

M I N U T E S

SPECIAL COMMITTEE ON INSTITUTIONS

June 15-16, 1976

Members Present

Senator Arden Booth, Chairman
Representative Ray Zajic, Vice-Chairman
Senator Bud Burke (2nd Day)
Senator Bert Chaney
Representative Eugene Anderson
Representative Glee Jones
Representative Ardena Matlack
Representative Rip Reeves
Representative Jim Ungerer
Representative Bill Wisdom

Staff Present

John Schott, Legislative Research Department
Bob Epps, Legislative Research Department
Norman Furse, Revisor of Statutes Office
Bill Edds, Revisor of Statutes Office
Jim Hays, Division of Budget, Department of Administration

Area Legislators

Senator Al Campbell (June 15)
Representative Philip Martin (June 15)
Representative Roger Robertson (June 16)

June 15, 1976

Larned State Hospital

Chairman Booth opened the meeting by welcoming the Committee members to the first meeting of the Special Committee on Institutions. He then introduced the legislative delegation from the Larned area, Senator Al Campbell and Representative Philip Martin. Following several brief introductory remarks, Senator Booth turned the meeting over to Mr. Rod Clelland, Superintendent of the Larned State Hospital. Mr. Clelland began by noting that he has had extensive experience in the administration of both general and mental hospitals in the United States and felt that at LSH there is a substantial amount of concern exhibited by the staff for the patients. He pointed out, however, that he felt the level of the professional staff was low. In a general discussion of psychologists and psychiatrists at Larned State Hospital he noted that the depth of training is lacking, the rate of pay is not competitive with other jobs available to these individuals and that the rural setting of LSH is a specific detriment to employment. He stated that the hospital has a "hard core" of long time employees and a large number of employees who stay at the institution a relatively short period of time.

In responding to questions concerning the orientation of LSH relative to patient treatment, Mr. Clelland noted that the hospital is organized on a team concept, through which an individual patient's treatment program is implemented by members of the treatment team, including psychologists, psychiatrists, therapists, aides, and other members of the nursing staff.

Mr. Clelland pointed out that one of the primary goals of Larned State Hospital was to become accredited by the Joint Commission on Accreditation of Hospitals. In his opinion, LSH is approximately 70% of the way towards becoming fully accredited and hopes to be at that point by August of 1977.

Mr. Clelland also noted that three of the older buildings on the LSH campus would be vacated by October of 1976 and that all persons currently residing in these buildings will be placed in adequate facilities which meet fire safety standards.

With regard to the youth operations at LSH, Mr. Clelland explained that they are currently planning for an additional youth program at the Hospital which will be designed for adolescent, delinquent and mildly retarded individuals. It is anticipated that the program initially would have approximately 30 participants.

In response to several questions from the Committee concerning the operation of the State Security Hospital, Mr. Clelland noted that on July 1, ward east-two of the hospital will be reopened in order to allow certain transfers as provided by 1976 H.B. 3178. It was also pointed out that the concern of the state security hospital aides with regard to pay, working conditions and legal matters are continuing, and in response to these and other problems, an advisory commission has been established to deal with security, clinical and legal matters arising within that unit.

Following his remarks, Mr. Clelland introduced Dr. Getz, clinical director of Larned State Hospital. His primary point was that there were physician - patient communication problems at LSH due to language barriers, and that the Hospital should have broader authority in the expenditure of funds for hiring qualified personnel. He felt that restrictions on the use of staff funds is partially responsible for the continual recruitment of "semi-qualified" physicians. (See Attachment II.)

Mr. Wayne Heshner of Larned State Hospital then briefed the Committee on institutional budgetary matters. (See Attachment II.)

In response to questions from the Committee, members of the LSH staff noted that the decline in the patient population of Larned State Hospital reflects a general national decline in mental hospital population. This decline has been attributed in part to increased operations of mental health centers and a growing number of private-extended care nursing home facilities. It was pointed out to the Committee that both the admission and re-admission rates are high at LSH. One of the historical problems for the hospital has been the substantial number of patients from the Wichita area. Under new directives, new admissions from the Sedgwick County area are received at Topeka State Hospital, while re-admissions are directed to Larned State Hospital. It was pointed out that the declining number of hospital patients generally has meant that long term, chronically mentally ill individuals have been placed in the environment which is best able to deal with that situation, i.e., the state mental hospital facilities.

In response to a question regarding follow-up on discharged patients, it was noted that the system is marginal at best. Currently, follow-up operations are conducted through SRS offices and mental health centers and clinics.

Mrs. Louise Smith then briefed the Committee on the educational activities of the nursing staff and Mr. Ralph Arnold gave a limited presentation concerning medical records. (See Attachment III).

In summary, the particular concern of the staff was the professional psychiatric services offered at the institution and how the problems within that operation affected the patient treatment process at Larned State Hospital. Of specific concern was the cost of aide training vis-a-vis the high aide turnover rate, and the hiring of competent professional staff.

In response to several Committee questions, it was pointed out that LSH now has a full-time pharmacist and is moving toward the unit dose system for dispensing drugs.

The Committee adjourned for lunch and a tour of the institution.

Afternoon Session

Following a tour of Larned State Hospital and the State Security Hospital, the Committee reconvened and began a discussion of the use of drugs for individuals in the State Security Hospital. Mr. Clelland pointed out that several factors are taken into consideration when establishing a medical treatment program for these individuals, including the appropriate type and combination of drugs, the possibility of overmedication and resulting medicine dependency, and the position of the psychiatric aide as it relates to the management and treatment of these individuals.

The last topic of consideration was the alcoholism treatment operation at Larned State Hospital. The director of the program indicated that the average age of the individuals in this program is becoming lower. The oldest individual in the program currently is 62 years old and the youngest is 19. The program at LSH is 60 days in duration, following which the individual is released to the community and more often than not maintains a degree of personal contact with a halfway house or a local health center. In discussing the voluntary commitments to the alcoholism treatment unit, he noted that although 6 of the 32 currently in the program are court committed, coercion is a significant factor for many voluntary patients.

Following limited further discussion the Committee thanked Mr. Clelland and the LSH staff and adjourned until 9:00 a.m. the next day at the Kansas State Industrial Reformatory at Hutchinson.

June 16, 1976

Kansas State Industrial Reformatory

Senator Booth called the meeting to order at 9:00 a.m. He introduced Representative Roger Robertson of Hutchinson, and turned the meeting over to Mr. Ken Oliver, Director, Kansas State Industrial Reformatory.

The current population of KSIR is 738, which the director believes is reflective of a slow and steady increase at the institution. He noted that KSIR has a rated capacity of 692 and that, in the opinion of the staff, the number for which they can provide appropriate incentives and treatment is approximately 450. Mr. Oliver pointed out that individuals who are at KSIR as a result of conviction of crimes of violence are on the upswing and that the average inmate currently residing at the institution is more violent and aggressive than in the past. He felt that the implementation of the unit teams at KSIR has been an important factor in limiting problem situations at the institution.

Following extensive Committee discussion of food service and correctional officer employment situation, Mr. Oliver indicated that the two greatest problems at KSIR are the overcrowding of the institution and that the institution currently houses individuals who need to be in a psychiatric setting. He felt that these persons were a major disruptive force in the institution. In response to a question from the Committee as to the help which KSIR receives from local mental health facilities and Larned State Hospital, Mr. Oliver explained that mental health agencies provide assistance on an infrequent basis.

Following additional questions, the Committee divided into several groups and began its tour of KSIR.

Afternoon Session

Following lunch at the institution, the meeting was called to order by Senator Booth. The Committee discussed at length the problems relative to staff turnover. Mr. Oliver explained that the primary problem was with correctional officers and that the institution has been staffed with a full compliment of correctional officers for only a period of days during the past several years. Mr. Oliver felt that pay, prestige, working conditions and the relative lack of career opportunities for the correctional officer were significant factors in correctional officer turnover. The Committee discussed early retirement for correctional officers, during which time Mr. Oliver emphasized the fact that the environment in which a correctional officer must function is both strenuous and dangerous, and, as a result, he felt correctional officers should be given an early retirement benefit.

In response to a question from the Chairman concerning the morale and the general condition at KSIR, Mr. Oliver indicated that the staff orientation at the institution was positive and that in general there were very good people working to carry out the mission of Kansas State Industrial Reformatory.

Senator Booth and the members of the Committee thanked Mr. Oliver and his staff for their presentation and turned their attention to future Committee meetings. Following discussion it was decided that the next meeting would be held July 8 and 9 at the Topeka State Hospital and the Youth Center in Topeka; August 5 and 6 at Kansas State Penitentiary and the Kansas Correctional Institution for Women; and September 13 and 14 at the Winfield State Hospital and the Toronto Honor Camp.

There being no further business, the meeting was adjourned.

Prepared by John Schott

Approved by Committee on:

July 9, 1976
Date

SPECIAL COMMITTEE ON INSTITUTIONS

June 15, 1976

1. POSITIONS OF PARTICULAR IMPORTANCE TO A HIGH QUALITY CLINICAL PROGRAM:

Psychiatrist \$30,000 ot \$34,000

Psychologist

Psychologist I - \$11,136 to \$14,148

Psychologist II - \$14,148 to \$17,964

Psychologist III- \$16,332 to \$20,748

Physical Therapist (Vacant four years)

Therapist I - \$9,204 to \$11,676

Therapist II - \$10,620 to \$13,488

Dentist \$17,136 to \$21,768

Registered O.T. \$10,620 to \$13,488

Director of Chaplaincy \$14,148 to \$17,964

Attorney

Attorney I - \$11,148 to \$17,964

Attorney II - \$16,332 to \$20,748

Medical Technician (Vacant one year)

Technician I - \$7,296 to \$9,204

Radiological Technician (Vacant one year)

Technician I - \$8,376 to \$9,620

2. COMMENTS REGARDING RECRUITMENT AND RETENTION



G. W. Getz, M.D.
Clinical Director

LARNED STATE HOSPITAL

GENERAL BUDGET INFORMATION FOR LEGISLATIVE STUDY COMMITTEE
June 15, 1976

Projected patient population: 1976..... 482
1977..... 450
1978..... 415

Closing of the following buildings for patient use:

- 1) Dix Building
- 2) Capper Building
- 3) Lee Building

Total approved staff for 1977..... 791.5
Total requested staff for 1978.....*782

*Includes 32 staff in a new special juvenile program;

Requested 19 new positions to improve clerical and
treatment team staffing. Includes:
(Psychiatric nurse
(Psychiatrist
(Physician
(Social Worker
(Clerical
(Personnel Officer
(Maint. Painter
(Activity Therapy Aide II
(Alcoholism Counselor

Requested Capital Improvement projects, including:

- 1) Construct & Equip Laundry Building.....\$ 450,000
- 2) Construct & Equip Sewage Treatment Facility.\$ 400,000
- 3) Air Conditioning Replacement for M & S.....\$ 220,000
- 4) Fire & Safety Improvements ('73 L.S. Code)..\$ 100,000
- 5) Modify Lee Building for Academic School.....\$ 50,000
- 6) Remodel Jenkins Hall.....\$ 350,000

LARNED STATE HOSPITAL
EXPENDITURE HISTORY

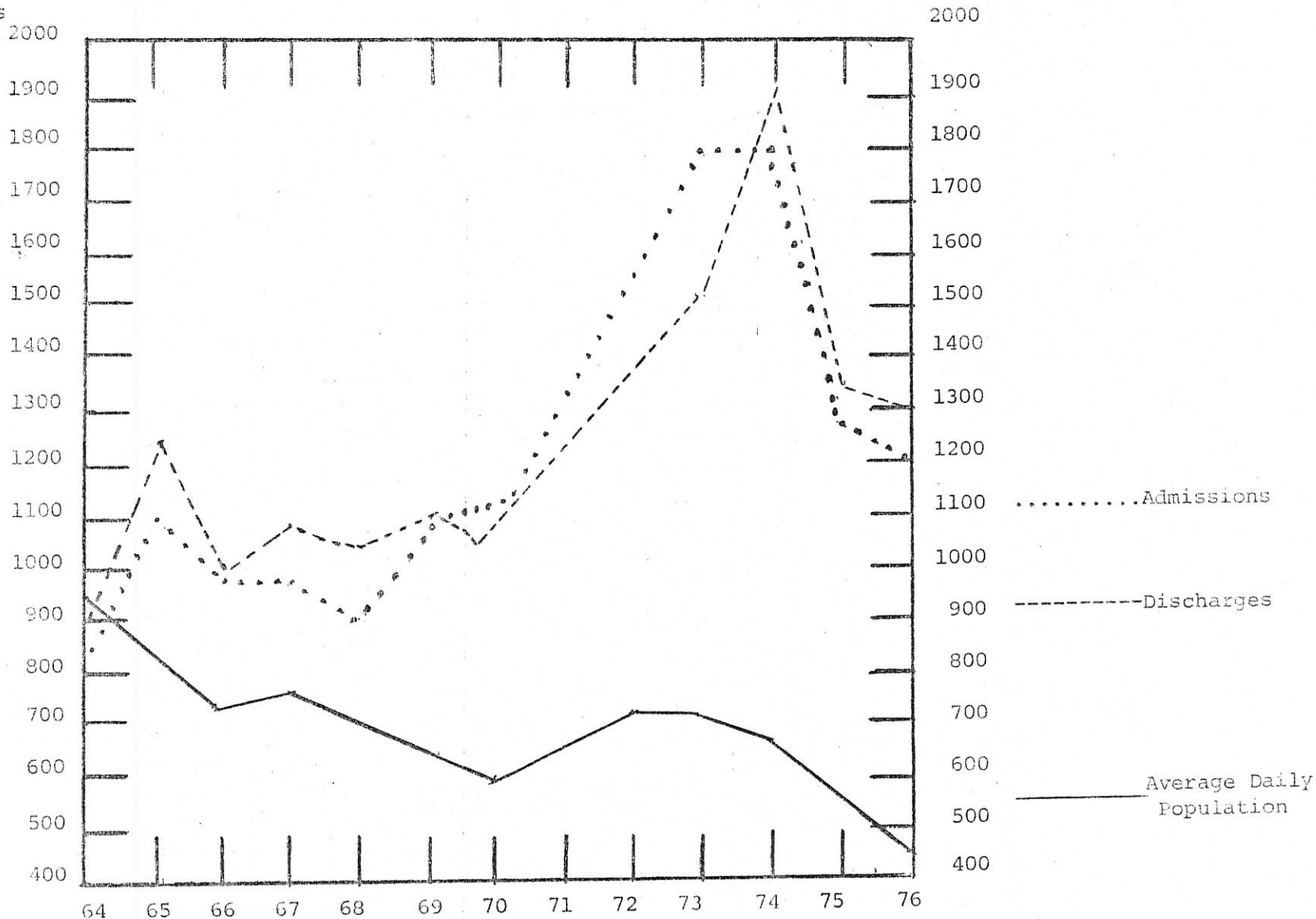
Fiscal Year	Travel	% Total	Capital Outlay	% Total	Educa- tion	% Total	Total Op- erating Budget
1967	\$ 8,112	.20	\$30,753	.76	\$		\$ 4,019,121
1968	7,569	.17	23,685	.54			4,381,078
1969	9,748	.19	32,189	.65			4,949,570
1970	9,800	.16	27,358	.47			5,784,286
1971	7,830	.12	35,035	.54			6,447,174
1972	7,460	.11	7,533	.11			6,708,768
1973	9,542	.13	24,279	.34			7,070,845
1974	11,442	.15	43,916	.58			7,567,296
1975	12,523	.15	52,106	.64			8,093,494
*1976	24,320	.25	63,276	.65	4,000	.04	9,706,219
1977	12,290	.12	50,000	.49			10,172,751
Avg.	10,967		35,466				

*Although \$24,320 was originally approved for travel for FY 1976 the actual expenditure for this purpose will be approximately \$15,000. Due to difficulty in attaining approval for out-of-state travel, requests were submitted for approval to utilize a portion of travel funds approved for Adult II STEP Program for other purposes, such as contractual educational classes and additional Activity Therapy supplies.

LARNED STATE HOSPITAL

Patient Movement FY 1964 through FY 1976*

of Patients



* Last Month FY76 projected.
(Includes all programs.)