

BACKGROUND ON STAFFING

for talk by Melvin Heckt, Past Pres. Minnesota Assn. for
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Introduction

I want to talk with you about the crisis that we face today in staffing our institutions for the mentally retarded. Many people are not aware that a crisis exists, and some have questioned the remedy that our institutions have proposed in order to meet this challenge. In the main, they are requesting higher salaries and more staff. They request 4 and 1/2 million dollars to increase the salaries of present employees, and 8 million dollars to finance 749 new positions at Brainerd, Cambridge, Faribault, and Owatonna.

Most people understand the necessity for increasing salaries. They know that our salaries in the institutions are no longer competitive with those of other industries and that a substantial increase in salaries will help to offset the high turnover rates that have plagued the institutions in recent years. What they question is the request for 749 additional personnel. "Why", they ask, "should the legislature allocate more staff positions to the institutions at a time when they are unable to fill the new positions granted at the last session? Why allocate more positions at a time when these institutions are having trouble filling their current vacancies?" Thus, it would seem that the major difficulty experienced by the institutions is their inability to find enough new people to hire so that they can fill all of their vacant positions. But this view is mistaken. Vacancies are merely a symptom of the basic problem.

Or to put it another way, the reason why the institutions have had so many vacancies is not that they haven't been able to recruit enough new employees—they are already recruiting new people in large numbers. Rather, it is that they are unable to retain sufficient numbers of both new and old employees. The turnover rate is very high. Too many employees, both new and permanent employees, are leaving their jobs; and oddly enough, one reason why they are leaving is that the institutions in which they work are understaffed. Of course, low salaries is a major cause of this high turnover, but a more difficult point to grasp is that the lack of adequate numbers of personnel is itself a major reason why the institutions have as many vacancies as they do.

The combination of low salaries and understaffing creates a vicious circle. When salaries are low, better paying jobs at nearby industries become more attractive. People are reluctant to stay in difficult jobs without adequate compensation. When higher salaries and more pleasant working conditions are available nearby, some of these people will quit the institution and take another job. At that point, the institution, which was already short-handed, becomes even more understaffed, and the really serious problems begin. In order to cover all the wards in their buildings, administrators are forced to make greater demands upon their employees. In order to spread out the number of staff, the working shifts must be juggled around, and people are asked to work first on one shift and next on another, so that they no longer have any regular hours at all. Others are called upon to work double eight-hour shifts because someone has become ill, and there are not enough personnel to provide adequate care. Still others must come in to work on their days off. As the workload of each employee increases, the physical strains and emotional tensions begin to build up, and employee morale gets lower and lower. This, in turn, causes greater and greater numbers of employees to resign and take other jobs which promise higher pay, better working hours, and more pleasant working conditions. The vacancies created by these people leaving generates even more work for those that are left, placing them under a greater

Even though new employees are recruited every day, the increasing turnover places impossible demands upon the most vigorous recruitment effort and dooms it to partial failure; for the recruitment of new personnel was never expected to compensate for such a high turnover rate and so much job dissatisfaction. In short, lack of sufficient staff is one serious cause of staff turnover, and in this case, it is the high rate of turnover, rather than the failure to recruit, which has produced the vacancies that people are talking about today.

Recruitment has been successful.....

As far as the difficulties of recruitment are concerned, the institutions have been very successful, especially when you consider the tight labor market which exists today. At the Faribault State School and Hospital, for example, they recruited 199 new employees within a single one-year period prior to July of this year, and 199 employees is practically the same number of positions as allocated for the entire biennium. Certainly this shows genuine recruiting power. And this was done in an area where there is a relatively small population from which to recruit new employees. During the same year, Cambridge was able to hire 104 Psychiatric Technicians, which was more than double the 45 new positions in that category that the last legislature allocated for the present two year period. The fact is that recruitment has been very good, while turnover, for both new and old employees, has been very bad. This turnover causes a severe drain in personnel which is almost impossible to overcome just by recruiting new people to replace those who left. Why did they leave in the first place? And what is being done to make their jobs more attractive, more lucrative, and more rewarding? Since the institutions cannot raise salaries by themselves, or finance new buildings and better ventilation systems, they are hardly to blame for this failure at retention, either.

The vacancies are not that large...

What about these vacancies? Are they really that large? Would they not be even larger had not the institutions put on a vigorous recruitment effort? Let's look at the facts. This year the average turnover rate at the three largest institutions is 38%. Yet on November 28th, Brainerd reported that only 7% of their positions were vacant. On that date they had 461 budgeted positions and 31 vacancies. On November 1st, only 43, or 7% out of 654 budgeted positions at Cambridge were vacant. The rest were filled. And at Faribault, on October 5th, there were 112 vacancies for the 921 positions available at that time, giving them 12% vacancies. In summary, we can say that for these dates in October and November, the three largest institutions had 186 out of 2,036, or 9% of their current positions vacant. The really interesting question is, "How many vacancies would they have now if their recruitment effort had been unsuccessful?" But what these vacancies really reflect is the rate of turnover, which at bottom, is not a problem of recruitment at all.

Really a problem of turnover and retention...

The big problem is the alarming rate at which both new and old employees are leaving the institutions. They leave for a variety of reasons, salary being the most prominent reason given, and the solution to this problem is first, to discover its causes, and second, to take adequate measures to make sure that we are not

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faced with it again next year. I have been suggesting that two strong steps be taken at once. Raise salaries. And allocate all 749 of the additional positions requested for the next bienium. The reason for this is that understaffing, and the conditions which attend it, is one of the main causes of turnover, and turnover creates new vacancies. Paradoxically, we must add more positions to cut down on our number of vacancies! But I had started out here to speak about the present rate of turnover. The largest single group of employees at the institutions, and the group having the largest number of vacancies due to staff turnover, are the Psychiatric Technicians. At Brainerd this year the separation or turnover rate for this group has doubled to 42%—twice that of last year. At Cambridge it has risen to 39%, and at Faribault it has more than doubled. There it rose from 14% last year to 34% this year.

Something about our population of retarded persons in institutions...

At this point I would like to digress for a moment and say a word or two about the number of persons that live in our state institutions for the mentally retarded. To tell you how many there are and what kind of handicaps they have may give you some idea of what conditions are like on the wards and how difficult it is to work there and care for such people. In all, there were 12,764 persons residing in Minnesota institutions on September 30, 1966. Out of that number, 5,750, or 45%, were in institutions for the mentally retarded, and 5,695, or 45%, were in mental hospitals. Twelve years ago, mentally retarded persons accounted for only 28% of the total population residing in Minnesota institutions. In the past five years the number of mentally ill in residence has decreased 40%; while the number of retarded persons in residence has decreased only 6%. At the end of September, 94% of the 5,750 persons residing in institutions for the retarded lived in the three largest institutions at Brainerd, Cambridge, and Faribault.

At these three largest institutions, a total of 2,086 personnel were authorized for the present bienium. The American Association on Mental Deficiency Standards dictate that there be 2,440 patient care personnel alone to care for this number of retarded persons, excluding all other staff, but the entire number of personnel allocated for this bienium for these three institutions totals only 2,086. This may give you some idea of how few people there are to work in the wards where retarded persons live out their lives.

What kinds of problems would you encounter if you were to start work on one of these wards? First of all, you would face a variety of day, night, and weekend shifts, you would encounter the terrible odors and a wide variety of very unpleasant conditions. You would find that 24% of the patients are not toilet trained, 24% are hyperactive, 34% have physical handicaps, and your patience would be exhausted by trying to care for large numbers of such individuals on your own ward. Chances are there would be only one or two others there to share your work with you. You would find that there are serious shortages of Nurses and other vitally important professional people, such as the Nurse Instructors who train new Psychiatric Technicians. You would have a difficult time getting to work each day, because chances are that you would be living 20 to 40 miles away from your job.

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Some illustrations of problems caused by understaffing...

In order to illustrate some of the conditions which attend understaffing and tend to cause higher turnover rates, I might cite something which happened at one of our institutions during a recent four month period of this year. In about 11 buildings, each containing about three separate wards, there was not enough staff to put even one person in each ward for the day shift. In order to cover each ward for at least the day and afternoon shift, 84 Psychiatric Technicians were asked to work double eight hour shifts upon occasion, and 38 others were called in on their days off. Since there was not enough staff to cover the night shift in the same way, several wards were left unattended. It had taken a major effort just to staff those wards during the daytime hours. Knowing how hard all of these employees were working, the chief administrator said that his only question about the whole situation was, "Where does the breaking point take place?" During the last fiscal year at this institution about 18 Psychiatric Technicians quit their jobs each quarter.

What steps are being taken to stabilize turnover?...

What steps are being taken to stabilize turnover and increase job satisfaction at the institutions? The largest group of employees, and the group having the largest number of vacancies and turnover, are the Psychiatric Technicians, whose salaries now range from \$292 to \$356 a month. But using the new pay plan drawn up by the Civil Service Commission, the institutions plan to give the starting Technician a 22% increase in salary. Similar increases are planned for Practical Nurses and Special School Counselors. If the new increases are approved by the Governor and the Legislature, all the employees in our institutions will get at least an 8% increase in salary. On the new pay plan the Psychiatric Technician can start out at \$356 a month and work his way up a ten-step scale to a maximum salary of \$506 a month. Thus the largest increases are planned for those at the bottom of the present salary scale, where the present rate of turnover is so high and involves such large numbers of employees. It would seem to me, then, that the institutions and the Civil Service Commission have already provided part of the answer to those legislators who might ask, "Why should we grant you even more new positions when you can't fill the ones you have now?" The institutions are understaffed, they do need more staff, and by requesting this major raise in salary for the positions at the bottom of the scale, they have already made plans to prevent the type of situation which has occurred during the past year or so.

Some closing remarks...

In conclusion, I would like to say something about the numbers of new positions granted by the Legislature in past session. In 1959 the three largest institutions were granted on the average, 25% of the new positions they requested. In 1961 they were granted 31%. In 1963 only 23%, and in 1965 they were granted 52%, or about half. We urge that a new precedent be set this year and that these

three largest institutions for the retarded be granted 100% of what they request to meet their needs.

Minnesota can well afford to take the initiative and begin really doing something for all their mentally^{and} mentally retarded citizens. As it is now, the State of Minnesota is wasting large sums of money training new employees because it does not spend more to improve the working conditions in its institutions and because it accepts the responsibility of providing care for its less fortunate citizens without providing enough money to do the job the way it should be done. The view that our institutions should either have higher salaries or more staff, but not both, reminds me of the story about the man who was both starving and dying of thirst. Finally someone came whose intention it was to provide for the needs of this man, and he asked him whether he would rather have a bean or a thimble-full of water. Obviously, the man perished, just as our retarded citizens are languishing today because there is simply not enough love and companionship to go around. Our wards in the institutions for retarded persons are like vast deserts with an occasional staff person here or there who is like an oasis for those large number of adults and children that depend upon him for their care and emotional sustenance.

Thank you.

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Minnesota Association for Retarded Children