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State of Iowa

1964

Iowa Community Mental Health Centers

FIFTH STATISTICAL REPORT
1963 - 1964



IOWA MENTAL HEALTH AUTHORITY
PSYCHOPATHIC HOSPITAL
IOWA CITY, IOWA

Iowa
362.2
1961

Published by
State of Iowa

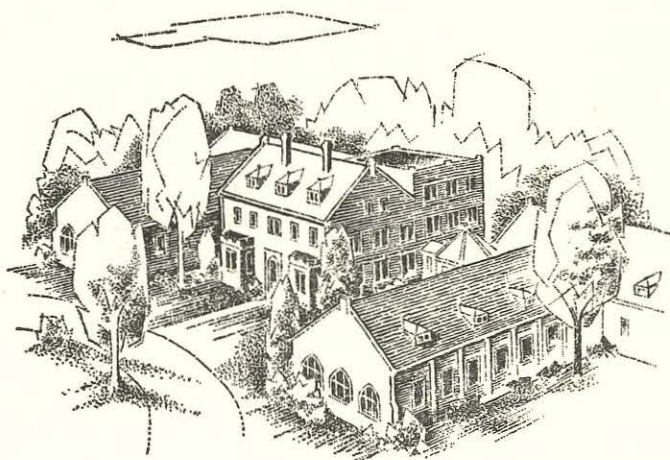
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Psychopathic Hospital, Iowa City, Iowa

IOWA MENTAL HEALTH AUTHORITY
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FOREWORD

Honorable Harold E. Hughes
Governor of the State of Iowa
State House
Des Moines, Iowa

Dear Governor Hughes:

In the Fourth Statistical Report of the Iowa Mental Health Authority published in 1963 appeared the following sentence: "Mental Health is steadily becoming a local community responsibility."

This statement is even truer today. In 1963, Iowa had fourteen mental health centers. Today there are sixteen, making these services available to nearly sixty percent of Iowa's people.

President Kennedy in his message to Congress, February 5, 1963, proposed a bold new national program for mental health which will return mental health care to the main stream of American medicine. To assist in this program many organizations and citizens of the state have been busily working on "A Comprehensive Mental Health Plan for Iowa", a primary responsibility of the Mental Health Authority. Returning the care of the mentally ill to the main stream of medicine, means the development of local facilities for treating both private and indigent patients. Local care will provide prompt and adequate treatment with less disruption of the patient from his family, his job and his community. Local communities are responding to the challenge as this new report shows.

Respectfully submitted,

Paul E. Huston, M.D.
Director
Iowa Mental Health Authority
Iowa City, Iowa

December 1, 1964

7-22-68 Governor's Rep.

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Compilation of Report

This Fifth Statistical Report represents the combined services of many agencies.

Particular credit is due to:

1. The Biometrics Branch, National Institute of Mental Health, U. S. Public Health Service, for their leadership in setting up a reporting system, July 1953, in which Iowa participated with twelve other states. These annual reports which at first were a few items of patient information have become more detailed studies of patient characteristics, clinic operation and special surveys. These statistics are valuable for National Reports and program planning, but are also interpretative data which the local clinics are using to good advantage.
2. The professional and secretarial staff of all the Community Mental Health Centers, for their accurate and detailed reports.
3. The Data Processing Service of The University of Iowa for its computer tabulations.
4. The staff of the central office who gave conscientious service in compiling data, tables and charts in preparation for this report.

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Chapter 1

IOWA'S COMMUNITY MENTAL HEALTH CENTERS' HISTORICAL DEVELOPMENT

The development of Iowa's Community Mental Health Center program over a period of seventeen years has broadened the scope of psychiatric services available to its citizens.

Population has been one of the prime factors in location of the centers. Over this seventeen year period an increasing number of services have been made available to the rural sections of the state. This has been accomplished primarily through the establishment of multiple county centers. An analysis of the areas served shows centers serving areas ranging from one county to nine counties.

Just as the areas differ, so does the program of services differ. There has been no attempt to fit patients into a definite treatment pattern. Rather the intent has been to structure treatment to the individual's needs, making as full use of the local community resources as possible.

From one Child Guidance Center in 1936 (Des Moines Child Guidance Center) to sixteen Community Mental Health Centers offering psychiatric services to 58.8% of the state's population is, in brief, the development of Iowa's Mental Health Center program. This is not the extent of the growth of Iowa's Mental Health Center program. Several communities continue to analyze their mental health needs and are in various stages of planning for the development of Mental Health Centers to meet the needs of their particular community in a more comprehensive way.

New Centers and Extension of Services

Since the last fiscal report of 1962, two centers began operations: Jasper County Mental Health Center, Newton, Iowa, serving Jasper county; the South Central Mental Health Center, Oskaloosa, Iowa, serving Mahaska, Monroe, Marion and Keokuk counties. These will be included in the present report. In addition to these two new centers, Pottawattamie County Mental Health Center, Council Bluffs, Iowa, and North Central Iowa Mental Health Center, Fort Dodge, Iowa, have been incorporated and were in the process of recruiting staff during the fiscal year 1963 - 1964. These two centers did not offer services to any patients during this period. As has always been the policy, the Iowa Mental Health Authority purchased new equipment, furniture, gave consultation on Articles of Incorporation, staffing patterns, financing and program to these two new centers.

Cedar Valley Mental Health Center, Waverly, which formerly covered only one county, Bremer, now covers three counties including Butler and Chickasaw counties. Grundy county has affiliated with Black Hawk County Mental Health Center. Tama county has affiliated with the Mental Health Center of Marshall and Hardin counties. Warren

county now affiliates with the Des Moines Child Guidance Center. Kossuth county affiliated with the Mental Health Center of North Iowa, which now serves an area of nine counties.

Several years ago, Robert H. Felix, M.D., Director, National Institute of Mental Health, said that any community of 50,000 population needs a full-time all purpose clinic. It is interesting to observe how the Community Mental Health Centers of Iowa cover population areas ranging from 35,282 (Jasper County) to the Des Moines Child Guidance Center, Des Moines, serving a population area of 287,144. It is significant that none of the centers has closed its doors. The patient load in 1963 - 1964 was 6,835.

There is a marked trend for communities to plan for more consultation and closer coordination with other local agencies. Often the Community Mental Health Center becomes the nucleus for developing these broader services. Iowa is particularly fortunate that the centers have a close relationship with public officials and the 364 loyal unpaid citizens, leaders in these communities, who serve on the various Boards of Directors.

New Construction

To better serve the communities and the increased patient load, several centers have occupied their own newly constructed buildings. Des Moines Child Guidance Center, Des Moines, Iowa; Mental Health Center of Marshall and Hardin Counties, Marshalltown, and the Mental Health Center of North Iowa, Mason City, occupy spacious and attractive center buildings, built largely by special gifts and legacies. Central Iowa Mental Health Center, Ames, has conducted a building campaign and is planning a new structure to be ready for occupancy in the near future. The land has been purchased. The large contribution of private funds for building is an expression of appreciation for early treatment of mental disorders in the local communities.

Legislation

Many factors have made this growth possible. Iowa's General Assembly has upon four separate occasions, enacted legislation strengthening the Mental Health Center program.

In 1951, legislation which enabled Boards of County Supervisors to appropriate monies from the County Mental Health Fund for "psychiatric examination and treatment", was passed. In 1957 the General Assembly passed legislation that provided for the County Supervisors directly levying a tax of .375 mills from the County Mental Health Fund for psychiatric treatment and examination in Community Mental Health Centers.

Again in 1963 the General Assembly provided enabling legislation which allowed County Supervisors from a county or affiliating counties having a population of 35,000 to levy \$250.00 per thousand population from the institutional fund to establish new community mental health centers in conjunction with the Iowa Mental Health Authority.*

The Extraordinary Session of the General Assembly in 1964, by the passage of House File 18, designated the Department of Health as the agency eligible to receive and administer federal funds as provided in Public Law 88-164 for the construction of Community Mental Health Centers.

Each action by Iowa's legislators has provided the basis for a more comprehensive program in the area of community mental health. The development of Iowa's Mental Health program following the findings and guidelines of the Comprehensive Planning Committee, will continue to provide services structured to meet the needs of the individual communities and its citizens.

Congress, by enacting the Community Mental Health Centers Construction Act (Public Law 88-164), has ensured the nation of a more comprehensive service for the mentally ill. The objectives outlined by President Kennedy in his message of February 5, 1963, to the Congress of the United States, can now be realized in every respect.

Grant-in-Aid funds have made planning grants available to prepare comprehensive long range plans for the treatment of mentally ill. Iowa is involved in providing a Comprehensive Mental Health Plan that will basically provide for the total mental health needs of the state.

*Code of Iowa, Chapter 230.24

Chapter 2

POPULATION AND AREA SERVED

At the time of our last statistical report, twelve Mental Health Centers served twenty-eight counties with a combined population of 1, 209, 023. Now, only two years later, there are fifteen active centers and one more which is beginning services shortly. These sixteen centers now serve forty-four counties with a combined population of 1, 605, 865. This represents an increase of sixteen counties, of nearly 400, 000 persons, or of 14.4% of the population of Iowa.

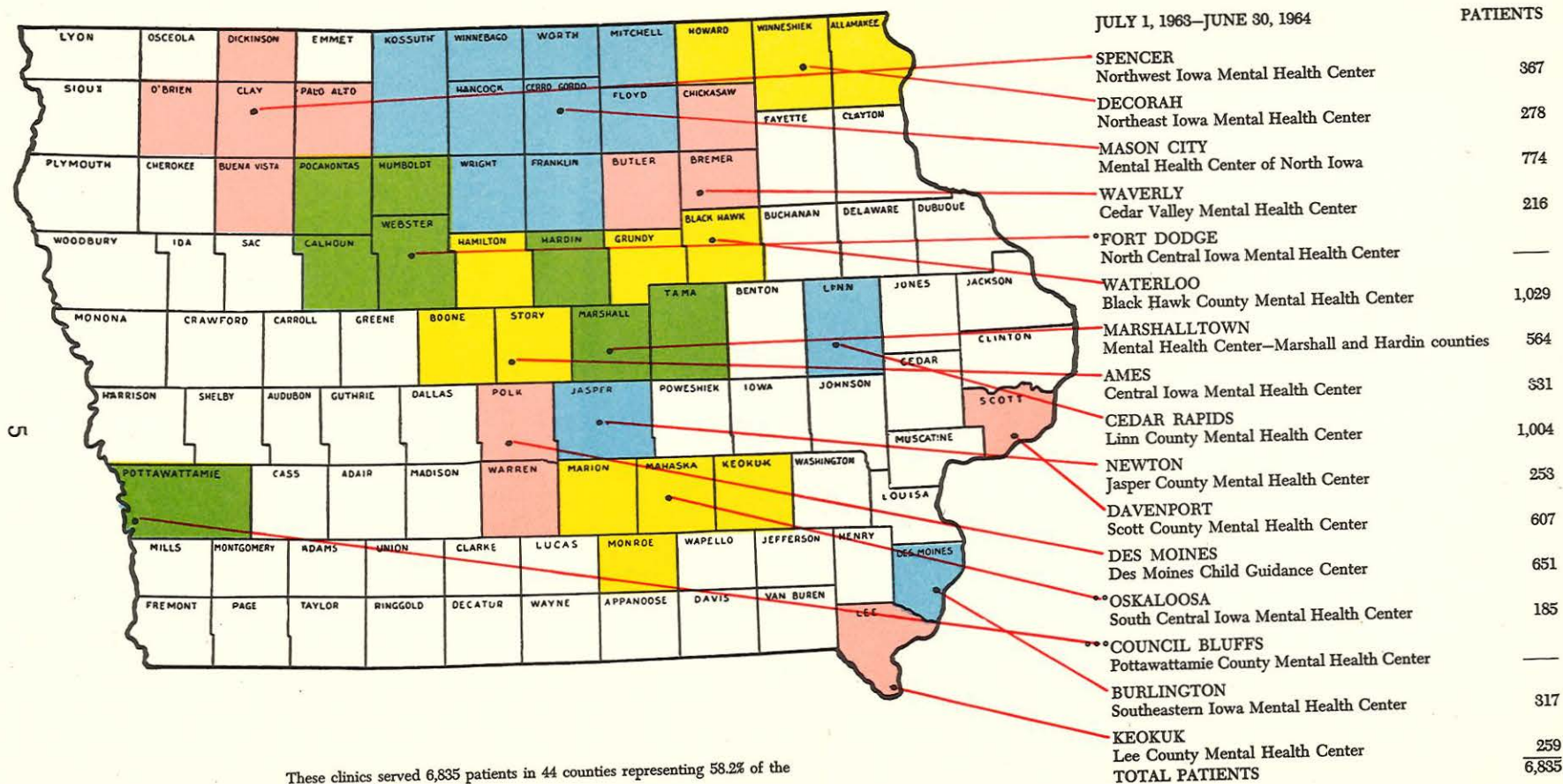
As the map on page 5 and Table I will show, most of the centers are in the more populous eastern and northern Iowa. The expansion into more sparsely populated areas has been substantial and encouraging, but the small tax base in non-metropolitan areas makes financing more difficult.

Civic minded leaders in other communities have shown interest in additional centers in other parts of the state, and it is not unreasonable to expect an increase not only in the number of operating centers, but in the rate of growth as well.

The present report is based on the fourteen centers in operation for the whole of 1963 - 64.

IOWA COMMUNITY MENTAL HEALTH CENTERS

Location, Area and Population Served



These clinics served 6,835 patients in 44 counties representing 58.2% of the state population.

*North Central Iowa MHC opens fall, 1964
 **South Central MHC opened September 1, 1963
 ***Pottawattamie County MHC opens fall, 1964

August 15, 1964

CHART I

TABLE I

IOWA COMMUNITY MENTAL HEALTH CENTERS

Date Established, Location, Population Area

August 15, 1964

DATE ESTBL. OR INCORPORATED	NAME OF CENTER	PRESENT LOCATION	COUNTY AREA	POPULATION SERVED
1. March 21, 1950	Black Hawk County Mental Health Center	1028 Headford Ave. Waterloo, Iowa	Black Hawk Grundy	122,482 14,132 <hr/> 136,614
2. Sept. 15, 1952	Cedar Valley Mental Health Center	112½ 1st St. SE Waverly, Iowa	Bremer Butler Chickasaw	21,108 17,467 15,034 <hr/> 53,609
3. July 1, 1959	Central Iowa Mental Health Center	223½ Main St. Ames, Iowa	Story Boone Hamilton	49,327 28,037 20,032 <hr/> 97,396
4. 1936	Des Moines Child Guidance Center	1206 Pleasant St. Des Moines, Iowa	Polk Warren	266,315 20,829 <hr/> 287,144
5. July 1, 1963	Jasper County Mental Health Center	2009 1st Ave. E Newton, Iowa	Jasper	35,282
6. Nov. 15, 1953	Lee County Mental Health Center	110 N. 8th St. Keokuk, Iowa	Lee	44,207
7. Oct. 10, 1949	Linn County Mental Health Center	223 Guaranty Bank Bldg. Cedar Rapids, Iowa	Linn	136,899
8. Jan. 7, 1958	Mental Health Center Marshall & Hardin Cos.	One N. Fourth Ave. Marshalltown, Iowa	Marshall Hardin Tama	37,984 22,533 21,413 <hr/> 81,930
9. Jan., 1956	Mental Health Center of North Iowa	P.O. Box 585 Mason City, Iowa	Cerro Gordo Floyd Franklin Hancock Kossuth Mitchell Winnebago Worth Wright	49,894 21,102 15,472 14,604 25,314 14,043 13,099 10,259 19,447 <hr/> 183,234
10. (Incorporated) March, 1964	North Central Iowa Mental Health Center	Fort Dodge, Iowa	Calhoun Humboldt Pocahontas Webster	15,923 13,156 14,234 47,810 <hr/> 91,123
11. May 1, 1956	Northeast Iowa Mental Health Center	300½ W. Water St. Decorah, Iowa	Winneshiek Allamakee Howard	21,651 15,982 12,734 <hr/> 50,367
12. Nov., 1959	Northwest Iowa Mental Health Center	19 E. 8th St. Spencer, Iowa	Clay Buena Vista O'Brien Dickinson Palo Alto	18,504 21,189 18,840 12,574 14,736 <hr/> 85,843
13. (Incorporated) Jan. 10, 1964	Pottawattamie County Mental Health Center	Council Bluffs, Iowa	Pottawattamie	83,102
14. April, 1949	Scott County Mental Health Center	121 W. Locust St. Davenport, Iowa	Scott	119,067
15. Sept., 1963	South Central Iowa Mental Health Center	Mahaska Co. Hosp. Oskaloosa, Iowa	Mahaska Keokuk Marion Monroe	23,602 15,492 25,886 10,463 <hr/> 75,443
16. March 17, 1949	Southeastern Iowa Mental Health Center	522 North Third Burlington, Iowa	Des Moines	44,605
			TOTAL	1,605,865

Official 1960 Census

State Total 2,757,537

Clinics serve 44 counties representing 58.2% of state population.

TABLE II
PATIENTS SERVED
IN IOWA COMMUNITY MENTAL HEALTH CENTERS

July 1, 1950 to June 30, 1964

In the past fourteen years since the first centers were sponsored, 23,563 patients have been referred. Of these patients, 46% were children, and 54% were adults. The services offered this large number of persons hopefully have alleviated serious behavior problems of children and have prevented more serious mental disturbances in these patients and their families.

In the earlier years a higher proportion was children, due largely to the case load of Des Moines Child Guidance Center. As new centers were organized, the proportions were equalized in 1958. For the fiscal year 1963-64 39.3% were children, and 60.7% were adults.

<u>Fiscal Year</u>	<u>New Admissions</u>		
	Total	Children	Adults
1950 - 51	1,058*	572	486
1951 - 52	917	395	522
1952 - 53	979	514	465
1953 - 54	1,116	650	466
1954 - 55	1,102	618	484
1955 - 56	1,184	640	544
1956 - 57	1,408	683	725
1957 - 58	1,494	780	714
1958 - 59	1,460	783	677
1959 - 60	1,988	877	1,111
1960 - 61	2,146	963	1,183
1961 - 62	2,348	956	1,392
1962 - 63	2,763	1,099	1,664
1963 - 64	3,600	1,415	2,185
TOTAL	23,563	10,945	12,618

* This number includes a few patients previously admitted.

Chapter 3

Financing Centers

Federal Funds

The allocation of federal funds to the Iowa Mental Health Authority assisted in the organization of all the Community Mental Health Centers in Iowa, except the Des Moines Child Guidance Center, which was previously established.

There was an increase of funds until fiscal year 1950, and then a gradual decline until 1955 when the allocation was only \$35, 712.94.

In these difficult years, some states entirely withdrew all federal funds to clinics, but the Iowa Mental Health Authority continued allocations for their six mental health centers. Although allocations to the centers have declined, and other funds are now available, there is still this policy of an allocation for partial salary and also a substantial amount for purchase of furniture and equipment for new centers. After fiscal year 1955, federal funds increased. Recently there has been a substantial allocation for a Comprehensive Mental Health Plan.

Local Tax and Private Funds

Support for these centers has increased from \$736, 752.27 (fiscal year 1961-62) to \$934, 849.73 (fiscal year 1963-64). Of course increased staff, higher salaries, larger office space account for such increases. (Table III, Page 11 shows source of income by center.) This amount does not include building costs, but only operating expenses. Federal funds from the Iowa Mental Health Authority and the grant from the National Institute of Mental Health to Des Moines Child Guidance Center for Day Hospital Care (\$51, 050.00) amount to about 10% of the operating expense. Conversely, the support from local tax and local private funds is about 90% of the cost. (See Chart II)

Through the years the proportion of county tax funds has increased, whereas the proportion of United Funds has declined. But this fairly constant proportion may indicate that the financing for Iowa Community Mental Health Centers is sound.

For the past two years there has been a strong trend toward stability in financing clinics. This is particularly so since sufficient funds are available to pay operating expenses on a yearly basis.

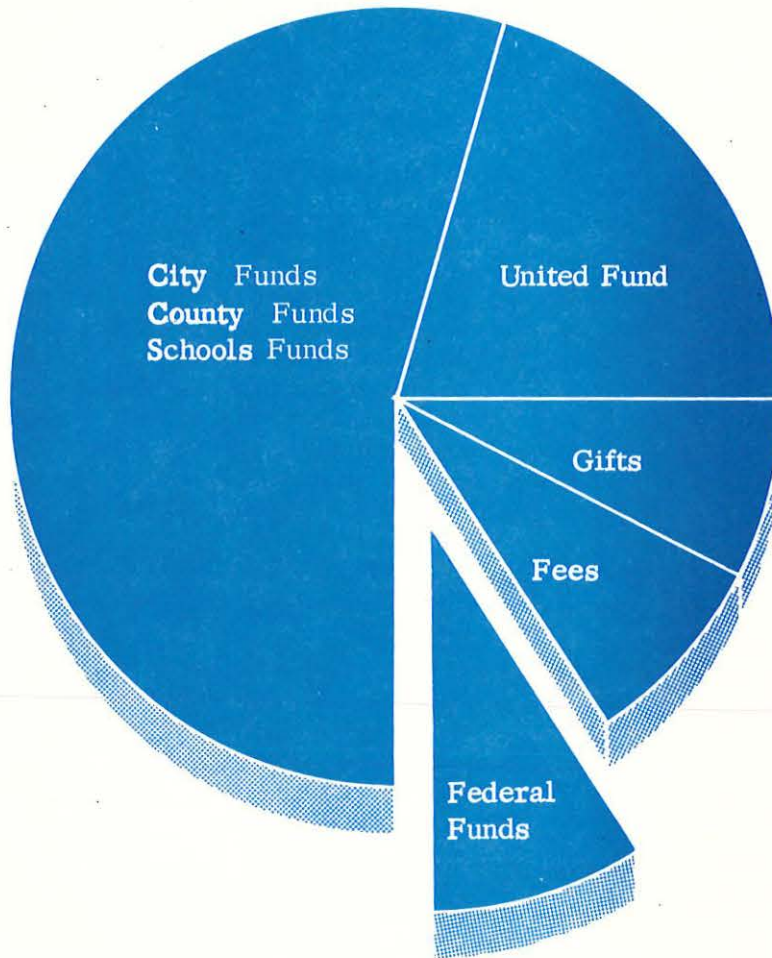
In compiling a budget for one county, or for affiliating counties, patient load and other essential services can be definitely projected ahead. With approval by the State Auditor, whose staff audits all county expenditures, the Board of Supervisors

can now levy monies on this basis. In the majority of the counties, payment from the county mental health fund is now either monthly or quarterly. This guarantees one-twelfth of the annual appropriation per month. This is necessary especially if there are not sufficient private funds to pay salaries.

CHART 2

SOURCES OF INCOME

Fourteen Community Mental Health Centers
July 1, 1963 to June 30, 1964
Percentage Distribution



<u>SOURCE OF SUPPORT</u>	<u>AMOUNT</u>	<u>%</u>
1. Tax Funds Federal: NIMH, IMHA County Funds, City Funds, School Funds	\$592, 208.17	63%
2. United Fund	130, 896.43	14
3. Gifts-Industry, etc.	119, 844.31	13
4. Fees	91, 900.82	10
TOTAL	<u>\$934, 849.73</u>	<u>100%</u>

TABLE III
ACTUAL INCOME

FIFTEEN COMMUNITY MENTAL HEALTH CENTERS SPONSORED BY IOWA MENTAL HEALTH AUTHORITY

July 1, 1963 to June 30, 1964

CENTER	TOTAL	TAX FUNDS		UNITED FUND	OTHER GIFTS	FEES
		FED. IMHA NIMH	CITY FUNDS COUNTY FUNDS SCHOOL FUNDS			
Black Hawk County Mental Health Center - Waterloo	\$103,440.00	\$ 1,800.00	\$ 70,000.00	\$ 10,340.00	\$ 3,300.00	\$18,000.00
Cedar Valley Mental Health Center - Waverly	21,872.58	1,800.00	10,060.00	3,925.00	3,061.00	3,026.58
Central Iowa Mental Health Center - Ames	50,995.08	1,800.00	36,224.00	1,544.50	7,797.83	3,628.75
Des Moines Child Guidance Center - Des Moines	202,221.00	51,050.00	27,900.00	53,196.00	45,190.00	24,885.00
Jasper County Mental Health Center - Newton	44,416.11	1,800.00	22,464.91	5,000.00	12,214.60	2,936.60
Lee County Mental Health Center - Keokuk	34,173.95	1,800.00	21,823.89	7,114.93	- - - -	3,435.13
Linn County Mental Health Center - Cedar Rapids	65,420.22	1,800.00	39,500.00	17,415.00	1,965.97	4,739.25
MHC - Marshall & Hardin Counties - Marshalltown	66,492.50	1,800.00	36,973.00	9,568.00	10,376.50	7,775.00
Mental Health Center of North Iowa - Mason City	112,662.00	1,800.00	82,534.00	- - - -	21,940.00	6,388.00
North Central Iowa Mental Health Center - Fort Dodge	2,342.55	2,342.55	- - - -	- - - -	- - - -	- - - -
Northeast Iowa Mental Health Center - Decorah	30,912.52	1,650.00	22,586.07	1,930.00	2,906.91	1,839.54
Northwest Iowa Mental Health Center - Spencer	44,519.72	1,800.00	32,339.00	1,681.00	4,815.00	3,884.72
Scott County Mental Health Center - Davenport	81,162.00	1,800.00	48,400.00	18,662.00	5,700.00	6,600.00
South Central Iowa Mental Health Center - Oskaloosa	39,018.45	1,500.00	33,159.70	520.00	276.50	3,562.25
Southeastern Iowa Mental Health Center - Burlington	32,566.66	1,800.00	29,266.66	- - - -	300.00	1,200.00
Other IMHA Funds Special Institutes	1,034.40	1,034.40				
Staff Meetings	1,599.99	1,599.99				
TOTAL	\$934,849.73	\$78,976.94	\$513,231.23	\$130,896.43	\$119,844.31	\$91,900.32

Chapter 4

LOOKING TOWARD THE FUTURE

Following closely the recommendations of Iowa Comprehensive Mental Health Plan, Iowa's Community Mental Health Centers will continue to meet the needs of their communities. Trade areas, tax bases, population and available community resources and professional staff, will be primary factors in structuring the role of the centers.

Newer methods of meeting community mental health needs will need to be made a part of the centers operations. Centers that are today meeting the needs of their communities will probably find it necessary to employ methods other than those now being used to enable them to provide the additional services.

As more and more of the treatment for mental illness is conducted in the community, and more time is devoted to rehabilitation and post treatment care, centers will become more involved in the continuum of care. Day and night hospitals, day care centers, halfway houses, sheltered work shops, 24 hour emergency service, offer many facets of service in which the Community Mental Health Center will be grossly involved.

As more treatment of mental illness is carried out within the family in its own community, more important will be the need to work with total family units. Some of the center's operations will not deal with illness alone but will be devoted to factors other than the illness.

The center will gradually assume a role in the community where by consultation with other treatment resources of the community many of the needs of the community can be met.

The comprehensive center envisaged by the National Institute of Mental Health will provide treatment of the mentally ill in the community by the community. Inpatient service, outpatient service, partial hospitalization, community services, diagnostic services, rehabilitative services, pre-care and after-care services, training and research are all seen as necessary in providing the services for the community.

Probably not all of Iowa's sixteen Community Mental Health Centers will follow the National Institute of Mental Health plan in every detail. Many factors prevent this. They will, however, continue to broaden the base of their present services in their endeavor to more fully meet the community's needs.

Much greater effort will be needed in the area of coordination of existing resources, closer liaison with other treatment facilities is a must. A wider participation with inpatient facilities will lead to broader coverage of needs of patients.

Comprehensive services cannot nor will not be accomplished by duplicating or replacing existing services. Comprehensive services will, however, be accomplished by coordinating and improving the present services, and filling the existing gaps. This coordination will provide the type of care and treatment needed, at the time it is needed, within the community where the patient lives. This cannot be accomplished by only the leaders sponsoring such a program. If it is to succeed, it must have support by all, especially within the communities where the centers are located.

Walter E. Barton, M.D., states, "The name Community Mental Health Center is more than a synonym for an outpatient clinic, or a new name to describe the regionalized unit of a state hospital or psychiatric unit of a general hospital. It is not necessarily a complex of resources housed in a fine new building. The ideal concept is that of a Community Mental Health Program that provides total mental health services to meet the total needs of the community."

This statement clearly points the direction Iowa's Mental Health Centers will take in an attempt to provide the needed services for its citizens. A program that provides total mental health services that meet the total needs of the community is a far-reaching program. Iowa's Centers have since their inception continued to adapt themselves to keeping pace with the needs of their communities. New approaches and combinations of present methods of treatment will have to be applied in order to provide for the total needs of the community. It is possible a new concept of "Community" will emerge. Iowa in the past has found it necessary for various reasons to broaden the area served by some of its centers from the single county community to the multiple county community. This very fact may, however, compound the attempt to provide more comprehensive services. Distance and transportation to some extent limit some of the types of programs visualized as being component parts of the Comprehensive Center.

Whatever program of services in the Mental Health field is applied to provide Iowa a broader, more comprehensive method of caring for the mentally ill will be largely affected by the recommendations resulting from Iowa's Comprehensive Mental Health Plan. The goal will be the reduction of psychiatric disorders to a minimum within the State both through remedial and preventive measures.

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TABLE IV

COMMUNITY SERVICE ACTIVITIES

PERCENT OF TOTAL STAFF TIME

FOURTEEN MENTAL HEALTH CENTERS

July 1, 1963 to June 30, 1964

I. <u>CLINICAL AND ADMINISTRATIVE DUTIES</u>		Percent
Administration*		19.73
Direct clinical services		73.98
II. <u>INFORMATION AND EDUCATION SERVICES FOR GENERAL PUBLIC</u>		
Single Presentation (Lectures, talks)		0.75
Group Study (Limited Period)		0.13
Group Study (Periodic sessions)		0.02
Mass Media (Radio, T.V., Papers)		0.07
Visitors, General Public		0.42
III. <u>IN-SERVICE TRAINING FOR PROFESSIONAL GROUPS</u>		
School Personnel		0.07
Courts, Police		0.02
Social Welfare		0.10
Health Personnel		0.07
Other		0.05
IV. <u>CONSULTATION AND CONFERENCES WITH OTHER AGENCIES</u>		
Schools		0.69
Courts, Police		0.24
Social Welfare		0.34
Health Agencies		0.18
Other Agencies		0.19
Community Planning		2.95
TOTAL (all items)		100.00

* Includes case review, Staff Meetings, In-service training, Statistical Reporting, and other allied duties.

Explanation of Table V

The seven columns are each divided into three parts: Total, Children, and Adults. The first column, Continued, enumerates the patients on the books at the beginning of the year. New patients, in the second column, are those who have never been seen previously in the center. Re-opened patients have been seen in a prior fiscal year, and recurrent patients are those who return for a second time in this fiscal year. Therefore, all the patients counted in the Recurrent Column have already been counted once in either column one, two or three. Closed patients are those whose experience at the center has been terminated during the year. These are the patients for whom detailed data are available.

The sixth column represents the patients on the books at the close of the fiscal year. This column will be identical with column one in next year's report, just as column one of this year's table is identical with column six of last year's. The final column, Caseload, is a count of all patients seen during the year. It is computed by adding columns one, two and three. This total can be checked by addition of columns five and six, and subtracting column four from the total (recurrent patients would otherwise be counted twice.)

TABLE V

PATIENTS SERVED IN CLINICS SPONSORED BY IOWA MENTAL HEALTH AUTHORITY

July 1, 1963 to June 30, 1964

CENTERS	Continued Cases ¹			New Cases			Re-opened from prior yr.			Recurrent this year			Closed Cases			Carried Forward			TOTAL Case Load ²		
	Tot.	Ch.	Ad.	Tot.	Ch.	Ad.	Tot.	Ch.	Ad.	Tot.	Ch.	Ad.	Tot.	Ch.	Ad.	Tot.	Ch.	Ad.	Tot.	Ch.	Ad.
Black Hawk Co. Mental Health Center	325	62	263	601	169	432	103	18	85	54	5	49	729	193	536	354	61	293	1029	249	780
Cedar Valley Mental Health Center	13	4	9	199	51	148	3	1	2	0	0	0	82	25	57	133	31	102	216	56	160
Central Iowa Mental Health Center	118	45	73	184	43	141	29	7	22	5	0	5	213	59	154	123	36	87	331	95	236
Des Moines Child Guidance Center	381	381	0	238	238	0	32	32	0	1	1	0	287	287	0	365	365	0	651	651	0
Jasper County ³ Mental Health Center	0	0	0	253	66	187	0	0	0	12	3	9	168	37	131	97	32	65	253	66	187
Lee County Mental Health Center	127	58	69	119	57	62	13	5	8	5	2	3	131	57	74	133	65	68	259	120	139
Linn County Mental Health Center	603	213	390	327	117	210	74	17	57	29	7	22	659	223	436	374	131	243	1004	347	657
Mental Health Center Marshall & Hardin	211	65	146	295	110	185	58	17	41	10	3	7	339	108	231	235	87	148	564	192	372
Mental Health Center of North Iowa	283	113	170	437	171	266	54	7	47	4	2	2	610	218	392	168	75	93	774	291	483
Northeast Iowa Mental Health Center	107	25	82	160	48	112	11	2	9	14	2	12	124	40	84	168	37	131	278	75	203
Northwest Iowa Mental Health Center	217	96	121	142	63	79	8	2	6	2	0	2	57	25	32	312	136	176	367	161	206
Scott County Mental Health Center	257	126	131	313	149	164	37	21	16	12	4	8	358	158	200	261	142	119	607	296	311
South Central ⁴ Mental Health Center	0	0	0	185	72	113	0	0	0	10	1	9	122	46	76	73	27	46	185	72	113
Southeastern Mental Health Center	157	40	117	147	61	86	13	2	11	4	1	3	88	3	85	233	101	132	317	103	214
State TOTALS	2799	1228	1571	3600	1415	2185	435	131	304	162	31	131	3967	1479	2488	3029	1326	1703	6835	2774	4061

1. Each column is divided into Tot. (total), Ch. (children), and Ad. (adults).

2. Recurrent (this year) Patients are not included in Total Case Load because they have already been counted in one of the columns to their left.

3. Jasper County MHC opened August 1, 1963

4. South Central MHC opened September 1, 1963

Source of Referral

More than two-thirds of all patients seen in the fourteen centers are referred by someone outside their own family. A study of the various sources of referral would indicate the degree of acceptance of the clinic by the agencies and professional people, as well as the prevalence of mental disorders among their clientele.

Since data on Source of Referral has been collected in substantially the same form ever since outpatient statistics have been collected, a longitudinal study is possible noting significant trends. Notable among these trends is the increased percentage of referrals by physicians. *

TABLE VI

Source of Referral - Terminated Patients

Percentage Distribution

July 1, 1959 - June 30, 1964

	1959-1960	1960-1961	1961-1962	1962-1963	1963-1964
Self, family, friends	32%	33%	32%	32%	32%
*Private Physicians	27%	27%	29%	30%	25%
Health & Welfare	13%	10%	14%	15%	15%
Schools	13%	14%	14%	14%	14%
Courts	8%	6%	5%	4%	4%
Others	7%	10%	6%	5%	10%
TOTAL	100%	100%	100%	100%	100%

Chart 3

SOURCE OF REFERRAL

Terminated Cases

Fourteen Community Mental Health Centers

July 1, 1963 - June 30, 1964

Percentage Distribution

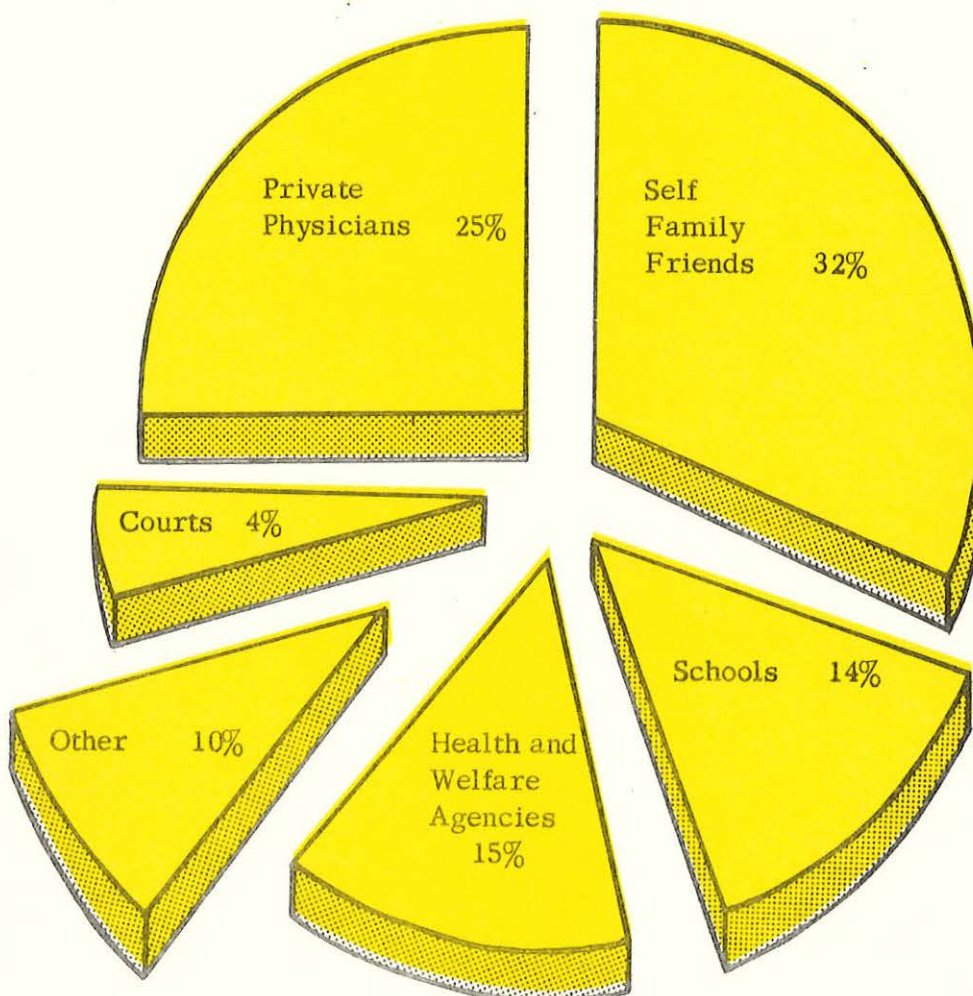


TABLE VII
SOURCES OF REFERRAL FOR TERMINATED PATIENTS
OF FOURTEEN MENTAL HEALTH CENTERS

July 1, 1963 to June 30, 1964

Source of Referral	State Total	Black Hawk County Mental Health Center Cedar Valley	Mental Health Center Central Iowa	Mental Health Center Des Moines Child Guidance Center	Jasper County Mental Health Center	Lee County Mental Health Center	Linn County Mental Health Center	MHC of Marshall & Hardin Counties	Mental Health Center of North Iowa	Northeast Iowa Mental Health Center	Northwest Iowa Mental Health Center	Scott County Mental Health Center	South Central Mental Health Center	Southeast Iowa Mental Health Center	
Self, family, friends	1212	179	23	82	58	55	60	216	111	145	41	10	161	37	34
Mental Hospital	174	31	2	6	0	1	0	67	14	27	17	3	3	0	3
Other inpt. fac.	35	9	0	2	1	0	2	3	0	11	1	0	3	1	2
Pvt. Psychiatrist	175	71	6	5	3	5	0	36	0	32	0	0	17	0	0
Private Physicians	1007	148	20	60	72	31	30	137	120	202	33	26	59	43	26
Soc. Serv. Agency	241	85	6	6	31	4	7	8	4	42	13	4	13	14	4
Court	151	30	3	2	18	0	3	29	28	16	0	0	16	3	3
School	570	113	11	21	82	48	26	85	32	65	8	9	53	16	1
Other	402	63	11	29	22	24	3	78	30	70	11	5	33	8	15
TOTAL	3967	729	82	213	287	168	131	657	339	610	124	57	358	122	88

PERCENTAGE DISTRIBUTION

Self, family, friends	32	24	29	38	20	33	45	33	33	24	34	18	45	31	39
Mental Hospital	4	4	2	3	0	1	0	10	4	4	14	5	1	0	3
Other inpt. fac.	1	1	0	1	0	0	1	0	0	2	1	0	1	1	2
Pvt. Psychiatrist	4	10	7	2	1	3	0	5	0	5	0	0	5	0	0
Private Physicians	25	20	25	28	25	18	23	22	35	33	26	45	16	36	30
Soc. Serv. Agency	6	12	7	3	11	2	5	1	1	7	10	7	4	11	5
Court	4	4	4	1	6	0	3	4	8	3	0	0	4	2	3
School	14	16	13	10	29	29	20	13	10	11	6	16	15	13	1
Other	10	9	13	14	8	14	3	12	9	11	9	9	9	6	17
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

Chart 4

AGE AND SEX OF TERMINATED PATIENTS

Fourteen Community Mental Health Centers

July 1, 1963 - June 30, 1964

From a patient load of 6835, the terminated cases, 3967 may be considered fairly representative of all patients.

The distribution of patients according to age and sex is graphically illustrated in Chart 4 below. This chart indicates there is a higher proportion of males than females under 15 years of age seen in our centers. After 15 years of age, there is a higher proportion of females. This fact has been evident since statistics for Iowa Community Mental Health Centers were first compiled in 1953. This same trend is noted in statistics for outpatient clinics on the national level. A detailed breakdown of age by centers is shown on Table VIII, page 22.

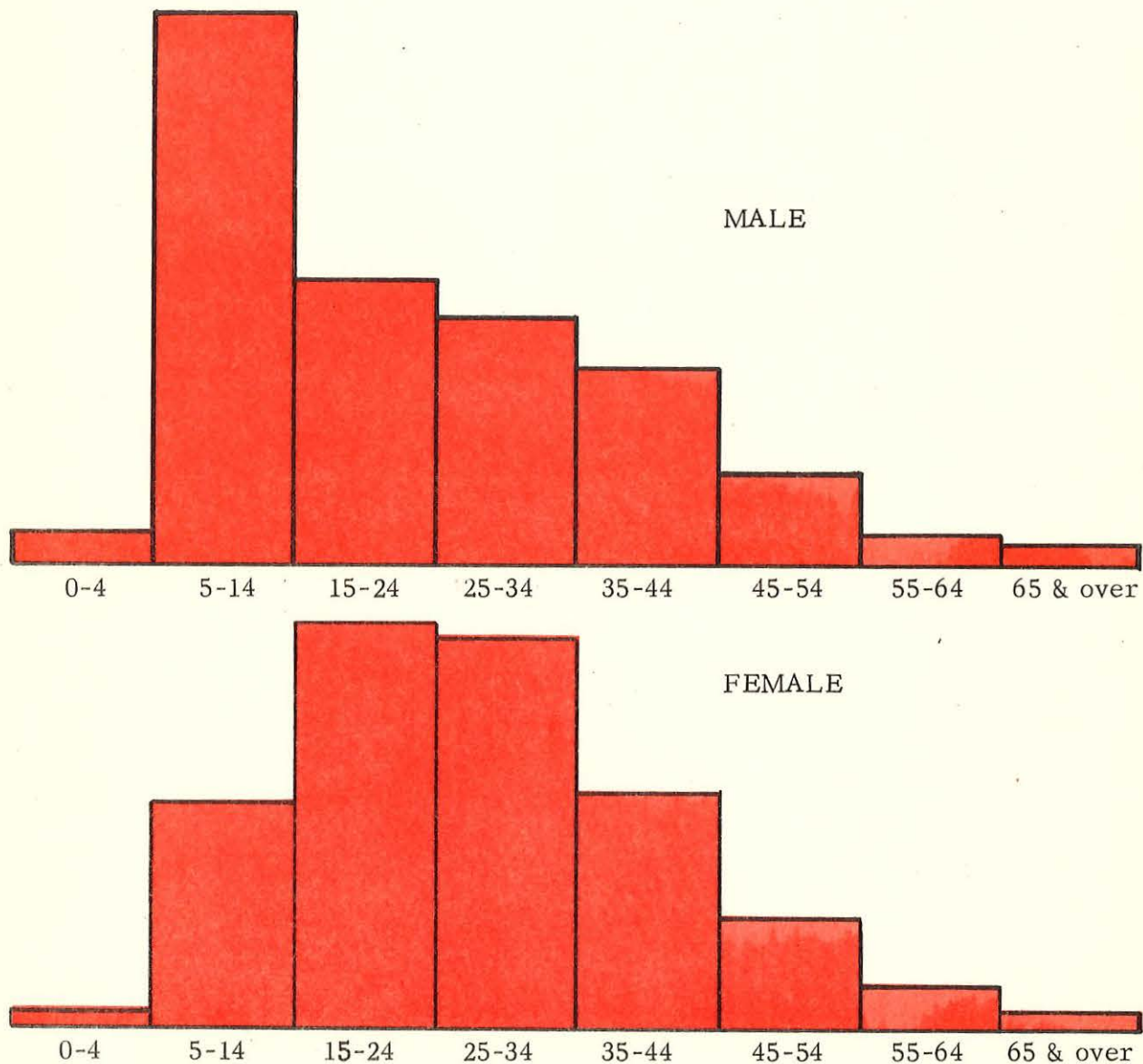


TABLE VIII

AGE OF TERMINATED PATIENTS

FOURTEEN MENTAL HEALTH CENTERS

July 1, 1963 to June 30, 1964

	Under 5	5 - 9	10 - 14	15 - 17	18 - 19	20 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 and over	TOTAL
Black Hawk County Mental Health Center	7	62	67	56	43	102	190	147	41	8	6	729
Cedar Valley Mental Health Center	0	8	8	9	10	13	15	10	7	2	0	82
Central Iowa Mental Health Center	1	9	27	23	13	41	52	23	16	3	5	213
Des Moines Child Guidance Center	31	99	107	50	0	0	0	0	0	0	0	287
Jasper County Mental Health Center	0	15	8	10	25	36	35	17	13	4	5	168
Lee County Mental Health Center	2	18	23	14	4	8	31	16	12	1	2	131
Linn County Mental Health Center	6	62	94	63	26	75	174	88	42	23	6	659
MHC of Marshall & Hardin Counties	1	42	32	33	22	57	75	41	20	9	7	339
Mental Health Center of North Iowa	10	63	81	69	27	89	114	85	41	21	10	610
Northeast Iowa Mental Health Center	4	13	14	9	3	13	18	22	16	5	7	124
Northwest Iowa Mental Health Center	0	9	11	6	3	6	10	7	2	0	3	57
Scott County Mental Health Center	5	53	60	39	11	27	80	66	14	3	0	358
South Central Mental Health Center	1	13	14	18	6	13	18	18	12	8	1	122
Southeast Iowa Mental Health Center	1	0	0	2	3	17	27	23	8	4	3	88
STATE TOTAL	69	466	546	401	196	497	839	563	244	91	55	3967

Chart 5

DIAGNOSTIC CLASSIFICATION OF DIAGNOSED PATIENTS

Terminated Cases

Fourteen Community Mental Health Centers

July 1, 1963 - June 30, 1964

Percentage Distribution

Diagnostic Classification of Diagnosed Patients

For the fiscal year of 1963-1964, Iowa's fourteen Mental Health Centers terminated 3967 patients of which 3260 patients or approximately 82% of the terminated patients, were given a diagnosis.

The diagnosis of "personality disorder" was the most frequent: 30% of the total patients diagnosed. The second largest category was "psychoneurotic" with 27% of the total diagnosed. "Transient situational personality disorders" was the third largest category with 24% of the total number diagnosed. There was only a slight variation from the findings of fiscal year 1962-1963.

The diagnosis of "mental deficiency" in the year 1956 accounted for 5.7% of the total patients diagnosed. The fiscal year 1961-62, and fiscal year 1962-63, the diagnosis of "mental deficiency" accounted for only 3% of the total. In 1963-64 the figure was 2%. This is probably due to the availability of other facilities and other specialized clinics, with the primary focus of service to the mentally retarded. The smallest group was the classification of "psychophysiologic disorder" making up only 1% of the total. (See Chart below.) A detailed breakdown by center is shown in Table IX, page 24.

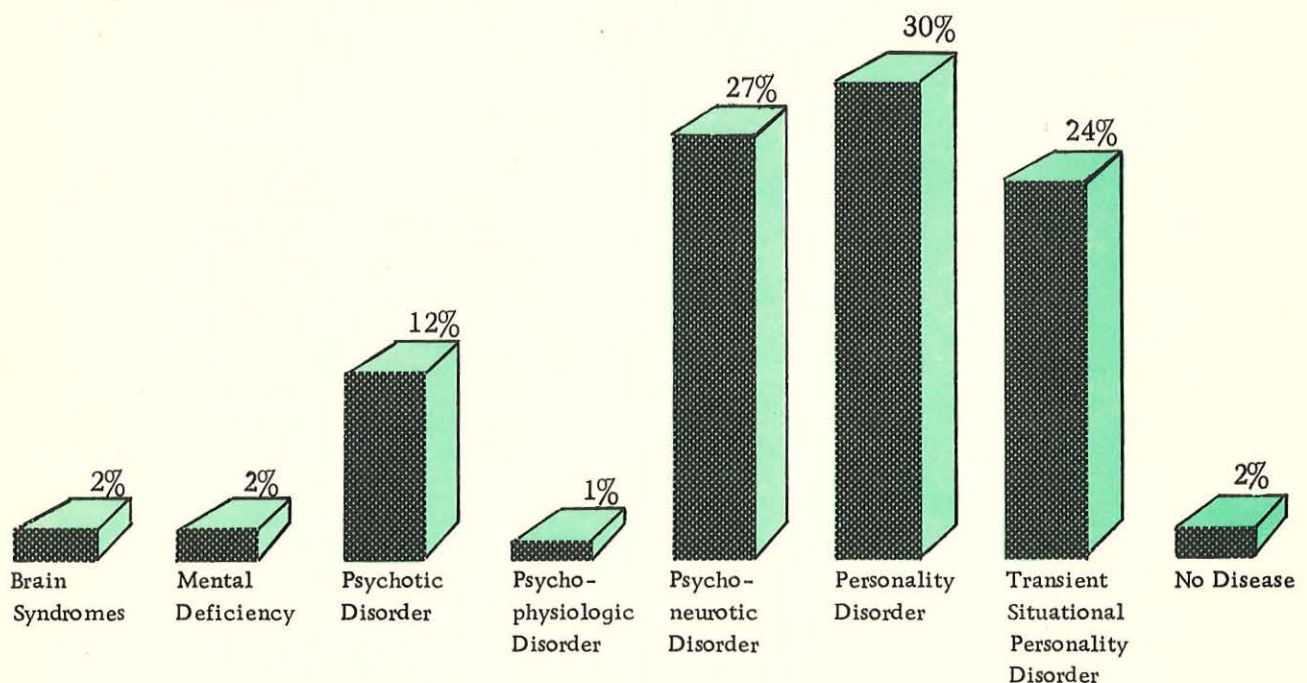


TABLE IX

DIAGNOSTIC CLASSIFICATION OF DIAGNOSED PATIENTS*
TERMINATED IN FOURTEEN MENTAL HEALTH CENTERS

July 1, 1963 to June 30, 1964

Diagnosis	State Total	Black Hawk County Mental Health Clinic	Cedar Valley Mental Health Center	Central Iowa Mental Health Center	Des Moines Child Guidance Center	Jasper County Mental Health Center	Lee County Mental Health Center	Linn County Mental Health Center	MHC of Marshall & Hardin Counties	Mental Health Center of North Iowa	Northeast Iowa Mental Health Center	Northwest Iowa Mental Health Center	Scott County Mental Health Center	South Central Mental Health Center	Southeastern Iowa Mental Health Center
Brain															
Syndromes	80	14	0	16	4	5	1	17	2	13	1	0	3	3	1
Mental															
Deficiency	78	10	4	2	12	2	0	7	12	14	3	1	9	2	0
Psychotic															
Disorder	386	48	11	43	4	16	2	76	34	88	17	1	30	8	8
Psychophys-															
iologic	35	5	0	2	2	3	0	5	5	5	2	1	1	4	0
Psycho-															
neurotic	867	261	24	8	44	21	38	94	86	96	24	26	92	17	36
Personality															
Disorder	963	162	17	87	132	31	9	160	46	179	11	10	94	17	8
Transient															
Situational	798	53	4	50	45	52	67	195	67	112	4	17	55	54	23
No															
Disorder	53	9	1	0	6	7	5	2	1	2	0	0	9	7	4
TOTAL	3260	562	61	208	249	137	122	556	253	509	62	56	293	112	80

	PERCENTAGE DISTRIBUTION														
Brain															
Syndromes	2	2	0	8	2	4	1	3	1	3	1	0	1	3	1
Mental															
Deficiency	2	2	7	1	5	1	0	1	5	3	5	2	3	2	0
Psychotic															
Disorder	12	9	18	21	2	12	2	14	13	17	28	2	10	7	10
Psychophys-															
iologic	1	1	0	1	1	2	0	1	2	1	3	2	0	4	0
Psycho-															
neurotic	27	46	38	4	18	15	31	17	33	19	39	47	32	15	45
Personality															
Disorder	30	29	28	42	52	23	7	29	18	35	18	17	32	15	10
Transient															
Situational	24	9	7	23	18	38	55	34	27	21	6	30	19	48	29
No															
Disorder	2	2	2	0	2	5	4	1	1	1	0	0	3	6	5
Total	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

*Of patients seen, 708 were not diagnosed.

TABLE X

INDIVIDUAL TREATMENT AND GROUP SESSIONS
IN FOURTEEN MENTAL HEALTH CENTERS

July 1, 1963 to June 30, 1964

During the fiscal year 1963-64, 51,327 interviews with individuals were held in the fourteen centers. Group sessions totaled 930, and involved approximately 6% of all patients. Half of the centers now employ group therapy; this seems to indicate that it is becoming a treatment of choice rather than an expedient to circumvent the manpower shortage.

The average number of interviews per patient is 7.5, a decrease of .9 from the preceding year, and of 1.5 from the year before that. The largest number of interviews per patient was 11.5, also a decrease from each of the two preceding years. The average per center shows remarkably little variation this year, having a standard deviation of less than 2.0. It appears that the centers are embracing a more uniform philosophy of treatment.

Center	Individual Treatment	Number of Group Sessions	Average Number of Treatments per Patient
Black Hawk County Mental Health Center	7468	464	7.3
Cedar Valley Mental Health Center	1879		8.7
Central Iowa Mental Health Center	2848		8.6
Des Moines Child Guidance Center	7487	211	11.5
Jasper County Mental Health Center	1649	56	6.5
Lee County Mental Health Center	1694		6.5
Linn County Mental Health Center	5198	3	5.2
MHC Marshall & Hardin Counties	4847	46	8.6
Mental Health Center of North Iowa	7440		9.6
Northeast Iowa Mental Health Center	1688		6.1
Northwest Iowa Mental Health Center	2189		6.0
Scott County Mental Health Center	3844	81	6.3
South Central Mental Health Center	1800	69	9.7
Southeast Iowa Mental Health Center	1276		4.0
STATE TOTAL	51,327	930	7.5

CONDITION UPON TERMINATION OF TREATED PATIENTS

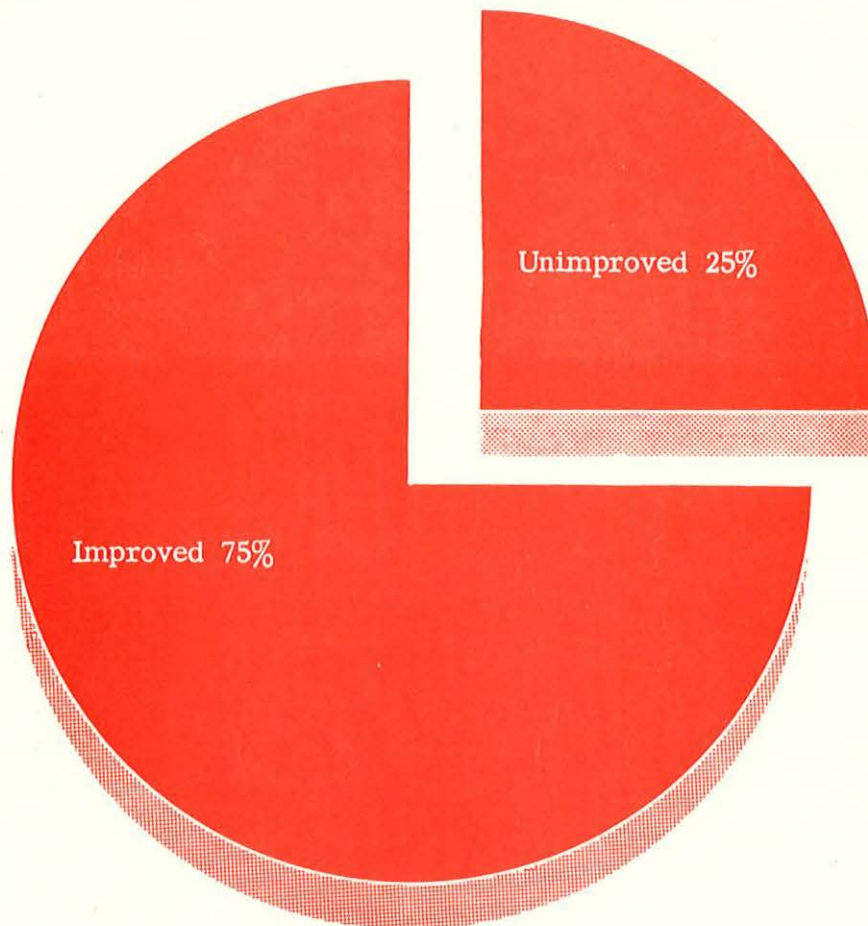
Terminated Cases - Fourteen Community Mental Health Centers

July 1, 1963 - June 30, 1964

Percentage Distribution

Seventy-five percent of all patients treated in Community Mental Health Centers are reported as improved when terminated. (See Chart below) While this high level of improvement may be in part attributed to screening those patients who cannot benefit from outpatient services, the reader must remain cognizant of other factors as well.

Patients who do not receive scheduled treatment are not evaluated on the Patient Statistical Abstract, and positive results with these patients are not reflected in the above percentage. It would be impossible to estimate how many patients find relief for their problems after one or two visits, and thus never return to the centers for a planned treatment program. The improvement of work and family relations, if measurable, would indicate more fully the value of a Mental Health Center to the community.



CLINICS NOT SPONSORED BY IOWA MENTAL HEALTH AUTHORITY

Broadlawns Polk County Hospital-Outpatient Clinic

Since 1953 Broadlawns outpatient clinic has submitted statistics to the Iowa Mental Health Authority. No funds have ever been allocated to this facility from the Mental Health Authority.

This clinic sees approximately 400 patients a year, the primary function being diagnosis and screening. 34.9% of the patients seen were self referred or referred by relatives, or friends. This proportion is quite comparable to the referrals for the twelve community mental health centers.

Iowa Psychopathic Hospital--Outpatient Clinic

This facility, located at Iowa Psychopathic Hospital in Iowa City, provides services for residents throughout the state. A professional staff of two psychiatrists - three social workers - one psychologist - one registered nurse and from four to six resident psychiatrists offers a range of diversified services. This is the largest outpatient clinic in the state. In the fiscal year 1963, there were 1663 new patients, and 7472 return visits.

Mental Health Institutes-Outpatient Clinics

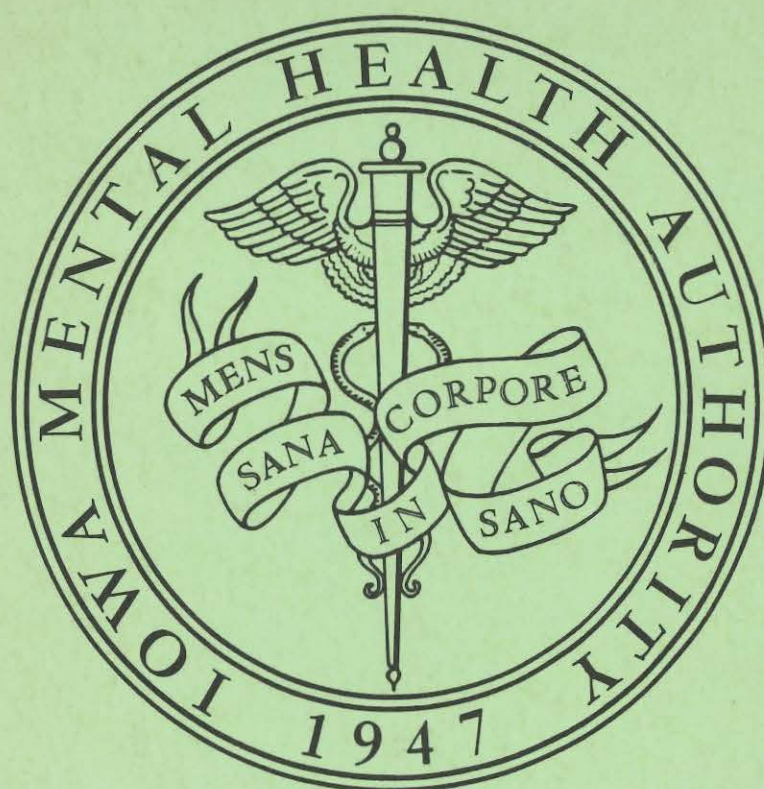
Each of the four Institutes (located at Clarinda, Cherokee, Independence, and Mount Pleasant) maintains an outpatient clinic in connection with its inpatient facility. In April, 1962, Clarinda established a clinic in Des Moines, in order to serve better the convalescent leave and discharged patients from Des Moines, Polk County, and vicinity. In the year ending June 30, 1963, these four clinics had had 3417 patients under care; nearly half of these were seen at Cherokee. Of the 1626 new admissions to the four clinics, 260 were children, and 1366, or 84% were adults.

Veterans Administration

The Veterans Administration maintains an outpatient unit in Des Moines, Iowa. This unit provides services to veterans, who are service connected directly or on an adjunct basis, for psychiatric or neurological diagnosis. Most patients seen live in Polk County or contiguous counties.

Mental Health Series #28

December 1, 1964



"A Sound Mind in a Sound Body"