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Maine Department of Mental Health and Mental Retardation
Augusta Mental Health Institute



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JOHN R. McKERNAN, JR.
Governor

SUSAN B. PARKER
Commissioner

September 1, 1989

Susan B. Parker, Commissioner
Department of Mental Health and Mental Retardation
State Office Building, Room 400
State House Station #40
Augusta, Maine 04333

Thru: William B. Deal, M.D.
Chairman, Health Consortium, Inc.
c/o Maine Medical Center
Portland, Maine 04101

Subject: Interim Report No. 3. August 1, - 31, 1989

Dear Commissioner Parker,

During the period of this report I have taken the first steps to implement the administrative reorganization of AMHI. Three (3) of the operational studies that we have commissioned have been completed and written reports submitted. The completed studies covered:

1. Nursing Structure and Organization/Staffing
2. Food and Nutrition Services
3. Housekeeping Services

A copy of each study is attached as an appendix to this report.

1. Nursing Structure and Organization/Staffing (Appendix 1)

I have provided Vera Gillis, R.N., Nursing Services, Marion Carroll, R.N., Unit Director, Vada Rose, R.N., Unit Director and Marilyn Dennis, R.N., Unit Director, a copy of this study. These managers will meet with members of the Consortium's Special Nursing Task Force on September 6th to review the report and clarify any special issues.

It should be noted that the report recommends the establishment of a Department of Nursing. This outlines the structure within which we can clearly define and establish responsibility for all nursing care provided to our patients. Once the nursing organizational structure is in place, it will be the responsibility of the Director of Nursing and the Associate Directors to insure that the nursing staff at all levels is held accountable for the quantity, but most importantly, the quality of that care.

The staffing section indicates that staffing authorizations provide for favorable overall staff-to-patient ratios, although some adjustments to individual unit staffing patterns may be necessary.

A transitional organization chart has been provided as well as two lists of specific recommendations. One list relates to structure and organization (thirteen recommendations) the other pertains to staffing issues (twelve recommendations).

We will need to review the current role and responsibilities of Mental Health Workers IV, V, VI and make the necessary modifications in their respective roles and responsibilities to fit within the new structure.

2. Food and Nutrition Services (Appendix 2) The Marriott report contains several key comments:
 - a. In general, the overall staffing authorization is adequate.
 - b. There is an identified need for a third Registered Clinical Dietician and a second Clinical Dietetic Technician.
 - c. Depending on how the food delivery system is organized, there is the potential for increased efficiency. Salary savings should be utilized to fund the additional Registered Dietician and the Dietetic Technician positions.
 - d. Emphasis should be placed on the clinical aspects of the Food and Nutrition Service.
 - e. In the near future, there will be a need to replace much of the basic major equipment in the department.

3. Housekeeping Services (Appendix 3)

The Servicemaster report on the Housekeeping Department was in general very complimentary. Among their suggestions are:

- a. The Housekeeping Department is in dire need of "state of the art" equipment. This would enhance the quality of work as well as improve efficiency. There is also a clear requirement for more "basic" housekeeping equipment.
- b. Staffing appears to be adequate.
- c. Coverage should be extended to the evening shift. This would help the patient care areas and certain tasks could be scheduled for that shift.
- d. Standardized work rates and written work schedules should be developed.

The two remaining reports - Medical Records and Primary Medical Care - are due early in September and will be covered in my final report.

Respectfully Submitted,


William J. Thompson
Interim Superintendent