

SPECIAL MESSAGE  
TO THE  
LEGISLATURE  
on  
WELFARE AND MENTAL HEALTH

Governor Elmer L. Andersen

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# Special Message to the Legislature on Welfare and Mental Health

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It is necessary that we focus attention on the most essential Welfare matters needing action at this legislative session. I am listing herewith a dozen proposals on which your favorable action is urgently needed. There are many more worthy proposals which also have my approval and support. It is particularly important that the following not be overlooked or lost in the crowded closing days.

## 1. Welfare and Mental Health Appropriations

The appropriation recommendations in the budget message for the Welfare and Mental Health programs are moderate. They include the medicine the doctors recommended, a 2¢ per patient per day increase in food, new personnel for new facilities and a modicum of other improvements. There is absolute need for every dollar in the Governor's budget. It should not be cut.

## 2. Remove Ceiling on Old Age Assistance Grants

Since the need of each recipient is determined by a standard budgeting process, there is no logic (and real inequity) in imposing an arbitrary maximum of \$71 per month on maintenance needs. More than 5,000 of our 45,000 OAA recipients are admittedly receiving less than their minimum budget calls for. Removing the ceiling would also greatly simplify the administration of the program. It would be unnecessary to distinguish between maintenance, boarding care, homemaker service and medical care, and recipients would receive the type of care they need.

### 3. Remove Ceiling on Aid to Disabled Grants

The same arguments apply as in OAA. Here the situation is even more inequitable, since no medical care may be allowed in the Aid to Disabled Program, and must be met from general relief. Removing the ceiling would mean a net saving to the counties of about one million dollars.

### 4. Residential Treatment Center for Emotionally Disturbed Children

One million dollars is required to supplement the appropriation made in 1959 to construct this center. The lack of facilities for the treatment of emotionally disturbed children is one of the major gaps in Minnesota's mental health program. Many young children are being committed to our state mental hospitals and living in adult wards. This is obviously undesirable.

### 5. Day Care Centers for Mentally Retarded Children

It is proposed that during the next two years the state provide \$70,000 to help local communities establish and maintain day care centers for the retarded. This would be an important step forward in our effort to develop local services and resources so that fewer children will have to be sent to state institutions for life-time care.

### 6. Exemptions of earned income in Aid to Blind

Federal legislation now requires that in determining the need of an AB recipient the first \$85 per month of earned income, plus one-half of income in excess of that amount shall be disregarded. Our state law must be amended, effective not later than July 1, 1962, to enable us to continue receiving federal aid. We propose that the new law take effect July 1, 1961, in order that our blind recipients may have this additional benefit throughout the coming biennium.

#### 7. Governor's Council on Aging

This Council, which has existed since 1956 by executive order, should be provided for by law, with its advisory functions clearly spelled out. Minnesota has been a leader throughout the country in the programs it has developed for its older citizens, and these programs should be continued. This bill also provides for the staff necessary to consult with community groups and suggest ways in which they may develop their own programs.

#### 8. Increased Salaries for Physicians

Our inability during the past few years to recruit competent physicians for our state hospitals makes it imperative that we significantly improve our existing salary scales. At present we are far from being in a competitive position with any of the states surrounding Minnesota. A bill now before the Legislature, which is recommended by the Civil Service Department will correct the situation.

#### 9. Boarding Care for Mentally Retarded Children

As another part of our program to keep retarded children in their home communities, state aid should be provided to help counties meet the costs of boarding care which many of these children require. At present the costs are borne entirely by the counties, even though these children are state wards, and the lack of state institution space makes it necessary for many of them to be boarded until their names are reached on the waiting list.

#### 10. State Aid to Counties for Indian Relief

Even though only about 26 counties are affected, the matter of Indian relief is a very important one, since the counties confronted with

the problem are usually the least able, financially, to carry this burden. We feel this cost should be shared by all of us, and this can be accomplished by providing state reimbursement of 100% to those counties which grant relief to Indians.

#### 11. State Acquisition of Glen Lake Sanatorium

A bill now before the Legislature would make it possible for the Department of Public Welfare to acquire (on a long-term, rent-free basis) the Glen Lake Sanatorium, for use as a combined tuberculosis facility and nursing home for the aged. This facility has a capacity of about 700, with only 145 TB patients at the present time. If utilized by the state, the state sanatorium at Walker would be re-established at Glen Lake, and all TB patients cared for there. At the same time the balance of the available space would be utilized for several hundred geriatric patients now in our mental hospitals who could be transferred there for nursing care, since they are no longer in need of psychiatric treatment.

#### 12. Public Welfare Laws Interim Commission

We propose that such a commission (which has worked so effectively in previous interim periods) be established. Laws which particularly require study and recodification are those relating to child welfare, the commitment of mentally ill and mentally deficient persons, and the operation of our state institutions.