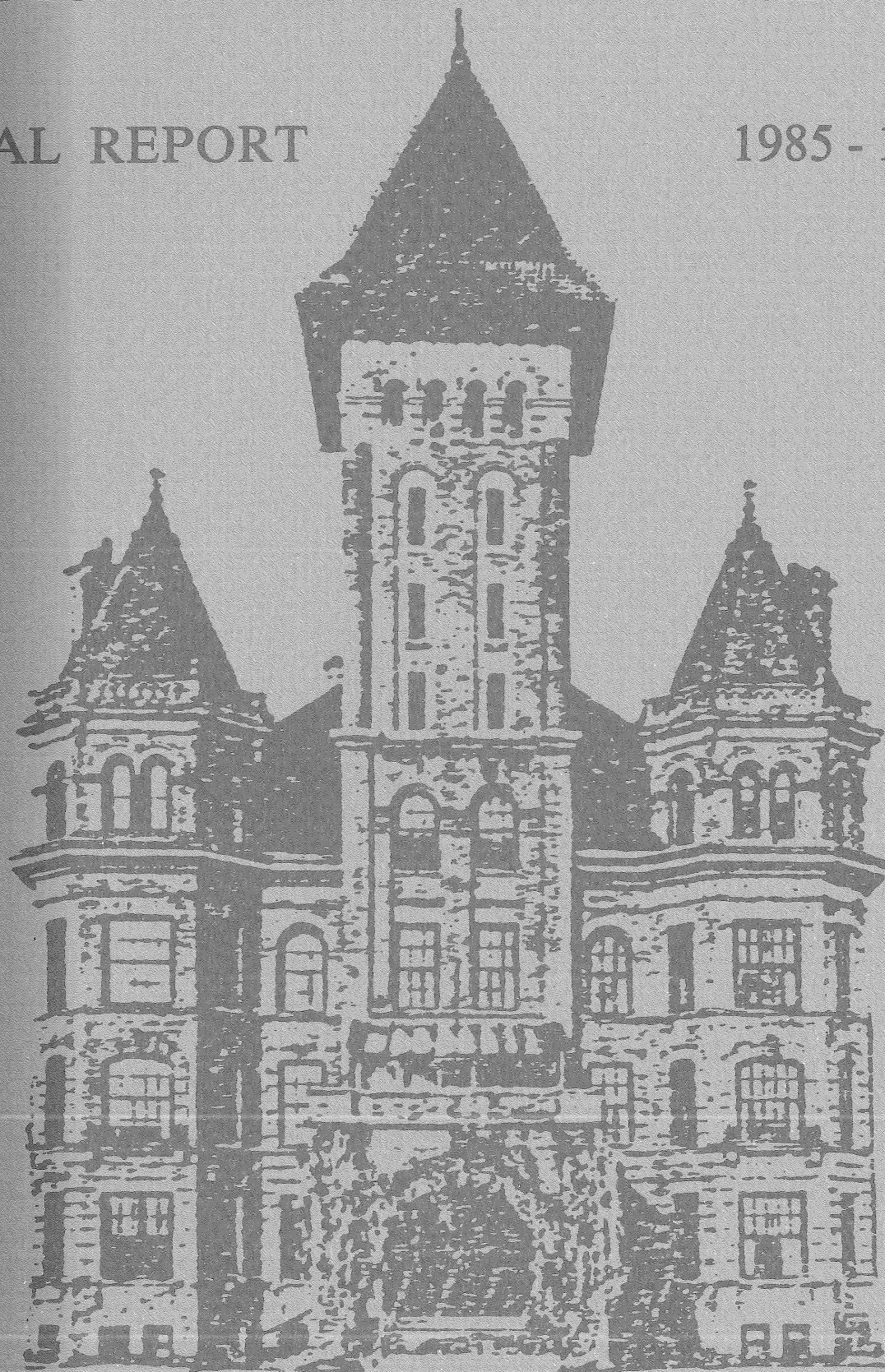


FERGUS FALLS  
REGIONAL TREATMENT CENTER

ANNUAL REPORT

1985 - 1986



A Tradition of Caring  
Since 1890

RC  
445  
.M6  
F3x  
1985/86



# Fergus Falls REGIONAL TREATMENT CENTER



North Union Avenue, Box 157, Fergus Falls, Minnesota 56537-0157  
Elaine J. Timmer, Chief Executive Officer

(218) 739-7200

October 1986

Dear Friends,

I am pleased to present to you the annual report for the Fergus Falls Regional Treatment Center. The information contained in this report covers the time period from January 1, 1985 through June 30, 1986.

During these past eighteen months, the Treatment Center has initiated efforts to realign services to more effectively meet the changing needs of the mentally ill, mentally retarded, and chemically dependent in northwest Minnesota. Admissions to the mentally ill and chemically dependent treatment programs have remained stable during this period. The mental retardation program, however, has seen a reduction in the number of individuals served, as clients continue to be placed in community service settings. All three programs have expanded efforts to involve family members in the active treatment of individuals served by the Treatment Center.

Under the provisions of the shared services legislation, the Fergus Falls Regional Treatment Center has extended its specialized services into the community. For example, the Fergus Falls Regional Treatment Center provides chemical dependency counseling to students and faculty at School Dist. #544. Such cooperative efforts among agencies in both the public and private sectors expand services and help to make them more accessible to the citizens of northwest Minnesota. Often residents can pursue treatment with little disruption to their daily lives. Most of these off-campus cooperative efforts have been in the area of chemical dependency. In the future, shared services opportunities will be expanded to include mental illness and mental retardation services as well.

Cooperation is not only limited to client services. In 1986, a contract between the City of Fergus Falls and the State of Minnesota was approved for the construction and operation of a refuse incineration burner at the Fergus Falls Regional Treatment Center. This project assists local counties to utilize an acceptable method of solid waste disposal while generating steam for the Fergus Falls Regional Treatment Center at a guaranteed savings of 8% per year.

The Fergus Falls Regional Treatment Center has served northwest Minnesota for nearly 100 years. We look forward to continuing this tradition of caring, as we face the challenges of the future.

Sincerely,

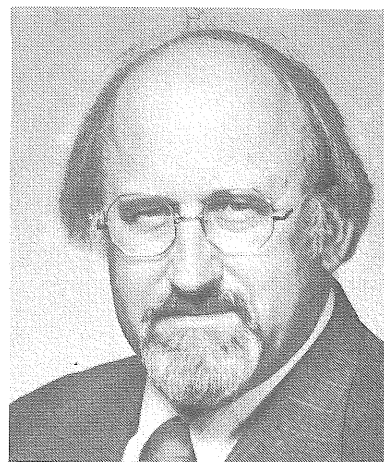
*Elaine J. Timmer*

Elaine J. Timmer  
Chief Executive Officer

## PROGRAM DIRECTORS



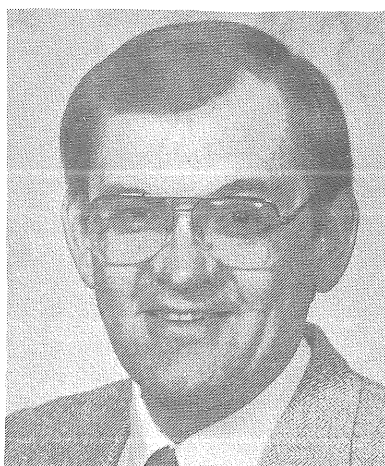
ELAINE J. TIMMER  
CHIEF EXECUTIVE OFFICER



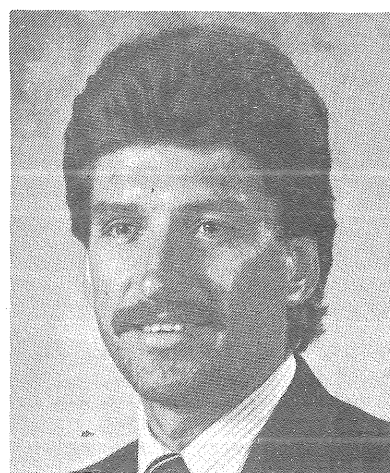
RICHARD C. BAKER, M. D.  
MEDICAL DIRECTOR



M. CURT RAMBERG  
PROGRAM DIRECTOR  
DRUG DEPENDENCY REHABILITATION CENTER



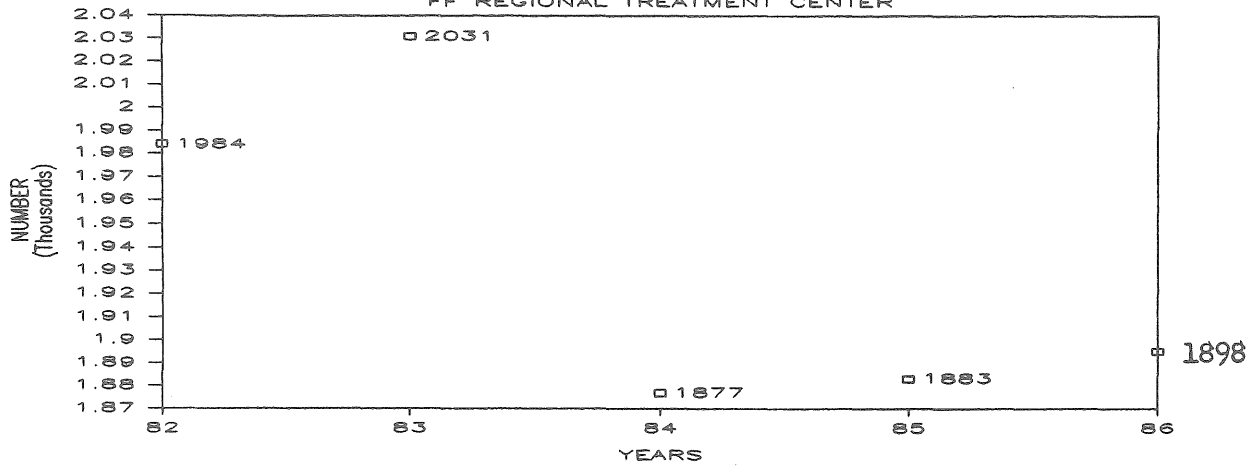
CHARLES E. JOHNSON  
PROGRAM DIRECTOR  
STATE REGIONAL RESIDENTIAL CENTER



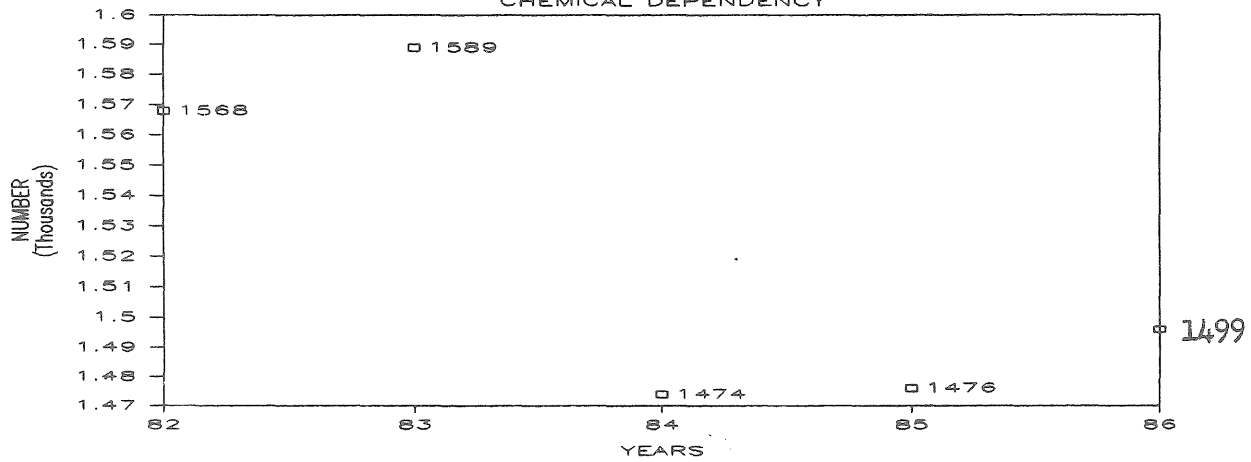
WILLIAM KLEIN  
PROGRAM DIRECTOR  
MENTAL HEALTH DIVISION

# ANNUAL ADMISSIONS

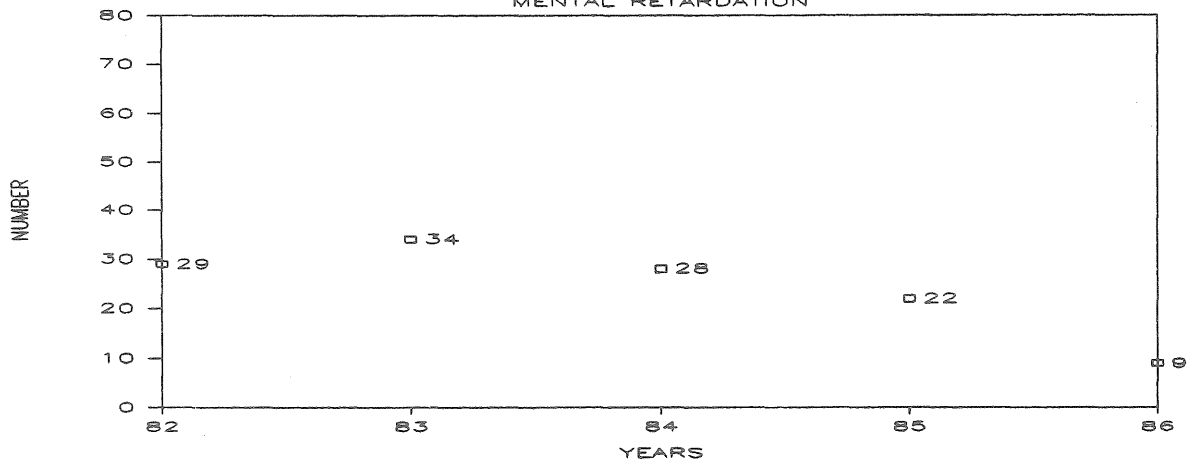
## FF REGIONAL TREATMENT CENTER



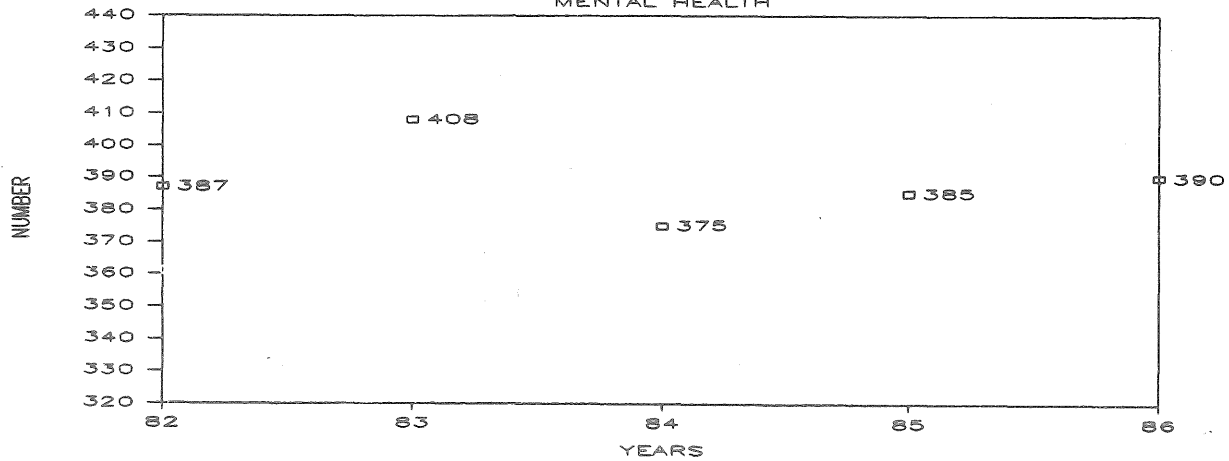
## CHEMICAL DEPENDENCY



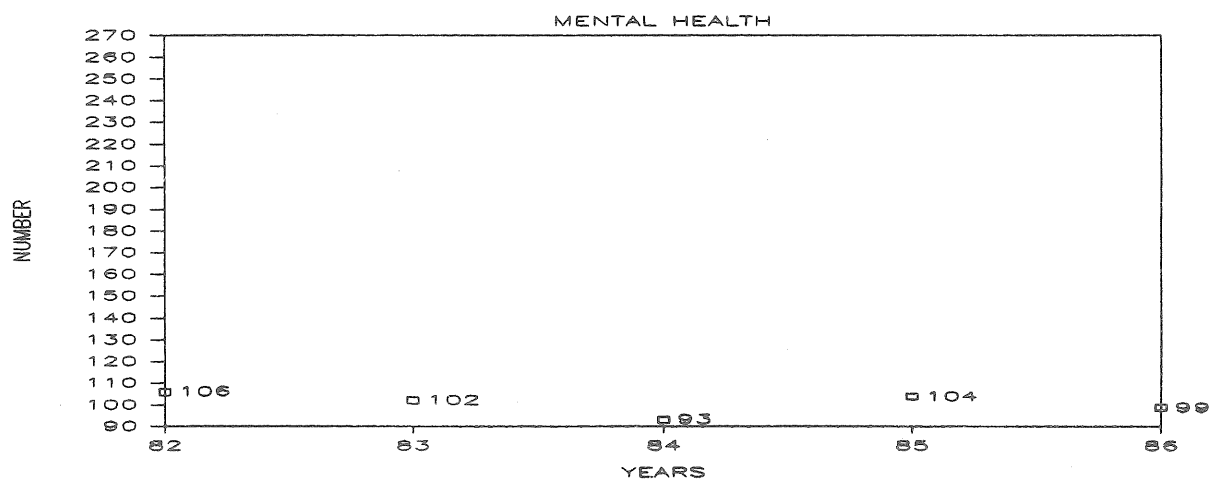
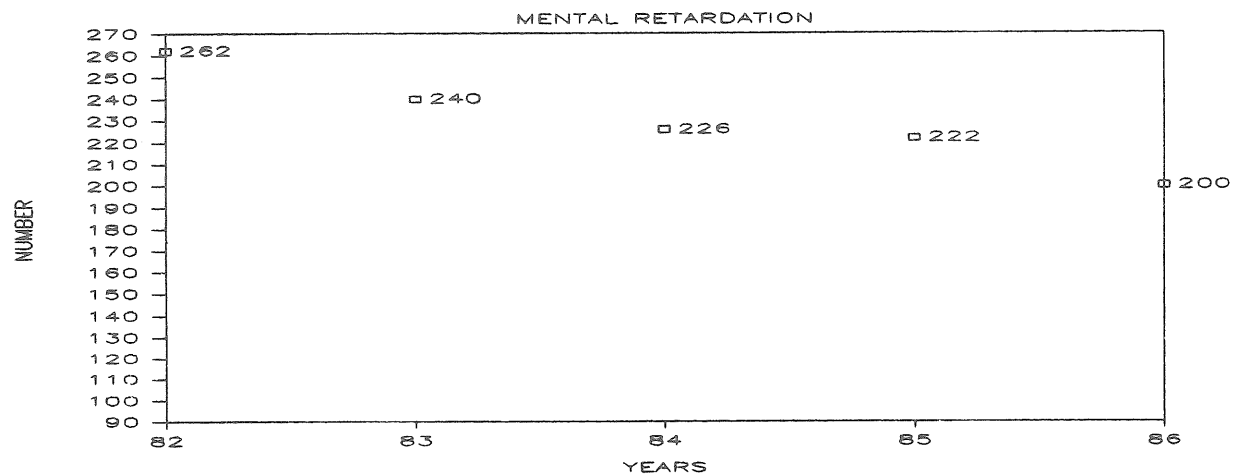
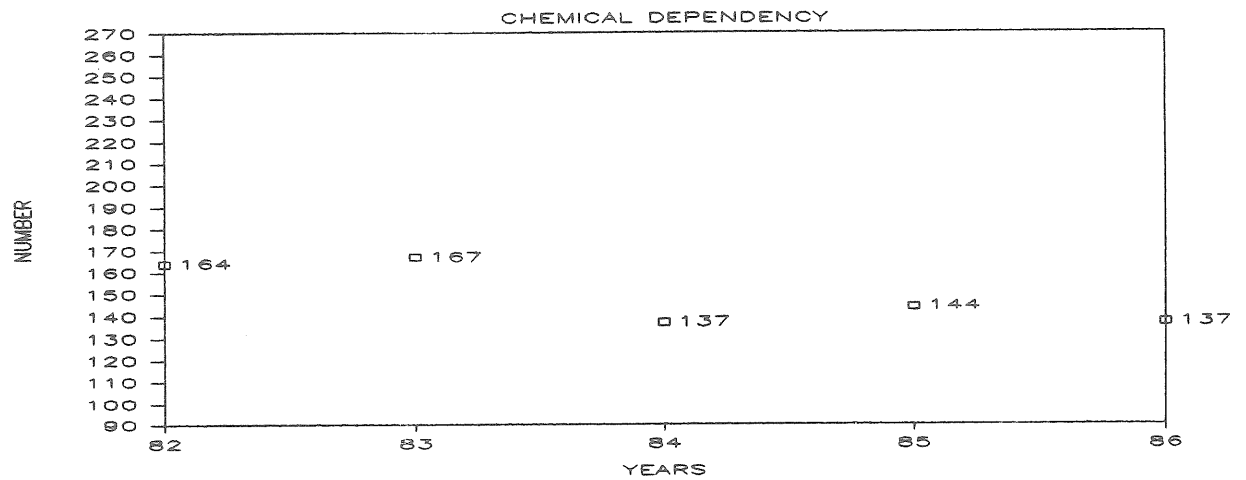
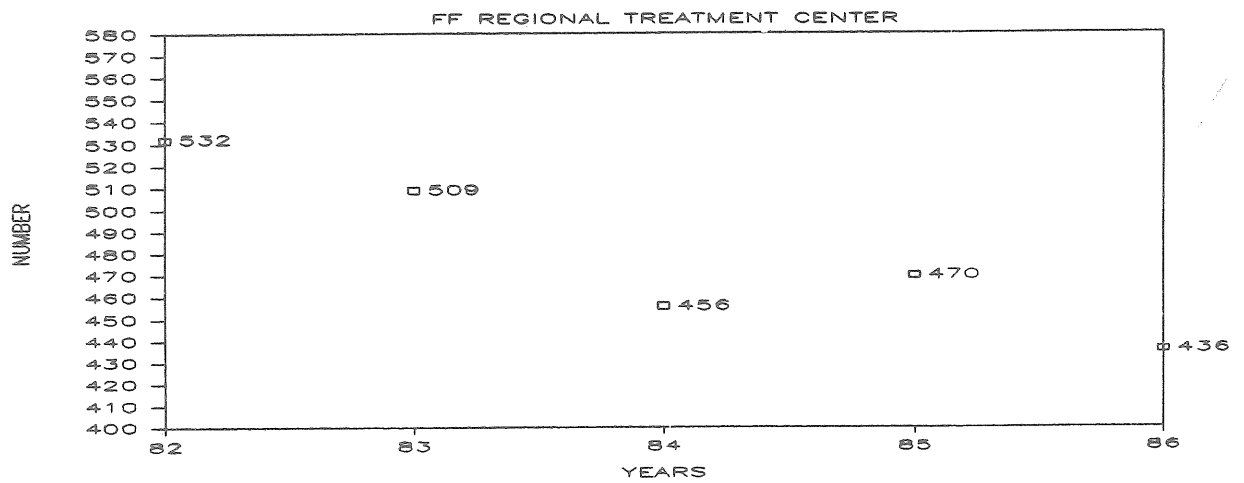
## MENTAL RETARDATION



## MENTAL HEALTH



# AVERAGE DAILY CENSUS



**Admissions to Fergus Falls Regional Treatment Center by County of Residence,  
Disability Group and Status for Fiscal year 1985 - 1986**

	C.D.									M.I.							M.R.				
	informal	committed	hold order	emergency	transfer	informal detox	emergency detox	TOTAL	rate per 10,000	informal	committed	hold order	emergency	transfer	TOTAL	rate per 10,000	informal	hold order	emergency	parental relief	TOTAL
Becker	94		3	4	1	4	10	116	40	29		1	21	1	52	18					
Clay	201		1		1	39	10	252	51	25	1	3	18		47	10			1		1
Douglas	63		1	2		6	6	78	28	19	2	4	12		37	13			2		2
Grant	10		1			4	11	26	37	8			5		13	18			1		1
Otter Tail	124		2	2	1	78	136	343	66	49	1	5	48		103	20			2	1	3
Pope	11					1	2	14	12	5	1		4		10	7	1				1
Stevens	11					4	3	18	16	5		1	9		15	13					
Traverse	10						1	11	20	3			1		4	7					
Wilkin	21					3	7	31	37	4		1	3		8	10					
Subtotal	545	0	8	8	3	139	186	889	44	147	5	15	121	1	289	14	1	0	6	1	8
Kittson	10		1					11	16	3					3	5					
Mahnomen	43			2		5		50	91	4			2		6	11					
Marshall	11	3						14	11	4	1		1		6	5					
Norman	9						1	10	11	4			1		5	6					
Pennington	28	1		1		2	1	33	22	7	1		2		10	7					
Polk	68		1	1		7	1	78	24	16		11	9		36	11					
Red Lake	8	1						9	16	3	1				4	7					
Roseau	21	1						22	18	3	2				5	4					
Subtotal	198	6	2	4		14	3	227	23	44	5	11	15	0	75	8	0	0	0	0	0
Other*	315	25	0	1	0	24	18	383		10	5	1	6	4	26		1	0	0	0	0
TOTAL	1,058	31	10	13	3	177	207	1,499		201	15	27	142	5	390		2	0	6	1	9

\*Other admissions by geographical area:

C.D. M.I. M.R.

North Central Minnesota	61	8	1
Northeastern Minnesota	24	2	
Metro Area Minnesota	188	10	
Southeastern Minnesota	54		
Southwestern Minnesota	46	4	
Out of State	10	2	
TOTAL	383	26	1

**KEY**

C.D. - Chemical Dependency

M.I. - Mental Illness

M.R. - Mental Retardation

**A TRADITION OF CARING SINCE 1890**

**ACCREDITED BY THE JOINT COMMISSION ON ACCREDITATION  
OF HOSPITALS (JCAH)**

## **MENTAL HEALTH DIVISION (Psychiatric Program)**

**William Klein  
Program Director**

### **HELPING PEOPLE TO COPE WITH STRESS AND TO FIND MENTAL HEALTH THROUGH A RESIDENTIAL PROGRAM OF INDIVIDUALIZED PROFESSIONAL PSYCHIATRIC TREATMENT SERVICES**

As "the old order changeth" in 1984, so progress has continued with additional changes in 1985 and 1986. The much anticipated move of the Sporre geropsychiatric unit to ground floor level was accomplished early in 1986. This has provided more client privacy, a more homelike environment, programming space on the unit plus easier access to the outside for our non-ambulatory clients.

The division is looking forward to another major change this fall when the long planned Admissions and Crisis Intervention Center becomes a reality. With the addition of this free-standing unit, initial evaluations and assessments of clients will be completed by an admissions team prior to their return to the community or transfer to a treatment unit. The other division treatment programs will then be able to concentrate their efforts exclusively on providing for the programming needs of their clients.

Admissions to the Mental Health Division continue to run high. Almost 70% of the admissions during the past year and one half were under the age of 40. More than two-thirds of these admissions are in the 20-29 year age group.

The quality of health care services and the environment in which they are provided have always been a high priority for the Fergus Falls Regional Treatment Center and the Mental Health Division. In 1985, the division was again surveyed and awarded a three year accreditation from the Joint Commission on Accreditation of Hospitals. One of the standards reviewed by the Joint Commission requires that there be an ongoing quality and appropriateness of client care, that the division pursue opportunities to improve client care, and that identified problems be resolved. The division's quality assurance plan, which was in its infancy two years ago, has gradually developed and evolved into a viable quality control system. The components of this system include utilization reviews, medical records audits, clinical care monitoring and tracking studies. These components have been implemented and incorporated into the structure of the division.

### **TRENDS AND CHALLENGES FOR THE FUTURE**

Continuing to dominate the admissions picture is the client who is younger, more seriously ill, more chronic and often suffering dual disabilities (mental illness and chemical dependency). Treatment programs have changed in the past and will continue to be modified and changed accordingly to meet the needs of their clientele. Requests have been received from the community for expanded services such as specialized client evaluations, increased crisis intervention and various types of day-care and outpatient services. Our goal is to accept the challenge of meeting those community needs by providing the highest quality services on a competitive basis with the private sector.

# **DRUG DEPENDENCY REHABILITATION CENTER**

## **(Chemical Dependency Program)**

**HELPING PEOPLE TO DEVELOP A HEALTHY LIFE STYLE FREE  
FROM CHEMICAL DEPENDENCY THROUGH A PROGRAM OF INDI-  
VIDUALIZED PROFESSIONAL TREATMENT, COUNSELING AND  
REHABILITATION SERVICES**

**MOVE OF MEDICAL/ADMISSIONS/DETOX UNIT:** The Drug Dependency Rehabilitation Center (DDRC) Medical/Admissions/Detox Unit was relocated in April of 1985 to the second floor of the main building. This move provides an area which is larger and more easily observed. It is a more secure area and is handicapped accessible. This area is also more accessible to the central services such as the Clinic, Reimbursement Office, and Canteen.

**HOPE III:** In December of 1985, DDRC was expanded to include an additional unit, HOPE III, which is located on the second floor of the AW Building. This program is a 60-90 day structured program for treatment of the chronic chemically dependent (CD) person and was developed because of the increased number of referrals being made requiring this type of treatment.

### **SHARED SERVICES CONTRACTS:**

**SCHOOL DISTRICT 544:** DDRC entered into a Shared Services Agreement with Fergus Falls School District 544 to provide CD services one day per week at the Senior High School. Services include classroom instruction, prevention training and services, intervention, group facilitation, and individual counseling. These services were provided for the school year 1985-86. As a result of the positive response to this contract, the school requested to enter into an additional contract to provide services to the Fergus Falls Middle School.

**RED RIVER SERENITY MANOR HALFWAY HOUSE:** Effective November 1, 1985, DDRC entered into a Shared Services Agreement with the Red River Serenity Manor Halfway House, Barnesville, Minnesota. Services provided through this contract by DDRC are program supervision, program planning, public relations, program evaluation, and weekly group facilitation.

**COMPUTERS:** Computer terminals were purchased for each building of DDRC. A software package, PLANR, was purchased which is utilized for treatment planning. It provides effective, measurable and individualized treatment planning for DDRC clients. The counselor, with the input from team members, utilizes assessments to develop an individualized plan resulting in a computer printout.

**PASSAGE OF THE CD CONSOLIDATED FUNDING BILL:** The passage of the CD Consolidated Funding Bill legislation will have an impact on the future role of DDRC. It will allow DDRC the opportunity to compete for funds to provide CD treatment services and to develop residential and non-residential CD treatment programs, satellite programs, etc. based on the needs of the residents it serves. Per diems and other costs for programs will be established for each program based on actual costs, with funds generated being credited to DDRC.



# STATE REGIONAL RESIDENTIAL CENTER (Mental Retardation Program)

Charles E. Johnson  
Program Director

## HELPING MENTALLY RETARDED CITIZENS TO DEVELOP TO THE MAXIMUM OF THEIR ABILITY THROUGH A PROFESSIONAL PROGRAM OF INDIVIDUALIZED RESIDENTIAL CARE, TREATMENT SERVICES AND OPPORTUNITIES FOR LEARNING

The Mental Retardation Program continues to experience a gradual reduction in its resident population. From January 1, 1985 to June 30, 1986, the population in residence decreased by twenty-three. The population reduction is consistent with the population projections upon which the current personnel budget was based. In July of 1985, the Department of Human Services projected the Residential Center's resident population at 217, and this population was at that level. As the resident population reduces, the Mental Retardation Program is also reducing its staff complement. The budget projection in July required a reduction of nineteen positions in the staff complement. This was done. The reduction was accomplished by voluntary resignations and retirement.

As the resident population reduces, the Mental Retardation Program is also altering its use of space. Since December of 1984, the Residential Center has closed two residential units and a day program area. As required by Rule 34, all residential living units are no larger than sixteen beds. These changes have permitted an expansion of space utilization by the programs of the Mental Health Division and the Drug Dependency Rehabilitation Center.

Despite the reduction in staff complement and space available to the program, the Residential Center continues to meet the various staffing and programming requirements. By being creative in the downsizing of the program, the Residential Center will maintain stability in its program efforts and where possible will strengthen and improve the quality of its services. Through the utilization of computer services, the Mental Retardation Program has developed an increased capacity for the monitoring of its program services. The staffing of the Residential Center program is essentially in compliance with the Welsch/Levine Consent Decree.

Numerous changes have been made in the role and responsibilities of the county social services agencies as it relates to the residents of the Mental Retardation Program. The Residential Center is attempting to closely coordinate its activities with those of the county case managers, particularly with respect to admitting and discharging of residents. The county staff are required to perform a more active function in their new role. The staff of the Residential Center are attempting to assist them in this assignment. If the goal of community placement for more of the severely handicapped residents of the Mental Retardation Program is to be reached, greater coordination between this facility and community agencies is essential.

The Residential Center continues to make improvements in its resident living units and day program areas as funds become available. The need for improvements in floor covering is being evaluated. A prioritized plan to meet this need will soon be submitted. Some furniture has been replaced, and some bathrooms have been updated. Improvements in decoration and lighting are in progress.

During the past few years, the mental retardation service system has encountered significant change, not only at this facility but throughout the system. The Residential Center staff are confident that they can and will adapt and hopefully will become a stronger service provider.

# FERGUS FALLS REGIONAL TREATMENT CENTER

## ANNUAL REPORT OF OPERATING BUDGET

July 1, 1985 - June 30, 1986

Program Service	Mentally Retarded	Mentally Ill	Chemically Dependent	TOTAL
Average Daily Population	200	99	135	434
Patient Days (1) (3) (4)	72,817	36,200	49,040	158,057
Expenditures	\$10,343,419	\$4,144,603	\$4,613,062	\$19,101,084
FFRTC Direct Per Diem Cost	\$142.05	\$114.49	\$94.07	\$120.85 (AVG)
Reimbursement (2) Revenue	\$10,713,288	\$2,107,627	\$1,595,245	\$14,416,160
Reimbursement Per Diem	\$147.13	\$58.22	\$32.53	\$91.21 (AVG)
NET ACTUAL FFRTC PER DIEM COSTS	\$(5.08)	\$56.27	\$61.54	\$29.64 (AVG)

NOTE: These figures represent only direct costs at this facility and do not include DHS Central Office, DOER personnel services, Depreciation, and Bonding Costs.

- (1) Reflects State Appropriated funds only.
- (2) These figures include estimated Poor Relief collections.
- (3) This figure includes \$15,400.00 of Regional Laundry operating costs funded by this facility.
- (4) The allocation of expenditures between the program divisions is not sufficiently accurate to rely on these figures for an accurate reflection of a program cost. However, they are useful for comparison purposes as to per capita costs in past years.

## FINANCIAL MANAGEMENT DIVISION

Dennis W. Zilmer  
Business Manager

The division is responsible for the preparation of all budgets, contracts, purchasing, general accounting, inventory, computerization, canteen services, and other related services. These responsibilities are carried out through the following departments within the division: Business Office, Material Control Center, Resident Bank, Canteen, and Computer Services.

The Fergus Falls Regional Treatment Center (FFRTC) has completed the design and implementation of a decentralized non-payroll financial reporting system in a departmental budget format. Through this computer system, information for the planning and decision making process is now available to departments, units, and the FFRTC Management Group. Allocation of funds and information detail can be made to any operational level. This computer-generated information provides a quicker response to unit and department financial needs and helps to assure better utilization of funds. The components of this computer program include the Budget Cost Control System, Resident Banking System, Resident Payroll System, Text Editor, Formatter, and data bases.

Through the use of the TI-990 central computer and personal computers the Resident Bank, Material Control Center, and Business Office have become more efficient and effective in information generation and transfer in spite of the distances between their locations.

The Management Information System and Computer Services Department has continued to expand the quantity and improve the quality of services available to its users. Over one hundred FFRTC staff now use the TI-990 computer in the course of performing their work assignments. The computer now has over fifty peripheral devices on line in the form of terminals and printers.

## PERSONNEL DEPARTMENT

Douglas C. Boyer  
Personnel Director

### FISCAL YEAR 1986

Average Number of Employees	654
Number Hired:	
Temporary/Emergency/Intermittent	23
Regular Full Time/Part Time	47
Total	70
Separations:	
Temporary/Emergency/Intermittent	24
Regular Full Time/Part Time	59
Total	83
Promotions	30
Turnover Rate - Regular Full Time/Part Time	9.0%

	<u>HOURS</u>	<u>FTE</u>
Average Authorized Full Time Equivalent (FTE)		622.9
Total Hours Paid	1,254,708	600.9
Total Hours Worked	1,079,396	517.0
	<u>VACATION LEAVE</u>	<u>SICK LEAVE</u>
Hours Earned	87,955	54,686
Hours Used	81,864	43,839
FTE of Hours Used	39.2	21.0
Hours Balance at Fiscal Year End	72,173	170,343
		<u>SICK LEAVE BANK</u>
Average Hours Used Per FTE Paid	136.2	73.0

Fiscal Year 1986 Salary Allocation \$16,637,410

### Fiscal Year 1986 Expenditures:

Regular Salaries	\$16,134,104
Severance & Vacation Payoffs	140,521
Shift Differential	175,434
Overtime	181,082
Total	\$16,631,141

Percent of Allocation Spent 99.96%



### **Accomplishments In Fiscal Year 1986**

- Developed and implemented a budget projection system with electronic transfer of data from the State Payroll System which provides salary expenditures and salary projections by budget center.
- Completed entry of the employment history for all Fergus Falls Regional Treatment Center employees in the computerized personnel system.
- Implemented new cost code system.

### **Objectives For Fiscal Year 1987**

- Obtain the cooperation and assistance of the Department of Employee Relations and the Department of Human Services to effectively deal with staff utilization problems resulting from downsizing of mental retardation programs.
- Further development of budget projection system to provide additional information to assist with the management of human resources.
- Increased emphasis on the containment of workers' compensation costs and return to work programs.
- Implement procedures for the reassignment and retraining of staff during the realignment of facility services due to changes in the mental health service system.
- Implement a system for monitoring employee position descriptions and performance evaluations.
- Reduce the number of affirmative action disparities in the work force.

## **MEDICAL DEPARTMENT**

**Richard C. Baker, M. D.**

### **MEDICAL DIRECTOR**

The Medical Department is comprised of ten divisions as follows: Medical Staff, Nursing Supervisors, Pharmacy, Dental, Occupational Therapy, Physical Therapy, Speech Therapy, Audiology, Clinical Laboratory and Central Sterile Supply. As a part of the General Support Services of the Fergus Falls Regional Treatment Center, the Medical Department provides services to the three disability programs. The past eighteen months have seen many changes in the department. Some of these changes were in response to the changing needs of the Center and some were due to the need to economize throughout all aspects of the Center operation.

The department continues to have the services of three full time general physicians: Dr. Jennie Lu, Dr. Leonora A. Trajano, and Dr. Vernon A. Doms. Dr. Albert C. Kohlmeyer is the Chief of Psychiatric Services. Hien Q. Dam, M. D. and Dwight H. Lysne, M. D. have joined the Medical Staff. Dr. Dam is a Family Practitioner with considerable psychiatric expertise. As a full time member of the Medical Staff, his contributions have been greatly appreciated. Dr. Lysne is serving on the Medical Staff on a part time basis. He has experience in the area of child and adolescent psychiatry. Dr. Lysne may join the Medical Staff on a full time basis in 1987. The Medical Staff has a complement of five full time and three part time physicians.

Under the direction of John Larum, R. Ph., the Pharmacy Division at the Fergus Falls Regional Treatment Center has taken the lead in institutional pharmacy work in the State Residential Facilities system. This division is in the final stages of implementing a computerized pharmacy system which will greatly increase the ability to track medications and patient responses. The Pharmacy Division has a staff of three full time pharmacists. A Doctor of Pharmacy is available to the division on a consultant basis.

The Medical Department has implemented a computerized Health Surveillance Survey which is used to track individual medical problems and therapies. This system will operate in conjunction with a new cost accounting system for the Medical Department.

There have been many personnel changes in the Nursing Supervisors Division. These vacancies have been filled by very capable people from within the facility, thus assuring continuity of excellent nursing services. These people represent the wealth of excellent nurses that the Regional Treatment Center has to care for its clients.

The Medical Department continues contractual relationships with a consulting physiatrist and a consulting neurologist from the Twin Cities, and with members of the Family Practice Department of the Fergus Falls Medical Group. The varied expertise represented by the Medical Department staff and consultants continues to provide excellent medical and psychiatric care for the residents of the Fergus Falls Regional Treatment Center.

The Medical Department is in the process of fulfilling needs in the field of dental health. Staff recruitment efforts will also be directed toward increasing the staff for Occupational Therapy and Physical Therapy. The Medical Department is still looking for two or three additional psychiatrists.

## **PLANNING AND EVALUATION OFFICE**

**David Aanes, Ph. D.**  
**Director**

Established in late 1985, this office is a part of the Fergus Falls Regional Treatment Center's (FFRTC) commitment to provide the highest quality of service of which it is capable. The development of a biennial plan for the FFRTC was one of its first objectives. This objective was implemented by acquiring the services of a professional planner, soliciting input from a broad base of staff, and conducting a planning retreat which resulted in the establishment of a plan. This plan gives direction to the FFRTC over the next two years, and provides indices on which accomplishment of the goals stated in the plan can be evaluated.

Another area of responsibility of this office is that of implementing the Excellence of Care Plan formulated by the Executive Committee of Professional Staff. This body is responsible for the quality of care delivered to the clients of the FFRTC. Its functions include quality assurance, utilization review, privileging of clinical staff and compliance to standards. Coordinated monitoring of quality assurance activities throughout the facility is conducted through the employment of mechanisms such as the review of patient care data, program evaluation and resource utilization, with a view to identifying opportunities to improve quality of care and which will lead to early detection and resolution of problems.

## **ADVOCATE'S OFFICE**

**Jerry Hanson**  
**Client Advocate**

This report covers the period from January 1, 1985 through June 30, 1986.

### **Accomplishments**

One accomplishment has been the extensive revision of the Client Handbook and the printing of same. The data is now on the computer to expedite future revisions as they are necessary.

Another accomplishment has been the revision of the Advocate Information folder used for inservice training and for distribution.

### **Current Trends**

The one major trend, an area of concern, is the issue of moving clients out of this facility into community based facilities. It is a concern that in the rush to move individuals out, that adequate facilities and services are not always available to receive them.

### **Challenges Faced**

To be an effective force for positive change in all the disability areas and to assist staff and residents to resolve problems/differences in a positive manner.

### **Statistics**

Total clients served	1,840
Clients from Mental Health Division	709 (38%)
Clients from Drug Dependency Rehabilitation Center	806 (44%)
Clients from State Regional Residential Center	325 (18%)

Total issues addressed 2,051

Most frequent issues:

Discharge/placement/transfer - 436 (24%)

Legal matters - 352 (20%)

Financial matters - 180 (10%)

Minnesota Hospitalization and Commitment Act - 86 (5%)

Issues falling under criteria for grievances by the Department of Health standards - 382

Grievances needing to go to the Chief Executive Officer for resolution - 86

## **CHAPLAINCY DEPARTMENT**

**Rev. Jim Tonneson**  
**Director Of Chaplaincy**

### **WORSHIP**

Residents receive spiritual nurture through the worship opportunities which are provided by the Chaplaincy Department.

Father Kenneth Brenny has Mass for the Roman Catholic residents each Saturday evening at the auditorium. In addition to weekly Mass, he provides worship opportunities for the special holidays in the church year.

Chaplain Jim Tonneson leads two Sunday morning Protestant services. There is a worship service for residents from the Drug Dependency Rehabilitation Center and the Mental Health Division, and there is a special service of singing for the mentally retarded citizens who are residents of the State Regional Residential Center. Chaplain Tonneson also provides special services for the festival seasons of the church year.

Chaplaincy services are also available for residents who cannot attend Saturday or Sunday worship.

### **PASTORAL CARE**

Chaplains are involved in visiting with individual residents. Chaplains help by listening and bringing hope and forgiveness to persons who often feel extremely without hope. The task of chaplains is to help people find their inner resources and to begin using them.

Chaplains also serve as a resource to the treatment teams at the Center by providing consultation and direction in the spiritual area. The Chaplaincy Department has made significant progress toward reaching the goal of providing a spiritual assessment for each resident.

There are several chaplains who work exclusively as a part of the treatment staff on the Drug Dependency Rehabilitation Center. Chaplain Ralph Pedersen heads this activity.

### **COMMUNITY RELATIONS**

The Chaplaincy Department helps residents to find spiritual resources in their home communities. Pastors and priests from the community are encouraged to regularly visit their parishioners who are residents at the Center.



Department chaplains are often invited to speak at various community functions about mental health issues.

Father Brenny is currently serving a two year term as the Regional Director for the National Association of Catholic Chaplains.

### **EDUCATION**

Each spring and fall the Chaplaincy Department invites clergy to the Regional Treatment Center for Clergy Visitation Days. These one day workshops provide clergy with an opportunity to meet the staff of the Chaplaincy Department, to familiarize themselves about visitation procedures at the Center and most importantly to get a brief overview of the services provided by the Center's treatment programs.

In his role as a Clinical Pastoral Education Supervisor, Chaplain Tonneson provides specialized accredited training for seminarians, for lay persons working in the church and for ordained clergy. Clinical Pastoral Education is most simply described as supervised on-the-job learning.

### **RELIGIOUS EDUCATION**

Phyllis Smilonich functions as a chaplaincy worker serving the religious education needs of residents on the State Regional Residential Center. As part of the ongoing trend to provide normalization opportunities for mentally retarded citizens, the Chaplaincy Department increased its efforts to provide, for residents who were not confirmed in the church, the opportunity to be confirmed at the Center. In the fall of 1985, forty-eight Protestant residents were confirmed in a very festive service which was held at the auditorium.

## **SAFETY DEPARTMENT**

**Elmer C. Klar**

**Safety And Health Officer**

The most noteworthy safety accomplishments during Fiscal Year 1986 are the drastic reductions in employee lost work days and the injury severity rate. Lost work days are down 38% and the injury severity rate is down 35%. Workers' compensation costs for Fiscal Year 1986 are up only 1.12% (the average increase in the previous three years was 50.16%) despite increased wages and medical care costs, and lump sum payments to settle long term claims from years past. Taking these factors into account, Fergus Falls Regional Treatment Center has reduced its workers' compensation costs and is doing an excellent job of containing these costs.

During calendar year 1985, there were 168 fire drills conducted, 33 false alarms, and 8 fires. Total damage caused by the fires amounted to \$47,619, of which \$47,547 was for repairs to the coal silo. The Fergus Falls Regional Treatment Center staff controlled 7 of the fires without the aid of the fire department. With the exception of the coal silo explosion, Fergus Falls Regional Treatment Center suffered minimal losses as the result of fires, especially since there were no injuries to staff or residents.

Coordinating with the Staff Development Department, staff were provided with Right To Know Training, Fire Safety Training, and Dietary Safety.

The Safety Department developed, aided in the development of, and updated 12 policies and procedures during Fiscal Year 1986. A highlight was the implementation of the Smoking Policy which brought the Fergus Falls Regional Treatment Center into compliance with the Minnesota Clean Indoor Air Act of 1975.

A final accomplishment of the Safety Department during Fiscal Year 1986 was bringing on-line a computer system to record, analyze, and report staff and resident injuries

To continue to improve upon the safe environment in which residents and staff live and work, the Safety Department and the Safety Committee have identified 9 goals for Fiscal Year 1987.

- Continued reductions in the number of lost work days, severity and frequency rates and workers' compensation costs
- Reduction in the number of back injuries and muscle strains
- Increasing staff awareness of good body mechanics
- Implementation of pre-work stretching exercises
- Increasing staff awareness of safety and safe work habits
- Implementation of departmental safety meetings
- Development of department safety committees with one representative from each attending the Regional Treatment Center safety committee meetings
- Safety committee representation for Dietary staff
- Inclusion of responsibility statements in the position description of supervisors

## DIETARY DEPARTMENT

Adelaide M. Cline, R.D.  
Dietitian II

The Dietary Department has a total of fifty-three full time and part time employees. During the eighteen month period covered in this report, the department staff prepared and served from 1,250 to 1,400 meals per day.

The bakery and kitchen revolving ovens were replaced by convection ovens resulting in a significant energy savings. The eight convection ovens in total use the same amount of electricity as was required by the kitchen revolving oven. They do not use oil which was needed for the operation of the bakery oven. Since all of the ovens are not turned on at the same time, the peak electric usage of the Dietary Department has not changed.

The department has expanded its clinical dietetic services by having a full time registered dietitian work with the residents of the Fergus Falls Regional Treatment Center. The dietitian completes annual nutritional assessments, attends ninety day medication and diet updates, gives individual diet instructions and teaches nutrition related classes.

In December of 1984, the department began working with the PWSIS Dietary Module as the test site for the utilization of this computer module. The department staff spent a great deal of time over a five month period working with the computer program. This program is used to provide individual resident dietary profiles, menus, recipes and ingredient lists which have been programmed for the computer. The computer program prints living unit diet lists, snack/supplement lists, individual snack/supplement labels, individual serving cards, the general house menu and modified diet menus. The department is providing assistance to other institutions as they begin to use the computer module.

The department is preparing for the start of centralized tray service later in 1986. The centralized tray service is a significant modernization of the Dietary Department which will provide better service for the residents of the Regional Treatment Center.

The Fergus Falls Regional Treatment Center Dining Room Committee has drawn up plans for the redecoration of the congregate dining room. The committee is now in the process of developing and implementing plans to raise money to cover the cost of this redecoration. The plans include the use of items of historical value as centers of interest.

# PLANT OPERATIONS DIVISION

Lester W. Baird

Physical Plant Director

The sixty-eight employees of the Plant Operations Division provide a wide variety of essential support services for the Fergus Falls Regional Treatment Center. The division consists of the following departments: Engineering, Construction, Plumbing, Electrical, Painting, Laundry/Housekeeping, and Grounds/Garage.

## Major Accomplishments (January 1, 1985 through June 30, 1986)

The division replaced roofs, resealed parking lots and streets, installed ramps for the handicapped, performed minor building renovation, removed asbestos cover and replaced with a different cover, replaced transformers containing PCB's with new transformers without PCB's, installed floor covering, renovated the center elevator by installing automatic and handicapped controls, installed new pneumatic temperature controls, replaced existing light fixtures with new energy efficient fixtures, and renovated the larger kitchen cooler to meet health standards and conserve energy.

The division completed the repair of the coal silo which was damaged by a coal gas explosion on August 2, 1985. The life safety work has been completed. This facility now meets all existing standards as set by the Life Safety 101 Code. The division assisted in providing information to the State of Minnesota, City of Fergus Falls and County of Otter Tail so that preliminary final plans could be developed towards building a refuse burner at the Fergus Falls Regional Treatment Center.

## Current Trends That Affect Plant Operations

- Cost accounting that has completely changed the method of assigning work tasks, material and labor accountability, and will also increase the work load per work order.
- Trend towards reducing occupied space and renovation to meet those needs.
- Increasing number of codes with which Plant Operations must comply.
- Increase of reports that are requested by the Department of Human Services.

## Challenges

- Raise the standard of work performance by in-house staff.
- To increase productivity of each employee.
- To enhance the appearance of this facility's exterior and interior surfaces.
- To provide an atmosphere—walls, floors, room temperature, cleanliness, and furniture—that enhances therapeutic programming.
- To prevent accidents to residents and staff by providing an accident-free environment.
- To provide grounds and streets that are safe and attractive.
- Reduce energy costs and still provide essential heating, cooling, lighting, and provide energy for process loads.

## FFRTC ANNUAL REPORT COMMITTEE

Emery Johnson Jr., Chairperson, Community Relations Department

Dolores Saurer, Mental Health Division

Carol Hovland, Drug Dependency Rehabilitation Center

Betty Neuleib, State Regional Residential Center

Tom Shubitz, General Support Services

Dennis Bogen, Computer Center

Bill Weyrens, Financial Management Division

Lois Anderson, Typing Center

Shirley Dowzak, Volunteer Services Department

Larry Norby, Drug Dependency Rehabilitation Center

## OTHER CONTRIBUTORS

Computer Graph Design By Kenneth Kjos, State Regional Residential Center

Printing By Fergus Falls Community College Printing Service



# STAFF DEVELOPMENT DEPARTMENT

Neil M. Herman  
Staff Development Director

Two hundred fifty formal classes and workshops were offered or attended in Fiscal Year 1985-86 with a registration total of 2,606. Some of the larger attendance was in the areas of Cardiopulmonary Resuscitation, Workers Compensation, Therapeutic Intervention, Infection Control, "AIDS," Advanced Positioning, Feeding and Dressing, Contract Administration, Counseling/Treatment of Dual Disorder Clients, Supervision, and Fire Safety.

The emphasis for Fiscal Year 1986-87 will be to continue to stress the training presented in last year's plan. A new emphasis for this year will be in the area of retraining staff to do other job assignments and learn other job skills in preparation for reassignment as staff shifts are made to realign employees as the resident population and treatment programs change.

A major challenge will be to implement more use of the computer systems in records, reports, and in providing an alternative training delivery system in independent study programs on the IBM Computer.

## MEDICAL RECORD DEPARTMENT

Linda Winter  
Medical Records Officer

The Fergus Falls Regional Treatment Center must maintain a written, individual record on every client evaluated and/or treated here. The record must: 1) be documented accurately and in a timely manner; 2) be easily accessible, and 3) permit prompt retrieval of information, including statistical data. The records must describe the client's health status at the time of admission, the services provided, the client's progress at the facility, and the client's health status at the time of discharge.

The three employees of the Medical Record Department are responsible for maintaining, controlling, and supervising the quality of the medical records. These responsibilities are carried out by census compilation, data entry, record retrieval, discharge record review, disease indexing, direction of and participation in Treatment Center medical record committees and Department of Human Services state-wide medical record meetings, filing, preparation of statistical reports, participation in special studies, chart repair, training unit staff and trainees, and answering requests for information from clients and third parties.

### Major Accomplishments

August 1985: Census data entry was decentralized to provide for entry in each program area. This was instituted to achieve more immediate entry of census information and to be able to obtain the previous day's census report by 8 A.M. the following morning, a requirement of the Health Surveillance System.

April-May 1986: Affiliation experience provided for North Dakota State School of Science second-year medical record technician student.

### Current Trends Affecting The Department Operation

- The trend toward increased computerization has led the department to seek improved computer reports with useful information that will eliminate duplication of efforts throughout the Treatment Center.
- The trend toward increased needs for client information has increased the requests for medical record information from clients, relatives, attorneys, insurance companies, treatment facilities, and other third parties. There has been an especially noticeable increase in requests from families doing genealogies, requiring information from very old records.

### Challenges

- Keeping the Fergus Falls Regional Treatment Center client record as uniform as possible throughout the Treatment Center, while allowing for each treatment program's individuality.
- Increased participation in quality assurance, particularly in the areas of record review and monitoring, census error reduction, reduction in number of overdue records, and monitoring of information received from general hospitals when clients return from medical leaves.
- Adaptation to advances in the computer system to improve computer-generated census reports.
- Application of computer programs already in place to put manually-done hand-outs, policy and procedure manuals, and indexes into computer files for easier, less time-consuming revision and retrieval.

### Significant Statistics For Fiscal Year 1985-1986

- Total number of requests for information answered:	1586
- Total number of census transactions processed:	
Drug Dependency Rehabilitation Center	6163
Mental Health Division	1916
State Regional Residential Center	993
	TOTAL 9072
- Total number of discharges:	
Drug Dependency Rehabilitation Center	1529
Mental Health Division	404
State Regional Residential Center	43
	TOTAL 1976

### TYPING CENTER

Marlene Messenger  
Typing Services Supervisor

The Typing Center has a staff of five employees including four typists and a supervisor. Two telephone dictation systems are now in operation at the Typing Center. Services have been expanded to include typing for the Speech Therapy and Audiology Divisions, Physical Therapy Division, Chaplaincy Department and the Nutritionist.

Within the last year, a computer terminal was placed in the Typing Center. This terminal is shared with the Medical Record Department. The staff have all received some computer training. They are constantly looking for more efficient ways of completing their tasks via the use of the computer.

### COMMUNICATION CENTER

Carol Schaaf  
Switchboard Operator Supervisor

The Communication Center at the Fergus Falls Regional Treatment Center has a staff of five switchboard operators. The staff are now doing computer information input for the daily resident census after regular weekday business hours, on weekends and on holidays. They also do daily computer information input for the Medical Department's Health Surveillance Survey.

The new photocopy machine is now in operation. This machine is able to quickly produce quality copies and to collate copies, thereby saving much staff time. In addition to their telephone communication and information responsibilities, the staff of the Communication Center also distribute mail and assist with overflow secretarial work from the Typing Center and other areas.

# VOLUNTEER SERVICES - COMMUNITY RELATIONS DEPARTMENT

Shirley A. Dowzak  
Volunteer Services Coordinator  
Emery Johnson Jr.  
Community Relations Coordinator

During the eighteen month period covered in this report, the Fergus Falls Regional Treatment Center received contributions with a total value of \$63,992. Volunteers contributed a total of 86,328 hours of service in support of the Center's treatment programs.

A total of 1,278 people received information about the services which are provided by the Fergus Falls Regional Treatment Center through fifty-eight tour visits and community programs which were offered by the Center.

A committee with staff representation from throughout the Center developed a Public Relations Plan for the Fergus Falls Regional Treatment Center. Staff involvement committees are now beginning to implement this plan.

The Fergus Falls Regional Treatment Center published seventy-eight issues of "The Weekly Pulse." The Center also provided a number of information releases for the news media.

The following list represents some of the significant community relations activities which were carried out by the Fergus Falls Regional Treatment Center during the period which is covered by this report.

- Name change from Fergus Falls State Hospital to Fergus Falls Regional Treatment Center to more accurately reflect the broad scope of professional services which the Center now provides in the areas of diversified treatment programming, training, and mental health resources. (October 1985)
- "Changing Times For Quality Mental Health Programs" workshop held at the Center for persons active in the field of mental health. (May 16, 1985)
- Two Volunteer Recognition Banquets held at the Center. (May 1985 and April 1986)
- Two Employee Service Awards recognition programs held at the Center. (May 1985 and 1986)
- Address to the Center staff by Chief Executive Officer Elaine J. Timmer held at the Center auditorium. (July 31, 1985)
- Confirmation service for residents of the State Regional Residential Center's Mental Retardation Program held at the Center auditorium. (September 13, 1985)
- Clergy Visitation Day held at the Center. (April 10, 1986)
- Chemical Health Awareness Week observed by the Drug Dependency Rehabilitation Center. (June 9-14, 1986)





## FFRTC MANAGEMENT GROUP

Seated From Left

Charles E. Johnson, Program Director, State Regional Residential Center

Elaine J. Timmer, Chief Executive Officer

Richard C. Baker, M. D., Medical Director

M. Curt Ramberg, Program Director, Drug Dependency Rehabilitation Center

Douglas C. Boyer, Personnel Director

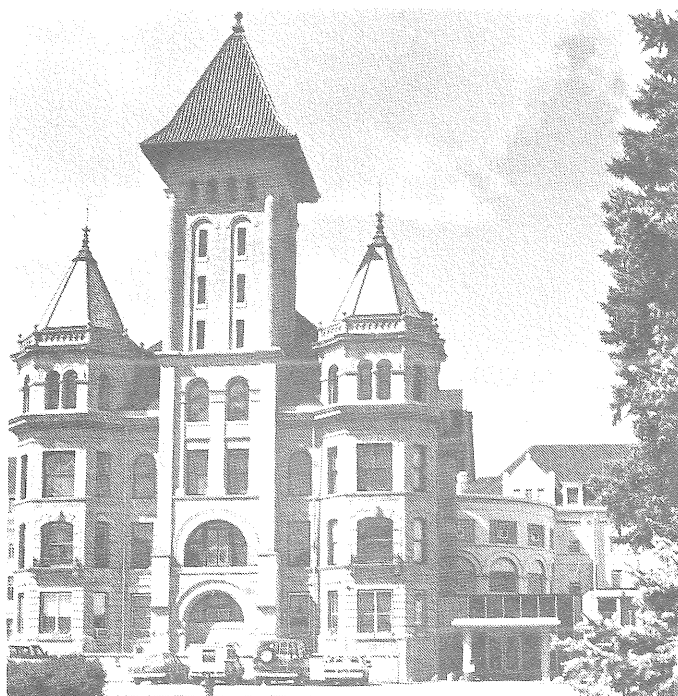
William Klein, Program Director, Mental Health Division

Standing From Left

Neil M. Herman, Staff Development Director

David Aanes, Ph. D., Director For Planning And Evaluation

Dennis W. Zilmer, Business Manager



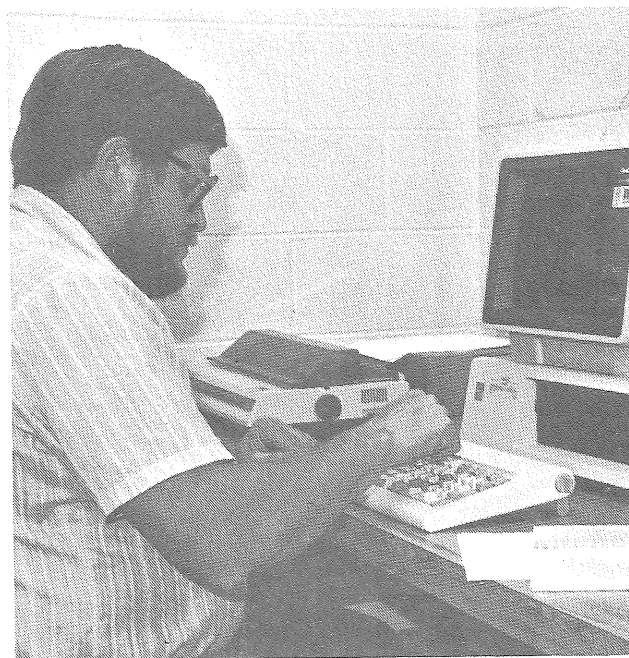
KIRKBRIDE BUILDING  
NATIONAL REGISTER OF HISTORIC PLACES



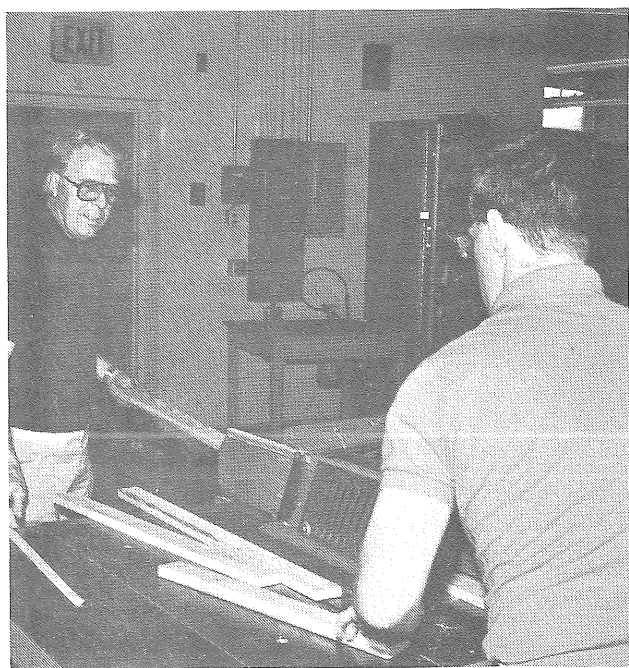
A TRADITION OF CARING  
FOSTER GRANDPARENT PROGRAM



STATE OF THE ART PHARMACY SERVICES  
MEDICAL DEPARTMENT



COMPUTERIZED TREATMENT PLANNING  
DRUG DEPENDENCY REHABILITATION CENTER



EVALUATION AND TRAINING CENTER  
STATE REGIONAL RESIDENTIAL CENTER



HAPPY BIRTHDAY  
REHABILITATION SERVICES - MENTAL HEALTH DIVISION