

Present and Potential Community Placement Status
of State Hospital Populations
("Appropriateness" of Present Institutionalization)

(Abstract of "Survey of Possible Placement of State Hospital Populations", February 6, 1973. Survey was conducted by Richard Hutchison, M.S., Alan Anderson, B.A., Ann Taylor, M.A., Sofus Urberg, B.S., and Nellie Jones -- all members of the psychology department at the Faribault State Hospital -- under the direction of Bruce Libby, Ph.D., to whom it was assigned by Roland M. Peek, Ph.D.)

I. THE STUDY

An attempt was made to ask questions the answers to which would reflect relatively objectively the placement status of current residents of state hospitals. The data was collected between January 23, 1973 and January 25, 1973, using a variety of sources such as ABS scores, medical or social service records, and/or consultation with direct-care staff. Because information was not consistently available for residents from outside the respective receiving districts, those residents were not included in the summary discussion.

Because of the nature of the questions, more subjectivity on the part of respondents was inevitably present for MI and Chemically Dependent populations than for MR. The questions asked were:

FOR MENTALLY RETARDED:

A measure of those who are probably placeable if community resources existed:

1. How many residents in programs 2 (aged 12 or less, ambulant), 3b (13 to 17, ambulant, toilet-trained), 5b (18 and over, ambulant, toilet-trained, able to feed and dress self), and 6 (like 5b plus certain additional skills)?
2. Of those above, how many are ambulant, toilet trained, over 13 years old, and have no severe behavioral or medical problems?

The minimum number presently placeable:

3. How many are presently on referral?

(For statistical comparisons) 4. What is your total MR population?

FOR MENTALLY ILL AND CHEMICALLY DEPENDENT (same questions for both):

(For statistical comparisons) 1. What is the total population?

The minimum number presently placeable: 2. How many are now on referral?

certain types of facilities in adequate numbers were available, many residents could be placed".

- (1) For example, of the 139 residents of RSAC, 52% could be placed as follows, if the facilities existed:

26% in nursing homes for all ages, with facilities for major medical care, and staff for DACs and pre-work level teaching in the home.

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SUMMARY TABLE

Summary of total responses to questions in Part I, by Regions (figures in parentheses are percentages)

Disability Group	Question Number	REGIONS											TOTAL
		1	2	3	4	5	6	7	8	9	10	11	
MR	1	85(54)	59(62)	248(62)	84(56)	86(61)	26(27)	68(36)	24(34)	165(58)	221(47)	574(44)	1640(49)*
	2	43(27)	12(12)	62(15)	42(28)	12(8)	11(11)	35(18)	7(10)	112(39)	164(34)	290(22)	790(24)
	3	13(8)	6(6)	21(5)	12(8)	5(3)	1(1)	19(10)	1(1)	23(8)	19(4)	59(4)	179(5)
	4	157	95	400	150	139	94	187	70	284	470	1291	3337
MI	1	63	28	215	101	39	135	124	100	167	349	540	1861*
	2	2(3)	14(50)	19(8)	7(6)	7(17)	30(22)	8(6)	15(15)	16(9)	85(24)	28(5)	231(12)
	3	3(4)	15(53)	35(16)	8(7)	7(17)	40(29)	19(15)	32(32)	18(10)	95(27)	159(29)	431(23)
	4	14(22)	8(28)	85(39)	29(28)	3(7)	40(29)	39(31)	25(25)	129(77)	69(19)	270(50)	711(38)
Chemically Dependent	1	18	13	77	53	32	53	37	23	35	22	217	580
	2	0	3(23)	0	1(1)	7(21)	5(9)	5(13)	5(21)	0	0	4(1)	30(5)
	3	2(11)	1(7)	0	2(3)	2(6)	15(28)	6(16)	15(65)	5(14)	21(95)	53(24)	122(21)
	4	2(11)	0	13(16)	4(7)	1(3)	10(18)	7(18)	8(34)	6(17)	0	87(40)	138(23)**

* Does not include residents from outside receiving districts

** Does not include Hastings State Hospital

Total hospital population in receiving districts (MR Question #4 + MI/CD Question #1)	=	5778
Total currently on referral (MR Question #3 + MI/CD Question #2)	=	440(8%)
Total who could be referred if community resources were available (MR Question #2 + MI/CD Question #3)	=	1343(23%)
Total on referral + those who could be referred if there were resources (MR and MI/CD Questions # 2 and #3)	=	1783(31%)
"Residual" hospital population	=	3995(69%)

52% in group homes for persons over 21 providing daily supervision, medical care as needed, programming during the day and evening with sheltered work outside the home;

22% in either (a) foster homes for up to four persons under 21 who are in TMR or EMR classes outside the home, with medical services as needed, or (b) private residential facility for persons under 21 with TMR or EMR classes and vocational training at the facility, and medical services as needed.

- d. Problems of the referral system: A number of respondents reported that "the time and effort needed to push and follow a referral through the referral bureaucracy severely limits the number of referrals which can be administered at any one time".

B. Mentally Ill:

1. 35% (662) of those hospitalized could be living in community; 12% (231) are currently on referral -- leaving 23% (421) who could be in community if resources were available there.
 - a. Residential facilities: (halfway houses, board-and-care homes, nursing homes, intermediate care facilities, etc.): If they existed, they could receive 50% of the 431 who could be in the community (12% of the hospital population).
 - b. Outpatient care or support services (mental health centers, public health nurse visits, etc.): 14% of the 431 (3% of the hospital population) could probably be in the community if these resources were adequate.
 - c. Community objections (family, county, or legal objections): These objections stand in the way of community placement for 36% of the 431 potential placements (8% of the hospital population).
 - d. "Chronicity": 38% of MI population were classified as long-term or "chronic" either because of non-response to treatment (22%) or because their social maladjustment is of a nature unacceptable to the community (16%).

C. Chemically Dependent:

1. 26% of those hospitalized need not be in a state hospital (5% are currently on referral, with 21% staying in the hospital because of the lack of community resources).
 - a. Residential facilities: (half-way houses, board-and-care homes, nursing homes, intermediate care facilities, etc.): 62% of the potential placements, or 13% of hospital population, could be placed if this type of resource existed adequately in the community.

- b. Outpatient care or support services (mental health centers, alcohol counselors, etc.): 17% (3% of hospital population) cannot leave because of inadequacies in this area.
- c. Community objections (family, county, or legal objections): 24% (5% of hospital population) remain in hospital because of these obstacles.
- d. "Chronicity": 24% are so classified, either because of non-response to treatment (14%) or because their behavior is unacceptable to the community (10%).

D. Total Population (all disability groups combined):

- 1. 8% (440) are currently on referral to community, and another 23% could be referred if adequate community resources were available -- a total of 31%. This leaves a "residual" hospitalized group of 69% of the present population.

RMP/bjv

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