#### Department of Mental Hygiene DEPARTMENTAL ADMINISTRATION

ITEM 169 of the Budget Bill	Budget page 510 Budget line No. 31
For Support of Departmental Administration From the Gei	neral Fund
Amount requested	
Estimated to be expended in 1951-52 Fiscal Year	1,402,089
Increase (18.0 percent)	\$252,000

Summary of Increase

		INCREASE	DUE TO		
	Total increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages	\$168,158	\$55,798	\$112,360	515	50
Operating expense	55,005	27,505	27,500	515	51
Equipment	28,837		40,451	515	52
Total increase	\$252,000	\$71,689	\$180,311		

### RECOMMENDATIONS

Amount bu	ldgeted	tion	\$1,654,089
Legislative	e Auditor's recommenda		
Reduction	· · · · · · · · · · · · · · · · · · ·		\$10,092

#### ANALYSIS

The budget request of \$1,654,089 is \$252,000, or 18.0 percent higher than the estimated expenditure of \$1,402,089 for the 1951-52 Fiscal Year.

#### **Departmental Administration**

The budget request for departmental administration is \$773,963, which is \$88,942, or 13 percent, higher than the estimated expenditure of \$685,-021 for the 1951-52 Fiscal Year.

Of this increase, \$64,136 is in salaries and wages. Thirteen new positions costing \$43,248, plus centralization of patients' accounts and records, which was put into effect on March 1, 1951, account for most of the increase.

The 13 new positions include clerical and accounting personnel which have been reviewed by the Department of Finance on a work load basis.

There are several new positions which we recommend be deleted. These are:

1 Instructor in cooking	\$3,720
1 Education intern (food studies)	2,280

We believe that the augmentation of feeding personnel should be justified on the basis of improving management and improving the food served to the patients, and that these positions should be financed out of the arbitrary 15 percent amount added to food costs for poor management, inexperienced cooks and helpers, poor equipment, etc. This 15 percent margin is high and an effort to improve the feeding personnel should reduce this arbitrary figure. This method of financing would result in a reduction in the budget of one instructor in cooking as shown on budget page 513, line 46, at a cost of \$3,720, and one educational intern as shown on budget page 513, line 47, at a saving of \$2,280.

1 Assistant superintendent of nursing services (psychiatric technician) \_\_\_\_\_\$4,092

We cannot see the justification of adding this person to represent an employee group in the hospitals at the departmental level. This is a new service. We recommend deletion of this position at a saving of \$4,092.

#### **Extramural Care**

The amount requested of \$880,126 is \$163,058, or 22.7 percent, greater than the estimated expenditure of \$717,068 for the 1951-52 Fiscal Year.

A total of 30.5 new positions is requested to reduce the ratio of patient case load from 92.5 to 76.0 per worker.

We recommend approval of the amount requested.

### Department of Mental Hygiene TRANSPORTATION OF PATIENTS

ITEM 170 of the Budget Bill

Budget page 515 Budget line No. 73

For Support of the Transportation of Patients Committed to State Institutions in the Department of Mental Hygiene From the General Fund

Amount requested Estimated to be expended in 1951-52 Fiscal Year	$$109,136 \\ 103,122$
Increase (5.8 percent)	\$6,014
RECOMMENDATIONS Amount budgeted	AT 00 T 00
Legislative Auditor's recommendation	_ 109,136
Reduction	None

#### ANALYSIS

The amount requested covers transportation costs, sheriff's fees and traveling expenses incurred in connection with the delivery of patients from the counties to the mental institutions.

As mentioned in our analysis of the 1950-51 Budget Bill, the schedule of fees and allowances made to sheriffs for the transferring of patients to mental hospitals was drawn in 1933. It was also noted that a new schedule was being prepared for the approval of the Board of Control, computed largely upon a cost per mile basis. This has not yet been completed. It is desirable that the necessary study be made as soon as possible in order to avoid further delay in making an accurate determination of the actual costs involved in the transportation of patients.

Approval is recommended of the amount budgeted.

#### Department of Mental Hygiene DEPORTATION AND INSTITUTION TRANSFERS

ITEM 171 of the Budget Bill Budget I	page 515
Budget I	ine No. 85
For Support of Deportation and Institution Transfers of Patients Fro Institutions of the Department of Mental Hygiene From the Gene	m the State
Amount requested	\$72,400
Estimated to be expended in 1951-52 Fiscal Year	78,900
Decrease (8.2 percent)	\$6,500

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### RECOMMENDATIONS

Amount budgeted	\$72,400
Legislative Auditor's recommendation	72,400
Reduction	Nono

#### ANALYSIS

The amount requested is for the deportation of patients to their own states of legal residence, and institution transfer of patients from the state mental institutions.

The State will deport approximately 325 patients during the 1952-53 Fiscal Year at a per capita cost of \$206. The average cost of returning a patient increased from approximately \$157 to \$206 in June, 1951, when new railroad rates became effective.

It is estimated that 100 patients will be transferred between northern hospitals at an average cost of \$5, and that 200 patients will be transferred from southern institutions to Napa and Stockton at an average cost of \$25.

The decrease in the 1952-53 Budget request is accounted for by a reduction in the estimated number of transfers between mental institutions within the State.

Approval is recommended of the amount requested.

#### Department of Mental Hygiene FAMILY CARE

ITEM 172 of the Budget Bill

Budget page 516 Budget line No. 9

For Support of Family Care of Patients Paroled or on Leave of Absence From State Institutions of the Department of Mental Hygiene From the General Fund

Amount requested Estimated to be expended in 1951-52 Fiscal Year	\$348,480 271,656
Increase (28.3 percent)	\$76,824
RECOMMENDATIONS Amount budgeted Legislative Auditor's recommendation	
Reduction	None

#### ANALYSIS

This budget request provides for the placement of approximately 440 patients in family care.

The 1951 Session of the Legislature authorized an increased allowance up to \$70 per month and the department has estimated the average cost per case at \$68 for the 1952-53 Fiscal Year.

The annual cost of maintaining a patient in family care is \$816, which compares favorably with the estimated average annual cost of \$1,095 for maintaining a patient in one of the state mental institutions during the 1951-52 Fiscal Year.

An allowance of \$68 per month represents a 13.3 percent increase over the previous allowance of \$60 per month. However, this is less than the percentage increase between the Fiscal Years 1950-51 and 1951-52

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in the cost of maintaining a patient at one of the mental institutions and appears to be justified by the rise in prices.

Approval of this budget request is recommended.

#### Department of Mental Hygiene RESEARCH INTO SEX CRIMES

ITEM 173 of the Budget Bill

Budget page 512 Budget line No. 65

Amount requested	eral Fund \$142,132
Estimated to be expended in 1951-52 Fiscal Year	75,000
Increase (89.5 percent)	\$67,132
RECOMMENDATIONS	
Amount budgeted	\$142,13
Legislative Auditor's recommendation	42,82

Reduction \_\_\_\_\_ \$99,311

#### ANALYSIS

The Legislature, in Chapter 35, Statutes of 1950, appropriated \$100,-000 to be expended by the Department of Mental Hygiene in research on the problem of sex crimes. The act provided that no more than \$50,000 of the appropriation could be spent in any one year.

The 1952-53 Budget shows that \$42,821 was expended in the 1950-51 Fiscal Year, and of the balance of \$57,179 the sum of \$50,000 is estimated to be expended in the 1951-52 Fiscal Year. This latter sum has been supplemented by a \$25,000 allocation from the Emergency Fund, the remaining balance of \$7,179 is budgeted for 1952-53 in addition to the item appropriation of \$142,132.

The department has requested funds for a seven-point program, plus a \$10,000 contingency fund. The portions of the program that have already been started are the following: sociological survey; study of certain steroids and antienzymes in the urine and blood of the sexual deviates (contracted with the University of California School of Medicine at Los Angeles); study of the juvenile victim; and preparation of an abstract of the literature on the subject.

The request involves both the extension of the present study and a large expansion of it. The Department of Mental Hygiene has indicated that an extension of the program will be requested for at least three more years. Sex crimes is only one of many problems competing for research funds, and this raises the question as to whether the problem is of sufficient relative importance to warrant a research program of this magnitude. There is also the question of the extent to which this problem is susceptible of fruitful scientific analysis, and whether this research should be state financed.

It is recommended that the present program be continued for another year at the level authorized in Chapter 35, Statutes of 1950. This would constitute a reduction of \$99,311 in the budget request.

With the recommended reduction we recommend approval of the budget as requested.

#### Department of Mental Hygiene OUTPATIENT CLINIC SURVEY

	Budget page 516 Budget line No. 32	
For Survey of All-purpose Clinics and Community Services Progr Department of Mental Hygiene From the General Fund	am of the	
Amount requested Estimated to be expended in 1951-52 Fiscal Year	\$50,000 None	
Increase	\$50,000	
RECOMMENDATIONS Amount budgeted Legislative Auditor's recommendation		
Reduction	\$50,000	

#### ANALYSIS

The amount of \$50,000 requested for Outpatient Clinic Survey has been prompted largely by the insistence of this office in previous budget analyses that there has been no adequate demonstration to date of the effectiveness of outpatient clinics which would warrant establishing additional clinics throughout the State, ultimately on a basis of a clinic per one hundred thousand population. We also have pointed out previously that the request for additional clinics has been largely on the basis of organized regional demands from the public, rather than a careful and impartial analysis of regional requirements. The Legislature, in eliminating funds for a portion of the expansion in this function which was requested in the last budget, indicated that on the basis of the justification given for clinics at the particular locations provided for in the budget, equal argument could be made for similar treatment in innumerable communities throughout the State. The department maintains that its present staff is inadequate to make a survey of the effectiveness of clinics which would be sufficiently comprehensive to answer the policy questions involved in these issues.

We have pointed out on numerous occasions in the past the inherent difficulty in evaluating statistically the effectiveness of a mental hygiene clinic program. This is, in large part, because a clinic acts as an information and service center which attracts persons from the community and thereby increases the number of cases to which psychiatric treatment is given. Statistically, this would appear to indicate that the clinic was increasing the incidence of mental disturbances, although, in fact, we know that it acts only to recognize the existence of cases in the community. While on the one hand the net effect of a clinic is to increase the number of cases which are treated, there is no *statistical* means for determining accurately the extent to which the treatment of cases having psychotic tendencies will result in avoiding further mental deterioration. For this reason, we seriously question whether the results from any organized survey would justify the expenditure of \$50,000.

Since one of the fundamental policy questions relates to the role of the State in financing additional clinics in response to local needs and local demands, we believe that serious consideration should be given to a type of formula which requires minimum local participation as a

prerequisite to state financing. An example, which more or less parallels the mental hygiene clinic program in its basic concepts, is the crippled children's program where, in large part, state funds are made available on a matching basis with required minimum local effort prior to apportionment of state funds.

We believe that the services of the University of California should be requested to develop a statistical technique which could be applied with existing research personnel in the department as a continuing program and that the services of the Department of Finance should be requested to develop a basic formula which would give orderly control, through both state and local participation, over an expanding program of financial support for mental hygiene clinics. We recommend that the amount of \$50,000 not be approved.

#### Department of Mental Hygiene SANITATION SERVICE FROM PUBLIC HEALTH

ITEM 175 of the Budget Bill

Budget page 516 Budget line No. 44

Amount requested Estimated to be expended in 1951-52 Fiscal Year	
 Increase	\$20,000
RECOMMENDATIONS	
Amount budgeted Legislative Auditor's recommendation	_ \$20,000 _ 20,000
Reduction	None

ANALYSIS

It was our understanding that this item, which was discussed extensively before committee, is to provide a survey of sanitary facilities throughout the institutions to supplement the service ordinarily rendered by regular maintenance staff. While we recommend approval of the amount requested for the 1952-53 Fiscal Year, we would question the need for this amount as a recurring item in subsequent budgets.

### Department of Mental Hygiene COMPREHENSIVE LIABILITY INSURANCE PREMIUMS

ITEM 176 of the Budget Bill

Budget page 516 Budget line No. 59

\$16.000

Increase \_\_\_

### RECOMMENDATIONS

Amount budget Legislative Au	edditor's recomme	ndation	 	 \$16,000 16,000
Reduction	10 C	2 A	•	 None

#### ANALYSIS

The comprehensive liability insurance will provide protection to officers and employees of the Department of Mental Hygiene against claims to which they might be subjected as a result of official acts performed in the course of their duties. Government Code Section 1956 provides for this type of insurance. The budget request is based upon an annual per capita employee cost of approximately \$1.50.

This request raises a basic question as to the extent to which the State of California should acquire comprehensive liability insurance covering the acts of state employees. It is a policy which affects all agencies of the State and not only this department. It also raises the question as to whether or not a policy which is carried in the amount shown here is adequate for the purposes. We believe that this should be the subject of a special study designed to determine whether the State should acquire insurance for this purpose or act as a self-insurer, and if the State is to purchase insurance, the type of policies, the amounts, and the classes of liability or activity which should be covered by insurance. This study should be made prior to the next session. We recommend approval of the amount budgeted.

### Department of Mental Hygiene OUTPATIENT MENTAL HYGIENE CLINICS

1	ГЕМ	177	of	$\mathbf{the}$	Budget	$\mathbf{Bill}$
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Budget page 517 Budget line No. 32

#### For Support of Outpatient Mental Hygiene Clinics From the General Fund

Amount requested	\$402,790
Estimated to be expended in 1951-52 Fiscal Year	371,030
Increase (8.6 percent)	\$31,760

Summary of Increase INCREASE DUE TO Total Work load or New Budget Line increase salary adjustments services No. page Salaries and wages\_\_\_\_\_ \$41.172\$41.17252226Operating expense \_\_\_\_\_ 14.99314.99352227-5,082 52228 ----5,082 Equipment \_\_\_\_\_ \_\_\_\_ \$51,083 Total increase \_\_\_\_\_ \$51.083 ----Less: Federal fund share\_\_\_\_\_ \$19,323 \$31,760 RECOMMENDATIONS \$402,790 Amount budgeted \_ 402,790 Legislative Auditor's recommendation \_\_\_\_\_ None Reduction \_

### ANALYSIS

The budget request of \$402,790 is \$31,760, or 8.6 percent, greater than the estimated expenditure of \$371,030 for the 1951-52 Fiscal Year.

The 17,557 interviews held in the Los Angeles, Fresno, Chico, Sacramento and San Diego clinics during 1950-51 is apparently very low as evidenced by the high cost to the State of \$14.45 per visit.

The primary justification for the State providing these outpatient clinics was for patient interviews but apparently other outside activities have become a significant part of their work.

We feel that a further statement regarding the emphasis given to the various functions of these clinics be made to the Legislature and that records be kept as to the time devoted to patient interviews as compared with outside activities so that accurate cost data can be furnished on the cost to the State for each visit.

The collection of \$6,867 during 1950-51 by these clinics as fees indicates that the average collection per visit was 39.1 cents. We recommend that the Department of Mental Hygiene establish and enforce a fee schedule on the basis of ability to pay that has a minimum charge and a ceiling no greater than the full cost of the visit to the State.

With these recommendations we recommend approval of the amount requested.

#### Department of Mental Hygiene LANGLEY PORTER CLINIC

ITEM 178 of the Budget Bill

Budget page 523 Budget line No. 7

#### For Support of Langley Porter Clinic From the General Fund

Amount requested	\$854,994
Estimated to be expended in 1951-52 Fiscal Year	811,109
	\$43.885

	Summar	y of Increase			
and		INCREASE	DUE TO		
<ul> <li>March 1999</li> <li>An and 1999</li> </ul>	Total increase	Work load or salary adjustments	New services	- Budget page	Line No.
Salaries and wages	\$27,446	-\$3,310	\$30,756	526	66
Operating expense	7,227	277	6,950	526	67
Equipment	9,644	4,129	5,515	526	68
Less: Increased reimbursements				526	72
Total increase	\$43,885	\$664	\$43,221		
RECOMMENDATIONS Amount budgeted			•	\$85	4,994
Legislative Auditor's reco	mmendatio	n			4.994
					_,. , _
Reduction				:	None

#### ANALYSIS

The budget request of \$854,994 is \$43,885, or 5.4 percent, greater than the estimated expenditure of \$811,109 for the 1951-52 Fiscal Year.

Because we feel that the Department of Mental Hygiene has a very inadequate system of collecting fees based on the ability-to-pay of persons who visit their facilities, we recommend that the Department of Finance review the charges made to patients at the Langley Porter Clinic before the next session of the Legislature.

We recommend approval of the amount requested.

#### MENTAL HYGIENE SUMMARY

The budget request of \$44,348,476 for the nine mental hospitals and two mental defective homes is \$2,734,450, or 6.6 percent, higher than the estimated expenditure of \$41,614,026 for the 1951-52 Fiscal Year.

The estimated population of 39,153 is 125, or 0.3 percent, higher than the estimated population of 39,028 for the 1951-52 Fiscal Year. Although there is but a slight increase in resident population, the Department of Mental Hygiene is requesting 974 new positions. In order to evaluate more clearly the expected returns to be secured from the large annual increases requested for this program, we have compared mental hospital population with the change in state population.

The growth of mental hospital patients has closely paralleled the increase in total state population from 1929 through June 30, 1951. Although the Department of Mental Hygiene estimates that the mental hospital population will level off by June 30, 1953, while the total state population will continue to increase, there are several significant factors not related to the improved medical program in the hospitals that would tend to make this possible:

(1) The increase in state population is primarily due to the continued high increase of the population in the age group 0-14. The age groups 15-44 and 45-64 leveled off after June 30, 1949. These latter two groups which have not increased constitute the group from which the State receives 99 percent of hospital patients.

(2) Although the department shows large increases in annual admissions, their figures include readmissions. The first admissions appear to have leveled off since 1949, but the readmissions have continued to climb at a rapid rate.

(3) In recent years the department has placed increased numbers of patients in family care homes. We think that this is desirable. However, as far as state costs are concerned, it is largely a transfer out of the hospitals to private homes with the State paying support costs in the home. These transfers account for part of the reduction in hospital population.

(4) During 1929 and 1930, the mental hospitals had one employee for every 5.63 patients; during 1941 and 1942 there was one employee for every 5.77 patients. The budget proposal for 1952-53 would give the mental hospitals one employee for every 3.71 patients. The figures for 1929, 1930, 1941 and 1942 have been adjusted to make valid the comparison with the 1951 figure which is based on a 40-hour week.

From the study which we have made, we are not convinced that the present high cost mental hygiene program is producing returns, nor can we see how the department can continue to request large increases in new services every year in the face of the over-all facts.

#### 435 Psychiatric technicians\_\_\_\_\_\_\$667,000

The request for psychiatric technicians is to increase the staffing of these positions throughout the institutions from 86 percent to 87 percent of the department's goal and to staff two new receiving and treatment buildings at a highly favorable ratio of patients to attendants. The goal

which is referred to is based upon a standard that was devised by the Department of Mental Hygiene several years ago. New standards were devised by the department for the receiving and treatment centers.

To appraise the need for an increase in the staffing of the psychiatric technician class we examined the survey by the Council of State Governments on "The Mental Health Program of the Forty-eight States" which was completed in 1950. In studying this survey we compared the staffing of California hospitals with the staffing in the hospitals of Illinois, Massachusetts, Michigan, New York, Ohio and Pennsylvania for psychiatric technicians (or attendants), physicians, psychologists, occupation al and physio-hydro therapists and graduate nurses. California led all of the states in the comparison of the standards of psychiatric technicians, which is the class where major salary expenses are incurred because of the larger numbers of personnel involved. The following table is derived from information contained in the survey on the attendant class and it indicates California's favorable position in relation to these other states.

The table indicates the number of patients per attendant in mental hospitals of various sizes which are in excess of 1,000 patients in certain selected states. These states are all large industrial states and fundamentally comparable with California. A low number opposite each hospital bracket in the tabulation indicates a relatively favorable position. It will be noted that California has a consistently low or favorable ratio. As would be expected, the hospitals with the largest population have a ratio which is higher than those hospitals which are small. California's small institutions have the most favorable ratio of all, which is four patients per attendant, and the largest institutions at seven patients per attendant compare, for example, with 14 patients per attendant in Illinois, and eight patients per attendant in the larger of New York's hospitals. For the most part, California rates more favorably than any other state, although New York and Michigan are relatively comparable.

I. Number of Patients per Attendant<sup>1</sup> in Mental Hospitals, of Various Sizes in Excess of 1,000 Patients, in Selected States—1949<sup>2</sup>

	in Excess o	т 1,000 Ра	itients, in	Selected S	tates-1949		
Hospital population	California	Illinois	Massa- chusetts	Michigan	New York	Ohio	Pennsyl- vania
9,500-10,000		·			. 6		<b></b> ,
9,000- 9,500							
8,500- 9,000							·
8,000- 8,500					8		
7,500- 8,000	· ·····				8		
7,000- 7,500		12					
6,500-7,000							
6,000- 6,500				· ·	8		12
5,500- 6,000		12	·				
5,000- 5,500					8		
4,500- 5,000	7	14			8,7		
4,000- 4,500	8,6	11					14
3,500- 4,000	6	·		7	. 8		
3,000- 3,500	7	10		7	7,7,9,7	12,8	- 9
2,500- 3,000	8	11	7	7	7,8,8,8	9	11,8,7
2,000-2,500	4,6	10,13	7,8	5	7	5,14,8	12,10,10
1,500- 2,000	4	11	7,7,7,8		7	8,8	10
1,000- 1,500			7	5		<b>9</b>	10,11

<sup>1</sup>Attendants include practical nurses, psychiatric technicians, student nurses and affiliates.

<sup>2</sup> Council of State Governments. "The Mental Health Programs of the Forty-eight States," Table 20, pages 278-285.

In 1946 the American Psychiatric Association set a desired goal of one nursing personnel to six patients for mental hospitals. The association, like any other professional group, has extremely high standards and stated that mental hospitals should strive to meet this goal in 10 years. In 1947, the Department of Mental Hygiene set up staffing standards for the California institutions. The Legislature then provided nursing personnel on the basis of the standard set up by the Department of Mental Hygiene. However, the standard has never been related to a population basis.

The following tables convert the department's standard to a population basis and indicates that California is striving to reach a goal of one nursing personnel to 4.76 patients. Even at the present "86 percent of goal," considering overcrowding, we now have one nursing personnel for each 5.72 patients.

#### Goal Based on Normal Capacity

	Normal capacity	Nursing personnel goal	Patients per nursing employee goal
Agnews	3,742	$\cdot$ 712	5.26
Camarillo	_ 5,916	1,257	4.71
DeWitt	2,878	531	5.42
Mendocino	2,355	440	5.35
Modesto	2,902	666	4.36
Napa		1,035	4.62
Norwalk	1,873	443	4.23
Patton	_ 3,567	725	4.92
Stockton	_ 4,545	943	4.82
Pacific Colony	1,662	360	4.62
Sonoma	_ 2,671	643	6.15
Totals		7,755	4.76
	(86%)	(6,669)	(5.53)

#### Goal Based Upon Normal Capacity and Overcrowding

Agnews         3,900           Camarillo         6,165           DeWitt         3,022	720 1,270 539 446	$5.42 \\ 4.85 \\ 5.61$
Camarillo         6,165           DeWitt         3,022	539	5.61
	446	
Mendocino 2,454	110	5.50
Modesto 2,987	671	4.45
Napa 4,983	1,046	4.76
Norwalk 1,952	448	4.36
Patton 3,717	731	5.08
Stockton 4,736	954	4.96
Pacific Colony 2,000	408	4.90
Sonoma 3,200	717	4.46
Totals 39,116	7,950	4.92 (5.72)

Because of the extremely high standards of nursing personnel already budgeted for the department, we cannot recommend increasing the ratio from 86 to 87 percent, nor can we recommend the nursing personnel requested for the new receiving and treatment units. The Legislature has always given the department the choice of distributing nursing personnel between hospitals. This is demonstrated by the department

staffing Modesto at 74 percent of the theoretical goal and other hospitals at 90 and 92 percent of the goals.

We feel that with the present high standards already incorporated into the program the department can reassign nursing personnel among the hospitals and still lead any other state in this category of personnel. We have no supportable basis of any kind for recommending a further increase.

85 Senior psychiatric nurse (replace senior psychiatric techni-

cians II) \_\_\_\_\_\_\$53,040 124 Psychiatric nurse (replace graduate nurse) \_\_\_\_\_\_ 12,580 56 Psychiatric nurse (replace psychiatric technician) \_\_\_\_\_ 39,609

These positions are requested as another increment towards the full staffing of the acute treatment wards in the institutions in accordance with the staffing plan which was formulated by the department and the standards of personnel needed for these wards, which was also developed by the department.

We do not believe that the Legislature has been fully apprised of the implication of the over-all policy which was first presented as a piecemeal request during the 1950-51 budget hearings.

The full pattern as it now emerges is to substitute psychiatric nursing personnel for psychiatric technician personnel (hospital attendants) to an undetermined extent on all of the acute treatment wards. The nurses are of a higher personnel classification and therefore presumably better able to perform the duties with greater effectiveness. The substitution, however, was not on a position for position basis, but due to the higher staffing standards developed by the department for the acute treatment wards we have, in effect, a replacement of one psychiatric technician by approximately 2.5 psychiatric nurses and psychiatric technicians on the acute treatment wards. This is caused by a difference in standards, which amounts to applying a standard of about 5.5 patients to one psychiatric technician on the general wards and a standard of 2.2 patients per psychiatric nurse and psychiatric technician on the acute treatment wards.

The first step in this program was presented in the 1950-51 Budget in the following language:

"109—Reclassifications of hospital attendants and graduate nurses to psychiatric nurses in mental hospitals and hospital attendants to graduate nurses in mentally defective homes \_\_\_\_\_\_\$

.\_\_\$15,780

To provide one-sixth improvement toward established standards in order to provide for the patient the most adequate and efficient care possible."

On that basis this office did not recommend against the inclusion of these positions in the budget at that time, and the Legislature subsequently approved them in the full amount requested. To our knowledge, the full implication of this step was not presented during the 1950-51 budget hearings. This action meant that the State might be committing itself to completely replacing attendants on acute treatment wards, of which there are over 100, at a rate of 2.5 psychiatric nurses and psychiatric technicians in place of one psychiatric technician. Because the staffing of the acute treatment wards as proposed involves employing higher level personnel in much greater numbers than is the case on the regular wards, and because no statement showing the over-all cost and extent of replacing attendants by psychiatric nurses on these wards has ever been presented to the Legislature, we cannot recommend continuation of staffing acute treatment wards on a piece-meal basis. We recommend disapproval of the request for additional senior and psychiatric nurse positions on the basis that these units can be staffed by distributing personnel among the various hospitals in accordance with varying standards determined administratively. We believe that the ratio for budget purposes should be limited to nursing personnel (irrespective of whether they are psychiatric attendants or nurses) per unit of patients. In this case, we believe that the ratio should be held to the present level.

To illustrate how the standard of staffing of psychiatric technicians to patients has been changed by the Department of Mental Hygiene and thereby made the acceptance of 87 percent staffing of their standard an illusory measure, we can compare the regular ward staffing standard at Napa with the staffing standard of the new receiving and treatment building and the standard for the Stockton Pilot Study.

The following table indicates that on the regular wards at Napa the standard staffing for June 30, 1952, would be 6.56 patients per psychiatric technician. The standard now set for the Receiving and Treatment Center calls for 2.20 patients per psychiatric technician which is even greater than the 2.74 standard for the Stockton Pilot Study. The results of the latter, in our opinion, are far from being conclusive:

Napa

1. Regular Wards (June 30, 1952)

4,400 patients

671 psychiatric technicians (100%) 6.56 patients per psychiatric technician

2. Receiving and Treatment Center 714 patients

324 psychiatric technicians (100%) 2.20 patients per psychiatric technician

- 3. Stockton Pilot Study
  - 200 patients

73 psychiatric technicians (100%)

2.74 patients per psychiatric technician

Because of the changing standards incorporated into the present budget request and the implications of continued change as new buildings are being placed into operation, we cannot recommend an increase in psychiatric technicians based on an increase from 86 percent to 87 percent of the Department of Mental Hygiene's goal.

We recommend that the standard staffing be based upon the present ratio of psychiatric technicians to total population and that a study be made before the next session of the Legislature to determine what a desirable goal would be for the State of California and to compare our existing standards with standards of other leading states.

The staffing at Modesto to 84 percent of their standard can be made without adding new personnel. The Legislature is being asked to raise the average in all hospitals from 86 percent to 87 percent. If the Legislature adopts our recommendation of remaining at the present level, the

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department can staff Modesto at 84 percent as requested by merely reallocating positions among the hospitals. Certain hospitals may be at 92 percent of their goal. Unfilled positions at these institutions can easily be transferred to the Modesto State Hospital budget at no extra cost.

We feel that asking for these positions to raise Modesto from 76 percent to 84 percent of their requirements is misleading. The Legislature has granted positions on the basis of an average staffing of 86 percent. The department chose to staff Modesto at 76 percent and other hospitals at 90 or 92 percent in maintaining an average staffing of 86 percent. The policy question that should be placed before the Legislature under present budget methods is "Should the average staffing of psychiatric technicians be raised from 86 to 87 percent of the department's goal?" and not on the basis that "This will raise Modesto's staffing from 76 percent to 84 percent of their goal."

#### Senior Psychiatric Technician I

This is a new classification in order that supervision may be had on the afternoon and night shifts on the regular hospital wards. Past coverage in each hospital will ultimately require 1,048 reclassifications.

The department proposes to finance the full cost of such upward reclassifications as turnover permits by recruiting new employees in the lower classification of psychiatric technician trainees.

It is our belief that this is poor budgeting procedure which conveys the impression that these 1,048 new reclassifications are not going to cost the State any money.

When the Personnel Board set up a new psychiatric technician class in place of the attendant class, it considered pay ranges in the new class of personnel as opposed to the class which was replaced. Surely one of the factors that the Personnel Board considered was that although the new psychiatric technician class was at a generally higher pay range, this over-all increase was modified somewhat by the fact that the new classification of psychiatric technician trainee, at a salary range that was lower than the old attendant class, offset the full cost of setting up the new psychiatric technician services.

The following action was taken by the State Personnel Board:

old	Class
0.000	01000

Hospital attendant (\$200-\$243)

Charge hospital attendant (\$220-\$268) Assistant supervisor of hospital attendant (\$255-\$310) New Class Psychiatric technician trainee (\$180-\$200) Psychiatric technician (\$200-\$243) Senior psychiatric technician I (\$200-\$268) Senior psychiatric technician II (\$220-\$295) Supervising psychiatric technician (\$281-\$341)

It appears to us that when the department states that recruiting at the lower level of psychiatric technician trainee will offset the costs of reclassification of psychiatric technicians to senior psychiatric technicians I there is an element of double counting involved.

These new reclassifications to senior psychiatric technicians I are actually additional positions involving additional cost. If the 1,048 reclassifications are realized, it will cost the State between \$251,520 and \$339,552 in salaries over and above what a psychiatric technician would receive. We feel that these reclassifications should be considered on the basis of increased cost to the State.

Because of the large programs of reclassifications involved, we recommend that the State provide for 20 percent of the amount requested. This will result in an approximate saving of \$236,428.

#### 28 Senior physicians and surgeons\_\_\_\_\_\_\$173,880

These positions will increase the average staffing in the mental hospitals from 55 percent to 64 percent of the goal of the department. Although the goal of the department will need further study because some modification of the goal should be made by the clinical psychologists budgeted, we are of the opinion that this category of personnel has not reached the goal.

On this basis we recommend approval of the amount requested.

20 Senior clinical psychologists\_\_\_\_\_\$104,640

The goal of staffing of senior clinical psychologists has been greatly modified in this budget request from one to 900 admissions to one to 300 admissions plus one per 1,000 resident patients for mental hospitals and to one to 300 residents at the mental defective homes.

This request will bring the mental hospitals to 44 percent of their new goal, and mental defective homes will be at 67 percent of their new goal. Because we feel that there will be recruiting difficulties in this professional field and that the budget also contains a request for internships to meet recruiting difficulties, we are recommending that 11 internships for clinical psychology be granted and that this request be reduced by 11 positions at a saving of \$57,552.

6 Supervising dentists (reclassification of senior dentists)\_\_\_\_\_\$4,536

This request is based upon the need for coordinating and directing staff work in the hospitals. It is our opinion that this request is merely a method of securing a pay increase. If this request were granted, the staffing pattern for dentists in the institutions would be:

Hospital	Supervising dentist	Senior dentist	Dentist
Agnews	1	<b>2</b>	1
Camarillo	1	4	
DeWitt		2	·
Mendocino		<b>2</b>	
Modesto		<b>2</b>	
Napa		3	·
Norwalk		<b>2</b>	′ <u></u>
Patton		2	
Stockton		$\frac{2}{2}$	1
Pacific Colony		2	
Sonoma	1	2	

We recommend that the reclassification not be granted.

11 Physician and surgeon III (reclassification) \$8,712 The reorganization of the medical staff is designed to reduce the number of persons reporting directly to the director of clinical services. We recommend approval contingent upon the approval by the Management Analysis Section of the Department of Finance.

	8 Occupational therapists I	\$112,560
· •	9 Recreation therapists	31,860
_1(	0 Music therapists	35,400
(	9 Junior librarians	28,944
·	<u> </u>	
6	6 Total	\$208 764

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This request is to increase from 25 percent to 43 percent the department standard of one rehabilitation therapist for 100 patients.

Because we have not seen any tangible results to date of the improved medical program, we are not recommending approval of this added new service to the program at this time.

14 Clinical laboratory technicians\_\_\_\_\_\$42,840

These positions are requested to complete laboratory procedure on all newly admitted patients, including blood counts, urinalysis, serology, and spinal fluid.

Because of the necessity of these tests in a good medical program, we recommend approval of the positions requested.

2 Neuropathology technicians\_\_\_\_\_\$6,744

These positions are requested for special studies of tubercular patients and for special technical problems involved in neuropathology. We recommend approval of the two positions.

## 14 Chaplains \_\_\_\_\_\$66,360

This is purely a policy question as to the extent to which the State should pay for religious services for wards of the State. It is a new service, and we recommend deletion of the item.

	Chief psychiatric social workers Supervising psychiatric social workers	\$47,088 33.180
	Senior psychiatric social workers	137,472
56	Total	\$217,740

Largely because we feel that these persons will relieve the doctors to a great degree in getting information that will assist them in determining the medical needs of the patients, and will help patients solve family problems, as well as assist doctors in surveying the patient population for possible placement material, we recommend that each institution be provided with some additional psychiatric social workers. However, in view of the high vacancy of 31 percent in intramural staff as of September 30, 1950, and 36 percent as of September 30, 1951, we recommend that the full amount requested not be granted.

The following table indicates the proposed social service staffing at each hospital and the September 30, 1951, vacancies:

Hos <b>p</b> ital	Chief	Supervisors	Seniors	Juniors	Sept. 30, 1951 Vacancies
Agnews	1	. 3	15	·	4
Camarillo	1	3	14	3	6
DeWitt			1	1	1
Mendocino	1	1	6	1	2
Modesto		· · ·	<b>2</b>		<b>2</b>
Napa	1	2	11	3	
Norwalk	1	1	8	· · ·	1
Patton	1	2	14		1
Stockton	1	2	8	3	3
Pacific Colony	1	1	3	<b>2</b>	
Sono ma	1	1	5	2	· 4

Based on the proposed staffing of the intramural social service departments and because of the high vacancy ratios of Agnews and Camarillo, we cannot see why any hospital needs more than two supervisors. We therefore recommend that the new position classification request of chief psychiatric social worker not be granted at a saving of \$57,552.

We also recommend that two supervising psychiatric social workers not be granted at Agnews and Camarillo, saving \$9,480, and that 11 senior psychiatric social workers not be granted, at a saving of \$47,256. These would be distributed as follows: Agnews, 4; Camarillo, 4; Mendocino, 1; and Stockton, 2:

	Food administrators	
	Dining room supervisors Diet cooks	
	Supervisor cooks I	
	Cooks	
42	Assistant cooks	52,920
11	Vegetable room charge	26,400
	Meat cutters	
	Butchers	
15	Bakers	45,900

\$416,184

These positions are requested on the basis of ultimately improving the feeding of the mental patients.

The special food report that was prepared by the special nutrition consultant hired by the Department of Finance stated that there was no justification for increasing the department's food allowance. This ration is now at 2,400 calories per person which represents the needs of a healthy, active male person of 24 years of age. The consultant stated that the addition of 15 percent to this ration in computing food allowances was generous. This 15 percent was for such factors as poor management, understaffing, inefficiencies and inexperience of cooks and helpers, inadequate equipment, spoilage, plate waste, theft, et cetera.

The United Nations Food Survey also pointed out that while the healthy, active male adult needs about 2,400 calories at the age of 24 years, the intake should be reduced by 7.5 percent for every 10 years past the age of 24. California institutional feeding recognizes that persons younger than 24 years of age need higher caloric diets and budget accordingly. However, when a department such as the Department of Mental Hygiene has an age group older than 24 years, no recognition is made of their smaller caloric needs. For example, with the average age of about 54 years in the mental hospitals, this would require an average diet of only 1,860 calories.

Because the new feeding personnel is requested on the basis of improving the feeding in the institutions, we recommend that the arbitrary 15 percent budgeted for poor management, understaffing, inefficiencies and inexperience of cooks and helpers, inadequate equipment, spoilage, plate waste, and theft be reduced to sufficiently compensate for the full cost of any added feeding personnel. The full cost of these positions would require a reduction of the 15 percent for waste to approximately 10 percent.

In connection with the Department of Corrections budget, we recommended that the positions which were requested for preparing and serving food should be adjusted to reflect a more realistic staffing ratio than was employed in the Howe Report, based upon commercial restaurant

experience. We believe that the positions budgeted for the Department of Mental Hygiene should be reviewed critically in terms of a formula which more nearly represents the manpower requirements for institutional mass feeding.

11 Educational internes\_\_\_\_\_\$25,080

These positions are requested for the fields of hospital administration, occupational therapy, and clinical psychology.

We fail to see how graduate students can ultimately secure positions of hospital administration in the present hospital organization.

In addition, we have recommended against increasing the therapist groups in the hospitals this year because the over-all increased mental hygiene program has not produced sufficient tangible results to warrant adding new services, particularly in a budget session.

We do recommend, however, that the 11 positions be granted to attract internes in clinical psychology to the hospitals. Because we believe that this is a desirable method of recruiting clinical psychologists to the hospitals, we feel that these interne positions should be granted. Because of recruiting difficulties which the department states it has experienced in the professional fields, we recommend that these internes be substituted for 11 of the 20 clinical psychologists requested and that the internes be counted in the standards set up for clinical psychologists.

11 Executive housekeepers (6 reclassifications) \_\_\_\_\_\$27,060

These positions were denied last year by the Legislature. We feel that these positions should not be approved this year on the basis of last year's policy set by the Legislature and because the work is already being performed.

4	Assistant laundry supervisor Laundrymen Laundry helpers	\$3,060 10,560 20,520
	-	
14	Total	\$34,140

The department states that these personnel are requested on the basis of a survey by a private engineering firm which recommended the abolishment of five positions and the addition of the requested 14 positions.

This survey also stated that "Our observation indicates that the general level of efficiency of the paid operators is very low, averaging roughly between 50 to 60 percent of what we would consider normal for a commercial establishment."

Because we have inadequate justification for the new positions and no indication of improved efficiency of paid operators in these laundries, we cannot recommend approval of these positions.

1 Automotive equipment operator\_\_\_\_\_\$2,916 This will permit one person to act as dispatcher of all automotive equipment and operators at Camarillo State Hospital.

We fail to see why one of their present operators cannot perform this task as many of the vehicles and operators will not need daily dispatching. This is added service, and we recommend that the position not be approved.

#### 17 Watchmen .

\_\$42,840

This request is to augment the staff of watchmen at the institutions to provide two-shift coverage. Two years ago the department requested a similar augmentation of watchmen at the institutions, and this request was not granted by the Legislature.

We do not believe that this additional expenditure is warranted.

### Research in Alcoholism—Agnews

The rapidly increasing number of alcoholics being committed to state mental institutions has focused attention on the need for a positive program to prevent alcoholism and for research into the cause of alcoholism and methods of treatment. Alcoholic admissions to mental hospitals in California increased by 150 percent (1001 to 2500) during the period from 1945-46 to 1950-51. As early as 1944 California ranked highest among the 48 states in the rate of chronic alcoholism per 100,000 adults. On the positive side, however, it should be noted that in recent years there has been an improvement in public understanding of the problem. Alcoholism is being recognized as a form of mental illness, requiring medical and psychiatric care.

Not only is alcoholism being recognized as a form of mental illness, it is also coming to be regarded as a public health and a basic social problem. Various states have made independent studies, resulting in many cases in improved legislation and the creation of appropriate organizations to deal with the problem. In attempting to find a solution, different states have developed a variety of ways of coping with alcoholic excesses, ranging from absolute prohibition of the manufacture and sale of alcoholic beverages to the establishment of special state commissions embracing all the most advanced medical treatment programs, such as the Connecticut Commission on Alcoholism.

The importance of the problem in California is evident from the fact that the Department of Mental Hygiene, in its Statistical Report for the year ending June 30, 1949, shows that approximately 25 percent of all admissions to mental hospitals are alcoholic patients. For some time the State has acknowledged the need for experimentation and research in this field and has conducted a conditioned reflex program for alcoholic patients at the Mendocino State Hospital. In the 1952-53 Budget the Department of Mental Hygiene has requested funds to establish an alcoholic research project at Agnews, as well as to continue the present program at Mendocino. The proposed Agnews study will be concerned primarily with the use of ACE, ACTH and cortisone in the treatment of alcoholics.

While the need for research is obvious, there is some question concerning the advisability of establishing a new unit at Agnews. As presently organized the primary responsibility for research in mental illness has been assigned to the Langley Porter Clinic. Inasmuch as the clinic already had done some research in alcoholism, it seems logical that the proposed study should be carried on there.

It is also felt that the time has come when the Legislature should consider the possibility of developing a comprehensive program for meeting the problem of the excessive use of alcohol, including public education as to the need to change the basic social drinking habits of the public. A committee of the California Medical Association made a study in 1950

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and recommended that the State "establish a new Division of Alcoholism within the State Department of Mental Hygiene, this division to be the central planning and coordinating agency within the State. In order to insure wide representation in the approach to the problem and close integration with other agencies in state government which are involved in this field, it is recommended that an Advisory Council on Alcoholism be appointed by the Governor." Such a commission would be expected to develop a program of research, treatment, and education and to coordinate the activities of all state, local and private agencies concerned with alcoholism.

In addition, the committee suggested that the cost of financing continued study in this field "would best be met by legislative allocation of a percentage of the excise taxes derived from the production and sale of the alcoholic products." A bill incorporating such a proposal was introduced in the 1951 Session of the Legislature but was not passed. Howe ver, several other states have recently considered such a proposal and at least one has enacted it into law. The income for the Connecticut Commission on Alcoholism is derived from 9 percent of the moneys received by the Liquor Control Commission as fees for permits

Sex psychopath unit-Mendocino\_\_\_\_\_\$8.608

The positions of senior clinical psychologist and psychiatric resident are requested to assist the present unit in its responsibility for meeting Sections 5500 to 5518 of the Welfare and Institutions Code relative to the treatment of sex psychopaths.

We recommend approval of the amount requested.

## Diagnostic and preadmission service units\_\_\_\_\_\$48,312

This request for a total of ten positions is to operate a dianogstic and pread mission service at the two mentally defective homes.

This service will operate as an all-purpose clinic, offering three types of service in consultation, diagnosis, and treatment of children or persons having problems in mental retardation.

We are conscious of the fact that there are waiting lists at these two institutions and, it is necessary to screen the new admissions as well as helping those who cannot be admitted because of present overcrowding. We recommend approval of the request.

		* *	· •	 		
11	Intermediate	stenographer-clerks		 	\$29.040	
9	Intermediațe	stenographer-clerks	·	 	23,760	
<b>7</b>	I ntermediate	typist-clerks		 	17,640	

We recommend approval of these clerical positions for the assistant superintendents, directors of clinical services and superintendents of nurses.

#### 33 Intermediate typist-clerks\_\_\_\_\_\_\$87.120

These positions are requested to continue the clerical pool at the present ratio of one clerical position for each 3 users of the pool, including many new professional positions requested in the present budget. If all of the professional positions are not granted there will be an automatic reduction in the pool requirements.

While we recommend approval of continuing the ratio of 3 to 1 for the present year, we believe that much can be done by use of dictation equipment which can reduce the present ratios.

#### 3 Intermediate typist-clerks\_\_\_\_\_\_\$7.560

These positions are requested for the X-ray departments at Camarillo, Napa, and Stockton.

We recommend approval of the request.

#### 1 Intermediate clerk\_\_\_\_\_ \$2,520

This position is based upon one clerical position for each 250 employees on the pay roll. We have found that there is no standard common among the agencies of the State, and we recommend that added study be made of this function.

In view of our recommended reduction in employees throughout the budget, we recommend disapproval of the request.

#### 46.3 Miscellaneous new positions\_\_\_\_\_ \_\_\_\_\_\$147.592

Because of the large number of miscellaneous positions requested that have to be reviewed on a position by position analysis, we feel that it would be necessary to review each of the requested positions at the institutions to determine their need. We have been unable to do this during the year.

The department originally requested 194 miscellaneous positions which indicates the problem involved in attempting to review these positions at the state level. We recommend approval on the basis that the Department of Finance will carefully review these needs prior to approval in connection with its budgetary control function.

#### Medical supply allowance increase\_\_\_\_\_ \_\$85,949

This request is to raise the allowance from \$10 to \$12.50 for mental patients and to \$17.50 for the mentally defectives.

We recommend approval of the request although it is an increase in the level of service.

### Travel expense increase for superintendents\_\_\_\_\_\$5,060

This will permit the 11 superintendents a six-week visit to the department headquarters for training in administration and in orientation in the policies of the department. Also, each superintendent will be assigned short term projects in other hospitals in order that they may enlarge their own program and evaluate it on the basis of a study of their observations of other hospitals.

We cannot recommend approval of this request because the superintendents are away from the hospitals on earned vacation time, out-ofstate trips, in-state travel, and testifying in courts. We feel that, at most, a limited amount provided for two day conferences at headquarters periodically is sufficient. The superintendents do travel to headquarters at the present time so that the additional amount needed would be small if proper coordination of these trips is made.

\$4.964

### Family care leave allowance increase\_\_\_\_\_

This request is to cover incidental expenses of approximately 78 percent of the 440 cases on family care. This will provide an increase of \$3.00 per month to \$4.20.

We recommend approval of the amount requested.

#### **Operating Expenses and Equipment**

The amounts budgeted for operating expenses are largely based upon the previous year's experience with percentage augmentations for price and work load increases. Replacement equipment is generally budgeted on the basis of a percent of investment as a bench mark.

We have recommended that the Department of Finance should establish positions of equipment inspectors who could review each request thoroughly at the institutions prior to actual replacement of equipment. Our examination of equipment requests convinces us that this would be a worthwhile investment.

#### Employee Feeding

The practice of employee feeding at state institutions was reviewed recently by the Management Analysis Section of the Department of Finance. Their findings and recommendations were referred to the Board of Control, which then adjusted the charges made for employee meals. The following figures show the new schedule of charges which was approved by the Board of Control and went into effect on December 1, 1951:

Single meals	\$.70
Coupons for 30 meals :	
Up to 3 years of age	No charge
3 years to under 10 years	$37.00 (23\frac{1}{3}c \text{ per meal})$
10 years to under 15 years	10.50 (35¢ per meal)
16 years and over	15.00 (50¢ per meal)

The reason that the charges are broken down by age levels is that the privilege of using the dining facilities is extended not only to the employees but also to the members of their families. The Department of Finance study states that the charges approximately cover the food and salary expense but do not allow for such things as overhead, rent, and depreciation.

It is our view that the schedule of charges is still unrealistic and amounts to a subsidy to these particular employees. The new charges were based on cost data which resulted in a downward adjustment of 5 percent in actual food costs to compensate for a decline in food prices between July, 1949, and January, 1950, when the principal work on the report was completed. In adjusting the meal prices late in 1951, the Board of Control apparently made no allowance for the price increases that have occurred since the start of the Korean War.

An examination of the menus indicates that the employees and their families are able to buy meals in the state mental institutions at prices substantially lower than those they would pay for similar meals on the outside. Since the Personnel Board has indicated that present salaries, as adjusted, are comparable with other salaries and do not justify on that basis food and housing subsidies, the low price of the meals cannot be supported.

There is considerable difference between the food served to the employee and that served to the patients. Sample menus are compared on page 351.

	BREA	KFAST	DIN	NER	SUPPER	
	Employees	Patients	Employees	Patients	Employees	Patients
Sunda y	Breakfast will be to order every day choice of	Stewed prunes with lemon Steel cut oats Hot milk and sugar Hot cakes Coffee or cocoa	Baked ham Pineapple sauce Mashed potatoes Steamed cabbage Cottage cheese salad Ice cream	Minced wiener hash Apple-raisin pudding Oranges	Bean soup Hamburger steak French fried potatoes Buttered broccoli Spiced beet salad Cookies and fruit	Beef soup Spaghetti and meat sauce Spiced beet salad Graham erackers Fresh milk
Monda y	Pork sausage Ham or bacon Eggs, any style Hot cakes, French toast Potatoes	Fresh apple sauce Cracked wheat Hot milk and sugar Creamed beef on toast	Corned beef and cabbage Parsley potatoes Buttered carrots Waldorf salad Hot rolls Custard	Spanish rice and meat Buttered cabbage Spice cake	Cream of pea soup Chicken a la king Mashed potatoes Buttered peas Tossed salad Pumpkin pie	Bean soup Macaroni and cheese Carrot-raisin salad Sliced pickles
Γuesda y		Stewed figs Farina cereal Hot milk and sugar Hot coffee cake	Breaded veal cutlets Tomato sauce Baked potato Creamed corn Hearts of lettuce salad Ice cream, hot rolls	Meat loaf Brown gravy Rice-raisin pudding Hot rolls	Noodle soup Irish beef stew Steamed rice Buttered green beans Combination salad Chocolate cake	Split pea soup Baked beans with bacon Chilled pears Corn bread
Wødnesda y		Stewed peaches Corn meal mush Hot milk and sugar Hard boiled eggs	Rib roast of beef Italian spaghetti Buttered cauliflower Fruit salad Hot biscuits Apple pie	Oven roast of beef Mashed potatoes Natural gravy Cookies	Beef broth Breaded pork chops Country gravy Oven browned potatoes Buttered beets Cole slaw Marshmallow roll	Beef broth Scrambled eggs Vegetable salad Sliced cheese
Thursday		Stewed prunes Rolled oats Hot milk and sugar Coffee cake Hot cakes and syrup	Roast leg of lamb Natural gravy Mashed potatoes Buttered asparagus Plum duff Hot rolls	Irish beef stew with Potatoes, onions and carrots Stewed tomatoes Oranges	Cream of tomato soup New York cut steaks Long branch potatoes Creamed onions Cooked vegetable salad Cocoanut cake	Celery soup Rice jambolaye Chilled peaches Cottage cheese
Friday		Fresh apple sauce Steel cut oats Hot milk and sugar Creamed eggs on toast Doughnuts (Boys side)	Baked fresh fish Creamed beef Mashed potatoes Buttered peas Cabbage-pineapple salad Corn bread Cornflake custard	Creamed salmon and noodles Buttered green beans Ited sheet cake	Corn chowder Grilled lamb chops Egg omeletæ Home fried potatoes Stewed tomatoes Salmon salad Fruit bars	Barley soup Succotash with pigs head Buttered beets Soda crackers Ice cream
SATURDAY NOTE: Bread and served daily at e	butter, tea, coffee, and milk ach meal.	Stewed apricots Cracked wheat Hot milk and sugar Creamed beef on toast	Roast shoulder of pork Candied sweet potatoes Buttered brussel sprouts Carrot-raisin salad Ice cream sundae	Scrambled eggs and cheese Fruit sego pudding	Split pea soup Swiss steaks French baked potatoes Cauliflower au gratin Chef's salad, cherry pie	Vegetable soup Rice creole with meat sauc Carrot-raisin salad Sliced cheese

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From the menus it can be seen that most of the choice cuts of meat are reserved for the employees. In this connection it should be noted that meat cost in the mental institutions is based on carcass weight, so that the cost of a pound of meat as calculated is the same whether it is steak or hamb urger. Thus, the employees are eating the best cuts of meat but paying an average carcass weight price for it.

Since the price of the meal is the same whether it is breakfast, dinner or supper, the heaviest use of the dining facilities is at the meals when the expensive cuts of meat are served. Meal tickets collected at one of the hospitals during a single month showed the following :

		No. of tickets	Percent
	st	 696	9.1
Din ner Sup per		 $ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$55.1 \\ 35.8$
Total		 7,641	100.0

While recognizing the need for employee feeding facilities at the mental institutions, and particularly at those far removed from urban areas, it is our belief that the present system is unjust. It is unfair to the patients, some of whom work on the farm to raise the food. It is unfair to other state employees doing comparable work who do not receive such a subsidy. The adverse effect on the morale of both of these groups is a factor of some importance.

In view of these facts it is recommended that employee feeding at the mental institutions be continued but that consideration be given to the possibility of turning this function over to a concessionaire, who would be expected to purchase his food supplies at market prices, employ his own staff, and establish a realistic and equitable price schedule for the meals served. As a result the food served to patients should be improved automatically.

#### Department of Mental Hygiene AGNEWS STATE HOSPITAL

Budget			t page 527 t line No. '		
For Support of Agnews	State Hospital	From the Genero	al Fund		
Amount requested Estimated to be expended					
Increase (4.9 percent)				\$212,6	11
	Summar	y of Increase			
		INCREAS	E DUE TO		
	Total increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages	\$191,661	\$636	\$191,025	533	35
Operating expense	7,990	1,873	6,117	533	36
Equipment	23,876	8,332	15,544	533	<b>37</b>

Equipment	23,876	8,332	15,544	533
Less: Increased reimbursement_ Replacement of	1,766	1,766	· · 	533
fire loss	9,150	9,150		533

\$75

\$212,611

Total increase \_

40

58

\$212,686

### Department of Mental Hygiene CAMARILLO STATE HOSPITAL

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ITEM 180 of the Budget Bill

#### Budget page 535 Budget line No. 7

# For Support of Camarillo State Hospital From the General Fund

Amount requested Estimated to be expended in 1951-		\$6,267,143 5,474,518
Increase (14.5 percent)	 	\$792,625

Summary of Increase

	INCREAS	E DUE TO		
Total . increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages \$731,530	\$526,573	\$204,957	542	9
Operating expense 109,721	61,229	48,492	542	10
Equipment41,166 Less :	54,612	13,446	542	11
Increased reimbursement7,460	7,460		542	14
Total increase \$792,625	\$525,730	\$266,895		

### Department of Mental Hygiene DE WITT STATE HOSPITAL

ITEM 181 of the Budget Bill

Budget page 543 Budget line No. 7

### For Support of DeWitt State Hospital From the General Fund

Amount requested Estimated to be expended in 1951-52 Fiscal Year	
Increase (3.5 percent)	\$110,105

#### Summary of Increase

		INCREAS	E DUE TO		
	Total increase	Work load or salary adjustments	New · services	Budget page	Line No.
Salaries and wages	\$85,177	\$4,003	\$81,174	548	9
Operating expense	9,190	-12,469	21,659	548	10
Equipment	17,598	4,644	12,954	548	11
Less:					
Increased reimbursement_	1,860	1,860		548	15
. –					1.1
Total increase	\$110,105	-\$5,682	\$115,787		

### Department of Mental Hygiene MENDOCINO STATE HOSPITAL

ITEM 182 of the Budget Bill	Budget page 549 Budget line No. 7
For Support of Mendocino State Hospital From the	General Fund
Amount requested Estimated to be expended in 1951-52 Fiscal Year	
Increase (6.1 nercent)	\$164,360

	INCREASE DUE TO			
Total increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages \$178,178	\$64,219	\$113,959	555	9
Operating expense26,125	37,708	11,583	555	10
Equipment 10,775	3,178	13,953	555	11
Plus:				
Decrease in reimburse-				•
ments 1,532	1,532		555	16
Total increase \$164,360	\$24,865	\$139,495		

## Summary of Increase

### Department of Mental Hygiene MODESTO STATE HOSPITAL

IIEM 183 of the Budget Bill	Budget page 556 Budget line No. 6
	Budget fille No. 0
For Support of Modesto State Hospital From the General Fu	Ind
Amount requested	
Estimated to be expended in 1951-52 Fiscal Year	3,437,798
Increase (5.3 percent)	\$181,326

Summary	of Increase			
	INCREAS	E DUE TO	_	
Total increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages\$155,142	\$64,464	\$90,678	561	9
Operating expense 4,750	-13,235	17,985	561	10
Equipment 28,391 Less :	4,087	32,478	561	11
Increased reimbursements	6,957		561	15
<b>Total increase</b> \$181,326	\$40,185	\$141,141		

#### Department of Mental Hygiene NAPA STATE HOSPITAL

ITEM 184 of the Budget Bill			page 562 line No. '	
For Support of Napa State Hospital	From the General Fun			•
Amo unt requested Estimated to be expended in 1951-52	Fiscal Year			
Increase (15.1 percent)		•	\$641,0	78
Summa	ry of Increase			
	INCREASE DU	E TO		
Total	Work load or	New	Budget	Line

	INCREAS	E DUE TO	_	
Total increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages \$541,050	-\$136,560	\$677,610	568	59
Operating expense 100,843	37,689	63,154	568	60
Equipment 9,527	-11,873	21,400	568	61
Less:				
Increased reimbursements 10,342	-10,342	· · ·	568	66
·	· · · · · · · ·			
Total increase \$641,078	-\$121,086	\$762,164	· ·	

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### Department of Mental Hygiene NORWALK STATE HOSPITAL

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ITEM 185 of the Budget Bill			t page 569 t line No.	
For Support of Norwalk State Hospita Amount requested Estimated to be expended in 1951-52 F			_ \$2,892,0 _ 2,836,6	
Increase (2.0 percent)			\$55,4	18
Summar	y of Increase INCREAS	E DUE TO		
Total	Work load or salary adjustments	New services	- Budget page	Line No.
Salaries and wages\$120,407 Operating expense60,051	\$4,984 69,409	\$115,423 9,358	$575 \\ 575$	$\frac{26}{27}$
Equipment —19,036 Plus : Decrease of	48,380	29,344	575	28
reimbursements 14,098	14,098		575	32
Total increase \$55,418	-\$98,707	\$154,125		

### Department of Mental Hygiene PATTON STATE HOSPITAL

#### ITEM 186 of the Budget Bill

Budget page 576 Budget line No. 7

## For Support of Patton State Hospital From the General Fund

Amount requested Estimated to be expended in 1951-52 Fiscal Year	
Increase (2.9 percent)	\$124,632

#### Summary of Increase

	INCREASE DUE TO			
Total increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages \$188,504	· \$16,418	\$172,086	582	39
Operating expense	-73,506	17,338	582	40
Equipment	-30,521	22,175	582	41
Plus:		· · ·		
Decreased reimbursements 642	642		582	44
and the second secon	· · · · · · · · · · · · · · · · · · ·	·		
Total increase \$124,632	-\$86,967	\$211,599	1 C	

#### Department of Mental Hygiene STOCKTON STATE HOSPITAL

ITEM 187 of the Budget Bill	Budget page 583 Budget line No. 7
For Support of Stockton State Hospital From the Gener	ral Fund
Amount requested Estimated to be expended in 1951-52 Fiscal Year	\$4,899,369 4,734,501
Increase (3.5 percent)	\$164,868

		INCREAS	E DUE TO	•	
	Total increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages	\$87,522	\$181,066	\$268,588	589	61
Operating expense	39,448	692	38,756	589	62
Equipment	24,350	-2,279	26,629	589	63
Plus:			-		
Decrease of reimburse-					÷.,
ments	13,548	.13,548		589	66
Total increase	3164,868	-\$169,105	\$333,973		

# Summary of Increase

### Department of Mental Hygiene PACIFIC COLONY

ITEM 188 of the Budget Bill	Budget page 590 Budget line No. 7
For Support of Pacific Colony From the General Fund	
Amount requested Estimated to be expended in 1951-52 Fiscal Year	\$2,644,185 
Increase (4.7 percent)	\$119,172

Summar	y of Increase			
	INCREASE DUE TO			
Total increase	Work load or salary adjustments	New services	Budget page	Line No.
Salaries and wages \$126,485	-\$12,325	\$138,810	596	9
Operating expense 5,442	9,658	15,100	596	10
Equipment	26,937	14,259	596	11
Increased reimbursements -77	77		596	15
Total increase \$119,172	\$48,997	\$168,169	· .	

### Department of Mental Hygiene SONOMA STATE HOME

ITEM 189 of the Budget Bill	Budget page 597 Budget line No. 7	
For Support of Sonoma State Home From the Gen Amount requested Estimated to be expended in 1951-52 Fiscal Year	\$4.029.542	
Increase (4.1 percent)	\$159,105	
Summary of Increas	e .	
IN	INCREASE DUE TO	
Total Work load o increase salary adjustm		
Salaries and wages \$140,211 -\$2,256	\$142,467 603 55	
Operating expense1,80935,999		
Equipment 18,249 —10,980 Plus:		
Decrease of reimburse-		
ments 2,454 2,454	603 60	

---\$46,781

\$205,886

Total increase \_\_\_\_\_ \$159,105

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