# REGIONAL CENTER TASK FORCE May 23, 1988

The Faribault Regional Center Task Force met at the Atirum at 11:30 a.m. on May 23, 1988.

Members present were Chairperson Helen Hoffmann, Bob Armagost, Marilyn Carstenson, Patricia Gustafson, Steven Griesert, Patrick Hentges, Nancy McCarthy, Dave Lenway, Diane Sammon, Bill Saufferer, Judy Tartaglia, and Joan Warmington. Dan Krom was also present.

Helen announced that the Task Force will be hiring a secretary to handle all clerical duties and coordinate the various subcommittee meetings.

Pat Gustafson reported that the City is in the process of interviewing intern candidates to assist the Task Force. The targeted start date is May 29, 1988.

The Subcommittee's goals were identified as follows.

- 1. Mentally Ill/Chemical Dependency Subcommittee Bob Armagost
  - a. Mentally Ill Units: two 20 bed units with one being a secured unit.
  - b. Day Program Services: historically, good day programming has not taken place. To implement this program, documentation of the population needs to take place. The program will need to be licensed. A full time psychiatrist will be needed for the Mentally Ill units.
  - c. Psychiatric Residency Program: through the University of Minnesota or Mayo Clinic to suppliment staff and to give practical work experience.

## 2. Developmentally Disabled Subcommittee - Joan Warmington

a, The services for the D.D. population already exist and they need to be expanded. To do this, the FRC needs to acquire a medical assistance provider number. Enabling legislation will be needed for the fee for service programs. There is a need for a consultant to look into this. The fee is \$75 per hour at approximately 100 hours.

The D.D. and Shared Services Subcommittees should be merged as their goals are similar.

- 3. Shared Services/Respite Care Subcommittee Nancy McCarthy
  - a. The provider number for M.A. patients and enabling legislation for fee for services.

- b. Need to determine the demand for services in the region. This can be accomplished through distribution of an updated version of the 1986 FRC shared services survey. The survey will help to determine what services are needed and can be shared. The mailing costs will be approximately \$400.
- c. Respite Care: There is a need to find out if the services can be offered to the D.D. population under the age of 18. There is the possibility of offering these services through a joint venture with the Academies.

#### 4. Ancillary Populations Subcommittee - Bob Armagost

- a. Day programs for a variety of populations including veterans, juveniles, and geriatrics.
- b. Veterans Residential Program: nursing care and day programs for the residential program. The subcommittee needs to gather information to support the day programs.
- c. Correctional Programming: Program to be established for correctional populations. All three of these programs will be able to utilize available staff. The group is uncertain about their consultation needs at this point.
- d. Veterans Board: The Task Force needs to appoint someone to the Veterans Board.

## 5. Rehabilitation Subcommittee - Judy Tartaglia

- a. Find and hire an appropriate consultant. Costs-\$145 per hour; \$10,000 maximum. Utilize line staff for services.
- b. Develop rehabilitation program center for the following areas: 1) head trauma-patients need nursing home type care;
  2) geriatrics-there is a need, but there is no reimbursement for the state without legislation permitting so; and 3) orthopedic and workers compensation-these patients could be handled on an outpatient basis.
- c. The Subcommittee needs to determine the types of rehab populations and the service area.

#### 6. Education Subcommittee - Dave Lenway

- a. Utilize the survey results to determine what educational services exist that the FRC could make available to others.
- b. Establish an education consortium coordinated with Mankato State, AVTI, and others, an internship program joint venture with the current programs being expanded, and certification training programs for Mentally Ill and Developmentally Disabled.

- c. Legislation is needed to allow for a roll over of funds from one year to the next and allow for the retention of fees by FRC.
- d. A need for greater authorization for the CEO to approve shared services and program agreements.

The following is a list of the overall goals of the Regional Center Task Force based on the individual subcommittees' goals.

- 1. Expanded fee for service legislation and expanded shared services.
- 2. Day programs
  - a. Training for day program staff.
  - b. Type of day program populations M.R., M.I., dual diagnosis, geriatric/veterans, on site juvenile programs.
- 3. State appropriation to monitor state operated group homes by some state agency or to reimburse the counties for the service.
- 4. Establish a rehabilitation center for some residential care, but largely outpatient programs.
- 5. Create education/training; joint ventures in all areas as needed\*.

A discussion was held to determine which subcommittees shared common goals and could be combined. The subcommittees were consolidated into the following four areas.

- Fees for Services Subcommittee Nancy McCarthy, Chairperson
   Shared Services/Respite Care
- 2. Residential Populations Subcommittee Bob Armagost, Chairperson
  - M.R.: day programs, education/training, shared services
  - M.I.: day programs, eduation/training
  - Geriatrics/Vets: day programs, education/training
  - Juvenile Delinquents: day programs, education/training
- 3. Rehabilitation Subcommittee Judy Tartaglia, Chairperson
  - Head Trauma
  - Geriatrics/Veterans
- 4. Monitoring State Operated Group Homes entire Task Force Helen Hoffman

It was stated that Peter Rodosovich and Linda Sutherland should attend the following meetings.

- 1. May 27 Mentally Ill/Chemically Dependent Subcommittee
- 2. June 9 Shared Services/Developmentally Disabled
- 3. June 13- Task Force Committee

The meeting was adjourned.

Respectfully submitted,

Dan Krom

## REGIONAL CENTER TASK FORCE June 13, 1988

The Faribault Regional Center Task Force met at the Atrium at 11:30 a.m. on June 13, 1988.

Members present: Chair Helen Hoffmann, Terrance Anderson, Bob Armagost, Chris Barron, Elaine Beaupre, Richard Berge, Marilyn Carstenson, Bill Combs, Pat Gustafson, Pat Hentges, Bonnie Klein, Viril Layton, Colin McAdam, Nancy McCarthy, Peter Rodosovich, Bill Saufferer, Judy Tartaglia. Shelly Rockman was also present.

Helen introduced new task force member Terry Anderson, from the Minnesota Department of Human Services; and Shelly Rockman, Task Force Intern.

Helen reported on the events of the Department of Human Services committee meeting. Commissioner of Human Services Sandra Gardebring has offered to supply any data the DHS has, that may interest DHS committee members, so Helen will take written requests from subcommittees until Monday, June 20. Terry Anderson and Representative Peter Rodosovich also stated they would be willing to supply data.

Pat Gustafson reported on the task force working budget.

Helen reported on the meeting with Peter Rodosovich on Friday, June 10, regarding 1) fee for service, 2) monitoring group homes.

Peter Rodosovich expanded on the meeting and proposed that Laura Cadwell, who does research and assists in writing reports, work with staff on this project.

Subcommittees reported on progress to date:

## 1. Rehabilitation

- A. Two areas are being looked into:
  - 1. closed head injury for 20-30 year olds who are presently in nursing homes, this area is underserved and in high demand, present staff and their skills could be utilized
  - 2. undetermined (possibly geriatric or musculoskeletal)
- B. For the second, undetermined area, the committee would like to interface with the needs of the other subcommittees.

## 2. Residential Populations

- A. Gathering statistics to support the need for the open and closed MI units.
- B. Exploring Veterans Home possibility. Planning on meeting with Commissioner of Veterans Affairs. It was suggested that the State be asked to appoint someone from this area to be on the committee and provide information.
- C. In regard to the correctional facility, Orville Pung will be consulted

## 3. Shared Services/Respite Care

A. Emphasis has been on revising the survey and getting it distributed.

#### 4. Education

Viril Layton initiated discussion about specialized training in the Human Services area. Using the current needs of the area, the Regional Center could offer training, and in this respect become a model for other Regional Centers.

Helen proposed the publication of a newsletter as a source of information for the public due to the numerous requests.

The next meeting will be held on Monday, July 11, 1988, at the Atrium.

The meeting was adjourned.

Respectfully submitted,

Shelly M. Rockman

# FARIBAULT REGIONAL CENTER TASK FORCE MEETING September 13, 1988

Present: Helen Hoffman, Chair; Ann Taylor (for Bridget Stroud), Dr. Iancu Foni, Dennis Burgess, Dave Campbell, Jan Langer, Mary Zabel, Phyllis Wegner, Bonnie Klien, Shelly Rockman, Terry Anderson, William Saufferer, Patti Gartner, Charlie Turnbull, Ole Stark, Pat Gustafson, Marilyn Carstensen, Judy Tartaglia, Bob Armagost, Viril Layton, Pat Hentges

The meeting was called to order at 11:45. Minutes to previous meeting had been distributed prior to todays meeting. Motion made, seconded and carried to accept minutes.

The chair asked persons attending to go over the preliminary reports sent in mail and be prepared to make corrections, additions and suggestions prior to the next meeting.

She also asked that each Subcommittee chair give just a brief report on their final proposals.

Dennis Burgess - Shared Services (subbing for Nancy McCarthy) Favor a state operated day program and a day operated community residential service. The day program proposal can be quite flexible - about 200 clients and 200 staff, serving only mentally retarded at this time. Mrs. Hoffman stated that she would like to recommend that mentally ill, elderly and veterans be included in the proposal along with the developmental disabilities. Nancy will be submitting the final report.

## Judy Tartaglia - Rehabilitation

The subcommittee is finished with the report and feel comfortable with what has been written and congratulated the members for their excellent job and cooperation. Mary Zabel is working on additions to the budget regarding supplies and equipment costs.

## Bob Armagost - Residential

Has finished the draft for the third part of the proposal dealing with skilled nursing beds. The report needs some refinement but this can be done rather quickly. He now has additional information on veterans proposal section. Charlie Turnbull stated that basically the proposal is good, just needs a little "beefing up." He had a copy of General Seiben's report and they are getting some support from veterans groups and are pushing for more support from other veterans organizations. The American Legion Commander has asked Charlie to serve on a committee to submit a request for a veterans home here. Bob is following through with General Seiben's coming here and touring the campus. He would like comments on the last part of this subcommittee's proposal.

Mr. Saufferer stated that he has been impressed with the proposals that have been submitted and would only suggest that the proposals should include an executive summary and then be separated into individual sections which would be easier to follow. It is planned that the final proposals will be submitted with each subcommittee addressed as a separate proposal, with an executive summary to tie them all together.

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#### Viril Layton - Education

Mr. Layton submitted copies of the education subcommittee proposal as a response to the proposals of the other subcommittees. They have responded to the reports and have addressed each report as A, B, C - Shared services, Residential services, and Rehab Services. The report may be 50% off base and this subcommittee needs help in information on what specific educational needs are anticipated. Plans are to give retraining of FRC employees to maintain employment priority. Once we can identify the needs in Item 9 on the format, a more thorough proposal can be written. He has assigned Bonnie Klien and Phyllis Wegner to work with the various subcommittees to write the final draft. Need to identify the types of jobs and the training needs, then we can put in the dollar amounts into the report; whatever retraining and additional training needed which would fall under the department of education - degrees, certification, etc.

Mrs. Hoffman stated that we have been told not to be too conservative as to estimated costs. Once we get the final proposals submitted, trimming is likely.

Mr. Layton stated that he feels a critical paragraph regarding the role of Faribault Regional Center in the retraining must be included in the final draft. He will work with Mr. Saufferer on this.

Mrs. Hoffman stated that they do need back up information and sources to support the cost requests.

She had a call from a city representative from Brainerd and they are asking to form a coalition of committees from the various task forces to discuss and present a joint proposal, which would be beneficial to all areas involved.

Are beginning to work on the video. Arnold Madow is doing the scripting and members may want to contact him. We are trying to portray the existing clients who need services and the condition of the facility and the expertise of the staff and to address the needs of the population and identify other populations that we want to serve. This all needs to be done by November 1.

Discussion on the counties we are proposing to serve. What about the possibility of approaching the various county Boards of Commissioners and Social Service department and ask them to send letters of support which can be included with the final request. Mr. Turnbull stated that the committee must be careful as to who is approached and the manner they are approached. Mr. Layton suggested that a political arm of this task force be formed to discuss this with the various groups. A subcommittee to form a presentation to various county groups was selected: Viril Layton, Bob Armagost, Bill Saufferer, Nancy McCarthy and William Saufferer. Mrs. Hoffman will personally go to the counties and do the presentation.

Pat Gustafson stated that they will put the report back into the individual segments, send them to the task force, with a request for

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comments and suggestions. The education subcommittee segment will be included.

Mr. Saufferer stated that the task force is being far more effective than they realize and this is working to our benefit. He has been asked by his supervisors to send a list of how we see the future of Faribault Regional Center and he wanted to go over the items that he is sending to Central Office:

- 1. Residual population people we can best serve on our campus.
- 2. Those persons who are presently in the skilled nursing facility (has received indication that there are 20 more people at Oak Terrace who may be coming to Faribault Regional Center as well.)
- 3. Operate S.O.C.S.
- 4. Operate State Operated Day Program Services
- 5. Operate a skilled nursing facility for the general population who are not acceptable to private facilities because of behavior problems.
- 6. Rehabilitation services
- 7. Two 20-bed units for mentally ill (one acute and one not acute)
- 8. Professional support services in the community.
- 9. MR-CD Unit on campus (12 beds) should be started because of the drastic need.
- 10. React to the needs of the veterans affairs department.
- 11. Lease surplus space. We presently have 835 usable beds and would have space to lease. We would prefer that the space be used in the field of human services.

At 1:00 today Bob Armagost, Helen Hoffman and Bill are meeting with Orville Pung (Department of Corrections), to tour the -FRC campus and make a preliminary evaluation if this would be a suitable site for any corrections programs.

Mr. Saufferer introduced his guests from Alpha House who are interested in leasing space for an inpatient adult sex offender program on the regional center campus: Gerald Kaplan, Executive Director, Pam Mindt, Residential Director, and Peter Pumper, Intake Director.

The Alpha House began as a halfway house in about 1972. Criteria for admission was adult male multiple offender being released from a correctional facility. It became more of an inpatient treatment program. He gave a general outline of the program from 1975 onward and stated that the program has changed a great deal and now consists mainly of child sexual abuse and familial sexual abuse.

They have a 20 bed inpatient program and have two clients who come in daily for the entire day and return to jail at night for sleeping purposes. Their outpatient program handles about 75 persons and they have 7-10 in a post residential program. Basically, they are treating 105-110 offenders at this time.

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They would like to propose leasing space here. Mr. Kaplan would like to continue in the metro area and provide additional bed space that they are in need of here - 28-36 beds is about the referral base that could be supported here and could be enlarged as they gain experience.

Mr. Layton asks what the primary source of funding is at present. Mr. Kaplan stated that they write contracts with agencies to receive services. Contracts are written on a per diem cost. Their present costs are lower than leased costs would be since they do own their present facility. He felt confident that they would be able to meet the financial demands that leasing space would require and ask the committee support in order to establish this sort of facility. They are in need of more space and have not been able to find the right buildings, the right locations, and community support which are all very necessary for a successful operation.

Mrs. Hoffman asked what number of people would be employed in a 28-36 bed unit. Cutting through estimates, local hires would be approximately 12. To begin with the administrative staff would be brought in and replacement staff hired locally. Local people would have to be willing to commute for training purposes for a time.

Mr. Saufferer stated that licensure and zoning are compatible for the start up of such a program and it would be an asset to the community. It would be a private organization that would not employ state employees Some agreement might be made that would allow state employees to work for the private sections of the leased space.

They are licensed by the Department of Corrections and are one of two facilities licensed under that department. They serve only male clients at the present time, the youngest being 18. It is an adult program. They are interested in going to a juvenile program but have not been able to do so. The bottom line of treating sex offenders it to reduce the amount of victimization.

Questions arose about the medical care that would be needed for a program such as this. At present the vast majority of their clients qualify for medical assistance, and their needs are met at the Hennepin County Medical Center. Those who do not have medical assistance have assets and they have to pay for room and board and have medical insurance, and select their own medical care.

Question arose as to how they would offset the negative attitude of the community in regard to the sex offender program. Their present location is in a residential area and the crime rate is lower than in other areas of the city.

They also have an education program that they present in public schools at no cost and do workshops on prevention, which is crucial to the community.

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Mr. Kaplan invited members of the task force to visit their facility and witness the community safety program in operation. He is interested in getting community support and needs the enthusiasm of the committee and would like them to get an informed judgement of the program.

They would give priority to Rice County, but the program would accept referrals state wide. Mr. Kaplan thanked the committee for their interest.

Mr. Layton stated that the task force should be an advocacy group which would support the 11 points in Mr. Saufferers memo to Central Office. He felt that we need to look at all the jobs which may be available in the event the other programs that are being discussed are not accepted.

He also stated that this committee needs to talk about governance - Who is going to run what, and he would like this included on the a agenda for the next meeting. Pat Gustafson stated that this is on the agenda for discussion at the next meeting.

Continued employment of the present Faribault Regional Center staff is of high concern to the committee. Employees presently working under the Department of Human Services may be transferred to another department - i.e. corrections, etc. This is also being addressed in the proposal - first priority for jobs would have to be local and presently employed at Faribault Regional Center.

Pat Gustafson thanked the guests for coming and announced the next meeting is scheduled for the 26th, at the Rose Room - 11:30 for lunch with the meeting to start at 12:00.

The meeting adjouned at 1:30

Recorder: Helen Gillis

#### NOTE FROM CHAIR:

The presentation by Alpha House was information for this committee only No agreements have been made or indicated. It is recommended that you do not discuss their proposal publicly, except with committee members.

#### REGIONAL CENTER TASK FORCE MEETING September 26. 1988

The meeting was called to order at 12:10 by Helen Hoffmann Chair. Meeting was held at Rose Room, Faribault Hotel Atrium

Present: W.C. Saufferer, Shelly Rockman, Charlie Turnbull, Bob Armagost, Dr. Berge, Nancy McCarthy, Bonnie Klein, Terry Anderson, Diane Sammon, Wade Karli, Judy Tartaglia, Viril Layton

Helen Hoffmann announced that she will be gone October 5-16 and committee members may contact either Nancy McCarthy or Bill Saufferer in her absence.

General Information - Reactions to the Alpha House proposal? Bob - the argument in favor of location here is "at least you will know where they are."

Judy - Questioned whether anyone had investigated their reputation and was told that they have an excellent reputation.

Viril - That type of outside group is the kind that we could phase into in the future. What would be the community reaction? Would DHS be involved?

Helen - We are running this past the legislative aide to see who would have the expertise to deal with this. It would be best to let the union lead on this. We would give some general guidelines and have identified the needs.

 $\label{thm:community} \begin{tabular}{lll} Viril - How do you respond to the individual request for such a facility location if this community wanted this program with DHS? \end{tabular}$ 

Bill - He contacted his supervisor regarding the presentation and was given approval to have the meeting. If we did go into this, it would be only as a leasing arrangement. As to governing, we are anticipating that we will still be under DHS and will function under two different governing agents. We will operate under DHS rules for the programs that they govern, for other programs we will lease space and be the landlord and they govern their own programs. We would then improve our lot by providing the space and service - which may include administrative services and procurement and we would have a 30 day escape clause that would be available to both the landlord and the leasing party. Alpha House was a little concerned about security. The rehab center would not be strictly private since we do want to use state employees. It is possible the rehab center as a public corporation and get approval to use state In discussing with Laura Kadwell, regarding the rehab center, employees. it may be possible that we will furnish the staff and support services as a landlord and do not see the governing as an issue. The working relationship would be the key to the operation.

Helen: Revised reports were received in the mail or hand delivered by Shelly. You will see that we have some spaces and gaps and do not plan to fill them in now but will go through and ask for additional information What is really needed today is to identify the resource person for the information that is lacking in the reports. If you come across anything that you do not agree with, this is your opportunity to address this at this time.

Page 1 - DHS-2 - Resource person - Dave Campbell

MI population - Bob Armagost

CD-MR population - Terry Anderson at state level

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SOCS - Joan Warmington - A
Bob - B

Non-DHS Rehab - Judy Tartaglia and Mary Zabel with consultation with

Ann Brutlag

Veterans' Home - Bob - contact with subcommittee members

Juvenile Placement - Bob = contact with city people and corrections

Fee for Services/Shared Services - Bill & Nancy

Enabling legislation - Terry Anderson at state level

Marilyn Carstensen contact with Mike Morrell

Training and Funding - Viril Layton in contact with Laura Cadwell funnel through Bill for budget

Licensing - DHS for programming license

Department of Health for Operating license

Peter, Laura, Bill and Helen will be working together on entire report

Summary of overall budget - need to be sure we are doing a two year budget - earliest start would be July 1, 1989 through June 30, 1991. We must be sure that the start up costs and budget are for two years operating. Need to include your cash flow in start up costs.

Overall staff - Bill Overall space - Bill

Bill will prepare the overall budget and city people can convert to graph form.

Shelly stated that city staff need everything in writing and presented to them, and any holes need to be filled in by the resource people. They will be contacting the resource people and need to have all the information ready for next Monday when Pat and Steve can begin to work on this.

In order to tie the entire report together, the executive summary needs to be complete. Simply add page four information to the entire report. There is a need to revise mission statements for some of the individual programs.

Helen - the task force is planning to submit this volume of information, but in order to really congeal we need to have all the reports complete and corrections and additions made for final writing

Bill has drafts of some revisions he wishes to suggest and has forwarded these to Shelly for possible use in discussing with subcommittee resource persons. He went through the suggestions.

Viril stated that we need to be sure to change the dates to be sure we

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are in the proper fiscal period.

Wording needs to be changed on reports - i.e. Shared services need to change a statement that Faribault Regional Center could benefit from this - change to a statement such as the Consumer will benefit. There is a need to decide the number of clients to be served in SOCS - 2, 4, 6, or 8. It was decided that 6 may be the best for us economically.

We do not want to be specific as to site locations - a 35 mile radius is presently in the contract. A Day Program is one of the items that must be addressed since the clients would have to be transported. Remember that this is going to be a statewide proposal and we would have people from the entire region but the location would be within 35 miles. Fragile cases would be located closest to Faribault Regional Center.

State Operated DAP - First draft - to be operated under CEO, Program Director and Advisory Board

The glossary needs to be complete - several items are not included at this time.

Budget: Start up costs must include cash flow for first year of operation. Need to identify how much is start up and how much is ongoing.

Need to identify the entire report as Regional Center Task Force Plan - not study.

Judy - We do need to add a statement regarding support services for the family. Do we need to write up how other regional centers could set up a similar program?

Veterans section - just need to update the glossary and redo the budget for two years.

Title all appendix.

Mr. Layton had some questions regarding the vocational training statement of "98 people - some are non teaching." The department of education only will approve qualified licensed teaching staff. There are many vocational training programs at the present time using other professional persons to do the training and these are licensed under DHS.

Where do the Deaf and Braille School and local education programs fit into the proposal. Helen stated that she will be presenting the proposal and will depend on the various subcommittee members to provide credibility to statements and technical information.

Essentially Wilson Center and the other education departments are allowing their professional staff to be members of this committee as a community gesture and in defense of the presence of the FRC. None are being paid

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for this endeavor. We will be establishing programs that can be interchangeable and beneficial to other departments and will increase the present cooperation with the various agencies and groups.

Helen - in 5-10-20 years from now, something may come up again and we need to look at this as a long term project when we will not be here. We want to put together something that others can carry on.

The plan is to work with Peter as the intuitive person who is guiding us and he will provide the expertise needed to submit the plan in the proper form and wording and bring in the other commissioners as we progress.

Members were urged to go through the entire report and bring up any suggestions for additions and completions so that we have a comprehensive plan. It is better to have too much and delete some than to have an incomplete statement or proposal.

The meeting adjourned at 1:45

Recorder: Helen Gillis

## REGIONAL CENTER TASK FORCE MEETING November 1, 1988

The meeting was held at the Golden Corral conference room beginning at 11:30.

Present: Chair, Helen Hoffman; Terry Anderson, Nancy McCarthy, Dr. Berge, Bill Saufferer, Jan Langer, Bridget Stroud, Marilyn Carstensen, Judy Tartaglia, Bob Armagost, Bonnie Klein, Viril Layton, Diane Sammon, Peter Rodosovich, Pat Gustafson, Steve Griesert, Shelly Rockman.

The meeting was called to order at 12:00. Helen had received letters of support from different groups and shared them with the committee: American Legion and Downtown Faribault Association.

This morning she received a Negotiating Committee text from DHS and shared that information. Anyone wishing copies of the text should contact Shelly.

The video is complete and will be viewed at 2:00 pm today in the 3rd. floor conference room, City Hall. Anyone interested in attending is welcome to critique it to see if any changes are needed before final presentation.

#### <u>Highlights</u> of DHS Text:

Do not agree with the DD section. They do not include us in the M.I. treatment section and we are not in agreement with this. Elderly population - Oak Terrace will close by July 1, 1992. Relocation of persons presently residing at Oak Terrace:

Ah-Gwah Ching stays at 250; Brainerd will go from 28 to 100; Faribault has 35 and will go to 120; Fergus Falls has 0 and will go to 75 for a total of 543 instead of the present 583

SOCS program will be increased:

Brainerd will have 10 residential sites and 5 Day Program sites Cambridge will have 20 residential sites and 10 Day Programs Faribault will have 17 residential sites and 8 Day Program sites This will be accomplished by 6-30-93 with an increase of 10 residential sites and 5 additional Program sites by 6-30-95, which would give Faribault 27 residential & 13 day program sites; with an additional 20 sites based on need of the region.

Mental Illness meeting: Today at 3:00 pm Dr. Malueg, Medical Director of DHS, Sarah Shippe and Bill Fink (licensing) will be here to discuss our proposal for the M.I. Unit. DHS has felt that the M.I. population could be served by local community hospitals but we have found this is not possible and we need somthing that can be counted on in the community. People from other counties will be attending this meeting as well as Bob Armagost and Bill Saufferer of this committee. It was felt that the addition of this unit would strengthen other units because of the availability of psychiatric coverage.

Terry Anderson cautioned the committee that one of the things we will have to deal with is we will need heavy professional involvement and specific kinds of treatment professionals that will be needed for this type of program.

We would need a psychiatrist as the director and a high concentration of RN's. The answer to this concern is that we know that the medical model is needed and we are assuming that Faribault is geographically located so that we would attract this type of professional staff. - Staffing and regional needs should be stressed; once we know that we have a program, recruitment will become easier. Faribault has been lucky to have a good number of RN's available and have not seen the shortage that has occurred in other areas. Physical Therapists and psychiatrist will be recruited when we are sure we will have such a unit.

We do have the acute hospital located on campus and this can be expanded to use the 35 beds now licensed. We are experienced in long term care and active treatment and have dual diagnosis treatment experience. There are 35 dual diagnosed residents at St. Peter and we presently have about 60. We have a high priority to hire a psychiatrist, but would have more if we can be assured of another unit.

Terry: Requirements for active treatment of M.I. is vastly different from developmentally disabled and retraining needs would have to be identified and updated. Present training is still valid and useful, but updating may be necessary.

Task Force Proposal/Report: At this point Steve Griesert and Shelly Rockman distributed the report. Pat Gustafson asked that people look it over and be sure that any comments be submitted by 5:00 pm tomorrow (11-2-88). A timeframe for completion of final report and printed was given to committee members, with final draft scheduled to be submitted to the printer by noon on November 5. By the end of the day on November 8, 320 copies of the document will be completed and ready for distribution.

In going over the report, please keep in mind the timeframe for completion, be sure there is a consensus of members before submitting change requests. We will compile an appendix so if you find anything that needs to be added, be sure that this is also submitted. The report will be printed using the photo of the regional center campus as the cover.

Pat went over the tabs for the various sections of the report and asked that any additions to this be given today, since the tabs are scheduled for printing today. She also passed around a sample of the printing for the final copy.

The question was raised as to how much would we want to include in the appendices. Letters of support, supportive statements? or refer to them. If too much is given, people may lose interest. Peter stated that charts, etc should be readily available and can be included or referred to. An appendix is just for reference.

Would it be a good move to label the report as a report to the legislature from the task force. Another way may be to insert a letter inside the report to the legislature. Peter stated that the report is to be directed to the chair person of the Health & Human Services committee of the house. This is a statutory requirement. The Planning Agency is only the vehicle used for distribution of funds - administrator of dollars, so the report is not directed to the Planning Agecny, It was suggested that a letter from Helen as the chair of the committee be inserted on the first page. This should be individually addressed to each person. (Shelly has the list that came from Peter)

Need for a standing committee to serve as advisory board to the center, legislature, DHS and the community? Need to have a free-standing committee that we can see that the original goals are followed through?

This is addressed in the text from DHS: There shall be a group in each community where there is a regional center to work with and advise the department; they will meet at least monthly in fiscal year 1990 and quarterly thereafter to plan and coorindate services; the department will request an appropriate of \$25,000 for 1990 for each of the seven communities where regional centers are located and \$10,000 for FY 91.

This is not what Bob Armagost had in mind when he suggested the ongoing committee - he would like to see a group established that would be interested in going forward and encouraging various groups to locate at the regional center - i.e. veterans and become an advocate for the center and the community.

Bill: We are members of the task force. In November we will disband. This task force is an outgrowth of a community action committee developed by the Chamber of Commerce. That is the watchdog group and was reactivated and we can fall back to that group.

What we are doing now, other communities can do as well. We would like to be able to make recommendations to DHS and the legislature as well as the CEO and need to plan a model that others can benefit from, with some legislative support to provide minimal funding for expenses.

Peter felt that the ongoing committee would be much more effective as a freestanding committee without funding from the state - self driven and community organized as the task force is much more beneficial than the lobbying monies. Need for an independent group sanctioned by the state to advise may not be as beneficial.

Agreement appeared to be a free-standing group that would meet monthly and can submit plans to the commissioner as they arise or to the legislature - it may be a community issue, may be a legislative issue or an internal department issue. See your strength as being independent and this has been the success of this group. Basically a branch of the Chamber. Make this a suggestion to the other regional centers to establish such a committee.

The committee will remain and follow the plan through the last day in May, 1989.

Discussion on the cover of the report and tabs. Separate SOCS into two tabs - label leases rather than Other. Peter stated that the report is very impressive and the picture on the cover shows the size of the regional center campus and would encourage them to look through the report.

Judy: Is there a need for marketing monies in the budget? Need to let people know that the program is available. Is there going to be an individual budget for marketing or should rehab budget for this?

It was suggested that a marketing budget be established for the entire facility. Mr. Saufferer stated that we are forbidden by law to advertise. It can be labeled regional education or information passed on by social service organizations, doctors, etc. who can state that this program is available.

Mr. Layton suggested that someone is needed to comb the entire document to see that the figures are in agreement and errors are detected. Mr. Saufferer stated that his Executive Committee will look the document over and identify any changes that need to be made.

Pat stated that she would like any suggestions for change in budget or otherwise be given to city staff - rather quickly so that the time-lines can be met.

Persons wishing copies of the Negotiating committee text & budget memo: Bob, Viril, Marilyn, Bridget.

The committee adjourned at 1:45 to meet at 2:00 pm at City Hall to preview the video.

Recorder: Helen Gillis

## REGIONAL CENTER TASK FORCE SPECIAL MEETING July 25, 1988

The committee met at the Atrium Rose Room at 11:30

Present: Helen Hoffman, Chair, W. C. Saufferer, Shelly Rockman, Pat Gustafson, Wade Karli, Nancy McCarthy, Bob Armagost, Marilyn Carstensen, Judy Tartaglia, Viril Layton

Guest: Jack Huus, Administrator, Olmsted Human Services Campus

Ms. Hoffman gave a brief resume of the beginning of the Task Force Committee as an update for Mr. Huus - interested volunteers to come up with alternature uses for Faribault Regional Center in downsizing.

## Rehabilitation - Judy Tartaglia

Originally this subcommittee had visions of rehabilitation for the muscular-skeltal and brain injured victims of accidents/disease. Have decided to zero in on brain injured with the underserved area of 20-30 year old closed head injuries with aggressive behaviors.

The staff at Faribault Regional Center are prepared to deal with this type of behavior. Are concerned mainly with reimbursement and are looking for assistance from legal/accounting areas as to what to watch for in setting up such a program.

We are looking at a inpatient population for an upcoming project for the use of Faribault Regional Center campus. The long range plan could involve brain tumors, dimentia, etc.

The subcommittee will be visiting three other facilities to see what their admission criteria is as to what type of patient they do not accept. We may want to look at the Dakota's and Iowa as well.

Judy wants to be challenged now so that this committee will be prepared in November when we will have to explain our proposals to the legislature. Needs feedback.

#### Residential Populations - Bob Armagost

This subcommittee has been looking at a number of residential settings for various need groups. The number one is a unit for the mentally ill which is currently not available in Faribault - 2 20 bed units - one locked and one open.

Have had some discussions as to the possibility of providing some type of care and service to veterans; are also looking at the possibility of correctional programs for juveniles or adults and also to provide day care services along with shared services.

## Shared Services - Nancy McCarthy

Shared services subcommittee has been looking to market the expertise that is now available at Faribault Regional Center - like out-patient seizure patients in the local area. Along with several other things such as staff training for people working in facilities for the mentally retarded.

Have sent out a survey and have been receiving some fairly positive responses to that in the area of serving the developmentally disabled in the community.

Shared services (con'd)

Have also been addressing the possibility of respite care mainly for doing some staff sharing for community use.

Judy stated that they would also be interested in looking for respite care and day care for persons involved in the head injury unit.

## Ediication - Viril Layton

We are looking at three things as educational needs for the community:

- 1) Pre employment, post employment and retraining,
- 2) Existing staff use using the staff development department at Faribault Regional Center in redirection of some employees into other areas of need.
- 3) Continuing education on a regional and state basis. We would serve the regional center requirements and assist the group homes as well, using the resources of Faribault Regional Center staff and other state educational groups.

They also did a survey and found some commonalities of needs. There are some specialized needs for each area proposed. The other sub committees will present their needs and this committee would be involved in filling those needs.

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Helen Hoffman explained that we did receive monies to write a proposal for alternative uses for Faribault Regional Center. The deadline for subcommittee reports is August 8. At that point, the committee will collect the ideas and funnel down to the areas that are most concrete. It was to that end that Mr. Huus was asked to share his experiences with the closure of Rochester State Hospital.

Some high points of Mr. Huus presentation:

The economic impact was not as great as it would be in Faribualt, but what you are doing is a good thing even if the Regional Center does not close.

Rochester closed very suddenly and they were faced with the effect on the employees. The state did very little to generate retraining of those without jobs. Because of their experience, we may now be better geared to respond to the situation.

Originally Olmsted County was leasing the space from the state and at one point suggested that the county be given the space. After days of discussion they took up the challenge and the county bought the grounds for \$1.00.

This turned out to be an incredible undertaking. We were looking at spending one million dollars per year just for maintenance of the area. But, in looking back, it was important for the community to gain control of the destiny of the facility.

Some of this concept may match your present endeavors. You may want to have a financial stake in the facility.

The venture became one of high finance and high risk. The federal prison took 2/3 of the campus for 14 million dollars. This did not solve all the problems - it did not solve any of the employee problem and the patient problem. Human cost was a price that did not need to have been paid.

We were charged with using the area for human services needs and to be sure it paid for itself. We did hire some financial and legal firms to assist with this planning.

The campus was set up as an enterprise and run like a business, with no tax monies for assistance. As it turned out, every inch of the place is rented at the present time - tenants include 21 agencies serving human services - private non-profit organizations some of which are: Red Cross, Child care referral, emergency services, pollution control, short term mentally ill unit, Olmsted County DAC, farm credit bureau, head start, etc. All are happy with the location and facilities and there is no giving away of county space.

If you don't make the finances work, you don't get the whole operation to work. You need some very hard and sound agreements with the state as to your stake in this program.

The whole concept of renting space was done by going first class. We presented good space where everything worked and remodeled to suit the needs of the tenants to include a conference center for the various agencies to use for a fee.

It is important to have someone running the place as an independent person who can make independent decisions, but you need to cut a deal with the state and have the community get involved and have a stake in it.

What you are doing here is a great step. You must have a concept of what you want this to look like in 5 years and on into the future.

Mr. Saufferer wondered what the county furnishes with the rent - do they furnish heat and lights, water and maintenance? Mr. Huus stated that this is built in the cost factor of the rent - they furnish all the utilities and general maintenance, but do not furnish janitorial services. The costs of maintaining and heating each area is pro-rated into the rental rate. Maintenance which is individual - moving of desks and things of that sort are taken care of by the renting party.

Mr. Huus showed pictures of the redesigned campus with new entrances and rerouted roads and shared brochures and reports to confirm the success of this venture.

Many Rochester residents were fearful of the federal medical center on the scene, but this has proved to be unfounded and there is no further demonstrations of bad feeling from the townspeople. The fencing and lighting they have installed in very attractive.

The question of "how did you sell the federal prison to the community?" was discussed. A number of meetings was held and the public was invited, an information center was established on campus complete with video tapes and speakers held informational sessions which were open to anyone interested - detailing the images so that the community could envision the end results.

Mr. Huus encouraged the committee to seek the assistance of a marketing expert and to get consultants on financing and legal assistance as well. You need to have the same financial interest as any private industy.

The committee wondered what kind of relationship do we want to have with the state? The buildings and land are owned by the Department of Administration and not by Human Services. It is absolutely essential to have the backing of the state legislators from this area and critical to have someone with a big influence in making decisions.

Mr. Huus favored the establishment of enterprise where you would have more freedom in marketing your package. You need to have the same financial interest as any private industry.

The committee thanked Mr. Huus for coming and asked if he would be available for further consultation and he is willing to meet again

The meeting adjourned at 1:30

Recorder: Helen Gillis

Next general committee meeting August 8, 1988

#### REGIONAL CENTER TASK FORCE MEETING August 22, 1988

The Task Force met at the Rose Room, Faribault Hotel and the meeting was called to order at 11:50.

Hoffman, Chair, Marilyn Nancy McCarthy, Present: Helen Carstensen, Shelly Rockman. Sammon, Saufferer, BobArmagost, Diane BillViril Layton, Russ Kennedy, Charlie Pat Gustafson, Elaine Dr. Richard Berge, and Turnbull, Wade Karli, Beaupre, Terry Anderson.

Guests: Judd Smith and Ernie Cameaux

- Motion was made, seconded and carried to accept the minutes of the August 8, 1988 meeting.
- 2. Budget report handed out by Pat Gustafson, who went over the report to clarify any questions.
- 3. Review of outline for reports. Sub-committee members received ahandout which detailed the outline for subof completed reports. This was done so that the reports will come in the same format and was gone over during the meeting to discover anv items needed to be added.

that theeducation subcommittee reports beincluded was suggested each of their final the subcommittee reports as part report as an added category. This would be included as part of #9 of the outline. The final report of the education subcommittee would include atotal education budget request with breakdown of individual budget needs for each subcommittee.

#### 4. Subcommittee Reports

Shared Services - Nancy McCarthy Copies of the shared services report were Surveys previously the distributed. done will beadded tofinal report along with supportive data for the corepopulation numbers.

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One big thing will be whowill be paying for the services. It was felt that referrals would behandled through social services and casenetwork managers. Once a is set up for contacting theservices, payment will the present made with system.

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The department has said they will not propose legislation that will authorize payment for services. We may need a small subcommittee to go into the

area of additional staff which would become necessary for shared services. The regional center is presently an M.A. vendor, but would need legislative approval for outpatient services.

There would also be a need to maintain accumulative funds for the replacement of equipment, employee salary for vacations and sick leave, etc.

It was felt that Day Programs and SOCS should be added into the shared services concept for a more comprehensive program. Do we want to add a SOCS proposal for MI at this time. It was decided that this would not be the proper place to add this in. We can identify the need at this point. There are various groups providing services to the M.I. but there is no clear-cut method of payment. We can make a suggestion that the department take a look at pursuing M.A. for M.I. people in the community.

There is a DHS ruling against the same people providing Day Programs as the Residential Programs. The suggestion was made that there be two separate directors operating under one CEO and operating under an advisory board.

<u>Residential Services - Bob Armagost</u> - Will be meeting further with the subcommittee and get together with Shelly in the middle of the week to bring in the final report. Have put together good documentation and have addressed some of the questions brought up today.

Present plans include a psych unit, veterans' proposal and a skilled nursing/special needs facility. Still working on the possibility of corrections but do not have a specific proposal. We do not want to close the door on the possibility of a juvenile correction facility, but do not want to submit a definite proposal at this time.

<u>Rehabilitation Sub-Committee - Shelly Rockman</u> Copies of the report were distributed. There is another meeting of one of the small groups this afternoon to bring more information together. The entire subcommittee will be meeting on Thursday to enlarge on the report.

There is a definite need for provision of active treatment for the dimentia aged in the community. We need to address what licensure they will operate under. Examine the present licensure under DHS Rehab centers. We need to take a good look at the present licensure to provide services suggested in the report.

We need to provide for the existing state employees but we also need to determine how inter-dependent all these units will be. Mr. Saufferer stated he would like to see the facility as the landlord with everyone becoming responsible for their own programs and contracting needed services.

#### Education - Viril Layton

- 1. What kind of consortium are we going to c reate to provide the needed training?
- 2. Who is going to pay for the training?
- 3. There are all kinds of private education vendors available.
- 4. Where are we going to house this and who is going to provide the space?

We need to look at what is best for us - Department of Education or DHS. We are in a very unique area for training . This project could pull some of the training areas together - both private and public training is going on and could be expanded and shared.

Helen stated that she brought Judd Smith into the meeting so that he could get an idea of what is needed to update a video which will outline the joint venture of education and special needs - the video would accompany the final proposals.

We may need to request authority to operate under multiple licensure and also be in a landlord situation, as well as requesting retraining dollars for the displaced workers. We will need to submit ideas to the negotiating team as to the establishment of additional SOCS programs.

When you submit your plans, describe the program and facility needed, but do not name specific buildings.

Shelly asked if the committee members are receiving the minutes and various information mailings. If you have not been receiving meeting notices, etc, please call Shelly.

The meeting adjourned at 1:30

Recorder: Helen Gillis

PLEASE NOTE: the next task force meeting is scheduled for 11:30 on September 13.

That is a <u>Tuesday</u>, not the normal Monday. The following meeting will be Sept. 26, both will be held in the Atrium Rose Room and notices will be sent.

# **Faribault Regional Center**

## August 22, 1988 A Task Force Report Volume 1, No. 3

The Task Force welcomed Jack Huus as guest speaker at a special meeting on Monday, July 25, 1988. Jack Huus, Campus Administrator of the Olmsted Human Services Campus in Rochester, Minnesota, witnessed the closure of the Rochester State Hospital when the state pulled out of its responsibilities in the Rochester Community. Mr. Huus was instrumental in assisting Olmsted County in picking up the pieces of this disaster and subsequently transforming the campus from state owned buildings and land to a county owned, selfsupporting entity. It was a very enterprising and somewhat risky venture for Olmsted County, as the tax payer burden would be \$1 million annually to cover maintenance costs of the closed facility.

Mr. Huus spoke with enthusiasm and commended the Task Force for initiating a study, and for the progress that has been made. He pointed out and discussed some issues that were a major concern in Rochester and may also be for Faribault. For example, there were a large number of displaced workers when the Rochester State Hospital suddenly closed. Faribault employs more workers than Rochester employed, and there are fewer jobs in this region that could

appropriately utilize the knowledge and skills Faribault Regional Center employees possess. Faribault also has a larger number of residents at the Regional Center who would require placement.

The Faribault Regional Center Task Force subcommittees have submitted a draft to the Task Force of additional uses for the Regional Center. The subcommittees conducted research to identify the underserved populations in the Southeast region of Minnesota. Following their research, the major thrust of each subcommittee was focusing on the most efficient utilization of Regional Center staff and buildings to best serve the current developmentally disabled residents, as well as the additional identified "in need" populations. Further, they are proposing additional uses that would require a limited amount of retraining for staff and a limited amount of renovation to meet licensure standards for various programs.

## REGIONAL CENTER TASK FORCE MEETING August 22, 1988

The Task Force met at the Rose Room, Faribault Hotel and the meeting was called to order at 11:50.

Present: Helen Hoffman, Chair, Marilyn Carstensen, Nancy McCarthy, Shelly Rockman, Bob Armagost, Diane Sammon, BillSaufferer, Viril Layton, Russ-Kennedy, Charlie Turnbull. Wade Karli, Pat Gustafson, Elaine Beaupre, Dr.Richard Berge **Terry** Anderson.

Guests: Judd Smith and Ernie Cameaux

- 1. Motion was made, seconded and carried to accept the minutes of the August 8, 1988 meeting.
- 2. Budget report handed out by Pat Gustafson, who went over the report to clarify any questions.
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When you submit your plans, describe the program and facility needed, but do not name specific buildings.

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The meeting adjourned at 1:30

Recorder: Helen Gillis

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# FARIBAULT REGIONAL CENTER TASK FORCE MEETING October 17, 1988

The Task Force met at the Atrium Rose Room at 11:30 The meeting was called to order at 12:00

Present: Helen Hoffman, Chair; Terry Anderson, Shelly Rockman, Russ Kennedy, Dr. Richard Berge, Viril Layton, Bob Armagost, Nancy McCarthy, Pat Gustafson, Marilyn Carstensen, Diane Sammon, Bonnie Klien, Wade Karli, Judy Tartaglia, Bridget Stroud (for W. Saufferer)

A short meeting was planned to go over things that we are aware of that we need to cover and complete.

Mayo Residency Program in Psychiatry from Mayo to rotate through the Regional Center: Judy will call Dr. Hanson and discuss this with him just to find out if he is in favor and is willing to research the possibilities.

Have a deadline for this Friday to have all supportive documents in. Big portion is still to come in from Bill Saufferer.

Pat Gustafson stated that they are pulling together all the information and will finish the draft and ask for special reviewers to review and critique before finishing the final draft. There have been some changes occurring at DHS and Peter's office and this brings changes to include in the final draft.

Terry Anderson stated that there will be more information coming regarding licensure and will contact Judy regarding the rehab. portion.

The mental illness proposal is the weakest component. DHS feels that mental illness can be served with the present facilities. We need to go to the other counties who are being turned away from St. Peter and enlist their support for the 2 20 bed units. We can get facts and figures from the sheriffs' departments of other counties and ask for their letters of support - this is in addition to the social services and county commissioners of other counties served.

We need a final outline to present to the county commissioners. Helen is willing to go to them and make a presentation, but will need to make calls to them and then send them letters. She would like a small group to do a summary of the details of the proposal. Our plan is to blanket the catchment area and we need to be careful to stick within our own region. Helen has visited with a representative from St. Peter and they are not going to oppose this proposal since we are talking only about taking their overflow.

A little update on the video: We are trying to get the deadlines met and the filming should be done this week at the center. We should be able to review the video by the end of this week.

Bob Armagost suggested that we may need to establish an ongoing community committee to see what happens after we have made our presentation to the legislators. Who is going to be the advocate for the Regional Center? Someone from the community needs to screen what is acceptable

and what is not for use of the program. We are going to all the work of presenting to the legislature and who is going to be the watch dog to see that the things we have proposed are being carried out - an advisory board to the CEO. Also, it may be that we identify other needs in the future - things that we now recommend may not be feasible in a year from now. We need to have a core group who would follow through with legislation and rule making and hold policy meetings, etc.

This group would be of a broader base than the task force at present. The present task force would be a part of this community support group but would include a broader representation from the community.

Should we add an addendum to seek legislative approval for this committee? This would show them that we are serious about this and that we intend to follow through. It was decided that it would be better to do a cover letter to accompany the plan stating that we do intend to follow through and monitor the programs once they are set in motion.

Rather than a report, this is a plan and the term "we will" is used. We will have to be very observant and be sure that it does pass on as a legislative milepost.

At the time we present our plan, the task force is ended. We want to see that our recommendations are legislated. Who owns it after the plan is legislated. The task force is no longer in effect so we do need an advocacy group who would be in authority. The task force was legislated and an advocacy group may need to be legislated as well - especially if we would require funding. If we had legislative backing we would have some authority and that may be one way to influence future plans without asking for funding.

We need a general concensus stating that this something that we need to do. We will get some input from Peter and Laura, but generally favor this idea of an ongoing community group. The committee would not have to be attached to the chamber, but would stand alone as a community board. After discussion with Peter and Laura, a report will be given on their opinion.

Helen asked for assistance to do a cover letter for social services and county commissioners seeking their support - basically an executive summary outlining our proposal and asking their support. Nancy, Helen and Pat will meet on this matter.

Bob Armagost had a couple of questions. (1) Has anyone looked at all the various proposals as to what we are asking for staff? Does the Regional Center have enough employees to cover these programs if they do receive approval? (2) What is the impact of SOCS on the private providers presently serving the developmentally disabled? The department is planning for 100 SOCS homes and 900 private homes at this time. Russ stated that he has no problem with the SOCS plans.

Bridget cannot get the budget figures to us until the 24th. The entire plan will be presented for review on November 1 - at 11:30 meeting.

After the plan is presented to the various groups, Peter will arrange to have it presented to the Governor before it is presented to the general legislature.

This group has made it presence felt. Many of the other centers are eager to be among the first to have a *piece* of what is new and different coming out of this proposal. It is a real positive step for this task force to be so active and to have such an effect on other concerned areas. It is great that Faribault is not just interested in preserving the "status quo" but interested in a multi-purpose venture.

There was discussion on other state agencies - i.e. Willmar and Brainerd and the effect this program may have on operations.

The corrections department is now becoming interested in use of the Regional Center campus and are coming up with some proposals. We (Minnesota) will definitely need to have juviniles out of the local jails and prisons or we will lose federal monies — It is things like that that the ongoing advisory group could be very effective in looking at.

Bridget, Shelly and Pat will meet to discuss budget and be sure that they are coordinating on the figures that need to be added in. There was a question of how the per dium figure was arrived at in regard to the SOCS program. Also, a ballpark figure was given to the Shared Services section and this needs to be elaborated on. Bridget stated that she will be meeting with others to discuss shared services and to justify over-complement figures. Helen asked that as figures for the various sections are completed, they could be included in the final draft and it would not be necessary to send them all at once.

Bridget will contact Shelly to set up a date and time for meeting on the various sections.

The meeting adjourned at 1:30. Next meeting November 1, 1988 - 11:30

Recorder: Helen Gillis

## REGIONAL CENTER TASK FORCE MEETING MINUTES

## March 23, 1989

The Regional Center Task Force met on Thursday, March 23, 1989, at 11:00 a.m. at The Atrium.

Present: Helen Hoffmann, Chairperson, Marilyn Carstensen, Nancy McCarthy, Peter Rodosovich, Bridg Carpentier, Steve Carpentier, Pat Hentges, John Gullickson, Dave Schweisthal, Nancy Hohbach, Milt Plaisance, Gerald Pineur, James Nielsen, Bill Saufferer, Ron Osterbauer, Dale Szyszka, Steve Griesert, Dean Purdie, Ann Bjork Vohs, Elfi Rice, Phyllis Wegner, Patricia Gustafson, Clarence Purfeerst, Judy Tartaglia, Russ Kennedy, Bob Armagost, Judy Saye-Willis, Pauline Schrieber. Also present were Orville Pung, Bill McRae, Fred Holbeck, Andy Neal, and Ralph Lealler.

Senator Clarence Purfeerst began the meeting with a brief introduction. Helen Hoffmann spoke briefly and asked each person present to identify themselves. Representative Peter Rodosovich explained the process of the Task Force Plan from the development stages through the final recommendations. He then introduced Commissioner Orville Pung from the Department of Corrections.

Mr. Pung shared his familiarity with the doubts and concerns expressed by the community. Other communities reacted similarly when correctional facilities were located in their neighborhoods. Lino Lakes used to have a Juvenile Diagnostic Center on the current site of the medium security prison. The community has experienced less crime because the juveniles were not in a locked facility and tended to run away. In Rochester, where the Federal Medical Hospital is located on the former State Hospital campus, there was great concern initially, but now neighbors are positive about the facility. The Willow River-Moose Lake facility has not had any problems.

The Department of Corrections was asked by the legislators to look at RTC's for other potential corrections uses and what the cost would be to implement and run a correctional facility. The Faribault campus was favorable because of the location.

Mr. Pung defined "medium" security in relation to the other levels of security within correctional facilities. Oak Park Heights is a "maximum" security facility and is considered possibly the most secure facility in the U.S. The next level in order of decreasing security is a "close" custody facility such as Stillwater (for inmates over 24 years of age) and St. Cloud (for those under 24 years). A "medium" security facility is aimed at those who are close to the end of their sentence. Inmates must apply to transfer to a medium security facility and must meet the criteria of the facility. The medium security facility such as Lino Lakes is the part of the system that is geared to prepare inmates for their return to the community. If bills are passed by the Minnesota legislature to lengthen stays, the population of inmates will likely increase and the department will be looking for additional space.

Fred Holbeck, Superintendent at Lino Lakes provided some information about the Lino Lakes facility. Lino Lakes has 304 inmates from St. Cloud and Stillwater. None of them come off the street because they must have their behavior evaluated and must meet the criteria of the facility. Any behavior problem within the past six months would make an inmate ineligible to go to Lino Lakes and any misbehavior while at Lino Lakes results in their return to the sending institution.

Inmates are paid for working at the facility. They participate in educational programs ranging from remedial to vocational programming. Treatment programs are offered for Chemical Dependency and Sex Offenders. The Lino Lakes facility has an excellent relationship with the community. Inmates do public service work if asked by the community.

Ralph Lealler, former mayor of Lino Lakes in office during the conversion of the juvenile facility to the medium security prison, talked about what the conversion felt like. The community did not feel good about the juvenile facility because the juveniles ran, stole cars and damaged property. The announcement that a prison would replace the existing facility caused an uproar due to fear of the unknown. The community insisted that a watch tower be built which is rarley used and very ugly. The Department of Corrections was very cooperative throughout the conversion. The community became interested and supportive when they realized cars were no longer stolen and property was no longer damaged.

Andy Neal, Lino Lakes City Council member spoke on behalf of the community about the value of the community service done by the inmates to benefit the community. The community also recognizes and values the \$10 million annual payroll.

Bill McRae, Superintendent of the St. Cloud facility for 21 years, spoke about the report "A Plan for Converting Faribault Regional Center to a Medium Security Correctional Facility, March 1, 1989." He was given the task of developing this report, including every item and cost needed to implement a prison on the campus. Some of the security features include a 12 foot double chain link fence, razor ribbon, cameras, electric sensor, perimeter vehicle and armed guard.

A question/answer period followed the presentations. The following topics were addressed.

The type of offenders in a medium security prison are those who are in the last year of their sentence for repeated property offenses. This group makes up about 50% of the committments. The rest of the population is comprised of those who received long sentences and have spent many years in a higher security facility and are nearing the last year or two of their sentence.

The medium security facility proposed for the FRC campus would not be converted to a higher security facility in the future. A maximum security facility would only be feasible through new construction and is not suitable for the existing campus.

The kind of goods or services that would be purchased from local businesses include all clothing and supplies inmates would need for their release and medical services from the hospital.

The facility would not expand to accomodate more than the proposed 500 inmates as 500 is the national norm. Another site would be selected as the need arose.

With the "graying" of inmates and the longer sentences being considered, the Department is looking at programs for those with special needs such as elderly and medically fragile. Currently Oak Park Heights has a psychiatric program for inmates and two cottages at Lino Lakes have DWI offenders.

A significant number of FRC employees could convert from the existing facility. The human service jobs are compatible with corrections so a portion of the 270 jobs can come from the community. Women do work in prisons with male inmates. The Minnesota Department of Corrections does hire women and persons over age 35. The Federal Government does not so sometimes that is misleading.

A former teacher at the St. Cloud facility remarked that the inmates have fewer behavior problems than a teacher would encounter in a public school and she always felt safe teaching there.

Inmates could do public service work at the Nature Center if desired. The fence area around the prison could be landscaped with trees or whatever was desired to preserve the atmosphere of the Nature Center.

A Citizens Advisory Committee would be critical to have if the plan is adopted. Other communities have had them and they are an asset. If the plan was accepted, the Department of Corrections estimates that it would take six months to prepare the site and implement the program.

Citizens of Faribault are welcome to tour any of the prison facilities to become more familiar with them.

Respectfully Submitted,

Shelly M. Rockman

## REGIONAL CENTER TASK FORCE MEETING September 26, 1988

The meeting was called to order at 12:10 by Helen Hoffmann, Chair. Meeting was held at Rose Room, Faribault Hotel Atrium

Present: W.C. Saufferer, Shelly Rockman, Charlie Turnbull, Bob Armagost, Dr. Berge, Nancy McCarthy, Bonnie Klein, Terry Anderson, Diane Sammon, Wade Karli, Judy Tartaglia, Viril Layton

Helen Hoffmann announced that she will be gone October 5-16 and committee members may contact either Nancy McCarthy or Bill Saufferer in her absence.

General Information - Reactions to the Alpha House proposal? Bob - the argument in favor of location here is "at least you will know where they are."

Judy - Questioned whether anyone had investigated their reputation and was told that they have an excellent reputation.

Viril - That type of outside group is the kind that we could phase into in the future. What would be the community reaction? Would DHS be involved?

Helen - We are running this past the legislative aide to see who would have the expertise to deal with this. It would be best to let the union lead on this. We would give some general guidelines and have identified the needs.

Viril - How do you respond to the individual request for such a facility location if this community wanted this program with DHS?

Bill - He contacted his supervisor regarding the presentation and was given approval to have the meeting. If we did go into this, it would be only as a leasing arrangement. As to governing, we are anticipating that we will still be under DHS and will function under two different governing agents. We will operate under DHS rules for the programs that they govern, for other programs we will lease space and be the landlord and they govern their own programs. We would then improve our lot by providing the space and service - which may include administrative services and procurement and we would have a 30 day escape clause that would be available to both the landlord and the leasing party. Alpha House was a little concerned about security. The rehab center would not be strictly private since we do want to use state employees. It is possible to have the rehab center as a public corporation and get approval to use state In discussing with Laura Kadwell, regarding the rehab center, employees. it may be possible that we will furnish the staff and support services as a landlord and do not see the governing as an issue. The working relationship would be the key to the operation.

Helen: Revised reports were received in the mail or, hand delivered by Shelly. You will see that we have some spaces and gaps and do not plan to fill them in now but will go through and ask for additional information What is really needed today is to identify the resource person for the information that is lacking in the reports. If you come across anything that you do not agree with, this is your opportunity to address this at this time.

Page 1 - DHS-2 - Resource person - Dave Campbell

MI population - Bob Armagost

CD-MR population - Terry Anderson at state level

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Non-DHS Rehab - Judy Tartaglia and Mary Zabel with consultation with

Ann Brutlag

Veterans' Home - Bob - contact with subcommittee members

Juvenile Placement Bob contact with city people and corrections

Fee for Services/Shared Services - Bill & Nancy

Enabling legislation - Terry Anderson at state level

Marilyn Carstensen contact with Mike Morrell

Training and Funding - Viril Layton in contact with Laura Cadwell 
funnel through Bill for budget

Licensing - DHS for programming license

Department of Health for Operating license

Peter, Laura, Bill and Helen will be working together on entire report

Summary of overall budget - need to be sure we are doing a two year budget earliest start would be July 1, 1989 through June 30, 1991. We must be sure that the start up costs and budget are for two years operating. Need to include your cash flow in start up costs.

Overall staff - Bill Overall space - Bill

Bill will prepare the overall budget and city people can convert to graph form.

Shelly stated that city staff need everything in writing and presented to them, and any holes need to be filled in by the resource people. They will be contacting the resource people and need to have all the information ready for next Monday when Pat and Steve can begin to work on this.

In order to tie the entire report together, the executive summary needs to be complete. Simply add page four information to the entire report. There is a need to revise mission statements for some of the individual programs.

Helen - the task force is planning to submit this volume of information, but in order to really congeal we need to have all the reports complete and corrections and additions made for final writing

Bill has drafts of some revisions he wishes to suggest and has forwarded these to Shelly for possible use in discussing with subcommittee resource persons. He went through the suggestions.

Viril stated that we need to be sure to change the dates to be sure we

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are in the proper fiscal period.

Wording needs to be changed on reports - i.e. Shared services need to change a statement that Faribault Regional Center could benefit from this - change to a statement such as the Consumer will benefit.

There is a need to decide the number of clients to be served in SOCS - 2, 4, 6, or 8. It was decided that 6 may be the best for us economically.

We do not want to be specific as to site locations - a 35 mile radius is presently in the contract. A Day Program is one of the items that must be addressed since the clients would have to be transported. Remember that this is going to be a statewide proposal and we would have people from the entire region but the location would be within 35 miles. Fragile cases would be located closest to Faribault Regional Center.

State Operated DAP - First draft - to be operated under CEO, Program Director and Advisory Board

The glossary needs to be complete - several items are not included at this time.

Budget: Start up costs must include cash flow for first year of operation. Need to identify how much is start up and how much is ongoing.

Need to identify the entire report as Regional Center Task Force Plan - not study.

Judy - We do need to add a statement regarding support services for the family. Do we need to write up how other regional centers could set up a similar program?

Veterans section - just need to update the glossary and redo the budget for two years.

Title all appendix.

Mr. Layton had some questions regarding the vocational training statement of "98 people - some are non teaching." The department of education only will approve qualified licensed teaching staff. There are many vocational training programs at the present time using other professional persons to do the training and these are licensed under DHS.

Where do the Deaf and Braille School and local education programs fit into the proposal. Helen stated that she will be presenting the proposal and will depend on the various subcommittee members to provide credibility to statements and technical information.

Essentially Wilson Center and the other education departments are allowing their professional staff to be members of this committee as a community gesture and in defense of the presence of the FRC. None are being paid

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for this endeavor. We will be establishing programs that can be interchangeable and benficial to other departments and will increase the present cooperation with the various agencies and groups.

Helen - in 5-10-20 years from now, something may come up again and we need to look at this as a long term project when we will not be here. We want to put together something that others can carry on.

The plan is to work with Peter as the intuitive person who is guiding us and he will provide the expertise needed to submit the plan in the proper form and wording and bring in the other commissioners as we progress.

Members were urged to go through the entire report and bring up any suggestions for additions and completions so that we have a comprehensive plan. It is better to have too much and delete some than to have an incomplete statement or proposal.

The meeting adjourned at 1:45

Recorder: Helen Gillis

## The Conservation Foundation

September 30, 1988

#### MEMORANDUM

TO: Members of the RTC Negotiating Committee

FROM: Facilitators Howard Bellman and Tim Mealey

SUBJ: Minutes from Previous Meetings and Scheduling of Future

Meetings

Enclosed you will find draft minutes from our last meeting, as well as meeting highlights from the information exchange meeting that was attended by a number of community representatives and DHS staff on September 14, 1988. Please review the minutes and let us know at the next meeting if any changes or corrections are needed.

As you should be aware by now, the RTC committee meeting that was scheduled for October 5, 1988 has been canceled. The next committee meeting will be held on October 19, 1988. The location of the October 19th meeting will be announced in a mailing that will be distributed by DHS representatives sometime next week. Three additional Committee meetings are scheduled for November 2nd, 9th, and 16th. (The meeting that was tentatively scheduled for October 26th has been canceled as well.)

This schedule change was made in order to provide all of you with an opportunity to further refine your positions and proposals before the Department puts pen to paper on the first draft of what we have been referring to as a "single text."

We are aware that many of you are, or will be, meeting with other Committee members in various configurations during this interim period to work on refining existing proposals or developing new proposals. We strongly support these activities and urge you to continue in these efforts.

The October 19th meeting will be devoted to surfacing any of these proposals before the Department sets out to develop the first draft of the "single text" from which will all be working from in future meetings. The October 19th meeting certainly won't be the last time that you will be able to make proposals, but it will be the last time to do so before the first draft of the "single text" has been developed. After this time we will try to keep the discussion focused on any revisions, additions or deletions that should be made to that text.

Beverly and Brian have informed us that they will continue to meet with any Committee member who wishes to meet with them up until October 19th Committee meeting. After this time they will concentrate all of their efforts on producing the first draft of the single text, which they intend to complete and distribute on October 26th. Assuming they meet this schedule, the entire Committee will have one week to review the document before the November 2nd meeting. We will then spend the next three meetings refining the language used in this single text in an effort to achieve consensus.

In closing, we believe you are making steady progress toward the ultimate goal of this process. To be sure, there are many issues that have not yet been resolved, but we are beginning to see some definite signs of hope that they may be resolved in a mutually satisfactory manner. As you begin to make some very tentative commitments at this critical phase of the negotiations it is extremely important that you keep in close contact with your constituencies so you can be sure that the tentative commitments you are making will be acceptable. This may require a significant amount of time and energy for some of you, but it is essential to the overall success of this effort.

We may be attending some of the smaller meetings that will be taking place between now and the full Committee meeting on October 19th meeting. Please feel free to call either of us if you wish to discuss any proposals that you plan to make at the October 19th meeting.