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# REPORT ON

THE DEPARTMENT OF MENTAL HEALTH AND CORRECTIONS

Submitted by Louis Jalbert, Chairman Legislative Research Committee

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This report is submitted to the members of the 103rd Legislature with hope that the information contained herein will be of value in the determination to be made by way of supporting appropriations for programs and needs of the various institutions within the Department of Mental Health and Corrections.

As a legislator for some 20 years, and a member of the Appropriations Committee for many of them, I have agreed and disagreed with the spending of millions of dollars for state services. As Chairman of the Legislative Research Committee, I became sincerely concerned with many of the problems unique to the institutions and have learned firsthand the general functions of each, the vital role of their employees, the needs as expressed by the institutional heads, and offer my personal observations for your consideration.

LOUIS JALBERT, Chairman Legislative Research Committee Following are the institutions within the Department of Mental Health and Corrections:

Augusta State Hospital, Augusta
Superintendent Dr. John C. Patterson

Bangor State Hospital, Bangor Superintendent Dr. Harold A. Pooler

Boys Training Center, South Portland
Superintendent William H. Hughes

Governor Baxter School for the Deaf, Mackworth Island, Portland Superintendent Joseph P. Youngs, Jr.

Maine State Prison, Thomaston Warden Allan L. Robbins

Military and Naval Childrens Home, Bath Superintendent Dr. Earle B. Perkins

Pineland Hospital & Training Center, Pownal Superintendent Dr. Peter W. Bowman

Reformatory for Men, South Windham Superintendent Merton R. Johnson

Reformatory for Women, Skowhegan

Superintendent Miss Ward E. Murphy

Stevens Training Center, Hallowell Superintendent Dr. Pauline I. McCready

In an attempt to understand better the functions of one of Maine's largest departments, I visited our state institutions in whose care we have placed our indigent, retarded, wayward and mentally ill citizens—those persons for whom we are responsible.

The very nature of the services performed, together with the institutional environment, tend to set their problems apart from those of general state employment. Institutional impositions become a way of life--for the employee as well as the patient.

To the extent that the patients must be treated and cared for, we, as legislators, have the responsibility of providing the necessary funds to accomplish this. We must rely on those qualified professionals in the field of mental health and corrections to develop treatment programs necessary to rehabilitate—but we must provide the money.

The patients—and I now refer to the retarded and mentally ill—are those individuals for whom the home and community are ill—equipped to help. These people are in need of professional treatment and become temporary or permanent wards of the State.

The community responsibility aspect is not a subject for this report. The recently completed Maine Mental Health Plan is a worthy contribution toward the end when these problems will be accepted for what they are—illnesses—and solutions found to solve our mental health dilemma.

#### PINELAND HOSPITAL AND TRAINING CENTER

At Pineland Hospital and Training Center, there is an average population of 1,150 patients ranging in age from 7 to 65. Presently there are 378 who are untestable, having an intelligence quotient below 25. Fifty-five patients are permanently confined to bed-84 have to spend their day in a chair-462 receive tranquilizers-239 are epileptic-229 are rated to be self-abusive. The majority of these patients require constant supervision. Thus, that which relates to direct patient care, rates as priority number one.

Also high on the priority list is the need for adequate fire protection. Most of the buildings are 2 or 2 1/2 story structures, and Pineland is located a good distance from any municipal fire department. The need for adequate fire protection equipment is obvious. There will be requests made for other necessities and I only mention these in view of their importance.

#### AUGUSTA STATE HOSPITAL

The Augusta State Hospital has 1,600 patients. Twenty percent of these are geriatric patients—those unable to care for themselves. Another 20% are old and regressed, but may be helped to return to society. There is the out-patient service for those who can adjust or accept their environment outside the hospital for limited periods of time without help; and the criminally insane requiring severe security accommodations.

Because of position limitations, established by past
Legislatures, increased admissions to the out-patient service,
and rapid advances in many technologies and affiliated programs
and relationships, personnel problems are a serious concern.
In the maximum security section, there should be special pay
differentials or job classifications because of the special
demands placed on the employees in that area.

The superintendent supports the fact that the function of the psychiatric aide is the backbone of treatment efforts. The psychiatric aide is still underpaid, overworked and far too often alone in his or her efforts. The need for a 40-hour work week is of primary importance.

## BANGOR STATE HOSPITAL

The Bangor State Hospital has approximately 1,200 patients, and in general the same problems, though it does not have the maximum security section. There is again the urgent need for more patient care, personnel, a standard 40-hour work week and higher salaries. The standard work week for most hospital employees is currently 44 hours. The wards must be covered 24 hours a day, 7 days a week.

At the present time, Bangor State Hospital does not have an infirmary or intensive medical treatment ward. The physically ill patients are on the same ward with the emotionally disturbed and the disturbed patient could conceivably seriously harm a patient who is in bed and possibly in traction. Top priority is being given to the need of renovating rooms which would be suitable for a medical ward. No ward would be closed—existing "dead" space would be used for this purpose. Patients would be brought to this section and lessen the workload on the wards by removing those patients requiring intensive care.

Maine has been a pioneer in the field of mental health and recognizing in 1840 the need for facilities, built the Augusta State Hospital. The Bangor State Hospital was constructed in 1895 and Pineland in 1907.

Physical facilities are important in determining, to some extent, what services may be performed, but my immediate concern involves patient care and treatment. Care and treatment of those numerous mistakes of birth, heredity and environment which have

been placed within the confines of our institutions.

Professional staffing is a universal problem by virtue of the limited numbers of medical doctors, psychiatrists, psychologists, and to a degree, registered nurses. Recruitment and retention have become a real challenge.

## OBSERVATIONS

Maine, being one of the few states to recognize and employ the qualified foreign doctor, has been able to fill certain professional positions. However, many of these professionals leave to enter private practice or seek employment with the Federal Government—desiring higher wages. The lack of adequate housing, aside from the salary factor, at the institutions also has an adverse effect in recruitment. The superintendents of both state hospitals will attest to this, and Pineland finds this a problem for many employees, due to the remoteness of its location.

From the standpoint of patient care, vital service is performed by those who fill the positions of psychiatric aide and male attendant. These employees are the backbone of any institution caring for the ill. Those employees who care for nature's misfortunes and society's outcasts, who can love them and tolerate the suffering, who work many long hours, week after week, are worthy of far more consideration than has been given.

In spite of recent salary increases, those employees who care for the mentally ill and retarded are among the lowest paid in the State--yet, they have direct influence on the patients since they are in constant contact with them. The work week for aides, or male attendants, is 44 hours; often working 11 consecutive days out of 14. Typically, they work 8 days with one off; 7 days on and 2 off; 7 days on and 3 off; and back to 8. The complaint that the aides are too tired to enjoy their free

time is understandable.

Since work shifts are necessary to provide complete 24-hour coverage, these same employees are often called on to fill-in on other shifts--absenteeism being a problem. Receiving pay for the extra hours is necessary as their services cannot be spared to allow compensatory time off and this dilemma is common to all 3 institutions.

Of the myriad duties required of all attendants, the most important and exacting are those relating to care of the individual patient. The attendant or aide must put up and administer medications; give inter-muscular shots, insulin, vitamin, penicillin, etc.; take blood pressures, temperatures, pulse and respiration; dress and bandage bed sores; take and test urine samples of diabetic patients; and maintain the required patient reports.

There are certain housekeeping chores which are expected.

These include the mopping of floors because of urine or feces; washing walls, windows, etc., in addition to caring for the patients. It is asking too much of aides to do the heavy cleaning as well as all the regular ward duties which are required. Additional domestic and custodial workers are needed, and positions for ward clerks would relieve the aide of burdensome paperwork and allow her to treat the patients more effectively.

For those employees who must perform their duties on the night shifts, we are asking them to reverse their mode of living in terms of normal working hours—with no additional pay.

Recruitment and retention of employees to fill the positions is

a major problem. With a shortage of employees on the night shifts, patients cannot receive the special care they need.

Many of the patients in these 3 institutions are existing for reasons that the body is stronger than the mind; but Pineland seems somewhat more tragic than the state hospitals as there are so many children and young patients. There are those who sit hugging their knees, staring straight ahead, unseeing reality, the boy banging his head as if to rid himself of something undesirable, and the aide rushing to prevent injury; the retarded little redhead of 5 who looks at you, throws her head back and laughs, and is tied with white cloth to keep her from straying.

There are men who look but do not comprehend; the older women clutching her purse as though for security, bundled in her bed near the window where the sun is shinning brightly; and there is the constant stench of urine--or disinfectant.

One cannot but admire each and every individual who daily administers help to those unfortunate children and adults.

The preceding outlines only briefly some observations made during my several visits to the 2 state hospitals and at Pineland. The 5 correctional institutions also deserve consideration. There are problems, but the nature of the services performed is diversified.

#### STEVENS TRAINING CENTER

Stevens Training Center in Hallowell was established in 1875, and covers 105 acres of land. There are 125 girls, ranging in age from 11 to 17—placed through court action—and in need of professional help. They must be rehabilitated to become useful to themselves and to society. They have emotional problems, warped values and crave attention.

There are 5 cottages, with 20-plus girls in each. The cottages are old, ill-furnished, drab and inconvenient. The bedrooms measure 4 feet wide and 8 feet long. They contain a metal cot, dresser, chair and possibly a small bedside table. In most rooms, a closet has been fashioned by hanging a curtain diagonally across one corner. No provisions are made to encourage proper study habits—a single light suspends from the ceiling.

The corridors in these old buildings are too narrow to meet minimum fire and safety standards, and there is no way to correct them. The toilet and shower facilities are makeshift and inadequate by their very number.

There is currently under construction one new cottage which is designed to house 15 girls—the desirable number per unit.

New cottages should be high on the priority list for consideration by this Legislature—6 of them.

The housemother fills a vital role as she is responsible for her charges around-the-clock. She is accountable for the girls under her supervision from 3 p.m. to 3 p.m.; 24-hour

shifts, with 8 hours allowed for sleep. Any interruption, however, during those 8 hours is not recognized for overtime credit—it is a condition of employment. The housemother is on duty for 24 hours, off 24 hours, on another 24 hours, off 24, and off 48. Though the housemother is on call the full 24-hour period—a total of 72 hours per week—she is compensated for only 48 hours.

The 102nd Legislature approved certain capital improvements. Underway, in addition to the cottage, is a diagnostic and treatment building, a recreation building and renovations in the administration building to provide a central dining room and kitchen. Much more is needed.

There is no infirmary. There are no facilities where the pregnant girls can be separated from the others, professionals are needed to effectively evaluate the girls, there is no after care program, no training program for housemothers. The need for social workers and a full time psychologist is obvious.

Since it has been said that the arts and crafts program is too expensive, it is my hope that funds will be requested to reinstitute and strengthen such an activity.

#### REFORMATORY FOR WOMEN

Another correctional institution with old buildings is the Reformatory for Women in Skowhegan, established in 1915.

Cooperation and discipline permeate the entire atmosphere and problems are at a minimum.

There are no confining fences around the 280 acres which encompass the administration and treatment center building, a converted hospital, the half-way house, 3 cottages and superintendent's quarters. There has been no new construction since 1930, yet maintenance has been such that the cottages are acceptable in appearance. The old varnished floors creak, the cant of the woodwork indicates the age of the buildings, but the walls are painted and no unsightly holes are allowed to remain in the plaster. The individual rooms are small, but tidy.

The superintendent's home, on the grounds of the reformatory, is shared with the assistant superintendent and spouse, the afternoon supervisor, and as many as 9 interns during the summer months—plus those on call for weekends. The superintendent has no privacy, and consideration should be given to the request for an off-the-ground residence and the present building made into apartments for staff.

Inmates at the reformatory are those women sentenced by
the courts to either the Reformatory for Women or to the Maine
State Prison, plus those girls transferred from Stevens Training
Center as incorrigibles. With only 2 professionally trained

members on the staff, there is need for the addition of a social worker and a psychologist. The lay-staff is commendable, but specialists are needed to evaluate, diagnose and treat the problems of the inmate.

High on the priority list of needs at the Reformatory for Women is the complete renovation of Stevens Building, built in 1918, or probably more economically feasible, a new building and the demolition of Stevens Building. This building which houses inmates, and a limited recreation area, is unsuitable. Renovation would provide for much needed activities facilities which are not now available, a small kitchen and sewing room.

The administration has established a sound and productive relationship with the community, thereby making it possible to carry out beneficial rehabilitation programs. The Half-way House Program provides an environment of community living, with supervision, for those who are eligible and can benefit through schooling, on-the-job training and full employment, before being permanently returned to society. This program is over 3 years old with more than 50 women and girls participating. I am told that not one of these has been sentenced for a new offense to any state correctional facility.

A request is being made to acquire a home in the Skowhegan community to provide facilities for a permanent residential center for Half-way House participants. Such a home would make possible even greater participation in this proven program of rehabilitation.

The housemothers work around-the-clock shifts; 8 hours allowed for sleep. This is the same situation that exists at Stevens Training Center. Housemothers work a 24-hour shift but receive compensation for only 16 hours.

# OBSERVATIONS

Because of the relatively small size of 2 institutions, I would like to recommend that one full-time person be employed to manage business matters at both Stevens Training Center and the Reformatory for Women, with General Fund accounting being handled in the central office.

#### BOYS TRAINING CENTER

The Boys Training Center in South Portland was established in 1850 and extends over 307 acres of land. There are over 250 boys between the ages of 11 and 20 committed to the institution. With the increased residential population well above expectations, all programs and facilities have been adversely affected.

A continuing effort is made to provide comprehensive programs, both academic and vocational, for these juvenile offenders and attempt to develop socially acceptable attitudes which will enable them to return to family and community with a degree of success.

The several new facilities recently constructed, or scheduled for completion in the near future, include a recreational unit, 2 boys living units, an infirmary and control unit, central kitchen with staff dining rooms, and a heating plant. These represent an important step forward in the implementation of programs required to rehabilitate these young males.

The boys' cottage life, which is one of the most important programs, is under the supervision of a man and wife team assigned to each unit. This departure from the single-house-parent structure of the Stevens Training Center is due in large part to the fact that a woman's presence has a proven effect on the boys, whereby they are more easily taught respect, cleanliness, and to a great extent it discourages the use of foul language. This more balanced cottage life, based on years of experience, appears to be of great benefit in the rehabilitation

of boys.

The results of a "staff team" approach is obvious at both this institution and the Reformatory for Women. The effects of this team effort to relate all aspects of treatment is most beneficial in the treatment of the inmates. Where one phase of a program ends, another begins, and each employee is aware that his responsibilities have an important part in the teamwork toward the rehabilitation of the inmates.

In spite of effective administrative procedures, there is the continuing need for more psychiatric service for those suffering serious mental and emotional disorders—if we are serious in our desire to help these unfortunate boys. There is also the continuing need to provide adequate supervision and coverage personnel in the cottages. Relief personnel is often not available and current personnel must extend themselves well beyond any reasonable workweek schedule.

Obviously, at the Boys Training Center, there is need for additional personnel in the several areas of responsibility—nursing, cottage life, remedial reading and related subjects, clerical and professional.

#### REFORMATORY FOR MEN

The Reformatory for Men, established in 1919, covers 418 acres of land and presently has an inmate population of over 180, committed through court actions.

Here, the effort is made to utilize the inmate's time to the extent that upon release, he will have acquired usable skills which will enable him to be a productive and useful citizen. And, at the same time, provide in-service training programs for the reformatory staff to better prepare them for their assignments in handling the inmates.

Vocational education programs enable the inmates to participate in a training program which will benefit their rehabilitation and release program. The vocational education available include woodworking, printing, small engine repair, welding, dairy plant operation, plumbing, sewer treatment plant operation, grain mixing plant, carpentry, mason work, forest improvement and management and others. There is an immediate need for 2 vocational trades instructors which would allow the expansion of the program to include electrical and an automotive body repair.

The gymnasium is a valuable center which provides a hobby shop program operated on a year-round basis, and, this combined with a library program, keeps the inmates occupied during non-working periods.

There is need for a bus to transport inmates to various work assignments off the grounds; increased medical, dental, optical and psychiatric programs--beyond the emergency situation;

and more personnel to relieve those who work 12 straight days in order to have 2 days off. Again, the facts point to the need for a standard 40-hour workweek.

#### MAINE STATE PRISON

The Maine State Prison was established in 1824, only 4 years after Maine became a state. Today, it encompasses 1,111 acres of land and has an inmate populace of 436 men and boys. It is a town within walls.

A full program of religion education and recreation is maintained, and although everyone works, a full vocational training program is badly needed. The vital job of technical training and rehabilitation in prison is as vital to the protection of society as the job of keeping a man locked up, but the prison functions with a low ratio of staff to prisoners.

The inmates work the 1,100 acre farm and produce a surplus for outside markets. The men and boys are exposed to training in the print shop, sanding room, upholstery shop, tailor shop, plate shop, and wood shop. There is no gymnasium.

Furniture is made and furniture repair work is done at and for the prison, for various other state agencies, and for the general public. Some of the furniture is comparable in quality to the best lines in leading furniture stores.

Much of the clothing worn by the inmates is made there, as well as uniforms and bed linen. And, you know that the automobile registration plates and validation tabs come from the prison.

Uniforms are an immediate need. The officers have to be uniformed by law and the presnt uniforms are threadbare. The officers should be dressed in a uniform of more acceptable quality.

No provision has ever been made to provide inmates with winter jackets, except for those assigned to outside work details. The others go from cells to shops and stand in chow lines with only a shirt and no underclothing other than shorts and it is the desire of the superintendent to furnish the inmates with T shirts.

In modern penalogical planning, it is unheard of to have a power plant and boilers within the walls of a prison because of the extreme security hazzard. An attack upon the existing plant would completely cripple the institution for heat, power, hot water, electricity and all associated utilities. Priority should be given to moving all vital utility equipment outside the walls in order to make the institution more secure and emergency proof.

Most of the cell block windows have deteriorated and rusted out to the extent that it has been necessary to constantly repair and weld sections in. Since they do not close tightly, there is the loss of heat. Replacing these with a security type window would eliminate the outside bars that are constantly being repaired and greatly increase security in these areas.

## MILITARY AND NAVAL CHILDRENS HOME

The Military and Naval Childrens Home was established as an orphan asylum for the City of Bath in 1866, becoming a state institution in 1929. Most of the new admissions have been for short, emergency periods of time for young people ranging in age from 6 to 17. The majority come from Cumberland, Sagadahoc and Lincoln Counties.

The superintendent and his wife, who also serves as his assistant and house parent supervisor, live with the youngsters in the 3-story colonial mansion. This structure has been modified to accommodate 42 charges, the superintendent's living quarters and the administrative office.

Lack of requests for admission is the reason for the low number of 27 children presently being cared for, and no child has been refused admission. The Department of Health and Welfare has placed children at the home, temporarily, until suitable foster homes are found.

This home is an expensive operation, in a pleasant setting of approximately 76 acres, and offers physical and cultural advantages—doing a very lot for a very few.

The name of this home is, today, a myth. It has not been a home strictly for the children of soldiers and sailors for many, many years. The function of this home should either be integrated into the Bureau of Corrections, the Health and Welfare Department or eliminated.

The superintendent is of the opinion that the facility could be converted to a halfway house for pre-delinquent and post-committed children between the ages of 6 and 16. These

children would be those who could not be placed in foster homes, or who could be placed for short term custody to relieve an emergency situation. The superintendent feels such an institution could accept teenagers with sociological problems for whom no other suitable placement can be found and would include youngsters from both juvenile institutions who were ready for entrustment.

Discussing the desirability of placing the Military and Naval Childrens Home under the Department of Health and Welfare, the commissioner gave his views, and stated that the home is currently being used by the Division of Child Welfare.

The home constitutes a free placement for the division and a temporary placement for children pending location to an appropriate foster home. He feels it serves purely a local need.

If this facility were to be transferred to the Department of Health and Welfare, it would be used only for emergency-temporary group placement of children; as a diagnostic center for children needing such services; for short term treatment for the mildly disturbed adolescents; and would create some additional basis for appropriate use of the home--plus the added necessary appropriations. The Commissioner of the Department of Health and Welfare would not contemplate use of the home for relatively normal children who could make far better use of a regular foster home of the Division of Child Welfare.

In view of these facts, there seems little justification

for the use of this home as simply a large foster home for normal children, and the cost of such placement is disproportionately high in relation to regular foster home placements.

In spite of the need in Maine for a Juvenile Reception and Diagnostic Center, well staffed and ideally located geographically, I question if the Childrens Home could be converted to fill that need.

#### GOVERNOR BAXTER SCHOOL FOR THE DEAF

The Governor Baxter State School for the Deaf was established in 1876 and became a state institution in 1897. It is a coeducational institution for the teaching of deaf students.

There are now about 144 young people striving to overcome their invisible defect. Approximately 95% are totally deaf, or deaf to the degree that they cannot be taught in the public schools. The remaining 5% have such severe hearing defects as to need the special training.

Baxter School prepares the child through the 8th grade and to continue education, these graduates must go out of state to receive secondary education. Presently, Maine has 27 students attending the American School for the Deaf in West Hartford, Connecticut.

The original plans for the development of Baxter School included provisions for high school facilities. This phase has never been developed, nor has the science and vocational class-room building been approved for construction.

We are mindful of all that Governor Percival Baxter has done and is continuing to do for the school. Governor Baxter is a man for whom I have high personal regard. He has been a great benefactor and public servant and is concerned with the education of the deaf. I feel sure he will understand the possible benefits and want what is best for the students.

Since this institution provides schooling to pupils, not inmates or patients, the Governor Baxter State School for the Deaf should be placed approximately within the Department of

Education. This school cannot accommodate the mentally ill or the severely retarded. The law states that any mentally normal child between 6 and 18 years of age, too deaf to be materially benefited by the methods of instruction in the public schools, shall be required to attend the Governor Baxter State School for the Deaf until discharged by the superintendent.

There are needs such as private living quarters for the superintendent and family. More staff housing is needed if a competent teaching staff is to be maintained. Some are now living in children's rooms. And, additional personnel is needed to expand present programs.

## CONCLUSIONS

In the field of mental health and corrections, current thinking has centered around the possible advantages of moving certain patients out of institutions and placing them in boarding or nursing homes. This philosophy, which is under consideration country-wide, proposes to remove those patients who do not need or can no longer benefit by the specialized services which the large institution provides, and thus release the facilities for new admissions.

At the present time, adequate and properly located boarding or nursing homes are not available. In the ultimate, our current problems concerning patient care personnel and facilities could well be alleviated—but that will not come within the next few years.

In my observations, I have not been unmindful of the employees who serve in supervisory and administrative positions. Without them such complex institutions could not function.

By way of summary, much needs to be done to improve programs and facilities. Additional staffing would improve and expand programs; employees would benefit if there were more inservice training programs available; a standard 40-hour workweek would relieve the overworked; there are inequities in the salary structure; and there is the need for much capital improvement.

In spite of the needs, Maine can be proud of her institutions

and the dedication by those responsible for treating and caring for our less fortunate citizens.

Louis Jalbert, Chairman Legislative Research Committee Representative, Lewiston