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STATE OF MINNESOTA

DEPARTMENT Public Welfare

Office Memorandum

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Medical Director

DATE: 5/31/68

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SUBJECT: Availability of Drinking Water in MR Institutions

In the course of making inquiries at MR institutions regarding drinking fountains, I found the following:

At Brainerd, Cambridge, and Faribault, large numbers of patients are left without available water between meals. The drinking fountains are smashed, in need of repair, or are boarded up because parts are not available. The situation is worst on the wards of hyperactive patients, where the fountains are frequently pushed from their moorings.

Faribault: there are four drinking fountains with coolers. These are located in lobbies and reception areas where patients can come in for a drink if they wish. A few of them do. Aside from these four fountains, there is only a make-shift type of bubbler on one faucet in each of the bathroom areas. These are operable either by turning (and holding turned) a knob or by pushing down (and holding down) a projecting pipe-like attachment. For short patients, or for weak or non-dextrous patients, these are inoperable. Patients who are in need of a drink of water can ask an aide for it or can take it where they can get it -- from a toilet. No special plans are made to give extra water to diabetic patients or to others with special water needs. No plans have been made for better facilities, although the nursing staff has given this need top priority for years.

Brainerd: the drinking fountains were obsolete when they were installed, so parts for repair of the fountains have never been obtainable. The porcelain shells which house the operating parts of the fountains are of such poor quality that they are constantly broken and are out of the buildings for repair much of the time. The fountains in two of the cottages are boarded up, non-accessible, and the patients in these buildings must await new drinking fountains. The business manager explained that six new fountains (of a more permanent type with stainless steel frame and electric cooler) are on order, three to be paid for from the 1967-68 budget and three to await the new budget. When these are installed, they will be recessed as deeply as possible, with the cooler completely concealed in the wall to lessen possibility of malicious destruction. There was a ready admission that some of the patients drink from the toilets,

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either because they are thirsty or, being brain-damaged, because this is a place to play. More than 100 patients are living in areas where the fountains are boarded up. No provision is made for extra water for diabetic patients.

Cambridge: the walls are of poured concrete and are impenetrable for recessing drinking fountains. Thus, the fountains extend out into the hallways where they are pushed off, smashed down, and are repeatedly out of order. On one ward housing 22 patients there is no drinking fountain (never has been), and there is none in the Hospital Ward which houses about 100 patients. An admission that patients have been known to drink from the toilets was slow in coming, but, with examples cited from the other hospitals (unnamed), a discussion of this common problem followed, and it was freely admitted that this is a constantly nagging problem in this institution also. No provision is made for extra water for patients with special needs.

In each of the three hospitals I spoke to more than one nurse or technician and in every case was treated with respect and trust. Those interviewed made such comments as,

"We wondered why you were asking in Ward Living Conditions Questionnaires about water coolers when we don't even have fountains to put the coolers on."

"Every time we have an opportunity to list our needs, we head the list with drinking fountains, but we never get any results and are completely ignored."

"For years we have been asking for better water dispensers, but we are always turned down."

"Unless we had staff enough to watch every patient every minute of the time, it would be impossible to keep them from drinking out of toilets."

"Not only do the patients drink water mixed with urine, but they also eat feces from the toilets. We don't have enough staff to prevent this."

"Besides the water that patients get with their meals, they are given a glass of water twice a day when they brush their teeth and are encouraged to drink as much of it as they can."

"In addition to the water patients drink with their meals, they are given a small shot-glass of water with their medication."

"Some patients ask for water when they are thirsty, but many of them are not able to ask."

"We consider lack of or inaccessibility of drinking water one of the major problems in our institution."

"When we notice that a patient looks dehydrated, we give him a glass of water."