

M1000.6  
Im7  
19:3

# impact

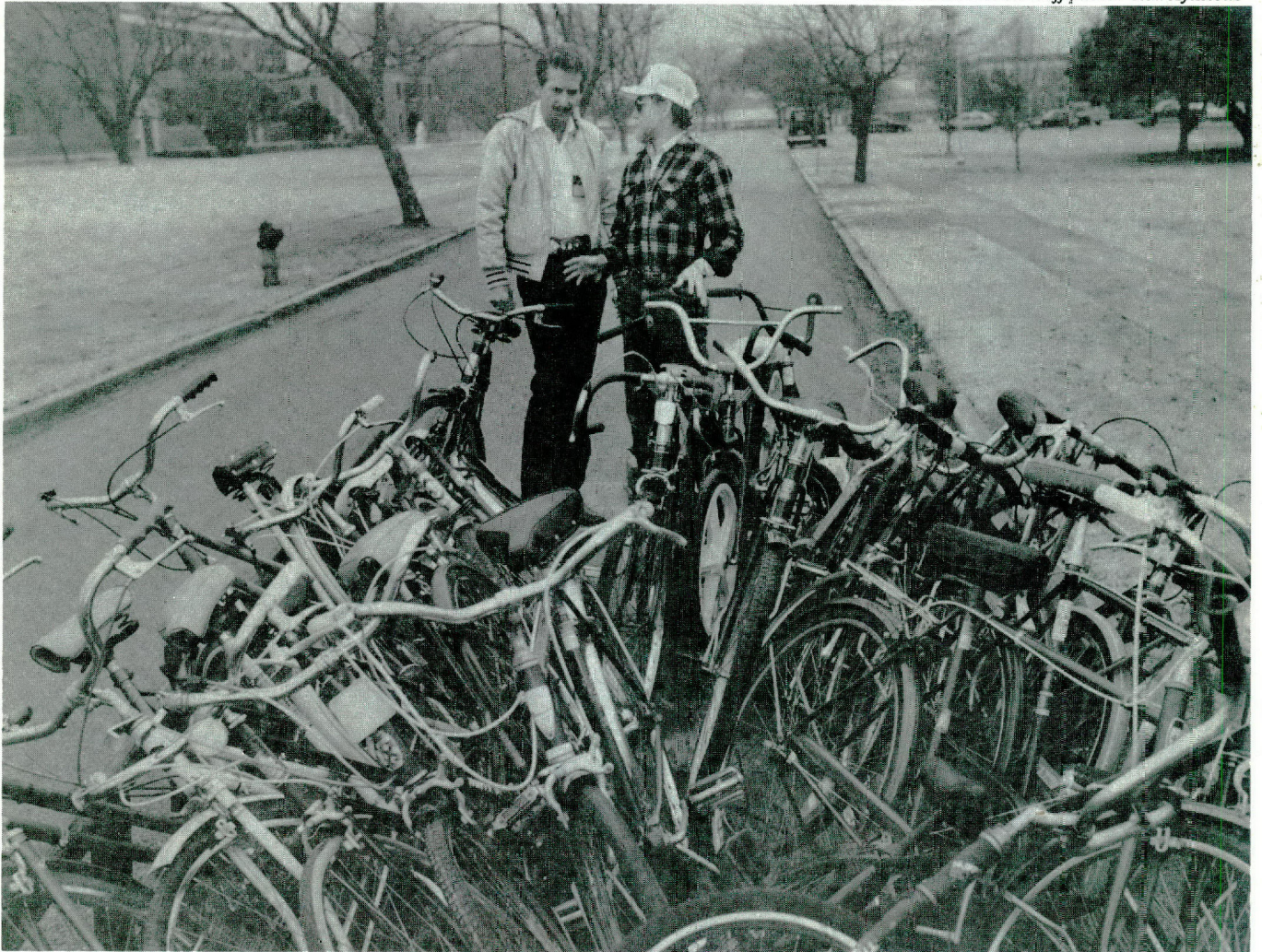
A publication of the  
Texas Department of Mental Health  
and Mental Retardation  
March/April 1990

Government Publications  
Texas State Documents

MAY 08 1990 ✓

Dallas Public Library

Waco Tribune-Herald staff photo—Rod Aydelotte



Travis Bailey (left) and James Kirkpatrick made a special delivery to children at the Waco Center for Youth. "There's something about a kid and a bike," Bailey said. "I can't explain it, but it's fun to watch." Story on page 18.



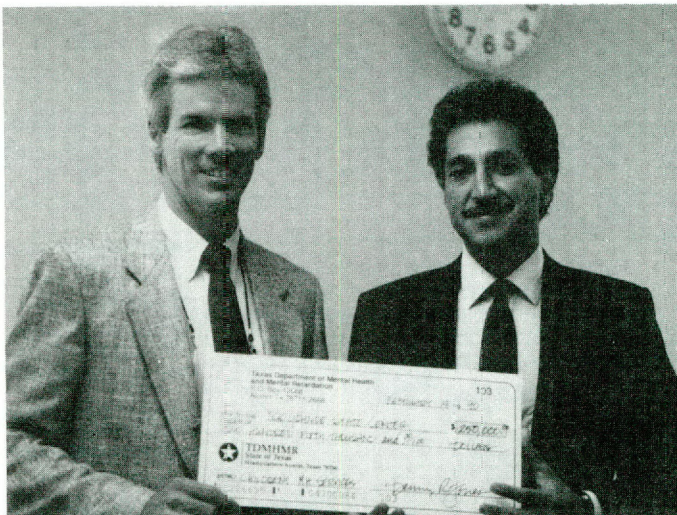
# Centers Celebrate Grants for Youth Projects

## *TDMHMR Awards \$1.75 Million in Grants for Children and Adolescent Services Projects*

News conferences held in Austin, Dallas, Kingsville and Longview on February 14 spotlighted an exciting event in the history of child and adolescent services in Texas: the public announcement of the awarding of \$1.75 million in grants for youth projects to MHMR centers in those communities by the Texas Department of Mental Health and Mental Retardation. During the day's events, Commissioner Dennis Jones presented oversized "checks" representing grant funds to Ron R. Cookston, Ed.D., executive director of Sabine Valley Center in Longview, and Marcia Bryan, Ed.D., executive director of Dallas County MHMR Center, while Deputy Commissioner of Mental Health Services David Bean, M.D., presented giant checks to John Brubaker, executive director of Austin-Travis County MHMR Center and Rigoberto T.F. Gonzalez, director of the Rio Grande State Center. Each conference took on the air of a celebration, with center board members and staff, elected officials, TDMHMR staff, family members of persons served by the centers, media representatives and other interested individuals on hand to applaud the presentations. In Longview, Commissioner Jones noted the appropriateness of this Valentine's Day being "a day for kids in Texas."

The four mental health centers were selected from among more than thirty applicants from across the state to receive \$1.75 million in grants for children and youth services demonstration projects. The projects are intended to target persons under age 18 with severe emotional disturbances. Funding will be for a two-year period, beginning in March 1990. After the second year, projects will remain eligible for state support. The grants are the result of a state legislative appropriation for expansion of community mental health services for children and youth in Texas.

"These projects illustrate TDMHMR's placing a high priority on



*Robert Evans, Community Services Administrator for Kingsville MHMR Outreach, and Rigoberto T.F. Gonzalez, Executive Director of Rio Grande State Center proudly display grant "check" for the center's demonstration project.*

*Sherry L. Grona*

services to families and children," said Regenia Hicks, Ph.D., Coordinator of Children and Youth Services for TDMHMR. "The demonstration projects will allow us to establish state-of-the-art services in communities where services have been minimal or nonexistent. And the projects are a major step toward our goal of offering community-based services that reduce the number of young people who have to leave home to go to a hospital," Hicks explained.

The selected demonstration projects will serve as model programs to enable TDMHMR to test various types and combinations of services in communities that range from large cities to small towns, with a mixture of ethnic and economic groups. Services that prove to be successful will be replicated in other communities. Each site chosen for a demonstration project represents one of four categories based on the number of children and adolescents residing in their service area.

Two major criteria for selection were the extent to which the applicant's proposed programs would involve the young people and their families in the treatment process and the degree to which the applicant would collaborate with other agencies that provide youth services, such as local schools, juvenile courts, the Texas Department of Human Services and the Texas Youth Commission. "We were looking for ways to prevent children from having to deal with the stress of being hospitalized—of being away from family and friends while they are trying to handle other

problems," said Hicks.

The Dallas County MHMR Center proposal includes multiagency coordination through assignment of MHMR liaisons to work at Child Protective Services offices, Juvenile Probation offices and Dallas Independent School District sites, as well as partial funding of operation of the Child and Adolescent Staffing Team (CAST), a multiagency team that will collaborate on difficult cases. The Dallas County MHMR proposal also includes two new programs: an extended day treatment program in an east Dallas school to enable students to remain in their school and in their home and a family in-home support program in which a therapist will provide treatment by going into the home of a child at high risk for hospitalization. Speaking at the news conference, Commissioner Jones praised the Dallas proposal as "a different kind of service, one that focuses on intensive care for children at risk and their families."

Austin-Travis County MHMR Center's proposed program is comprised of home-based crisis intervention, in-home family support and respite care. The crisis intervention component will provide 30 to 90 days of intensive treatment to families experiencing a crisis situation. The in-home family support component will provide treatment for up to a year to families with multiple needs and a history of instability. Through the respite care component, families will have relief from caregiving responsibilities while the provider works individually with the child. Austin-Travis



County MHMR plans to engage advocacy groups, consumers and community agencies in planning and implementing the program.

The Sabine Valley Center already has a wide array of youth services in place, but the grant will enable the center to build upon existing services. Through the demonstration project, Sabine Valley Center plans to provide in-home community services and specialized case management services to 450 targeted youth and families. Additionally, approximately 600 youths will receive medication and related services. Grant funds will also be used to add two therapeutic foster home beds. At the press conference, Executive Director Cookston explained that "our project doesn't just set up an office model—it gives us a chance to go to the kids and to the parents."

With funds from the grant, the Community Services Unit of Rio Grande State Center will train bilingual mental health professionals as clinicians to deliver home-based mental health services to young people and their families—an approach carefully geared to the needs of the South Texas community. The services will include case finding, evaluation, case management and family and related therapies. Project clinicians will coordinate with education, juvenile justice, child welfare and mental health agencies, as well as consumers. Community Support Services will provide support services, including psychiatric care, medication, laboratory work, a 24-hour crisis network and professional consultation.

Speaking at the news conference in Dallas, Commissioner Jones stated that the department has "a very strong commitment to continue and expand these programs." He added that the agency will set up a well-planned evaluation model "to measure what happens when these models are put into place."

For more information about the children and youth demonstration projects, contact Regenia Hicks, Ph.D., Coordinator of Children and Youth Services, Texas Department of Mental Health and Mental Retardation, at (512) 465-4657. □

## Participating in Life

by Harrison Kinney, M.A.

The major mental illnesses such as schizophrenia can significantly disrupt an individual's thinking, feelings and processing of sensory perceptions—the primary avenues people use to interact with the world around them. Having work, relationships, a personal residence, simple independence, privacy and other intrinsically rewarding activities that make life worthwhile can become elusive.

Helping individuals who experience major mental illnesses to return to participation in life is often a difficult task. The Sabine Valley Center in East Texas has found an effective tool to meet this challenge in the form of permanent subsidized housing. On September 21, 1989, the center opened Cypress Manor, a newly-constructed apartment complex located in Marshall. The complex has 16 one-bedroom units.

Construction has been financed through a HUD Section 202 mortgage. Mortgage repayment and operating expenses are funded through the HUD Section 8 resident subsidy program. Residents pay about 28 percent of their income for rent and utilities, with HUD Section 8 subsidy paying the remainder.

Currently, three married couples and twelve individuals, plus the resident manager (who is a center employee and a consumer) reside at Cypress Manor. For half of the residents, this is their first experience in independent living. The center provides the residents with mental health, case management, psy-

chosocial and vocational services through service units in Marshall. The majority of the residents came to Cypress Manor from one of the center's other residential units. The center operates a continuum of adult mental health residential programs that includes an inpatient unit (Psychiatric Center), two intermediate residential programs (Greensprings and Nova), a semi-independent residential program (Fredonia Place) and Cypress Manor, a semi-independent/independent living program.

The most remarkable aspect of Cypress Manor has been the speed at which residents established an effective peer support system—neighbor helping neighbor. This occurred within the first month, rather than in nine months as anticipated. Spontaneously, residents rapidly established themselves as an extended family. Evidence of this extended family dynamic appears daily. When a resident needs help in cooking, a neighbor is there to assist. When a resident goes to the hospital for minor surgery, half a dozen neighbors await her return to offer assistance during her recuperation. When two residents marry, residents assist in the wedding.

The Resident Council plans and implements social and recreational activities ranging from Thursday night bingo to trips to Six Flags. Two residents of Cypress Manor have married and another two are engaged to be married this summer. Two individuals have obtained competitive employment in the community, another has started her own business, and the remaining residents are employed within the center's vocational programs.

The individuals who call Cypress Manor their home are working, establishing a social support network, playing and establishing close relationships. Quite simply, the residents of Cypress Manor are, again, participating in life. □



Harrison Kinney

---

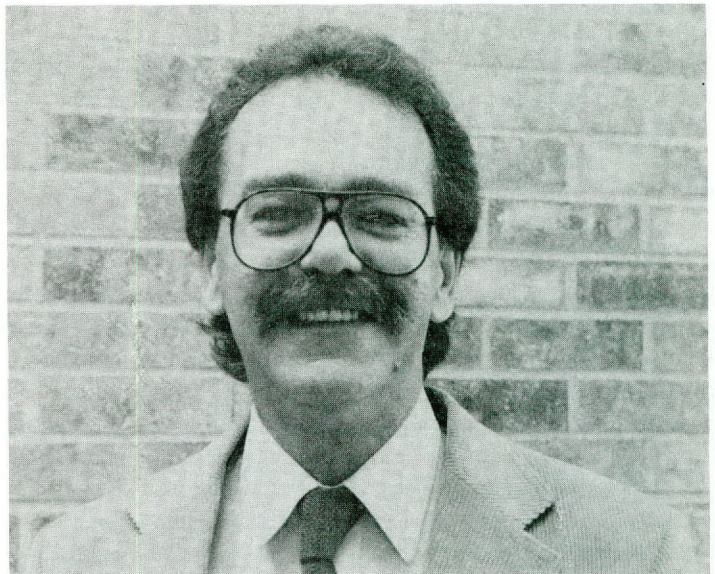
*Harrison Kinney is a community support program director for Sabine Valley Center.*

---

*Independent living includes the opportunity for Cypress Manor residents to marry.*



# Winner and Finalists Announced for 4th Annual Preston E. Harrison Award



**Tony Skokauckas, Orthopedic Equipment Technician at Abilene State School, was chosen from among TDMHMR's 28,000 employees to receive the agency's most prestigious honor, the Preston E. Harrison Award.** Since 1982, Skokauckas has worked in the Orthotics department at Abilene State School. He and his five staff design, build, modify and repair wheelchairs for people at the school who have severe physical impairments.

A seven-member panel of employees from TDMHMR facilities across the state and Central Office selected Skokauckas for the 1989 award, which honors "outstanding employees who have made significant contributions to and have had a positive impact on the agency in terms of creativity, efficiency and innovation."

Skokauckas will receive an engraved plaque at the fourth annual award ceremony March 30, 1990, in the Don Cauble Friendship Chapel at Abilene State School. His name will also be engraved on the Preston Harrison Award plaque for permanent display at the TDMHMR Central Office in Austin.

Because most commercially-available wheelchairs are either unsuitable for Abilene State School's population or prohibitively expensive, Skokauckas and his staff found it necessary to modify existing chairs and to manufacture others. He works with physical therapists and other professionals to design each chair specifically for the person who will use it. For example, he recently built a "multi-positional" chair for a woman with scoliosis, a condition which causes a lateral curvature of the spine. The chair allows her to be placed in a prone position, and the resulting "gravity stretch" may in time reduce the severity of her condition.

Skokauckas has built a number of other custom chairs which allow users to sit, lie prone or on their left or right sides. The finished chairs, or "mobile positioning devices," provide "immeasurable benefits to users in comfort, support and therapeutic effectiveness," according to David Feemster, Director of Communication Disorders at the school.

Each wheelchair is built by hand from stainless steel and is designed to be easily modified as the user's needs change. Skokauckas and his staff spend an average of 60 hours building each chair, with materials costing approximately \$500 per chair, in contrast to commercially-available multi-positional wheelchairs which can cost more than \$2500 apiece. Officials at Abilene State School estimate that Skokauckas' handiwork saves the state thousands of dollars each year.

"Tony is a tender-hearted person who shows concern and love for the people he is asked to help," said Rex Nutt, a physical therapist at the facility. "He always pays attention to the clients and is attentive to their needs. He is light-hearted and upbeat in his interactions with them."

Skokauckas says he enjoys the opportunity to have a positive impact on people's lives. "I'll never forget the time we built a wheelchair for an older gentleman here at the school," he recalled. "When the chair was finished and we let him sit down in it, he just sat there smiling. The aide who brought him over was just amazed. She said she had worked with him for five years and that was the first time she'd ever seen him smile."

The annual employee award was created in memory of the late Dr. Preston E. Harrison, superintendent of the Big Spring State Hospital for 22 years. He was a pioneer in the field of mental health whose efforts led to new and better ways to treat persons with mental disabilities.

In addition, the following finalists for the Preston E. Harrison Award will receive certificates of commendation at the March 30 ceremony, and all nominees will receive congratulatory letters from TDMHMR Commissioner Dennis Jones.



**Kalana Allen** is Client Records Coordinator for **Abilene State School**, where she has been employed since 1975. She is responsible for all client records, active and inactive, and for medical records. In various capacities such as Medicare Coordinator, PORS Coordinator and Investigating Officer of the Death Review Committee, Allen has been a valuable resource to medical, legal, administrative and direct care staff at the school and to TDMHMR as a whole. She has implemented and submitted comments to Central Office regarding new Departmental Rules on ICF regulations. She participates in quality assurance audits at the school and has been involved in developing plans of correction in response to ICF/MR and HCFA audits. Allen was responsible for gathering data to file Medicare claims dating back to 1984, and, as a result of her careful research,



Abilene State School collected over \$53,000. The staff whom she supervises declare that she inspires them to do their best by her own skill, dedication and professionalism.



**Nancy J. Barker**, Director of Volunteer Services for **TDMHMR**, has served in that capacity since 1973. She has led the way in making the agency's volunteer program—which mobilizes approximately 12,000 volunteers—a model program for other states. She was instrumental in establishing a career ladder for volunteer service personnel in TDMHMR, departmental rules for volunteer service personnel, the first client volunteer program in an MHMR state institution, Public Responsibility Committees and annual statewide training programs for volunteers. She is a member and former president of the Association for Volunteer Administration. An active volunteer herself, Barker received the Sertoma Club "Service to Mankind" award in 1967, the "Dove Award" in 1986 for her contributions to the chaplaincy program and commendation by state Senate Resolution in 1983. Currently, she oversees the Volunteer Services State Council Family Project Committee assigned to examine the role of volunteers in working with families of persons served by TDMHMR.

Of his 11 years as Assistant Superintendent of **Vernon State Hospital**, **Jack Barthold** has been called upon to serve as Acting Superintendent for a total of two and a half. During this time he has also been a consultant surveyor with the Joint Commission on Accreditation of Hospital Organizations, resulting in his becoming the department's valuable JCAHO consultant. In that capacity he has conducted numerous workshops and seminars, improving care in state hospitals and saving money for the agency. During major changes in the VSH administration, organization and mission, Barthold was instrumental in ensuring that the hospital maintained its accreditation status, encouraging positive revisions to policies and procedures, helping to raise employee morale through awards and expanded benefits, stimulating the facility's Volunteer Services program and encouraging community support for the hospital.







Chief of Food Service Management **Jan H. Coleman** of **Wichita Falls State Hospital** played a key role in converting the food service system at the hospital from cafeteria style to central kitchen

tray makeup and delivery. At the end of the first year after conversion, it was estimated that the central kitchen method would save more than \$300,000 annually. Although half of the patients are on special diets, Coleman's supervision ensures that they receive the proper food on time and at the correct temperature. His commitment to safety and to equipping the kitchen properly has reduced injuries by 50 percent since 1987. He uses a popular computer application to automate numerous essential food service tasks; TDMHMR Chief of Nutrition and Food Service Sharon Hunter described him as "the automation leader for all of TDMHMR Nutrition and Food Service." Employed at the hospital since 1974, Coleman has been Food Service chief since 1980.



Production Supervisor for the main campus workshop of **Austin State School's** Vocational Rehabilitation Department for over eight years, **Marty Danielson** coordinates the efforts of 10 trainers and 110 individuals with mental retardation in producing contract work. Despite the fact that there are usually several different jobs in production at the same time, Danielson ensures that the work is done well and on time. She is adept at finding ways to aid workers with motor disabilities in performing job tasks and to automate production inexpensively. Her innovative ideas and referrals from satisfied customers have resulted in monthly gross sales for the workshop rising from \$6579 in 1987 to over \$10,200 in 1989. In turn, increased profits result in higher pay for the workers. Numerous letters of appreciation from both the public and private sector testify to her hard work and dedication. Her supervisor noted that "despite working devilishly hard, she is unfailingly cheerful and friendly."



**Harry G. Davis, Ph.D.**, Chief Clinical Psychologist of **Big Spring State Hospital** for over 22 years, worked closely with Dr. Preston E. Harrison to pioneer changes in the treatment of persons with mental illness and continues to make patient care his highest priority. His advocacy on behalf of people with mental illness ranges from past involvement in the 1960s as program supervisor for the Hospital Improvement Program, which focused on resocialization, to his development of one of the first community-based halfway houses in the system, to his present involvement in restructuring and developing creative psychosocial treatment programs. Currently, he directs revamping of the treatment program on the Intermediate Care Unit, where patients and staff are learning to be increasingly autonomous in choosing treatment. This approach has a positive effect on the self-esteem and sense of personal responsibility of both patients and mental health workers. His dedication to helping others is seen often in his ability to succeed with difficult patients and his willingness to support staff in developing their potential.





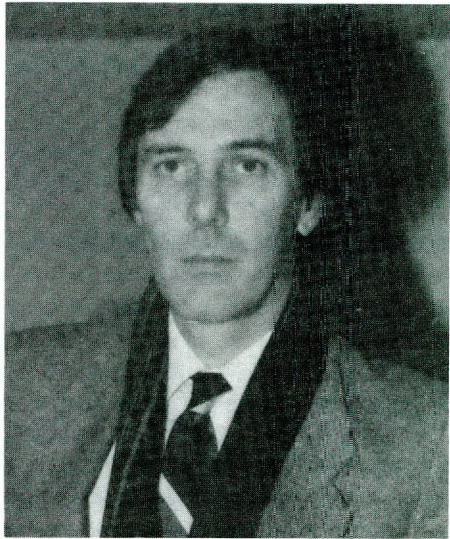
Coordinator of Volunteer Services for **Terrell State Hospital** since 1970, **Sarah Kegerreis** is involved in a variety of activities that support the hospital and

its services. Her recruitment and retention efforts include recognition events and other special activities for employees, volunteers and various departments. She has recruited and trained approximately 500 volunteers. Kegerreis works closely with the community to obtain manpower and funding to support the hospital's needs, interacting with groups such as the chamber of commerce, the Red Cross, private foundations and the local Mental Health Association. In 1987-1988, TSH ranked second in TDMHMR facilities for donation of funds and gifts. As a result of her creativity and management skills, patients benefit from receiving personal items and recreational and leisure time equipment. Additionally, she has been involved in completion of projects to develop recreational sites. Kegerreis also serves as the hospital's public information officer.



**Beverly Sutton, M.D.**, Director of Residency Training for **Austin State Hospital** and formerly the hospital's Director of Child and Adolescent Psychiatric Services, is generally acknowledged as being responsible for the crea-

tion and development of children's services at ASH (accredited by the JCAHO) and of the Child Psychiatry Residency Program (one of the few free-standing accredited programs in the country). Her capabilities and advocacy on behalf of children and adolescents have been recognized by requests for her participation and consultation in both state and national advisory committees and committees of the American Academy of Pediatrics and the American Academy of Child Psychiatry. She is described as having "an unwavering dedication to patients' treatment needs" and an exceptional ability to lead by personal example. As a tribute to her many contributions to child psychiatry, Sutton was awarded the Jackson R. Day Memorial Award by her peers of the Texas Society of Child and Adolescent Psychiatry in 1989.



**Rusk State Hospital's** Director of Psychosocial Programming, **Richard M. Trent, M.D.**, has applied his programming expertise and communications skills to psychosocial programming at Rusk since 1985, ahead of mandates and trends. A colleague reported that "With the arrival of Dr. Trent on the Multiple Disability Unit, both the program and program training became increasingly organized, more relevant and more understandable," and his Staff Motivation Program proved highly successful. Staff reported that he has exceptional energy, as well as ability to communicate and demonstrate his ideas. The effectiveness of his efforts on the MDU were noted in several surveys, with the MDU program now considered among the best in the nation. In 1988 he began designing a program for the Extended Care Unit and a program for the Rehabilitation Therapies Department for implementation the following year. In 1989 he was assigned to his present position and to serve the TDMHMR system as the RSH member of the Statewide Committee on Psychosocial Programming. □



# Texas Board of MHMR Update

## Board approves \$20 million for community homes

by Mark Southern

The Texas Board of MHMR approved a list of 58 proposed new community-based facilities for difficult-to-place persons with mental retardation during its meeting on February 16. The construction and renovation projects will cost an estimated \$20 million and will be financed from the sale of bonds.

The community homes will be operated by state schools and state centers through their community services departments. The homes were made possible by Rider 35a, Senate Bill 1, of the 70th Texas Legislature, which appropriated \$20 million in bonding authority for use by TDMHMR in the development of community-based facilities for individuals who have traditionally been difficult to place in the community because of severe physical impairments or behavioral problems.

The list of projects must now be approved by the Governor's Office, the Legislative Budget Board, the Texas Public Finance Authority and the Bond Review Board before construction can begin.

In other action, the MHMR Board:

- approved the selection of Gerald W. Brunette, M.S., as the new superintendent of Richmond State School. Brunette is currently assistant superintendent of Mexia State School. He replaces Joe Emerson, who has accepted a position as director of the Center for the Retarded, Inc., in Houston.
- approved a set of procedures to be used in the administration of a sick leave pool to benefit state employees who suffer catastrophic injury or illness. House Bill 357 of the 71st Texas Legislature allows state agencies to create a process by

which employees can donate up to 24 hours of sick leave per fiscal year to a pool which can be tapped by employees who experience catastrophic injury or illness—either themselves or within their immediate family. According to the new policy, employees must exhaust all other sources of leave before they can use sick leave from the pool. All contributions to the pool will be voluntary, and employees who use pool leave will not be required to pay it back. The TDMHMR sick leave pool should take effect this spring.

- accepted a report entitled "Master Plan Part 1: Facility Assessment" from the Douglass Group, a Houston-based medical facilities consulting firm. The report provides a comprehensive assessment of the campuses and buildings at TDMHMR's state schools and state hospitals. It compares operating costs of the various facilities and assesses the impact each facility has on its local community. The department plans to use the study as a guide in developing budgets and strategic plans for its residential facilities.
- accepted a draft of the TDMHMR Strategic Plan for fiscal years 1992-1997. The department will hold seven public hearings in late February and early March to solicit comments on the proposed plan. The agency will submit its final plan to the Board in April for approval.
- approved the selection of architectural and engineering firms for a number of TDMHMR construction projects. The projects are the result of a November 7 bond election in which Texas voters approved over \$48 million for construction, reno-

vations and repairs at TDMHMR facilities. The projects include roof replacement, mechanical renovations and asbestos abatement at several state schools and state hospitals.

- approved a Memorandum of Understanding and a Finance Agreement with the Texas Public Finance Authority (TPFA). The TPFA, a state agency responsible for financing projects from the sale of bonds, will issue over \$48 million in bonds that were approved by Texas voters in the November 7 bond election.
- approved a list of construction projects totalling almost \$2.5 million at TDMHMR facilities. The projects, which will be funded by FY 88-89 general revenue appropriations, include the replacement of air conditioning units at Austin State Hospital, construction and repair of steam lines and boilers at San Antonio State School, building renovations at Rio Grande State Center and Austin State School and repairs to a campsite dam at Rusk State Hospital.
- approved \$2 million in paving projects at TDMHMR facilities and selected two engineering firms to oversee the projects.
- adjusted the FY 1990 operating budgets of Richmond State School, Austin State School, Austin-Travis County MHMR Center and El Paso State Center.
- approved a Memorandum of Agreement defining the relationship between TDMHMR and the General Land Office with respect to the land development process. The agreement between the two agencies outlines the role each agency as-



sumes in evaluating, planning, developing, administering and managing land development projects on TDMHMR's surplus property. The Board asked the agencies to draft the resolution at their December 8 meeting during a discussion of the lease of surplus property at Austin State Hospital.

- unanimously adopted a motion not to approve the lease before the Board pertaining to the surplus property at Austin State Hospital.
- adopted a new section to the departmental rules governing interagency agreements. Responding to a requirement from the 71st Texas Legislature to create a plan for the development of new ICF/MR beds, the Board approved and adopted a new document entitled "Annual Plan for New Bed Development in the Texas ICF/MR Program for State Fiscal Year 1990."
- approved the naming of the renovated swimming pool at Lubbock State School the Kenneth May Thera-Pool. May was editor of the Lubbock Avalanche-Journal and the father of two children with mental retardation. He served on the Lubbock State School Volunteer Services Council and was a trustee for the Lubbock Regional MHMR Center. He spent countless hours researching the need for a state school in Lubbock and worked with the Chamber of Commerce and other civic groups to encourage the placement of a state school there. The Lubbock State School Volunteer Services Council has raised approximately \$325,000 to renovate the pool, which will be enclosed for year-round usage. The new building will include dressing rooms, showers and restrooms. In addition, the pool surface will be refinished and the concrete deck will be resurfaced with skid-proof material. □

---

*Mark Southern is an information specialist in the TDMHMR Public Information Office.*



# Mark Your Calendar

## *for the First Annual Helen Farabee Conference on Mental Health and Mental Retardation*

### *Dedication to Shared Dignity.*

That's the theme of the First Annual Helen Farabee Conference on Mental Health and Mental Retardation, scheduled for November 7 through 9, 1990, in Dallas.

The conference is named for the late Helen Farabee of Wichita Falls, who exemplified the innovation, energy and caring on behalf of persons with mental disabilities that TDMHMR strives to foster. The name of the conference and this year's theme reflect the underlying philosophy of the conference: that diverse groups of individuals interested in mental health and mental retardation services in Texas can come together to create a unique opportunity for a better understanding of one another's concerns and perspectives that will lead to improved services to persons with mental disabilities.

The Helen Farabee conference will serve several important purposes. First,

it will provide educational and networking opportunities for staff, individuals receiving services and families of those individuals through a variety of seminars, workshops, speaker presentations and social events. Second, the conference is being designed to revitalize staff members, reinforcing their identity as persons who care about the people they serve. Third, the conference will reward and publicly recognize TDMHMR staff and others who, like Farabee, have made exceptional efforts on behalf of persons with mental disabilities.

An additional benefit of the conference will be positive media coverage, due to the high caliber of speakers and the state-of-the-art information about programs and services that will be presented.

Future issues of *Impact* will present details about this exciting event, including registration information, speakers and more. □

---

## *Aussie Flyaway*

### **Tropical Texas Fundraiser Soars**

**by Rose Lee Lucio**

Staff and volunteers from the Tropical Texas Center for MHMR were in a frenzy on February 9 as they completed preparations for the Aussie Flyaway. People were coming and going throughout the day: buying and turning in tickets for the raffle, transporting auction items, making name tags and signs or trying to figure out where the hot dog buns for the food bar had been stored! That evening, everyone went home tired but in high spirits to await *The Day*.

And then *The Day* happened—February 10, 1990—the day of the Aussie Flyaway Fundraiser at John Henry's in Edinburg, Texas, coordinated by the Volunteer Services Department of the Tropical Texas Center. Everything was in place for the main event of the fundraiser, a drawing for round-trip airfare

for two to Australia donated by Continental Airlines. Other events included an auction of about 70 items and a country-western dance to top off the evening. Several booths offered a variety of items: food (we found the hot dog buns), ceramic products made by persons served by the center, t-shirts, sweat-shirts and caps, cookbooks and plants grown at the La Lomita Greenhouse by people served by Tropical Texas.

Not only was the Aussie Flyaway fun-filled and thrilling, it was also a big success. Money raised by the event will be used to establish a Client Emergency Fund to help meet the needs of individuals served by the center. The success of the fundraiser can be attributed largely to the Volunteer Services staff, who worked hard to organize the event. Hats off to all of the staff members and volunteers who helped with the event and to the businesses and individuals who sponsored the Aussie Flyaway. □

---

*Rose Lee Lucio is a quality assurance specialist for Tropical Texas MHMR Center.*



# Volunteers Meet Needs for Over Six Decades

by Sue Ramsey

Picture yourself in an environment where you have the responsibility of fulfilling many ongoing needs of hundreds of people with mental retardation with a limited staff and a constant need for money. Just how do you do it?

Volunteers—faithful, dedicated volunteers. Volunteers who come back year after year doing whatever you need them to do and doing it well. These good people will help you meet an almost unbelievable challenge.

Such are the four wonderful ladies who for the past several years have opened our door almost every Tuesday morning in a rainbow of color, with flashing smiles and an expression of eagerness to “get on with the job and get the job done.” Most of their work is in Denton State School’s Ames Shopping Center. They unpack, price and mark stock and place it in inventory. These ladies are unique in their dependability, dedication, good humor and youthful spirit.

Margie Cartwright, former Denton State School employee of 11 years, has been a volunteer for the past 18 years. She was the school’s first dental hygienist. Cartwright stays busy with a large, loving family but finds time to be actively involved in her church and fill grocery bags each Wednesday for the Denton Food Center, in addition to her volunteer efforts for the school.

Marge Odom is a retired teacher who spent 30 years in the classrooms in Orange, the Masonic Home and School in Fort Worth and Denton schools. She taught home economics and was one of the first in the state to obtain a degree in Child Growth and Development. Odom then became one of the first teachers of preschool education. She is active in her church and is on the physicians on-call list for pre- and post-surgery support for ostomy patients. Odom has been a Denton State School volunteer for 20 years.

Millie Dobbins, also a retired teacher who taught for 30 years, taught in class-

rooms located in Albany, Graham and Denton. For several years she taught in a laboratory summer school in the Appalachian Mountains in North Carolina. Dobbins has been a Denton State School volunteer for the past 14 years.

Carolyn Laney, is an accountant who retired in 1979 from the University of North Texas Alumni office, where she worked in the records department. She also worked as an accountant for the Denton school district. She has been a volunteer at Denton State School for 10 years and is active in her church. Laney and Dobbins are sisters.

When these ladies were asked what was their favorite task they do while volunteering at Denton State School, they unanimously agreed that whatever they do is enjoyable because they believe it is necessary and important.

Cartwright, Odom, Dobbins and Laney always smile, share comradery and complete all tasks requested of them. Collectively, they have contributed 62 years of volunteering. Where would we be without the dedication of volunteers such as these?□

---

*Sue Ramsey is coordinator of Volunteer Services for Denton State School.*

---

*Volunteers (from left) Marge Odom, Millie Dobbins and Carolyn Laney assist in Denton State School’s Ames Shopping Center. Together with Margie Cartwright (not pictured), these ladies have contributed 62 years of volunteer service to the school.*





# Words into ACTION

## TDMHMR announces Operation Renew projects

by Mark Southern

The Texas Department of Mental Health and Mental Retardation has identified eight projects it will undertake as a part of Operation Renew. These projects, which range from increasing salaries to streamlining policies and procedures, were developed by a diverse group of TDMHMR employees from across the state. Except where noted by an asterisk (\*), teams responsible for planning these projects will complete their work by April 1990.

### *Mission, Values and Goals*

#### **Purpose:**

- To incorporate the mission, values and goals of TDMHMR into all aspects of its daily operations.
- To communicate TDMHMR's mission, values and goals to the different publics served by the agency.
- To develop a slogan and/or logo for TDMHMR.

### *Human Resources System*

#### **Purpose:**

- To design a human resource development system for TDMHMR that would complement existing personnel and staff development functions. This system might include such things as career counseling, wellness programs, financial counseling, educational leave and assistance for employees who experience personal problems.

### *Policies and Procedures*

#### **Purpose:**

- To streamline the large number of departmental rules, policies, procedures and directives into a minimum set that is up-to-date and user friendly.

- To develop a "sunset" process to review policies and procedures and eliminate those that are out-of-date, contradictory or unnecessary.
- To give employees better access to existing policies and procedures and more input into the development of future policies and procedures.

### *Organizational Structure*

#### **Purpose:**

- To develop an organizational structure for Central Office that is responsive to the needs of its customers.
- To improve communication between Central Office and the field and between individual units of Central Office.
- To determine the respective roles of community MHMR centers and state centers and their relationship to the rest of TDMHMR.

### *Salaries*

#### **Purpose:**

- To increase the salary levels of positions for which pay is currently not competitive with the private sector or other agencies.
- To institute merit raises, bonus pay and other incentive programs.
- To identify areas for which career ladders need to be developed.

### *Management Styles and Practices*

#### **Purpose:**

- To recommend an overall management philosophy for TDMHMR.
- To assign responsibility for implementing management training.
- To assess the training needs of executive-level managers and design or select a training program to meet those needs.
- To develop a mechanism of continuing education for managers.

### *Customer Service*

#### **Purpose:**

- To identify the customers of TDMHMR facilities and community MHMR centers and develop ways to actively solicit and respond to feedback from them.
- To identify the customers of Central Office and develop ways to actively solicit and respond to feedback from them.

### *Quality Awareness and Sensitivity\**

#### **Purpose:**

- To define the concept of quality within TDMHMR.
- To develop methods of measuring quality based on customer needs and wants.

The Quality Awareness and Sensitivity Project will begin after the results of the Customer Service Project are known. □

---

*Mark Southern is an information specialist in the TDMHMR Public Information Office.*



# A Dialog with Denny

## TDMHMR Commissioner responds to questions about Operation Renew

by Mark Southern

The following interview with TDMHMR Commissioner Dennis Jones is a condensed version of an interview that will be used in an upcoming videotape about Operation Renew. In the tape, the Commissioner answers some of the most commonly-asked questions about Operation Renew from employees, consumers, advocates and family members of consumers.

The videotape, which is being produced by the Public Information Office, will be distributed throughout the agency and used to raise employee awareness of Operation Renew. In addition to the interview with Dennis Jones, the tape will also include highlights of the Operation Renew conference held last October in San Antonio, an explanation of the agency's new mission, values and goals statements and an overview of the eight major projects the department will undertake as a result of Operation Renew.

Our conversation with the Commissioner took place on Thursday, January 25. The questions were gathered from employees of Austin State Hospital, Brenham State School, Austin-Travis County MHMR Center, Central Office and representatives from consumer and advocacy groups.

*Q: I've heard a lot about Operation Renew, but so far it's been all talk, and I haven't seen much action. Can you tell me what's been accomplished so far?—Personnel Assistant, Austin-Travis County MHMR*

A: I'm glad you've heard about Operation Renew, and a lot has happened. The three major task groups all completed their work on time last summer. The Oversight committee put together a major conference last fall in San Antonio for all the chief executives and all

the task force members. Some 26 projects were identified as needing to be done. Eight of those projects have been approved, and seven of them are officially underway, ranging all the way from salaries to the organization of Central Office. This April, the draft of the agency's mission, values and goals statements—a very major document—will go to our Board for approval, and we'll be moving on down the road.

*Q: Exactly what is the expected outcome of Operation Renew?—Lab Technician, Brenham State School*

A: There's a lot that could be said about the outcomes of Project Renew, but, very simply, the goal of Project Renew is to begin an ongoing process by which we hope to improve the quality of services to people—those people being our own staff and, more importantly, the customers we serve.

*Q: When will we know what organizational changes will take place as a result of Operation Renew?—Administrative Technician, Central Office*

*Q: Can you tell us how long it will take before we start seeing results from Operation Renew?—Physical Therapist, Brenham State School*

A: The organizational task force, which I chair, will be completing its work by the middle of April. We will then be reporting at our systemwide conference at the end of April, and any elements that need to go to our Board for implementation will go to them at their June meeting this year. So you'll be hearing about this one by the middle or the end of April.

As to the question of how long it will take before you start to see the

results of Operation Renew, I think it's really important that people think about Renew at two levels. At one level, there are the projects and the things you've been reading about that have to do with major system changes. Obviously, those kinds of changes are going to take longer to do.

There's another whole level of Operation Renew, though, and I personally think it's the more lasting and important part. It has to do with individual work groups, individual facilities and individuals who can take on individual, small changes in their behavior. That's another part of Renew that I really want to underscore. Both of them are important: the major system changes and the things you can do today.

*Q: Operation Renew talks about "renewing" employees. How are you going to do that?—Clinic Nurse, Brenham State School*

*Q: I read in an Impact article that one of the major goals of Operation Renew is to support, reward and encourage us as employees of the Department. How will Operation Renew accomplish that goal?—Residential Service Coordinator, Austin State Hospital*

A: There are a number of things that I hope Operation Renew can do that will filter down to the individual employee level. But in the final analysis, renewal for the employee has to come from the employee.

I realize that there's a lot of stress on employees at all levels of the system, especially on those that work directly with our patients and clients. How is this project going to help people in those front-line situations? Let me mention a couple of things.

One involves getting supervisors



and top-management people to be more sensitive, more supportive and more positive about the hard work and the good work that people are doing. That can start today, and it doesn't cost a penny.

There are other things that we can, over time, do a better job of as a system for our employees: things like providing better child care, like developing employee assistance programs and like developing work groups for people. Those are the kinds of things that really need to be a part of our overall management structure.

The last thing I would say is that there are things that are going to cost some money—things like salaries and merit increases—that we are also looking at and that we want to make a part of this overall effort.

*Q: My name has been submitted several times for a merit raise, and each time it's been denied because they say there's not enough money available. What can Operation Renew do to see that merit raises are awarded to people who deserve them?—Mental Health Worker, Austin State Hospital*

*A: Not surprisingly, the whole issue of salaries and pay has been one of the main issues that's come up in Operation Renew. You'll be pleased to know that one of the projects we've launched has to do with salaries. That task group has two charges: One is to look at where we have pay scales that are out of line and that need to be addressed in our next legislative request. The second charge for that group is to look at the issue of what kind of incentive pay program we ought to have in the department this year. That task group has been asked to come back with a recommendation by March of this year. We will be going to the Board in April to seek approval for an agency-wide policy on incentive pay. Depending on the recommendations of that task group, this*

policy may include a bonus pay program and a merit pay program.

We are going to have an incentive pay program. Obviously, it's not going to cover everybody, but it will be in place this fiscal year.

*Q: Commissioner Jones, is anyone going to lose their job as a result of Operation Renew? It seems like every time we start something like this, we tend to lose people, and we keep doing the same amount of work with fewer people and less money. Is this project going to make a difference, or are you going to put it on the shelf once you're done with it and forget about it?—Laundry Worker, Austin State Hospital*

*A: I can assure you we're not going to put this project on the shelf. It's a project that is at the very heart of this agency and everything that I want to accomplish as commissioner. So you have my word on that.*

As to the issue of jobs—and that's one that always comes up—I can likewise assure you that nobody is going to lose their job because of Operation Renew. We may have reassignments, we may have people move into different areas as we go through this process, but nobody is going to lose their job.

*Q: One question I have about Operation Renew is whether or not it will address the need for management training for supervisors and department heads.—Recreation Specialist, Brenham State School*

*A: Yes, Operation Renew is very much looking at the whole issue of management training. One of the eight project teams that was formed—the Management Styles and Practices team—is trying to determine what kind of department-wide management training program we need for all levels of this agency. The group is also looking at a short-term goal of providing this training to chief executives. Our belief is that the place to begin with management training is at the executive level.*

*Q: As a representative of a consumer group of persons with mental retardation, I'd like to know what process the department has used to solicit input from consumers.—Self-Advocacy Program Coordinator, Association for Retarded Citizens*

*Q: Would it be possible for mental health and mental retardation consumers to become more a part of the agency—to be able to help the agency know what kinds of services are most effective for consumers?—Peer Support Coordinator, Austin-Travis County MHMR Center*

*Q: Denny, I know that customer satisfaction is very important to you. How are you going to make sure that consumers are satisfied with the results of Operation Renew once it's implemented?—Program Specialist, Central Office*

*A: As we move into this next phase of Operation Renew, we are attempting to involve consumers—both primary consumers and family members—in three of our task forces: the Mission, Values and Goals Task Force, the Customer Service Task Force and the Quality Awareness Task Force. We'll have some 12 people representing advocacy and consumer groups on the task forces, and I can assure you that they are being heard and that they have a lot to say about what happens in those groups.*

How will we know how customers feel when all of this is done? There's a very simple answer: we'll need to ask them. One of the things that will come out of this project is that we will ask the people we've identified as our customers how they feel. That, of course, includes our provider agencies. This will take place at all levels of the agency as a part of our ongoing operations. Once we've asked, we then need to do a better job of responding to how they feel.



*Q: Central Office seems to be out of touch with the needs of the people out in the field. What will Operation Renew do to change that?—Program Consultant, Central Office*

*A: One of the themes that's run through this whole project has to do with the mission of Central Office and the degree to which it's "in touch with the field." Just this past week, as we were looking at the mission of Central Office, one of the things that came through loud and clear was that the primary customers of Central Office are the people out in the field.*

I can't give you specifics yet, but I can say to you that as we begin to put into operation the notion that our customers are those people out there providing services—managers, administrators and direct care staff—it will begin to have some profound implications on how we behave.

Our Customer Service Task Force will be looking at the whole issue of how we can bring more of a customer service focus to the Central Office, and I will welcome any and all ideas that come out of that about ways we can make such a thing come alive.

*Q: I like the idea of Operation Renew, but I'm curious to know how it's going to be implemented in the community MHMR centers.—Community Liaison Specialist, Austin-Travis County MHMR Center*

*A: The community centers have been very actively involved in Project Renew from the beginning. Most of the projects involve community center representatives, so I think they'll be part and parcel of this whole effort.*

The point where we need to make some distinctions is where we get into such issues as salaries. As most of you know, the individual centers

and their boards ultimately make decisions about salaries, benefits, bonus pay and merit pay. Those things would have to be decided on an individual center-by-center basis.

Management training, though, and all the other projects I can think of will certainly involve the active participation of community centers.

*Q: The COMNET system is very much in need of renewal. I've presented on COMNET several times, and it is very frustrating when the system crashes or when listeners are unable to hear what is being said. Will Operation Renew update the system and perhaps include a video hookup so that listeners could see as well as hear the presenters?—Unit Manager, Austin-Travis County MHMR Center*

*A: Complaints about COMNET have come to my attention early and often. Outside of Project Renew, although certainly related to it, we are looking at ways to improve our ability to communicate with each other and with the field. There are a variety of options—and I don't pretend to be an expert—all the way from interactive audio/video to one-way video to improved audio capability. Obviously, each of these options carries a different price tag. During the next six months, we will be looking at different options and the costs that go with them. But I very much agree that our current COMNET system is simply not satisfactory and needs to be replaced.*

*Q: Commissioner, we've heard a lot about Operation Renew, and it sounds like a great idea. But it also sounds like it's going to cost a lot of money. Do you think you'll be able to find the money to fund this project?—Program Coordinator, Brenham State School*

*A: From the beginning of this whole effort, we've tried not to get caught*

in what I think is a real trap: good recommendations come out, but none of them can be done because there isn't any money to do them. I recognize—and I think everyone does—that some of the recommendations that come out of this project, such as salaries, are going to cost some additional dollars. I'm certainly prepared to defend and support those as we go to the legislature.

But the large majority of things that have come up so far are things we can do within available resources. They have more to do with how we do things than how much money we need to do them.

*Q: Operation Renew is a really big project, and we're hoping that a lot of good things will come out of it. But how are we going to measure outcomes so we'll know if we're successful or not?—Staff Development Specialist, Central Office*

*A: That's a really good question, and I'm not sure we have a good answer to it yet. But I would offer a couple of things.*

First, we'll be able to look at some of the specific goals we set for ourselves in Project Renew and measure whether or not we've done those. Did the project stay on time? Did we implement the things that were recommended? You might call that a "process evaluation."

When we get into bigger issues, though, I hope we can develop some so-called "systems indicators." For example: rates of turnover. We know what it is today, and we can look a couple of years down the road and see whether it has gone up, gone down or stayed the same.

In the final analysis, though, we will have to put in place a process by which we ask people how we're doing. Then we'll have to be dynamic enough as a system to change in response to our customers.



Q: *As with any new project, there are sceptics and critics who doubt that Operation Renew will result in any meaningful change. How do you respond to those people?*—

*Program Specialist, Central Office*

A: I recognize that there are people who are sceptical about this whole process. As I've said before, I think healthy scepticism has a place in this whole effort, because it keeps

our feet to the fire and keeps us asking the question, "How are we making this come alive?" None of this will have any meaning unless it comes alive for the people we serve. We have to ask this question constantly: "What is this doing to make life better for the people we serve?"

I don't think we're ever going to do away with all the scepticism, but

for those people who are willing to give it a shot—and I count myself among those—I can only say that we'll move on down that road to make this a better department. □

---

*Mark Southern is an information specialist in the TDMHMR Public Information Office.*

---

# The Motivation and Productivity Challenge

by William T. Martin, Ph.D.

Tom Peters would be proud of TDMHMR! Operation Renew is a significant and proactive step in our striving for excellence. Following the release of Peters' and Waterman's best-selling book in 1982, *In Search of Excellence*, the climate of private and public sector enterprise has taken a quantum leap toward the 21st century. Peters' latest books, *A Passion for Excellence* and *Thriving on Chaos*, provided further impetus to this international movement of excellence.

So what does all this mean? In part, it indicates that our global society and, more specifically TDMHMR, is accepting the challenge to excel and doing something about it. In the 1990s and beyond, entrenched bureaucracies will become obsolete. As Peters and Waterman pointed out, "getting back to basics" and "close to the customer" are becoming universal buzz words and a "bias for action" in our organizations. And, as Lee Iacocca graphically and succinctly observed, "in order to hit the duck, you have to move the gun."

Motivation and productivity issues have been discussed and re-discussed for decades. Easier said than done in most organizations. Of course, a certain percentage of employees in any organization are internally driven to produce, excel and achieve. Others need a little more encouragement. The status quo is comfortable and non-threatening. To

advocate, innovate and promote change in any organizational system is risk-taking behavior. But it usually brings significant rewards in the long run.

Increasing productivity is everyone's job. It may be as simple as removing an extra piece of paper from the myriad of forms that organizations use. Perhaps it is cutting down on unnecessary meetings and meetings that are too long. It

---

***Employees who bring personal problems to work cost an excess of \$100 billion a year in the United States.***

---

may include each of us encouraging co-workers to reduce excessive absenteeism and to leave personal problems at home. Employees who bring personal problems to work cost an excess of \$100 billion a year in the United States, according to an article in *Savings Institutions* (1988). And, in the *Journal of American Insurance* (1987), it was reported that our nation's drug abuse problem costs employers over \$120 billion a year in lost productivity.

Let's look at a hypothetical public residential facility. If, for example, that facility's annual budget is \$30 million, than a token five percent improvement in efficiency (or increase in productivity) would result in about a \$1.5 million

cost-benefit to that facility. Think about what a facility could do with these extra funds!

What would a five percent improvement in productivity be in real issues? For example, it could be about 24 minutes a day that each employee was more productive. Or, it might be reducing absenteeism. Another example would be better use of employees in terms of better matching knowledge, skills and abilities with job assignments or streamlining the everyday work flow.

Yes, we need to "get closer to the customer." Our services need to be more relevant to people's needs. We need to become more efficient and effective in the way we do things. Redundancy is a thief of time and money.

Stephen Jobs, the founder of Apple Computer Company, once said that a computer should be created from a vision of what *could be* rather than building upon what *was*. Creative input from all employee levels can only aid our progress toward better service delivery for the individuals we serve.

Both public and private sector organizations will experience unprecedented change in the 1990s and beyond. Quality will be an attainable goal. We must either move forward or we will fall behind in our striving for human and service delivery excellence. □

---

*Dr. William T. Martin is on the staff of Fort Worth State School.*





# CENSUS '90

## The Bicentennial Census

It's on the way. It will be here before you can say "everybody counts."

The 1990 Census will be the 21st in the nation's history and the largest and most complex ever undertaken. The Census Bureau expects to count 250 million people and 106 million housing units. Success of the census depends on you, on everyone. How well you cooperate—completing and returning your questionnaire—will determine how accurate the census will be.

About a week before Census Day (April 1, 1990) most households will receive a questionnaire by mail. Others, depending on location, will have forms delivered by census takers. Roughly five out of six households will receive a short form. About one out of six households will be asked to fill out a longer form.

## Why a Census? Why Participate?

It's part of the U.S. Constitution. And by participating in the census, you make sure that Texas and your community get a fair share of

- **Community Benefits** - Funding for schools, health clinics, job training, community centers and other services depends on census of clients.
- **Voting Power** - Representation in Congress, state legislatures and local voting districts is based on census numbers.
- **Recognition** - Pride in your heritage is reflected in accurate census totals. □

## The Census Is Confidential

Neither a census taker nor any other employee of the Census Bureau can reveal information about you or your household. Census personnel take an oath to uphold this confidence. Failure to do so can mean five years in prison and \$5000 in fines. And what about other federal agencies, can they get your census information? The answer is NO! Title 13 of the U.S. Code prevents any agency—Immigration, the FBI, the IRS, the courts, the military, welfare agencies—from getting any specific informa-

tion about you. In fact, personal information from the 1990 Census will be locked up until the year 2062.

## If You're Not Counted...

For a number of reasons, about 2.2 million people were not counted in the last census (about one percent). This is called the undercount. Among minority populations the percentage was higher, about six percent. Unfortunately, an undercount can result in flawed decisions. Inaccurate counts can curtail projects and cause lower funding for community programs and services. Often, those who could benefit most are those who are shortchanged when there's an undercount. Being missed in the census affects not only the people missed—everyone loses if everyone is not counted.

*So answer the census. It's good for all of us.* □

## What Can You Do to Help the Census?

- Success of the census in Texas depends on you, on all Texans. How well you cooperate by completing and returning your questionnaire will determine how accurate the census will be.
- Some of your clients are persons who are not likely to be counted in the census. Explain to them that it is confidential. Stress that the census helps rather than hurts the services they receive.
- If you need help in getting your clients counted, contact your nearest census district office. The following is a list of district offices in Texas and their phone numbers:

Abilene	(915) 674-8600
Amarillo	(806) 354-3700
Arlington	(817) 649-6200
Austin	(512) 326-7700
Beaumont	(409) 898-6800
Bryan	(409) 846-0444
Corpus Christi	(512) 878-0100
Dallas (central)	(214) 767-9750
Dallas (northeast)	(214) 960-5800
Dallas (northwest)	(214) 919-1400
Dallas (south)	(214) 320-540
Denton	(817) 383-9600
El Paso	(915) 590-1100
Fort Worth	(817) 347-7000
Harlingen	(512) 430-3400
Houston (central)	(713) 845-2425
Houston (northeast)	(713) 985-0400

Houston (northwest)	(713) 583-3400
Houston (south)	(713) 541-8600
Houston (southwest)	(713) 270-3600
Houston (west)	(713) 460-6600
Longview	(214) 236-6900
Lubbock	(806) 742-8600
Lufkin	(409) 634-8280
San Angelo	(915) 657-2900
San Antonio (central)	(512) 841-5400
San Antonio (south)	(512) 670-4300
San Antonio (north)	(512) 524-4950
Tyler	(214) 535-7400
Waco	(817) 751-5500

- If your client or residents of your community cannot read English fluently or need help with languages other than English, the Census Bureau has established a series of "800" numbers which may help them in answering their questions about the census form in their own native language. The 1-800 Telephone Questionnaire Assistance service will be available from March 23, 1990 to April 15, 1990 for the following languages:

English	1-800-999-1990
Spanish	1-800-CUENTAN (283-6826)
Korean	1-800-444-6205
Vietnamese	1-800-937-1953
Cambodian	1-800-289-1960
Laotian	1-800-888-3208
Thai	1-800-288-1984
Chinese	1-800-365-2101

(Mandarin & Cantonese) □



# Dever Visits Soviet Union

by Laurie Lentz

Barbara Dever, director of Case Management and Continuity of Care for MHMRA of Brazos Valley, had the unique and exciting opportunity to visit the Soviet Union in December as part of the activities of the Bryan-College Station Sister Cities Association. Dever and eight other Texans spent seven days traveling in Russia and touring Moscow and Kazan, a city about 500 miles east of Moscow.

Dever reported that everywhere the group went they were showered with gifts, fed abundantly and entertained by singers, musicians and circuses. She found that arts and education, coordinated at the city council level, tended to be more visible and modern than social care, which is handled at the republic level. For example, she noted that "there is a heavy emphasis on medical training, but a mental hospital that we visited was old and dilapidated."

Dever discovered that in the Soviet Union people with mental retardation and persons with physical disabilities are segregated from the general population. "Anyone different in any way is kept out of the public eye," she said. Typically, people with mental retardation are institutionalized for life and people with physical disabilities are kept at home, emerging only to attend church, if at all. "The Soviets see this as protecting the individual who has a disability. The family is totally responsible for the person and family life revolves around this person." Thus, little effort is given to making public places accessible. Dever toured a school for young people with disabilities, where the Texans were given gifts made by the students.

"A large and growing problem for the Russians is the increase in mental retardation due to fetal alcohol syndrome," Dever reported. Alcoholism in the Soviet Union is contributing not only to an increasing population of persons with mental retardation but also to the growing number of people with alcohol abuse problems being treated through mental health programs. Rates of alcoholism,

suicide, abortion and gang warfare are rising. To deal with these problems, community health clinics, called *polyclinics*, offer outpatient psychiatric services and crisis hotlines are common. The psychiatric hospital that Dever toured primarily treated veterans with mental illness and persons with alcoholism.

"Vocational services for the mentally ill are available, primarily simple assembly and piece work. In fact," said Dever, "there are entire factories in which all the workers have mental illness." Additionally, people with mental disabilities receive government pensions.

"Nurses serve as case managers," she said. "There is no brokering for services;

the nurse handles it all, including medication services."

In addition to facilities for people with mental and physical disabilities, Dever's group toured public schools, nursery schools, museums and other public institutions, "but regular medical hospitals were off limits," Dever said. "They are highly protected, fenced-in areas."

Dever and her group will have an opportunity in April to reciprocate the hospitality shown them when their Russian counterparts in the Sister Cities Association come to Texas. The Bryan-College Station Sister Cities Association will cover the expenditures of their guests and give the Russians lodging in their homes.

Asked if she enjoyed her visit to the Soviet Union enough to go back again someday, Dever's response was an enthusiastic "Yes!" □

Laurie Lentz is editor of Impact.



Barbara Dever

*Children in a Russian nursery school pause in their activities to watch Dever and other visitors from Texas with wide-eyed curiosity.*

## Rita Clements Addresses Travis Volunteers

Texas First Lady Rita Clements was the keynote speaker at a luncheon for Travis State School volunteers on February 8 at the school. Clements praised the volunteers for their efforts, stating that "All of you are to be applauded as successful men and women because successful living includes serving others."

Clements predicted that the demand for volunteers from the private sector would rise steadily in coming years and that people from age 65 to 75 will continue to be the most active volunteers.

She added that the volunteers at Travis provide an example of caring and dedication.

At the end of her address, volunteers presented Clements with a framed watercolor painted by one of the individuals served by Travis State School.

Also attending the luncheon were TDMHMR Commissioner Dennis Jones, Deputy Commissioner for Mental Retardation Services Jaylon Fincannon, Director of Volunteer Services Nancy Barker and Chairman of the Volunteer Services State Council David Garcia.

Entertainment at the event was provided by the Travis State School handbell choir and soloists from the school. □



# Runnin' to get a bike

by Mark England

Travis Bailey had some bicycles not spoken for this Christmas.

Each year, the constable's office in McLennan County collects bicycles to give needy children.

When he learned there were seven extra bicycles, Bailey, a deputy for Constable Bill Donaldson, took them to the Waco Center for Youth, a residential facility for emotionally disturbed children. It was a cold day just before Christmas.

Some of the bicycles, to be honest, were "junkers," said James Kirkpatrick, a building contractor who went with Bailey.

He wasn't looking at them through a child's eyes, however.

"One boy came runnin'," Kirkpatrick said. "He didn't have a coat on or nothing. He was just a runnin' to get a bike, though."

Bailey couldn't believe what he saw.

"We came out here and it was cold, maybe six or seven degrees," Bailey said. "It was freezing, but kids were standing in line to ride a bicycle. I couldn't believe it. The few bicycles we had didn't go far. I went home, where I had my tree set up, where my son had a new bicycle, a set of drums and other gifts. I just decided to see if I could do a little more for those kids."

Bailey and Kirkpatrick, moved by what they had seen, pooled their money to buy out the inventory of a Temple bicycle shop whose owner had died.

Some of the bicycles were put together, but many had to be constructed from the parts in the shop. When the tinkering was done, 37 bicycles stood ready to roll. A thief took seven. That still left 30 bicycles for Bailey and Kirkpatrick to deliver Wednesday to the Waco Center for Youth.

School was in session. So, unlike their first trip, no kids clamored around the

two men with all the bicycles. Bailey didn't have to guess at their reaction, however. He serves on the center's Public Responsibility Committee, a group of citizens who serve as advocates for the children. One of Bailey's goals is to make the facility more like a home for the children who stay there an average of nine months.

"I'd like to get some playground equipment for them," he said. "These kids all have problems, but they could just as easily be my kids or yours. Most of them have had to fight their way through life. That's left them with some problems."

A bicycle's magic, though, can make a child's problems disappear—for a time, anyway.

"There's something about a kid and a bike," Bailey said. "I can't explain it, but it's fun to watch."

The Waco Center for Youth, mindful of that special relationship, makes bicycle riding a privilege. Children have to earn it.

"One of the privileges children can request is bike riding," said Rebecca Grillo, a nurse/coordinator at Cottage One. "In the past, we've often only had one bike at a cottage. Some cottages wouldn't have a working bike. We've always encouraged children to get on the behavior level that lets them freely roam the campus. This will help us and the children."

One worker at the center Wednesday fretted over whether the small boy she works with could ride several of the large bikes.

Kirkpatrick soothed her fears.

"Don't worry, they'll find a way to ride them," he told her, laughing. "I guarantee you that." □

*Reprinted by permission from the Waco Tribune-Herald.*

## Conference Calendar

May 2-4, Washington, D.C.

**Agenda for the Nineties: Full Employment and Independence for All**

Sponsor: President's Committee on Employment of People with Disabilities  
Contact: Edmond Leonard  
(202) 653-5044

**May 4-5, San Antonio, TX  
Progress Through Education, Research, Advocacy: 6th Annual TEXAMI Convention**

Contact: Marge Holmes  
(512) 734-3349

**May 9-11, Kerrville, TX  
1990 Training and Staff Resources Annual Meeting**

Contact: Merlene Waters  
TDMHMR Central Office  
(512) 454-3761, ext. 4823

**May 23-25, Austin, TX  
TDMHMR First Annual LVN Conference: 1990's: A Decade of Growth for Nurses**

Contact: Ellen Hurst, ext. 4502, or  
Roberta Eacott, ext. 4650  
TDMHMR Central Office  
(512) 454-3761

**June 3-7, Lubbock, TX  
Annual Conference of the National Association for Rural Mental Health**  
Contact: H. Ed Calahan, TDMHMR Central Office  
(512) 465-4511

**June 11-15, Beaumont, TX  
Texas Association on Mental Retardation Annual Convention**  
Contact: Martin Woodard, MHMRA of Harris County  
(713) 654-7100

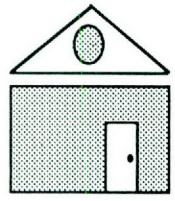
**June 27-30, South Padre Island, TX  
5th Annual Community MHMR Centers' Staff and Trustee Training Conference: Catch the Wave of the Future**  
Contact: Janci Covington  
P.O. Box 990651  
Austin, TX 78709-0651  
(512) 288-3510 □



# Rio Grande State Center

## Construction is changing its look, but the caring remains

by Merrijo Dean



Change is afoot at the Rio Grande State Center! But where is that? Unlike the department's other facilities, the name of the Harlingen-based center only hints at its location. Situated in the extreme southern tip of the state, the Rio Grande State Center provides inpatient mental health and mental retardation services to adults from Brooks, Cameron, Duval, Hidalgo, Jim Wells, Kenedy, Kleberg and Willacy Counties. The center is the mental health authority for Brooks, Duval, Jim Wells, Kenedy and Kleberg Counties, and it provides mental retardation community outreach counseling and referral services to those five counties, for which Corpus Christi State School is the mental retardation authority. The center's main outreach office in Kingsville has satellite offices in Alice, Falfurrias, Freer and San Diego.

Established by the Texas Legislature in 1962, RGSC's service area has been altered somewhat over the years. One constant, however, has been the center's unenviable physical condition. Since its inception, several factors have caused a geographic split in the campus. The 60-bed mental health unit near Valley International Airport, housed in a former 1940s-era military base hospital owned by Texas State Technical Institute, presents daily maintenance and temperature control problems. The narrow, lofty windows are reminiscent of outdated institutional wards of the past.

Across town on Rangerville Road, the 130-bed mental retardation unit is located on the campus of South Texas Hospital, an indigent care facility operated by the Texas Department of Health (TDH). About halfway between the mental health unit and the mental retardation unit is the center's vocational education unit, where persons with men-

tal retardation are transported for training and contract assembly work. Not surprisingly, the logistics and costs of maintenance, supervision and training at three campuses have presented major challenges over the years.

What sort of changes are underway?

*Change 1:* With the hiring of Commissioner Dennis Jones in 1988, the Rio Grande State Center found a new advocate. Recognizing the critical need for adequate facilities to provide services in the southernmost part of the state, Commissioner Jones joined with local legislators and key staff to provide the impetus to secure funds for a new 40-bed, state-of-the-art inpatient facility for mental health services. The upcoming groundbreaking for this facility represents the first new construction ever funded by TDMHMR south of Corpus Christi. Located adjacent to the mental health unit, the hospital will be quarters for the mental health unit's 20 beds for persons with acute mental illness, 20 beds for persons with substance abuse and clinical staff. Twenty beds allotted to individuals in transitional living will be located in a building formerly used as nurses' quarters for TDH.

*Change 2:* In the midst of this shifting scene, a new director took the helm. With the transfer of Aurelio G. (Ray) Valdez, Jr., to Corpus Christi State School, leadership at the center was undertaken in August 1989 by Rigoberto T. F. Gonzalez, a San Antonio native with diverse experience. After fewer than five months on the job, Gonzalez oversaw the successful transition brought about by the next wave, Change Three.

*Change 3:* Although funds for the inpatient mental health facility were gratefully received, they couldn't purchase enough space for all of the center's support functions. Fortunately,

last year the TDH Region VIII staff vacated a large building adjoining RGSC's mental retardation unit. After renovations to the building, administrative staff from the director's office, accounting, the business office, fire and safety, human resources, information services and staff development moved into the improved facility in January 1990. Remaining in the mental health unit at the old address until new construction is completed are personnel assigned to admissions, claims, clinical services, food service, medical records, mental health services, quality assurance and volunteer services.

If you are still following this crooked trail, you're doing very well indeed! To summarize, RGSC is getting a new inpatient facility for persons with mental illness that will be built on the campus of the mental retardation unit, and half of the staff have already moved to existing offices there. The rest will happily vacate the old military building and fill the spaces reserved for them as soon as the new construction is completed.

*Change 4:* For many, this chapter signifies the greatest element of change. How often do you hear of one large bureaucratic organization joining forces with a separate bureaucracy to cut costs and increase efficiency? Never, you say? Yet that is precisely the goal of TDH and TDMHMR as the two agencies iron out details of a plan to gradually merge the functions of their respective food service, housekeeping, maintenance and pharmacy departments. Commissioners of both agencies recognized in the concept of a shared campus the potential for significant savings to taxpayers while maintaining or even adding to consumer benefits.

Approximately one year from now, the center will have a fresh look and a consolidated address. Meanwhile, the daily care of persons with mental illness and mental retardation goes on. Delivering quality services with a caring touch doesn't require a fancy new building, but it does require the sense of purpose, team effort and consistency that have been and will continue to be the values found at Rio Grande State Center. □

*Merrijo Dean is the public information officer for Rio Grande State Center.*



# Up with People

## Boosts Spirits at Big Spring

by Evelyn Anderson

When the volunteer staff learned that the performing group Up With People was coming to Big Spring, they grabbed the phone and asked, "Would it be possible for some of the cast to come to Big Spring State Hospital to entertain the patients?" Managers for the Big Spring group had to call their manager, who had to talk it over and call the managers back, who called the volunteer staff and...it was arranged.

The result was even better than we anticipated. Not only would they come to sing and dance for the patients, but they would also spend the morning with the patients in their activity classes. The group makes it a point to do community service wherever they go.

After Up With People coordinated arrangements with Marilyn Clark, BSSH director of activities therapies, preparations were in place for the arrival of 20 cast members at 9 a.m. on January 16. The auditorium in the Allred Building was filled to standing room only. Cast

members introduced themselves individually, telling where they were from, and then marched up and down the aisles singing and dancing with the patients.

The enthusiasm of the young performers was contagious. The singing, smiles, tapping toes and dancing feet of staff and patients of BSSH showed everyone's enjoyment of this special treat.

Immediately after the program, the cast split into small groups and, accompanied by a volunteer, attended several activity classes. Some went to Music Therapy with volunteer Marilyn Newsom, some to Coping Skills with Betty Wrinkle, others to Arts and Crafts with Dotsy Jones or to the Sheltered Workshop with Doris Day. After visiting these classes, the small groups traded with one another to attend other activities or toured the hospital.

After this busy morning, the performers returned to the auditorium where the

hospital kitchen staff had prepared a delicious lunch for them. Then, with "goodbye" and "thank-you," Up With People got on their bus and returned to town.

Meanwhile, back in Big Spring, the Cultural Affairs Committee of the Big Spring Area Chamber of Commerce donated tickets to the hospital for the Up With People performance to be held that night. Thirteen patients attended the two-hour performance, which was even better than the special program they had attended that morning.

The next week a kind, sincere note came from the young performers who had spent their morning at the hospital. They thanked the volunteers, staff and patients for asking them to visit and letting them be a part of the patient's lives for a short time. □

*Evelyn Anderson is volunteer coordinator for Big Spring State Hospital.*

## DeFrank's Enterprise Provides Lift for El Paso State Center

by Anita Baldrige

John DeFrank, a ten-year resident of El Paso State Center with mental retardation, has accomplished his mission—a mission of his own conception, for which he worked with delight and deter-

mination until its completion. His efforts provided the center with a hydraulic lift.

When DeFrank and several other residents were taken to church recently, he observed the difficulty of shifting physically-impaired people on and off the van. Said therapist technician Fernando Fonseca, "When John came back, he asked me how much it would cost to buy a lift." He didn't know the terminology, but "he made an upward motion with his arm and made a buzzing

sound."

Although he is confined to a wheelchair and has limited use of his hands, DeFrank does finishing work on wooden articles for sale at the center and supervises others in his improvised workshop. He put in seven-hour days, donating the entire proceeds of his handiwork toward the cost of the lift, and managed to save \$800 at \$5 per article. Fonseca said, "We started scrounging around for pieces of wood. We gave him every piece of wood we could find."

DeFrank, who had previously experienced some depression, began to perk up. He started telling jokes. It was *his* project.

On December 18, the *El Paso Herald Post* ran a story on DeFrank and his efforts, accompanied by a heart-warming photograph of him surrounded by his creations. The following day, Auscension Sandoval of El Paso donated a hydraulic lift to the center.

John DeFrank had indeed succeeded. □

*Anita Baldrige is a staff member in the TDMHMR Public Information Office.*



*Kim Gerbich/Herald Post*

*El Paso State Center resident John DeFrank sold his handiwork to raise money for a hydraulic lift for the center. Photo courtesy of the El Paso Herald Post.*







# Images

## Newsmakers

- ❖ On February 16, the Texas Board of MHMR named **Gerald W. Brunette, M.S.**, as the new superintendent of **Richmond State School**, a post recently vacated by Joe Emerson, superintendent there since 1981. Brunette has been assistant superintendent of **Mexia State School** for three years and served at **Travis State School** for the seven years previous. He has extensive background in audiology, with a Master of Science degree in the field, experience as audiologist in Texas and Washington, D.C., and over 40 hours toward a Ph.D. in Communication Disorders at the University of Texas in Austin.
- ❖ **Antoni Sulikowski, D.P.A.**, resigned as superintendent of **Vernon State Hospital**, effective February 16, to accept a position as executive director of a community mental health center in Florida. During his tenure at Vernon, he oversaw development of a number of new programs for patients and brought the hospital into compliance with two deficiencies cited in a survey by the Joint Commission on the Accreditation of Healthcare Organizations. **Don Gilbert**, superintendent of **Terrell State Hospital**, will serve also as interim superintendent at Vernon until Sulikowski's replacement has been chosen.
- ❖ **Jim Morgan, Ph.D.**, was recently appointed director of Mental Health Services for **Central Counties**

**Center for MHMR Services** in Temple. A former assistant commissioner with the Texas Education Agency in Austin, Dr. Morgan has doctorates in Education Administration and Educational Psychology from the University of Texas at Austin. He is responsible for planning, developing new programs and supervising all Central Counties MHMR mental health and drug and alcohol abuse programs in the five-county area.

- ❖ The National Association of State Mental Health Program Directors has invited **Vijay Ganju, Ph.D.**, director of special programs for the **TDMHMR Office of Strategic Planning**, to serve on a six-member advisory panel that will assist in designing an Organization Information System. The system will be an ongoing data base that will contain key information about mental health service provider organizations in the U.S. The project, funded by the National Institute of Mental Health, will become part of a larger State Mental Health Agency Profile System—a major new data base for researchers and others needing information about state mental health programs.
- ❖ **Regenia Hicks, Ph.D.**, coordinator of **Children and Youth Services** for TDMHMR, has been appointed to the National Advisory Committee of the Robert Wood Johnson Foundation Mental Health Services Program for Youth. The primary objective of the program is to improve mental health services for children and youth with serious mental illness through combined efforts of state and community agencies to make major changes in financing, organization and delivery of services.
- ❖ **Ernest Fuentes** of the office of **Strategic Planning** was appointed in

January to the newly-created position of Coordinator of Services for the Deaf, Hearing Impaired and Deaf-Blind. Fuentes will analyze, plan, develop and coordinate services for this population within the agency, providing technical assistance to Mental Health Services and Mental Retardation Services. He has served on the Task Force on Services for Deaf-Blind for eight years and on the Governing Board of the Texas School for the Deaf for six years.

## Around the State

- ❖ The Volunteer Services Council for **Rusk State Hospital** has successfully met a challenge made by the Priddy Foundation to match a \$2500 contribution to the Council's Challenge Grant Fund, a fund started by the foundation in November. The council has garnered 25 donations of at least \$100 each, entitling them to an additional \$2500 for use in direct patient care programs.
- ❖ Effective January 1, 1990, a Substance Abuse Treatment Waiting List Reduction Grant was awarded to **MHMR of Southeast Texas**. The grant issued by the Texas Commission on Alcohol and Drug Abuse totals \$333,066 and will allot ten residential bed spaces for substance abuse clients at the vacant Daybreak building on the Orange outpatient campus and ten intensive outpatient slots to the ATAR program at the Beaumont Service Center.
- ❖ The **Rio Grande State Center** received high praise for its outstanding level of service and was recommended for recertification under revised federal regulations for Intermediate Care Facilities, qualifying the center for approximately \$4.3 million in federal and state funds. The



Health Department survey team gave Rio Grande only one administrative deficiency out of 600 grading standards, citing cleanliness and positive interaction between staff and clients and remarking that "The staff is performing over and above what is required." Of the TDMHMR facilities surveyed, Rio Grande is the only one to receive a perfect score in the area of nursing reports.

- ★ In January the **Gulf Coast Center** entered the recycling business in Lake Jackson, employing clients to collect and process paper, glass, aluminum and plastics. They have taken over the year-old Brazosport Community Recycling of Freeport, which operates on a partial buy-back system and which, through its steady growth, has decreased the use of landfills in the area by the equivalent of three garbage trucks per month. They are increasing local awareness by producing and distributing their own recycling pamphlet and involving area schools in paper collection.

- ★ Eleven outpatients from the **Life Management Center** of El Paso participated in a research project by the University of Texas at El Paso, the investigation of a possible link between Down Syndrome and Alzheimer's Disease. Each volunteered to give an ounce of blood for the project, enough to complete the study.

**Notice to All Participants, Beneficiaries, Applicants and Employees**

The Texas Department of Mental Health and Mental Retardation does not discriminate on the basis of handicap, in violation of Section 504, in the admission or access to or treatment or employment in its programs or activities. For further information, contact Section 504 Coordinator, Division of Standards and Quality Assurance, Texas Department of Mental Health and Mental Retardation, P.O. Box 12668, Austin, Texas 78711, (512) 465-4650.

**Let us hear from you.**

Send your comments to Laurie Lentz, *Impact* Editor, Texas Dept. of MHMR, P.O. Box 12668, Austin, TX 78711-2668.

I would like to see an article about \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I want to write an article about \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I want to comment on an article in the \_\_\_\_\_ issue.  
 \_\_\_\_\_  
 \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

**Second Notice**

If you want to continue to receive *Impact*, Texas law requires that you request it in writing. Your name will be removed from the mailing list if you do not respond. To remain on the mailing list, sign, date and return this page to:

Public Information Office  
 Texas Department of MHMR  
 P.O. Box 12668  
 Austin, TX 78711-2668

**I wish to continue receiving *Impact* at the address/corrected address on my mailing label.**

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

Note: TDMHMR and community MHMR center employees are exempt from this requirement because the public information officers receive a verified number of copies of *Impact* and distribute them to employees.



# Slow but steady wins the Safe Turtle Award

Slow but steady really does win the race, as staff of the Adolescent Services Unit at Austin State Hospital have demonstrated by reducing injuries to patients and employees by 49 percent from FY 1987 to FY 1989. The unit's steady decline in injuries inspired the Safety Awards Subcommittee of the ASH Safety Committee to create the Safe Turtle Award, the first of which was presented to Adolescent Services Unit employees at a surprise reception held for them on February 6.

Assistant Superintendent Adolph Supak presented to employees the inaugural Safe Turtle trophy—complete with

life-size turtle! The unit also received a certificate custom-framed by the ASH Maintenance Department, signed by Commissioner Dennis Jones and ASH Superintendent Kenny Dudley and embellished with realistic three-dimensional turtles. These imaginative awards

brought smiles to the faces of the surprised winners. The trophy and certificate will be permanently displayed on the unit. After the presentation, staff were treated to cake decorated for the occasion with the "slow but steady" slogan adopted for the award. □

Sherry L. Grona



# Impact

## Vol XIX, No. 3

Published by the Texas Department of  
Mental Health and Mental Retardation  
P.O. Box 12668, Austin, TX 78711-2668  
(512) 465-4540 or STS 824-4540

### Address correction requested

Public Information Office:  
Shari Massingill, Director  
Laurie Lentz, Editor  
Sherry L. Grona, Arts & Graphics Supervisor  
Mark Southern, Information Specialist  
John McLane, Information Specialist  
Debbie Pack, Circulation  
Anita Baldrige, Circulation  
Dott Salli, Circulation  
Impact will be sent on request.  
Enclose full address label when  
submitting change of address.

Printed with pride by San Antonio State  
Hospital's New Start sheltered workshop  
and distributed by Travis State School's  
sheltered workshop.