

STATE OF MINNESOTA

MAR 26 1970

Office Memorandum

DEPARTMENT Faribault State HospitalTO : Morris Hursh, Commissioner
Department of Public Welfare

DATE: March 24, 1970

FROM : Harold S. Gillespie, Administrator
Roger A. Johnson, M.D., Medical Director

SUBJECT: Staffing at the Faribault State Hospital

The staff shortage at Faribault State Hospital has become critical. Specifically we mean that any more retarded residents to take care of, or any more transfers of positions from this institution will mean cutting several programs and going back to simple custodial care in these areas. In fact, we already have had to halt programs because of staff shortages. For example, the special building for autistic children we wanted to begin in February, a service acutely needed not only here but throughout all the state, simply could not begin. For another example, our badly needed physical rehabilitation clinic cannot begin now--there just isn't enough staff here considering the type of resident.

In the recent past we have had far more residents (peak around 3200) and fewer employees. But, in those days we had over 1200 mildly retarded, and the vast majority were extra working hands. In fact, during most of the 1960's the working resident force was doing most of the physical labor to maintain this institution. Today we have only about 100 mildly retarded residents and most are either emotionally disabled or physically disabled. Consequently, they aren't much help as workers. The 170 which are to go before the end of the fiscal year are all easy to care for type residents, so even that is not a great deal of help, especially when we are losing 20 positions in the bargain.

To make matters worse, the degree of disability in today's admission is greater. About 85 per cent of our average daily population is severely or profoundly retarded and most have some additional physical or emotional disability (e.g., blindness, spasticity, hyperactivity, autism, deafness, edentulous, ataxia, choria, etc.). We must get relief either in the form of considerably reducing the population or considerably increasing the number of employees. To what extent? With the type of resident we now have, training programs turn into custodial babysitting around a gross patient/staff ratio of 1.4 to 1.5. In other words, at 1800 population, the minimum number of employees would be 1200, and at an average daily population of 1650, the minimum would be 1100.

But, should we talk about minimum program staffing? Why should a place that is trying to help the mentally handicapped and their families be "minimally" staffed? We need average program staffing, not minimal program staffing. And, when a residential facility has over 80 per cent severely and profoundly retarded, average program staffing means we need about a one-to-one staff-patient ratio.

Another element of the present critical condition at the Faribault State Hospital is the wages paid the ward level employees who spend more time than anyone else interacting with the residents. Psychiatric Technicians must be hired at \$400 per month and Hospital Aides at \$342 per month. This is not only unjust but actually ludicrous--this salary is only \$42 per month above the federal government's poverty level! Small wonder we have a difficult time hiring and retaining employees who successfully work with our retarded residents.

March 24, 1970

There are few less sensitive industries than the U.S. mail service. There are few from whom we could expect greater dedication. Old phrases such as "rain, hail, snow, sleet, the mail must go through", or variations thereof, are heard often. In the face of these dedications and the fact that a postal strike is illegal, some postal employees have struck. What next? It is also illegal for state employees to strike, but we ask, who has a bigger gripe--the letter carriers or the Psychiatric Technicians in our state hospitals?

How much intelligence and training does it take to be a letter carrier as compared to a Psychiatric Technician? How much tolerance does it take for each job? Can just anyone be a letter carrier, a Psychiatric Technician? These provocative questions are ones which must be faced because the Psychiatric Technicians of this state will surely strike unless something is done for them. They have a precedent and a cause. Furthermore, they are the life-blood of our state hospital system. They comprise about one-half of all the employees of a given hospital, and if they went out we would be in serious trouble.

Analysis:

	Letter Carriers	Psychiatric Technicians	Hospital Aides
Starting wage	\$6176	\$4800	\$4104
Top wage	8442	6828	4992

We cannot chart the degree of responsibility of each, but it would seem evident that someone who provides care and training for human beings, one upon whom human beings are totally dependent for basic needs such as food, kindness, encouragement, and discipline, carries a terrible responsibility, more necessary than letter carriers--and they know it.

We need to establish appropriate salary ranges for the employees who have the most interaction with the retarded. Putting these devoted personnel near the poverty level is indicating their performance isn't too important. What does that say about the value we place on the resident? Action can and should be taken to reclassify the Psychiatric Technicians in a higher paying salary range (e.g., Special Schools Counselor). We recommend this action now.

Also, we recommend that something be done to either increase the staffing at Faribault State Hospital, or decrease the number of residents until a one-to-one resident/staff ratio is reached. Until this is accomplished, Faribault State Hospital cannot provide adequate care, training and treatment for all its residents.

We do not look for trouble, but as your assistants in a given area we have the responsibility to express ourselves to you about impending dangers and to anticipate problems. Therefore, we advise you that unless positive action is taken, we will find ourselves in a situation which will be embarrassing to us and harmful to patients in our hospitals.

HSG:RAJ:jn

cc: David J. Vail, M.D., Medical Director, DFW
Ardo Wrobel, Dir., Mental Retardation Program Office, DFW
John W. Jackson, Director, Civil Service Dept.

Office Memorandum

SECTION FOR MENTALLY RETARDED

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Public Welfare

Mr. Harold Gillespie, Administrator
and
Roger A. Johnson, M. D., Medical Director
Faribault State Hospital

Morris Hursh
Commissioner

Staffing at Faribault State Hospital

This is in response to your memo of March 24, 1959, concerning staffing at Faribault.

Since your memo raises several issues related to program development, staff shortages and salaries, I'm sending a copy of this memo to Bradford and Cambridge for their guidance. This can be viewed as a guide in preparing legislative staffing requests.

Your requests should be based on your judgment as to what you need to carry out your program. Such requests should be in relation to what program developments you can reasonably implement in the next biennium.

Departmental review of requests for new positions will take into account other requests from the institutions and weigh the other factors that ordinarily enter into a decision to approve or modify.

We realize that there has been a gradual, but nevertheless significant, increase in percentage of severely and profoundly retarded, and a decrease in mildly retarded who have worked in the institution.

In the meanwhile there is nothing that we can do about adding more positions to the complement before the next legislative session. The institution complement is imposed by the legislature. You will, however, improve your situation significantly in the next three months, when you transfer more than 100 patients to Rochester and Minnesota Valley Social Adaptation Center.

Although there is some difference in staff ratios in the institutions for retarded as compared to the mentally ill, additional justification will need to be made. Such justification should be made on the basis of clearly identified programs, specific objectives for a certain group and number of residents. Across the board increases in complement would be very difficult to support.

Salary for psychiatric technicians, hospital aides and other staff appears to be a particularly difficult problem because of recent increases in cost of living and lack of competition in filling vacancies. We support an increase in salaries, but how much of an increase is needed in order to maintain and improve the level of care given, reduce turnover and related problems, is a matter being worked on by the Civil Service Department.

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cc: Mr. Herbert Gardner, Personnel
Mr. John W. Jackson, Director, Civil Service Department
Mr. Harold W. Peterson, Bradford State Hospital
Mr. John Stocking, Cambridge State Hospital