

MINUTES OF THE MEETING OF THE JOINT APPROPRIATIONS  
SUBCOMMITTEE ON LONG RANGE BUILDING  
April 13, 1961 CHILDREN'S CENTER

The meeting was called to order by GENE DONALDSON, Chairman, at 7:45 a.m. Committee members present were SEN. THOMAS, and REP. HURWITZ.

Testimony was given by CURT CHISHOLM, Deputy Director of the Department of Institutions; JUDY CARLSON, SRS; NORMA VESTRE, SRS; JOHN LaFAVER, SRS; DICK ROSENLEAF, Director of the Children's Unit; DAVE LEWIS, Office of Budget and Planning; BILL RILEY, Board of Crime Control; DR. BAILEY MOLUNEUX, Clinical Psychologist; PETER BLOUKE, Director of Residential Services; CARROLL SOUTH, Director of the Department of Institutions; DAVID BRIGGS, District IV Mental Health Center Director; DR. JAMES HAMIL, Warm Springs State Hospital.

MR. CHISHOLM stated back in 1977, there was formed an Inter Agency Committee on Emotionally Disturbed Children, to study the needs of the emotionally disturbed child. This was a subordinate committee of the parent committee on Handicapped Children. He wanted to discuss the current program and its strengths and weaknesses. The issue of the Unit being at Warm Springs since 1975, the adequacy of the staff, how easy is recruitment in that area, does the current facility comply with current life safety codes, can it be certified, is the capacity adequate, does it support the program architecturally. The population to be served is something the Committee on the Emotionally Disturbed Child has been working on for some time, and their investigation into that issue would suggest there is a population out there that is not being served, and the incidences of this acute mental illness is on the rise. This facility should be expanded above the current capacity of the present facility which is 30 beds. Also to be discussed is a self-contained facility, what type of atmosphere needs to be created. He feels architecturally it can be constructed so that the "least restrictive environment" is foremost in their minds. The projected cost being discussed was based on square footage requirements and not on any special design, so they would be completely flexible in that area. The Department's position regarding location is to build a 60 bed unit to meet JCAH accreditation and to be built in Anaconda.

REP. HURWITZ feels the need has been pretty well established, and the concept of placing it in Anaconda troubles the members in the Committee. Another question is whether it should be 40 bed vs. 60 bed. He noted MR. ROSENLEAF has stated he feels the numbers are going to increase.

SEN. THOMAS stated he felt the need has been established but the conflicting testimony has been the university system and the involvement they would have in this program. The type of treatment has been pretty well established to the Committee members,

but there is some external forces saying the treatment should be of a different nature. The Mental Health Association and the Mental Health Centers are very active, and it is difficult to find out where their parameters are, since no two agree on any one thing. He stated the location in Missoula has brought concern especially from the rural people in the Senate. The communities themselves are not especially welcoming the Children's Unit, Missoula being one.

JUDY CARLSON stated about three years ago, the Committee did have a study of the Missoula area in regard to setting up a facility similar to the intensive treatment in Great Falls. She feels toward the end of the study, things fell apart.

DR. BLOUKE stated he wasn't sure things fell apart, but as he recalls there were two proposals submitted. One was a Missoula proposal and one was from Great Falls. The Committee chose the Great Falls proposal over the Missoula proposal.

DICK ROSENLEAF, Director of the Children's Unit, stated he has three concerns regarding the location of the building. First of all they have spent five years training a staff, and in the polls he has taken, they would lose about 60% of that staff. Secondly, Anaconda is the only community that has invited the Children's Unit to be placed there, and thirdly regarding location in a larger town, he feels the priorities need to be looked at. The priorities of the university system are education, research and treatment, if there is time. If you are setting up treatment centers, then the first priority must be evaluation, and treatment, it should not be education and research. He stated they can develop an internship program wherever they are located.

THE CHAIRMAN asked that as far as the staff was concerned, the Unit did have a program to proceed on their treatment.

MR. ROSENLEAF stated he based this on the experience they have had in the past six years. The program has been developed, they have the lowest turn over of staff of any unit in the state hospital. He feels what keeps them in that program, is the fact they run a good program, allowed to do what they are trained to do, and get good support for this training. He feels if you have a good viable program, then you can recruit.

MR. CHISHOLM stated one of the issues that need to be discussed is the self-contained program. He stated he wanted to clarify a statement made the other day regarding it would be self-contained so that MR. ROSENLEAF was not looking at local school systems to provide educational services. He stated that he may in fact do that, but it would be the exception, not the rule. The program is to be

self-contained, so that when the children go on into intermediate care programs such as the RITZ in Great Falls, they can go on out in the schools, and utilize the community facilities. He stated this relates why Anaconda could work as well as any other area in the state. In talking to the university people, they agree there is no compelling reason to have this on their campus. They are interested in being able to have a state intern program.

REP. HURWITZ asked if it was a big issue over a long period of time regarding the training of staff.

MR. ROSENLEAF stated this would be a big issue for the first three to five years. In their experience, it takes a new employee about a year to know what is going on, and by the third year you are getting more of a skilled worker. Another issue is the type of person who would work in a Children's Unit, because these children give so little back. He felt the communities in Anaconda, Butte and Deer Lodge have had a lot of experience working with people in institutions, and they are quite tolerant of this. He noted he averages around 17 run aways a month, and the community doesn't get too concerned about this. Last year he lost one psychologist and one RN. He has a total staff of 41.5 FTE.

MR. CHISHOLM stated the Committee did not come up with the proposal for the site to be in Anaconda, he stated his Department working with the Governor's Office came up with this proposal site.

DAVE LEWIS explained the process they went through regarding their recommendation. They looked at the good program at Warm Springs, the good staff, and the placement of that program and the staff in tact was considered. There didn't seem to be any great argument in placing it anywhere else. Given the fact that Anaconda is a community that has recently been devastated economically, there didn't seem to be any compelling argument of pulling those jobs from Anaconda and placing them elsewhere. The program is working, they have the staff making it work, they have a history of working with institutions, and they need the jobs, basically covered the main issues.

MR. ROSENLEAF stated he has been observing this type of child for over 20 years, and there always seems to be a fight over whether or not the child should be mainstreamed. He stated he is not opposed to mainstreaming children, however, the type of child, who comes to this institution, has absolutely bombed out from all other programs. He usually has been suspended from school around age of 14. This child has been through all of the community base services. The child usually gets sent by the other communities and the judges, who label the child as one is not only disturbed, but disturbing, who is outraged and outraging and they do not want this child in the community. The idea of the self-contained unit

is two-fold, because you cannot treat unless (1) you need to get control, (2) the professionals need to agree on the type of treatment. Wherever this unit would be placed, it would have to have structure from within.

MR. CHISHOLM stated that wherever the unit is placed, ancillary support could be made available. If the facility were in Anaconda, they would use the laundry facilities of the valley as long as the laundry meets JCAH accreditation. They will recommend the building be built and staffed according to JCAH standards, even though over a period of time the federal support will be limited. If they comply with these standards, it will have to be operated as a self-contained unit anyway.

THE CHAIRMAN stated he did not feel there was any sense in building a 40 unit, when the commitments are already above that.

BILL RILEY, Board of Crime Control, feels the 60 bed facility is needed. The estimation of the records from the Youth Court is one in 23 children will need this facility. The justice system feels there is a problem when the child needs to be referred to Warm Springs and there is a waiting list, and no place for the child to stay except in jail. These numbers are going up and a 60 bed unit is needed. He stated as far as location goes, he agrees with MR. CHISHOLM'S statements.

He stated the problem the judges have is not the treatment, but the waiting list and not getting them in plus the legal problems this involves. He feels the type of child being discussed here, more community interaction and mainstreaming would cause more and more failures for them. He agreed the self-contained unit seemed to be the answer.

SEN. THOMAS asked if the age was a concern in the construction of this facility, and having 40 unit pods would be more effective.

MR. RILEY stated he didn't feel he could answer this, since it is more of an administrative matter. He didn't feel this would make any difference to the judicial system, whether it was one or two pods.

DR. MOLUNEUX stated last fall there was a study which contacted 200 inservice providers in the state, and asked them to identify the severely and moderately disturbed child in their communities. (EXHIBIT A). The results of the study indicate they do need a 60 bed facility. He stated he is a Clinical Psychologist, and he has no problem with a 60 bed unit as long as it not be constructed similar to the old dormitories. You could have four 15 bed units separated in that matter.

THE CHAIRMAN asked about the problem of identifying them at 13 and why not earlier.

DR. MOLUNEUX stated he feels they are there, but when they get 13, they are getting bigger, and come to the attention of the law. He feels the seeds are there earlier. He feels these children could be identified earlier in the school system.

SEN. THOMAS asked Dr. Moluneux to discuss the pros and cons of having it near the University system.

DR. MOLUNEUX does not feel that location is that important to the type of treatment that will be provided, since this is a self-contained unit. He feels regarding treatment purposes for different ages, in the study they broke it down to 12 and under and 13 and over, for treatment the 12 and under child should be separated from the 13 and over group. He would suggest a 15 bed unit set aside for the children 12 and under.

SEN. THOMAS asked if there would be any benefit having the Unit placed closer to Eastern Montana College.

DR. MOLUNEUX stated the Yellowstone Boys and Girls Ranch is already in Billings and has just opened a 20 bed facility for intensive treatment. Twelve of those beds have been designated for evaluation and treatment, and feels this would be a duplication of services in the Billings area.

MR. ROSENLEAF stated in terms of the intensive treatment center, not the ranch specifically, their length of stay is approximately six months. Children needing a longer term would probably need to return to the Children's Unit.

THE CHAIRMAN asked if there were advantages of having this type of facility and coordination of services similar to the Yellowstone Boys and Girls Ranch.

DR. MOLUNEUX stated at the Ranch, they do not have the experience or the expertise similar to the Children's Unit. He stated they are talking about the continuum of care, with a facility for the severely emotionally disturbed children on one end, and group homes and foster homes on the other end.

THE CHAIRMAN asked if there was an advantage of having an intermediate care facility along with the intensive care facility together.

MR. ROSENLEAF stated he would like to see continuum services built for the children in terms of the least restrictive environment and the most restrictive environment. He would like to see it

allowed legally to move the children from one treatment area to another. Where the problems arise is the Commitment Laws, which make it necessary to work out legal aspects for any type of change involved.

NORMA VESTRE, SRS, stated that in addition, about three years ago, SRS had about 20 children in out-of-state residential treatment facilities. This helped develop the RITZ program, and there is now only seven children out of state. All of the in-state facilities are full with a long waiting list. She feels they are doing a better job in placing these children, and if they do not get better resources available in Montana, then the children need to be sent out-of-state at a higher expense. She stated with SRS, the social worker makes recommendations as to where the child should be placed. Once the child is accepted into the program, their role is to make the payment to that facility.

CARROLL SOUTH stated he feels responsibility for the proposal of 60 beds because this figure was based on the children in need of these facilities, and with 37 there at the present time, he did not want to come back at a future time and request a larger facility. He stated to those who feel they don't need another institution, he would answer they already have the program that is taking place in an institution, it is a good program and very needed. Regarding the type of treatment in this program, he noted this is the Department's program and if the treatment needs to make the change. He didn't feel they needed to be influenced by an outside source as to the type of program they will have. Relative to the placement in Anaconda, it is the Department's position at this time. They do have an offer of free land, and also have a community that is receptive. He feels due to the time problem of the session, it may be necessary to set up a Site Selection Committee, and they may make a decision they could regret two years from now. He feels this is a good choice, and if they go anywhere else without working the terms out with a community, the Legislature could find the money has been appropriated, and the site and the working bids may not be approved by the community involved.

REP. HURWITZ asked how important it was to have a hospital nearby.

MR. ROSENLEAF stated in terms of bites, scratches, etc. they are a constant source of irritation wherever they are. Some children have eye, speech and amblyopic difficulties, and they do require some medical attention and supervision. The site proposed being so close to the hospital would be utilized.

THE CHAIRMAN asked what problems had been involved in discussing sites anywhere else.

MR. CHISHOLM stated two years ago they were proposing this facility and had approached certain communities regarding this site. There had been some talk regarding a site on the campus of EMC, but this has since been used for somewhere else. He felt that was perhaps the only site that had been offered. To be fair they did not go out and actively solicit from each community aggressively.

MR. SOUTH stated the Department has made their proposal, and if the Legislature does not feel it should go in Anaconda, then the Department is uncertain as to where else to look. He stated he did not want this to fall through the cracks, and he supported Sen. Haffey's motion of selecting a Site Selection Committee.

MR. ROSENLEAF stated a couple of years ago they looked at communities to locate and found there weren't any communities that wanted them. He noted there was such a wide divergence of opinion in each community, by the time you take into account the individual citizen, the probation authority, Justice of the Peace, County Commissioners, the divergence is remarkable. Missoula has run into problems of zoning over the group homes that have been established, he wasn't sure what they would do with a 60 bed unit. One site was offered 20 miles out of Missoula around Stevensville, but he feels since that is so far out, they might as well stay where they are.

JUDY CARLSON stated she felt there was need for the 60 beds, and it could be handled architecturally. She feels there will always be continuing needs for this program.

DAVE BRIGGS, Director of Region IV Community Health Service, felt he was acquainted in getting community support regarding this Unit. The location of the facility is not as critical a factor, but rather the type of program and the staff support that is going on in that facility.

SEN. THOMAS stated there are concerns expressed to him by the Mental Health Associations regarding this problem. He stated that Mr. Murphy from Billings stated in his testimony that he would prefer to go with more of a community based program, and a lady in Great Falls feels that Anaconda is not the place. He asked what role would the Mental Health Centers play in getting their exact opinions.

MR. BRIGGS stated he has not done a poll in regard to the location of the unit, he felt that all five Centers do agree there is need for a unit being discussed. The communities cannot handle the type of child being discussed. He stated he agreed that the 60 unit size would be appropriate.

SEN. THOMAS asked how much of the Committee relates to the opinions of the Mental Health Centers.

DR. MOLUNEUX stated the Mental Health Association is made up of several lay people. He understands they also see the need for intensive treatment centers that are secure. They would like 20 in one place and 20 in another throughout the state.

MR. ROSENLEAF stated that Anaconda to his knowledge is the only city and school system that has stated we can find room for you, and the only medical community that has offered its services, and the only community that has offered the land and the parks to this facility.

JOHN LaFAVER, SRS, stated he is pleased in the tone of the discussion as to not whether or not the Children's Unit should be built, but where it should be built. He hoped this was decided this session. He felt a key element is if you have a program that is working now, you shouldn't fool with it. He stated the one program that has impressed him throughout the Institutions is the Children's Unit and the staff of that unit. He felt this would be a strong argument in leaving this basic program in place.

SEN. THOMAS asked DR. BLOUKE regarding the type of children needed to be placed in an out-of-state facility.

DR. BLOUKE stated that is not the problem of the Department of Institutions, but more of a SRS problem.

JUDY CARLSON stated a number of local school districts send the children directly out of state.

NORMA VESTRE stated there is a screening committee, who have expertise in emotionally disturbed children. They review every referral where children should be placed. The SRS does not place any child out-of-state unless it has gone through the screening committee, and unless the recommendation has been made that the needs of the child cannot be met throughout the state. The out-of-state placements tend to be more expensive at a cost of \$2,000 a month. Also if it is necessary to have the family treated along with the child, the out-of-state treatment is very difficult. She feels this facility would decrease the out-of-state placements.

REP. HURWITZ asked about the information regarding the children on a waiting list, the 60 bed facility seems to already be filled.

MR. ROSENLEAF felt he was not a bit surprised by DR. MOLUNEUX studies, and he felt the amount of emotionally disturbed children in the state was too low.



MR. LEWIS felt that at first they recommended 40 beds, but with MR. SOUTH'S input plus others, he feels that 60 beds would be adequate. He feels this program is growing quite rapidly, and there will be need for this down the road.

MR. ROSENLEAF stated if you start talking about building a program that is approaching 80 or 100 children, you are talking about losing the quality of treatment both from the staff and the children.

DR. HAMILL stated he feels that 60 beds is the minimum amount to be considered, and Anaconda would be the first choice, but if that would keep the Legislature from passing the bill, then pass the bill for funding authorization and have it be decided by the Site Selection Committee and recommended by Mr. South.

REP. DONALDSON stated he wanted to bring up the fact there is a labor problem in Anaconda, and he noted the difficulty in working with six unions. He felt some of the resistance to Anaconda as a site was due to the unions.

MR. SOUTH stated he doesn't feel there is any difference where this is placed, because under the Collective Bargaining Law, it is just a matter of time until they are organized everywhere. Glendive is currently enrolling many of the employees at Eastmont.

MR. ROSENLEAF stated they work with the two largest union representatives, one for the professional staff, one for the independent union employee, one for the nursing staff, and the RN and LPN Association. He has not had any personal difficulties with them. He felt wherever you go you will be dealing with those bargaining units.

THE CHAIRMAN stated the LFA indicated they did a study of the Children's Unit last fall, and would like to see that study. He would also like to visit with people from different areas who might lend some expertise to this issue, and he would like to contact someone from the Yellowstone Boys and Girls Ranch. He would like to know more about the matter of intermediate care.

SEN. THOMAS asked MR. BRIGGS if he could get some type of poll from the directors regarding site, and size. He would like the OSPI to address two issues, one being the out-of-state placement, and secondly the educational component to this Unit. He would like to find out what type of commitment they would make in regard to funding it and their cooperation with this. He would like to have a representative from the Mental Health Center to attain a collective view. With this information, it would be necessary to discuss with other legislators regarding these key issues before making the final decision.

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MR. BRIGGS stated he would attempt to get a poll from the Mental Health Centers.

There being no further discussion or comments, the meeting was adjourned at 9:00 a.m.

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GENE DONALDSON, Chairman

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Gene Huntington

OBPP

Helena

Jim Hamill, M.D.

WSSH

Winn Springs

John Hancock, ALSN

M.S. S.H.

Winn Springs -

JOHN LAFAVER

SRS

Helena

W. S. S. H.

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NORMA VESTRE

SRS

Hoboken

Bruce Mounaux

DOI

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Bill Riley

MBCC

Helena

W. S. S. H.

W. S. S. H.

TO: ALL INTERAGENCY BUREAUS

October 31, 1980

FROM: J. Bailey Molineux, Ph.D. *J.B.M.*  
Chairman, Interagency Committee on Emotionally  
Disturbed Children

RE: Recommendations for the Treatment of Montana's Seriously Emotionally  
Disturbed Children

During August, 1980, the State Interagency Committee on Emotionally Disturbed Children conducted a needs assessment of 200 youth service providers - the community mental health centers, group homes, social service workers, district courts, aftercare workers and private psychiatrists and psychologists - to determine the number of seriously emotionally disturbed youths under age 18 in Montana in need of more intensive treatment. One hundred forty eight of those 200 youth service providers responded. Each was asked to provide the initials, dates of birth and sex of the youths listed to avoid duplicated counts.

The results, broken out by age, sex and degree of disturbance - moderate and severe - are presented below.

Severely disturbed children are those who are so suicidal, violent and/or "crazy" that they can't be treated or contained in the community. They need physically secure, institutional treatment. Moderately disturbed children are those who are so depressed, antisocial and/or "crazy" that they are having significant difficulties adjusting in their own, foster or group homes. Consequently, they need more intensive treatment - usually residential - but do not have to be committed to a physically secure setting as do severely disturbed children.

NUMBER OF SERIOUSLY EMOTIONALLY DISTURBED YOUTHS IN MONTANA  
IN NEED OF MORE INTENSIVE TREATMENT  
August, 1980  
(Unduplicated Numbers)

Severely Disturbed

	<u>Males</u>	<u>Females</u>	<u>Total</u>
12 and under	11	8	19
13 and over	87	38	125
Total	98	46	144

Grand Total 144

Moderately Disturbed

	<u>Males</u>	<u>Females</u>	<u>Total</u>
12 and under	102	44	146
13 and over	285	152	437
Total	387	196	583

Grand Total 583

exhibit A