more than once that of all the lobbying groups, they are the most effective. They have housewives and citizens who are able to see and talk to legislators and generate support. They don't have the money to spend for big feeds, parties and so forth that the industrial corporation has. This group is one of the most powerful in the state. I didn't realize that but I have heard it from other places too. But again, they have to be in line with the thinking of the people in the field. All of them, of course, are represented on the task forces.

Mrs. Roger Evenson, Public Health Nurse on Four-County Project.

Our aim is to find the mentally retarded when they are very young. And so, will speak of Fergus Falls first.

As a result of the work of this clinic or center, many services have been opened up in this particular rural area. There are essential needs up there, too, I am not just sure what needs there are. Ottertail, Becker, and maybe those of you in that area know what they are. Then they thought that because this one was so successful, they should try another one in the state, and they chose the Owatonna area, I think, particularly because it was close to both the Faribault State School and Hospital and the Owatonna State School. It is also close to the Cities, so they felt it would be easier if they got some of the staff who would feel it necessary to commute, it wouldn't be too far from the city.

We try to set up these centers in rural communities to give these people a full evaluation service, and in the teen types, we think we should have a pediatrician, a psychologist, a social worker, and maybe the director and a public health nurse. This type of service, then, will be free to the people in all these particular counties. The ones that would be serving Owatonna would be Rice County, Dodge, Steele and Waseca which is the same area covered by the South Central Mental Health Clinic, which, at the present time, is situated in Owatonna.

We will be on the second floor of this same building. They hope that they will be able to find many of these cases, to evaluate them, diagnose and evaluate them, when they are young, so that they can receive the training and the treatment they need and possibly prevent many of the emotional disturbances that so often go along with these cases. We are going to concentrate, I believe, on the infant, the preschool and the lower primary grade groups.

At the present time, there is only one trainable class in the whole four-county area. There is only one day activity center. I think the last time I counted they do have about 13 to 15 educable classes. There are about 5 new ones. There is one whole community where nothing has been established for these children. Many

of them are being transported down to the Claremont area, but they are running into many difficult situations in transportation.

There are several of them that I have already started visiting, and started visiting the homes of these children to become acquainted with the parents and with the children. There are countless things that I can do even though our center hasn't opened yet.

Two of these children of the few that I have visited so far, are just sitting at home. They have no information and their mothers are asking for any type of help that they can get for these children. That is help in management, help with play activities, what can we teach them, etc.? I find it very interesting and maybe eventually when our center is established, we might be able to help in the thing that we were just talking about, being able to find out what type of children are on the waiting list, and so on, so that you will know somewhat how to fit these better into the areas which you have and the available space which you have.

Reference materials were provided on mental retardation for those interested in reviewing current literature. A similar meeting of nurses who work in institutions for the mentally retarded will be held in late October at Brainerd State School and Hospital. Meeting announcements will be sent out.

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