

CENTER FOR RESIDENTIAL AND  
COMMUNITY SERVICES

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# **Persons with Mental Retardation in State-Operated Residential Facilities**

**Year Ending June 30, 1987  
with Longitudinal Trends  
from 1950 to 1987**

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Persons with Mental Retardation in  
State-Operated Residential Facilities:

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Longitudinal Trends from 1950 to 1987

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## EXECUTIVE SUMMARY

This report presents major statistical trends on state-operated residential facilities for persons with mental retardation. Presented in this report are data from recurring surveys conducted by the Center for Residential and Community Services since 1978, and comparison of statistical trends from a variety of studies of these programs from 1950. The data from these reports are based upon very high rates of response, with 100 percent of states reporting and extremely high response rates per item. The following represent primary statistical trends in state-operated residential facilities.

- In the past year (FY 1987), there was an increase in the number of state-operated residential facilities. Most of this growth occurred in smaller programs serving 15 or fewer persons (9% increase), and some in reclassification of existing facilities.
- During FY 1987, states had an average daily population of 102,075 persons with mental retardation in all state-operated residential facilities. This included 94,696 residents of state institutions for persons with mental retardation, an "institution" being defined as having 16 or more residents. It also included 4,542 persons in state-operated group homes for 15 or fewer residents and 2,837 persons with mental retardation in other state-operated institutions, almost exclusively psychiatric facilities. The number of persons with mental retardation in large mental retardation or other state institutions decreased by 5,763 persons (or about 5.6%) between June 30, 1986 and June 30, 1987 to 97,533. This is the lowest number of such persons residing in such facilities since 1935.
- The population of state institutions for persons with mental retardation continued to demonstrate an increasingly older age distribution. From FY 1977 to FY 1987 the proportion of children and youth (birth to 21 years) declined from 35.8% to 12.7%. The proportion of persons who were 63 years or older increased from 3.7% to 6.0%.
- Between FY 1967 and FY 1987 the daily population of persons with mental retardation in all state-operated institutions decreased by about 57%, from 228,500 persons to 97,533. These reductions were paralleled by declines in the "placement rates" (residents with mental retardation per 100,000 of the general U.S. population) in state-operated institutions. These rates peaked in FY 1965 at 115.8 per 100,000 of the general population, were 115.7 in 1967, and had declined to a rate of 40.1 in FY 1987. The FY 1987 placement rate for state-operated mental retardation facilities (38.9) was less than the rate of 39.3 in FY 1922.
- During the 10 year period from 1977 to 1987 state institutions for persons with mental retardation showed a reduction in the number and proportion of individuals with mild, moderate, and severe degrees of mental retardation. There was an increasing proportion of residents who are profoundly mentally retarded (from 47% to 63%). However, the total number of persons with profound degrees of mental retardation actually decreased by over 11,000 to 59,800.
- The average cost in state institutions for persons with mental retardation in FY 1987 was \$149.36. This represents an annual increase of 15% from the previous year, the largest annual increase since FY 1981.
- The cost of care provided in state-operated residential facilities for persons with mental retardation has increased dramatically since 1950, from an annual expenditure of \$750 per person to an average of \$55,000 per year in FY 1987. Controlling for changes in the Consumer Price Index, costs per resident in FY 1987 were 15 times the 1950 cost. These increased costs were associated with a number of factors, including increased regulatory requirements under Medicaid's ICF-MR program, increasing severity of populations, increasing staff-to-resident ratios, and increased pay for professional and direct service personnel. Court decisions and settlements in a majority of states requiring substantial improvements in state institution programs have also had a significant impact on costs.

## INTRODUCTION

This is the seventh publication since fiscal year 1978, in a series of Center for Residential and Community Services (CRCS) reports providing statistics on persons with mental retardation in state-operated residential facilities in the United States. Part I of this report presents population statistics for Fiscal Year 1987. These statistics were compiled within state agencies, with the exception of a few states for which individual facility data were collected. Part I represents a somewhat expanded version of a survey program originated and maintained in the Office of Mental Retardation (now the Administration on Developmental Disabilities) from 1968 to 1972. Its more expansive nature derives from inclusion of population and cost statistics on "small" state-operated mental retardation facilities (those with 15 or fewer residents) as well as the larger state facilities. The addition of small state-operated facilities was begun for Fiscal Year 1986.

Part II presents statistics on the characteristics of residents of large state-operated residential facilities (16 or more residents) on June 30, 1987 and resident movement during Fiscal Year (FY) 1987. It contains statistics that were gathered through facility surveys of all state-operated residential facilities of 16 or more beds for persons with mental retardation. These facilities included traditional state institutions, other state-operated congregate care facilities of 16 or more residents, and mental retardation units connected with state-operated mental health or long-term nursing care facilities. Previous surveys of state-operated facilities of all sizes were conducted in 1977, 1982, and 1985 (Hauber, Bruininks, Hill, Lakin, & White, 1984; Scheerenberger, 1978; White, Lakin, Hill, Wright, & Bruininks, 1987). Surveys in 1979, 1981 (Scheerenberger, 1980, 1982) and the survey reported here for 1987 include only state-operated facilities and units for 16 or more residents.

Part III of this report places Fiscal Year 1987 statistics in the context of data gathered on state institution populations, resident movement, and costs of care since 1950. Unlike the first two parts of this report, Part III provides only nationally aggregated statistics in order to permit longitudinal presentation. A brief historical review of these and other preceding surveys since 1950 can be found

in Lakin, Hill, Street, and Bruininks (1986). For a more detailed review, including surveys and statistics since 1880, see Lakin (1979).

As noted, this report distinguishes among facilities by size, notably those with 15 or fewer residents (15-) and those with 16 or more residents (16+). It also distinguishes between two general classes of state-operated facility:

Public Residential Facilities/Mental Retardation (PRF/MR) are state-operated (public, in a slightly restricted sense) residential facilities managed and operated by state employees, which as a whole or as distinct administrative units are designated to be primarily or exclusively for persons with mental retardation.

Other Public Residential Facilities (PRF/Other) are state-operated (public) residential facilities managed and operated by state employees, which as a whole are designated for persons with disabilities other than mental retardation (in the vast majority of cases, mental health facilities), but in which reside one or more persons with a primary diagnosis of mental retardation or a formal dual diagnosis including mental retardation.

For the purposes of this report, "persons with mental retardation" are those who have been so designated by their respective state governments as part of the process of placing them in the state residential care system. The formal and currently accepted definition of mental retardation is "significant subaverage general intellectual functioning (generally an I.Q. of 69 or below) existing concurrently with deficits in adaptive behavior, and manifested during the developmental period" (Grossman, 1977, p. 11).

Persons designated as multiply handicapped (mentally retarded/mentally ill) living in "PRF/Other" present some states with reporting problems, though the problems have become considerably fewer as procedures and data management have improved and the "PRF/Other" population of persons with mental retardation has decreased. Nevertheless, the actual number of persons residing in PRF/Other who have mental retardation may be slightly higher than the number reported in some states.

**PART I: PERSONS WITH MENTAL RETARDATION IN STATE-OPERATED RESIDENTIAL FACILITIES: YEAR ENDING JUNE 30, 1987**

**Methods**

The survey questionnaire for State-Operated Residential Facilities, Fiscal Year 1987, (Part I of a three-part survey which also included sections on nonstate facilities and ICF-MR certified facilities) was mailed with a cover letter to each state's mental retardation/developmental disabilities program director or the state's designated "data supplier" on December 20, 1987. These are included in Appendix A. Telephone follow-up began in January, 1988 to determine which individuals within the state agencies had been given responsibility for compiling the requested information, to clarify questions about the statistics requested, and, of course, to stimulate response.

Additional follow-up telephone calls to promote initial response and to clarify and edit the statistics on returned questionnaires continued until June 10, 1988 when draft tables of the data prepared from the state questionnaires were sent to all states for verification. Corrections and special notes on state data were completed on August 20, 1988. Compiling statistics from states on the three-part survey took an average of four telephone conversations with from one to four different people in each state. In eight states contacts were made with both mental retardation and mental health agencies to gather the required statistics for PRF/MR and PRF/Other facility categories. In three states data on PRF/MR were obtained from individual state-operated residential facilities, as part of the survey presented in Part II. New data collection systems in a few states resulted in some delay in reporting the requested statistics for Fiscal Year 1987. In general, the ability of state mental retardation agencies to aggregate data on residential services shows continued improvement.

Response rates for each of the items on the questionnaire are shown on the next page. For PRF/MR, item response rates ranged from 96% to 100% for the 15 or fewer resident facilities, and were 100% on all items for the larger traditional institutions. Item response rates for PRF/Other ranged from 98% to 100%. Only 5% of responses for state-operated residential facilities were marked as estimates.

Survey Item Response Rates by Facility Type  
Fiscal Year 1987

<u>Survey Items</u>	<u>% of PRF/MR</u>		<u>% of PRF/Other</u>
	15- beds	16+ beds	
1. Number of Facilities	100	100	100
2. Average Daily Residents (during the year)	100	100	98
3. Residents End of Year (June 30)	100	100	100
4. Per Diem Cost	96	100	98

Data elements of the state agency survey covered the number of facilities and residents, and the costs of care. Resident movement, which in alternating years is included on the state agency survey, was covered in the surveys of individual facilities (Part II) for Fiscal Year 1987. The specific elements and the corresponding definitions for the state agency survey can be found in the survey instrument attached as Appendix A. In recent years every state has increased efforts to place residents of large state facilities into smaller residential facilities. To assist in the effort several states have established state-operated, community based group homes and/or apartment programs. For the second year, in addition to collecting data on state institution and state hospital populations, this survey also collected data from each state specifically on residents of state-operated facilities with 15 or fewer residents, frequently referred to as "small" in this report. State-operated facilities with more than 15 residents are frequently referred to as "large."

Limitations are encountered when gathering statistics at the state level. Most notable among these are the variations in the types of statistics maintained by the various states. General problems in the collection of the data are presented in the discussion accompanying each table in the body of the report. Specific state idiosyncracies are reported in the *State Notes* in Appendix B. Although these variations should be noted, it is not likely that they have a substantial effect on national or within state totals or longitudinal trends.

### Findings and Discussion

The following seven tables and accompanying discussion summarize survey findings for the year ending June 30, 1987. The report is organized so that the discussion and accompanying tables are presented side by side. Definitions for each item as well as general definitional variations and problems are noted in the discussion. These notes are followed by a short summary of highlights of the state and national statistics presented in each table. In the discussion of these statistics, the descriptor "small" is often used for state-operated facilities with 15 or fewer residents. In the tables, the abbreviation "15-" refers to these same facilities. The descriptor "large" and the abbreviation "16+" is used in this report for facilities with 16 or more residents. No distinction is made for "large" or "small" PRF/Other. All PRF/Other are assumed to have at least 16 residents.

In Part I a common set of symbols is used for estimated or unreported statistics. These are:

- DNF "Data Not Furnished," by the reporting state. It is assumed that this number is larger than zero, but it is unknown.
- (e) "Estimated" data have been substituted where exact statistics were not available. It is assumed that these state estimates represent the best available information under existing circumstances.
- +" "+" is used where additional quantities are implied by the "DNF" symbol. When quantities are followed by the "+" symbol, the actual quantity is probably larger than the reported quantity.
- NA "Not Applicable" is used where no data are reported because a category of facility is not used in a state, but where zero would be inappropriate and would affect the computation of national averages.

### **Number of State-Operated Residential Facilities**

Table 1.1 presents statistics by state on the number of state-operated residential facilities serving persons with mental retardation in the United States on June 30, 1987. Separate counts are provided for facilities serving residents with a primary diagnosis of mental retardation in PRF/MR with 15 or fewer residents (15-), PRF/MR with 16 or more residents (16+), PRF/Other, and total facilities.

On June 30, 1987 states indicated a total of 1079 state-operated residential facilities that served persons with mental retardation. Of these, 935 were PRF/MR and 144 were PRF/Other. Of the 935 PRF/MR, 649 had 15 or fewer residents; 286 had 16 or more residents. All states operated at least one large PRF/MR on June 30, 1987; 15 states operated at least one small PRF/MR. Twenty-six states reported a PRF/Other with residents who were mentally retarded. The total of 649 small state-operated facilities on June 30, 1987, represents an increase of 56 facilities or about 9% between June 30, 1986 and June 30, 1987, in spite of the transfer to nonstate operation of several small facilities in Utah and South Carolina. The greatest number of small PRF/MR are operated by New York, with 422 facilities, or 65% of the national total; the 76 operated by Texas made up about 12% of the U.S. total.

In comparison with June 30, 1982, the reported number of large PRF/MR shows some increase (245 and 286 respectively). Some of this increase results from reclassification of PRF/Other with distinct mental retardation units to the category of PRF/MR. In addition, a number of states have opened relatively smaller, but still more than 15 resident PRF/MR in recent years. However, the number of large PRF/MR increased by only five facilities during Fiscal Year 1987. New York opened six and Missouri, one, while California and South Carolina each closed one during that period.

The number of PRF/Other ranged from 126 to 112 between June 30, 1981 and June 30, 1986. This past year saw an increase from 112 to 144, which undoubtedly reflects a change in facility inclusion criteria. Previous survey definitions of PRF/Other included facilities with at least ten residents with mental retardation. Given improved state reporting abilities, beginning this year it was possible to define PRF/Other as facilities with any residents with a primary diagnosis or formal dual diagnosis of mental retardation.

Table 1.1  
 Number of State-Operated Residential Facilities Serving  
 Persons with Mental Retardation  
 on June 30, 1987 by State

State	PRF/MR		PRF/Other	Total
	15- beds	16+ beds		
Alabama	0	5	0	5
Alaska	0	1	1	2
Arizona	19	3	0	22
Arkansas	0	6	0	6
California	0	7	0	7
Colorado	0	3	0	3
Connecticut	54	13	7	74
Delaware	0	1	0	1
D.C.	0	1	1	2
Florida	0	6	4	10
Georgia	0	8	4	12
Hawaii	1	1	0	2
Idaho	0	1	0	1
Illinois	0	13	2	15
Indiana	0	9	0	9
Iowa	0	2	6	8
Kansas	0	4	0	4
Kentucky	0	3	6	9
Louisiana	6	9	0	15
Maine	2	2	2	6
Maryland	1	7	8	16
Massachusetts	3	7	17	27
Michigan	0	8	0	8
Minnesota	7	7	0	14
Mississippi	28	5	0	33
Missouri	2	10	9	21
Montana	0	2	0	2
Nebraska	0	1	3	4
Nevada	0	2	0	2
New Hampshire	0	1	1	2
New Jersey	0	10	5	15
New Mexico	0	2	0	2
New York	422	34	32	488
North Carolina	0	5	4	9
North Dakota	1	2	1	4
Ohio	0	14	8	22
Oklahoma	0	3	0	3
Oregon	0	2	0	2
Pennsylvania	0	17	0	17
Rhode Island	25	2	1	28
South Carolina	2	5	0	7
South Dakota	0	2	1	3
Tennessee	0	5	5	10
Texas	76	15	0	91
Utah	0	1	0	1
Vermont	0	1	0	1
Virginia	0	5	4	9
Washington	0	6	2	8
West Virginia	0	3	8	11
Wisconsin	0	3	2	5
Wyoming	0	1	0	1
U.S. Total	649	286	144	1,079



**Average Daily Population of Persons with Mental Retardation  
In State-Operated Residential Facilities**

Table 1.2 presents state reported statistics on the average daily number of persons with mental retardation in large and small PRF/MR and PRF/Other by state in Fiscal Year 1987. For one state unable to furnish average daily resident (ADR) data for PRF/Other, the ADR was estimated from the average ratio of ADR to year end on roll population in all PRF/Other from 1984 to 1987 (98%).

During FY 1987 states had an average daily population of 102,075 persons with mental retardation in all state-operated residential facilities. This included 4,542 in small PRF/MR, 94,696 in large PRF/MR, and 2,837 in PRF/Other. In FY 1986 the average daily population of people with mental retardation in all PRF/MR and PRF/Other was 107,750, including 103,296 residents with mental retardation of large PRF/MR and PRF/Other and 4,454 residents with mental retardation in small PRF/MR. Between June 30, 1986 and June 30, 1987 the total number of persons with mental retardation in large state-operated facilities decreased by 5,763 persons (or about 5.6%). During the same period the average daily population of persons with mental retardation in small PRF/MR increased by just 2%. The decrease in average daily residents of large PRF/MR to 94,696 marks the first time since 1938 that the ADR of state institutions in the United States has been below 100,000 persons.

The decrease in average daily population of persons with mental retardation in state-operated facilities between Fiscal Year 1986 and Fiscal Year 1987 was evident in nearly every state. Only 8 states reported stable or increasing populations in state-operated facilities, and only 3 showed increases of 49 or more in ADR, with the most being 165. Among the large PRF/MR, ADRs increased by 9 or more in only 3 states, with the largest gain being 68 residents per day (Massachusetts). New York reported the highest daily average number of persons with mental retardation in all three categories of facility, 3,062 in small PRF/MR, 9,671 in large PRF/MR, and 682 in PRF/Other. New York's average daily population of all state-operated facilities (13,415) was over 5,000 more than the next highest state, Texas (8,365).

Table 1.2  
Average Daily Population of Persons with Mental Retardation in  
State-Operated Residential Facilities in Fiscal Year 1987 by State

State	PRF/MR		PRF/Other	Total
	15- beds	16+ beds		
Alabama	0	1,315e	0	1,315e
Alaska	0	59	3	62
Arizona	137	423	0	560
Arkansas	0	1,333	0	1,333
California	0	6,818	0	6,818
Colorado	0	912	0	912
Connecticut	364	2,309	130	2,803
Delaware	0	383	0	383
D.C.	0	258	150	408
Florida	0	2,038	130e	2,168
Georgia	0	2,121	22	2,143
Hawaii	8	272	0	280
Idaho	0	279	0	279
Illinois	0	4,468	30	4,498
Indiana	0	2,082	0	2,082
Iowa	0	1,113	71e	1,184
Kansas	0	1,223	0	1,223
Kentucky	0	671	155	826
Louisiana	31	2,938	0	2,969
Maine	25	291	16	332
Maryland	10	1,518	94	1,622
Massachusetts	24e	3,401	318e	3,743
Michigan	0	1,735e	0	1,735e
Minnesota	28	1,706	0	1,734
Mississippi	182e	1,522e	0	1,704e
Missouri	13	1,825	78e	1,916
Montana	0	256	0	256
Nebraska	0	468	19e	487
Nevada	0	170	0	170
New Hampshire	0	185	32	217
New Jersey	0	5,458	161e	5,619
New Mexico	0	486	0	486
New York	3,062	9,671	682	13,415
North Carolina	0	2,802	264e	3,066
North Dakota	11	412e	31	454e
Ohio	0	2,889	149e	3,038
Oklahoma	0	1,192	0	1,192
Oregon	0	1,157	0	1,157
Pennsylvania	0	5,004	0	5,004
Rhode Island	175e	300e	33	508e
South Carolina	22	2,500	0	2,522
South Dakota	0	496	15e	511
Tennessee	0	2,081	72	2,153
Texas	450e	7,915	0	8,365
Utah	0	540e	0	540e
Vermont	0	194	0	194
Virginia	0	2,892	85	2,977
Washington	0	1,825e	22e	1,847e
West Virginia	0	479	50e	529
Wisconsin	0	1,900	25e	1,925
Wyoming	0	411	0	411
U.S. Total	4,542	94,696	2,837	102,075

**Average Daily Population of Persons with Mental Retardation in State-Operated Residential Facilities per 100,000 of the General Population**

Table 1.3 presents the average daily population of persons with mental retardation in state-operated residential facilities for Fiscal Year 1987 per 100,000 of state and national populations on July 1, 1987. This statistic is referred to here as the "placement rate."

For Fiscal Year 1987 the national placement rate for all state-operated facilities was 42.0, compared to 45.2 one year earlier. The national placement rate for large PRF/MR was 38.9. For small PRF/MR, the national placement rate was 1.9 and for PRF/Other, the national placement rate was 1.2. Even more notable than the decrease in the placement rate for all state-operated facilities was the decrease in the national placement rate for all large facilities (from 43.3 in 1986 to 40.1 in 1987), and more specifically for large PRF/MR (from 42.0 in 1986 to 38.9 in 1987).

The national decrease in placement rate between Fiscal Years 1986 and 1987 in state-operated facilities was evident in almost all states. Rates in Indiana, Iowa, Montana, and Ohio remained essentially the same. Increases in the placement rate in Nebraska and West Virginia were due partly to the PRF/Other definition change and partly to decreases in the total state population. Massachusetts' reported rate increased by 2.2 persons per 100,000 due to both increased PRF/MR populations and increased numbers of PRF/Other (10) and their residents with mental retardation (73) due to the new definitions in this year's survey. Wyoming, which had the highest placement in larger state-operated facilities (81.2), increased from last year's rate (80.4) because of an increase of one person in the average daily population of its one facility and a slight decrease in state population.

In addition to Wyoming, the only other states showing placement rates of 70 or more per 100,000 in large state facilities were Connecticut (76), South Carolina (73), South Dakota (72), and New Jersey (71). The states with the lowest placement in large state-operated facilities in 1986 were Alaska, Arizona, Nevada, Florida, and Michigan, all below 20 per 100,000. The highest placement rates in small state-operated facilities were in Rhode Island (17.8), New York (17.2) and Connecticut (11.3).

Table 1.6  
 Net Change in the Number of Persons with Mental Retardation on the Rolls of State-Operated Residential  
 Facilities on the Last Day of Fiscal Year 1986 and the Last Day of Fiscal Year 1987 by State

State	PRF/MR						PRF/Other			PRF/MR 16+ and PRF/Other		
	1-15		Percent	16+		Percent	1986	1987	Percent	1986	1987	Percent
1986	1987	1986		1987								
Alabama	0	0	.0%	1,333	1,308	-1.9%	0	0	.0%	1,333	1,308	-1.9%
Alaska	0	0	.0%	59	60	1.7%	0	3	.0%	59	63	6.8%
Arizona	66e	134	103.0%	429	423	-1.4%	0	0	.0%	429	423	-1.4%
Arkansas	0	0	.0%	1,359	1,337	-1.6%	97	0	-100.0%	1,456	1,337	-8.2%
California	0	0	.0%	6,902	6,880	-.3%	0	0	.0%	6,902	6,880	-.3%
Colorado	0	0	.0%	969	901	-7.0%	0	0	.0%	969	901	-7.0%
Connecticut	347	383	10.4%	2,438	2,298	-5.7%	120	129	7.5%	2,558	2,427	-5.1%
Delaware	0	0	.0%	394	383	-2.8%	0	0	.0%	394	383	-2.8%
D.C.	0	0	.0%	285	258	-9.5%	134e	150	11.9%	419	408	-2.6%
Florida	0	0	.0%	2,094	2,061	-1.6%	112e	136	21.4%	2,206	2,197	-.4%
Georgia	0	0	.0%	2,127	2,089	-1.8%	0	14	.0%	2,127	2,103	-1.1%
Hawaii	8	8	.0%	279	260	-6.8%	0	0	.0%	279	260	-6.8%
Idaho	0	0	.0%	287	263	-8.4%	0	0	.0%	287	263	-8.4%
Illinois	0	0	.0%	4,475	4,436	-.9%	37	23	-37.8%	4,512	4,459	-1.2%
Indiana	0	0	.0%	2,302	2,270	-1.4%	0	0	.0%	2,302	2,270	-1.4%
Iowa	0	0	.0%	1,143	1,057	-7.5%	0	71	.0%	1,143	1,128	-1.3%
Kansas	0	0	.0%	1,345	1,298	-3.5%	0	0	.0%	1,345	1,298	-3.5%
Kentucky	0	0	.0%	678	686	1.2%	179	168	-6.1%	857	854	-.4%
Louisiana	34	33	-2.9%	3,042	2,889	-5.0%	37	0	-100.0%	3,079	2,889	-6.2%
Maine	24	25	4.2%	304	290	-4.6%	13	16	23.1%	317	306	-3.5%
Maryland	13	12	-7.7%	2,203	1,452	-34.1%	90	106	17.8%	2,293	1,558	-32.1%
Massachusetts	0	24	.0%	3,438	3,367	-2.1%	250	318	27.2%	3,688	3,685	-.1%
Michigan	0	0	.0%	1,930	1,658	-14.1%	0	0	.0%	1,930	1,658	-14.1%
Minnesota	0	28	.0%	1,780	1,653	-7.1%	0	0	.0%	1,780	1,653	-7.1%
Mississippi	216	182	-15.7%	1,628	1,522	-6.5%	0	0	.0%	1,628	1,522	-6.5%
Missouri	16e	16	.0%	1,858	1,874	.9%	151	80	-47.0%	2,009	1,954	-2.7%
Montana	0	0	.0%	257	254	-1.2%	0	0	.0%	257	254	-1.2%
Nebraska	0	0	.0%	468	472	.9%	0	19	.0%	468	491	4.9%
Nevada	0	0	.0%	166	175	5.4%	0	0	.0%	166	175	5.4%
New Hampshire	0	0	.0%	198	160	-19.2%	28	30	7.1%	226	190	-15.9%
New Jersey	0	0	.0%	5,453	5,304	-2.7%	157	166	5.7%	5,610	5,470	-2.5%
New Mexico	0	0	.0%	482	500	3.7%	0	0	.0%	482	500	3.7%
New York	2,905	3,218	10.8%	10,910	10,022	-8.1%	729	669	-8.2%	11,639	10,691	-8.1%
North Carolina	0	0	.0%	2,880	2,720	-5.6%	302	283	-6.3%	3,182	3,003	-5.6%
North Dakota	12	12	.0%	437	398	-8.9%	38	45	18.4%	475	443	-6.7%
Ohio	0	0	.0%	2,895	2,900	.2%	178	149	-16.3%	3,073	3,049	-.8%
Oklahoma	0	0	.0%	1,354	1,276	-5.8%	0	0	.0%	1,354	1,276	-5.8%
Oregon	0	0	.0%	1,294	1,145	-11.5%	0	0	.0%	1,294	1,145	-11.5%
Pennsylvania	0	0	.0%	5,647	5,127	-9.2%	0	0	.0%	5,647	5,127	-9.2%
Rhode Island	155	175	12.9%	366	280	-23.5%	42	33	-21.4%	408	313	-23.3%
South Carolina	150	22	-85.3%	2,628	2,534	-3.6%	0	0	.0%	2,628	2,534	-3.6%
South Dakota	0	0	.0%	497	485	-2.4%	0	15	.0%	497	500	.6%
Tennessee	0	0	.0%	2,159	2,074	-3.9%	75	69	-8.0%	2,234	2,143	-4.1%
Texas	530e	446	-15.8%	8,267	7,856	-5.0%	80	0	-100.0%	8,347	7,856	-5.9%
Utah	140	0	-100.0%	671	554	-17.4%	0	0	.0%	671	554	-17.4%
Vermont	0	0	.0%	195	196	.5%	0	0	.0%	195	196	.5%
Virginia	0	0	.0%	3,047	2,970	-2.5%	92	90	-2.2%	3,139	3,060	-2.5%
Washington	0	0	.0%	1,839	1,810	-1.6%	24	22	-8.3%	1,863	1,832	-1.7%
West Virginia	0	0	.0%	485	480	-1.0%	0	50	.0%	485	530	9.3%
Wisconsin	0	0	.0%	1,969	1,868	-5.1%	25	25	.0%	1,994	1,893	-5.1%
Wyoming	0	0	.0%	414	409	-1.2%	0	0	.0%	414	409	-1.2%
U.S. Total	4,616	4,718	2.2%	100,059	94,942	-5.1%	2,990	2,879	-3.7%	103,049	97,821	-5.1%

**Cost of Care for Persons with Mental Retardation  
In State-Operated Residential Facilities**

Table 1.7 summarizes statistics provided by states on the costs of services for persons with mental retardation residing in state-operated residential facilities. The state costs reported are average per resident per day costs. The national averages presented are the average daily per resident costs reported by states weighted by the state's average daily residential population, that is, the national average per resident cost. Every state was able to report the average daily cost for large PRF/MR for Fiscal Year 1987. Every state but West Virginia was able to provide this statistic for PRF/Other. All but two states were able to provide the per resident per day cost statistic for their small PRF/MR.

Average per day cost of care in state-operated facilities varied considerably across the United States. As usual, Alaska reported the highest cost of care in large PRF/MR (\$301.00 per day), reflecting in large part the state's high cost of living. Alaska was followed by Massachusetts (\$251.00), New York (\$238.54), Rhode Island (\$226.31), and New Hampshire (\$215.00). In all, over a quarter of the states (13) had annual per resident costs in PRF/MR at or above \$60,000 (\$165 per day). States with relatively low daily costs were Mississippi (\$60.45), South Carolina (\$83.81) and South Dakota (\$87.09). Only 5 states currently have per resident per day average costs below \$100 in their PRF/MR. From Fiscal Year 1986 to 1987 the per resident per day average cost of care in large PRF/MR increased from \$130.29 to \$149.36, the largest annual increase (15%) since 1981.

The 25 states providing for persons with mental retardation in PRF/Other and having access to the costs of care for those facilities reported an average per resident cost of \$166.03. Costs reported refer generally to the entire facility, not specifically to the population with mental retardation; 7 of the 25 states reported estimates. PRF/Other costs averaged about 10% more than those of large PRF/MR, but their 8% increase between 1986 and 1987 was less than the 15% observed in PRF/MR. Costs of care reported by 12 states for small PRF/MR averaged \$115.94 per resident per day or about 78% of those reported for large PRF/MR.

Table 1.7  
Average Per Resident Daily Cost of Care for Persons with  
Mental Retardation in State-Operated Residential Facilities  
During Fiscal Year 1987 by State

State	PRF/MR		PRF/Other
	15-	16+	
Alabama	N/A	\$130.46	N/A
Alaska	N/A	\$301.00	\$150.00
Arizona	\$101.80	\$174.94	N/A
Arkansas	N/A	\$100.17	N/A
California	N/A	\$183.83	N/A
Colorado	N/A	\$129.59	N/A
Connecticut	\$187.08	\$190.65	\$225.30
Delaware	N/A	\$106.51	N/A
D.C.	N/A	\$165.00	\$205.00e
Florida	N/A	\$117.00	\$190.00
Georgia	N/A	\$155.00e	\$182.00e
Hawaii	\$240.00	\$149.77	N/A
Idaho	N/A	\$124.36	N/A
Illinois	N/A	\$133.63	\$136.14
Indiana	N/A	\$114.04	N/A
Iowa	N/A	\$136.06	\$116.00e
Kansas	N/A	\$123.37	N/A
Kentucky	N/A	\$130.65	\$122.48
Louisiana	\$ 74.52	\$116.90	N/A
Maine	\$128.37	\$188.36	\$160.00e
Maryland	N/A	\$148.00	\$178.00
Massachusetts	\$231.00	\$251.00	\$210.63
Michigan	N/A	\$199.08	N/A
Minnesota	\$140.00e	\$158.20	N/A
Mississippi	\$ 30.00e	\$ 60.45	N/A
Missouri	\$ 81.30	\$118.45e	\$201.00e
Montana	N/A	\$143.14	N/A
Nebraska	N/A	\$108.00	\$138.00
Nevada	N/A	\$144.85	N/A
New Hampshire	N/A	\$215.00	\$159.00
New Jersey	N/A	\$117.00e	\$150.50
New Mexico	N/A	\$106.58	N/A
New York	\$129.67	\$238.54	\$166.99
North Carolina	N/A	\$155.50	\$138.02
North Dakota	DNF	\$197.40	\$106.97
Ohio	N/A	\$164.34	\$166.43
Oklahoma	N/A	\$150.00	N/A
Oregon	N/A	\$110.00	N/A
Pennsylvania	N/A	\$151.00	N/A
Rhode Island	\$128.00e	\$226.31e	\$175.95
South Carolina	\$ 77.34	\$ 83.81	N/A
South Dakota	N/A	\$ 87.09	\$ 88.87
Tennessee	N/A	\$101.72	\$155.08
Texas	DNF	\$ 99.65e	N/A
Utah	N/A	\$120.00	N/A
Vermont	N/A	\$168.09	N/A
Virginia	N/A	\$120.36	\$130.31
Washington	N/A	\$157.40	\$145.00e
West Virginia	N/A	\$106.41	DNF
Wisconsin	N/A	\$126.19	\$225.00e
Wyoming	N/A	\$ 93.00	N/A
U.S. Total	\$115.94	\$149.36	\$166.03

**PART II: CHARACTERISTICS AND MOVEMENT OF PERSONS WITH  
MENTAL RETARDATION IN LARGE STATE-OPERATED RESIDENTIAL  
FACILITIES ON JUNE 30, 1987**

**Methods**

To present a picture of the characteristics of residents of state-operated residential facilities and the movement of residents into and out of these facilities, Part II of this report describes the results of a facility survey of all large (16 or more residents) state-operated facilities for persons with mental retardation identified by the states as operating on June 30, 1987. This survey included questions on demographic, diagnostic, and functional characteristics of each facility's residents and on patterns of resident movement, including previous place of residence of new admissions and readmissions to state-operated residential facilities. Although it does not include small facilities, it does present more detail for large facilities than could be obtained directly from state offices.

This report integrates data on 271 large state-operated residential facilities gathered by the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded (Scheerenberger, 1988) in collaboration with the Center for Residential and Community Services (CRCS), and data from 32 additional large state-operated facilities gathered by the CRCS itself. Data collection was carried out primarily by mail with telephone follow-up to nonrespondents. Three instruments were used in this survey. They included a long form (22 items) initially mailed to all facilities, a short form (10 items) used in telephone interviews with all nonrespondents to the long-form, and a minimum data set of 5 questions on current resident population gathered in a final telephone follow-up to three facilities. Responses were obtained from 100% of facilities known to be eligible. Item response rates ranged from facilities representing 80% to 100% of the population of persons with mental retardation in large state-operated facilities.

**Findings and Discussion**

The most recent statistics on the number of state-operated residential facilities and persons with mental retardation living in them were presented in Part I of this report. Part II examines the

characteristics and movement of the residents of those facilities, based on a survey of state-operated facilities in operation on June 30, 1987 with comparable national data from earlier years.

### Characteristics of Residents

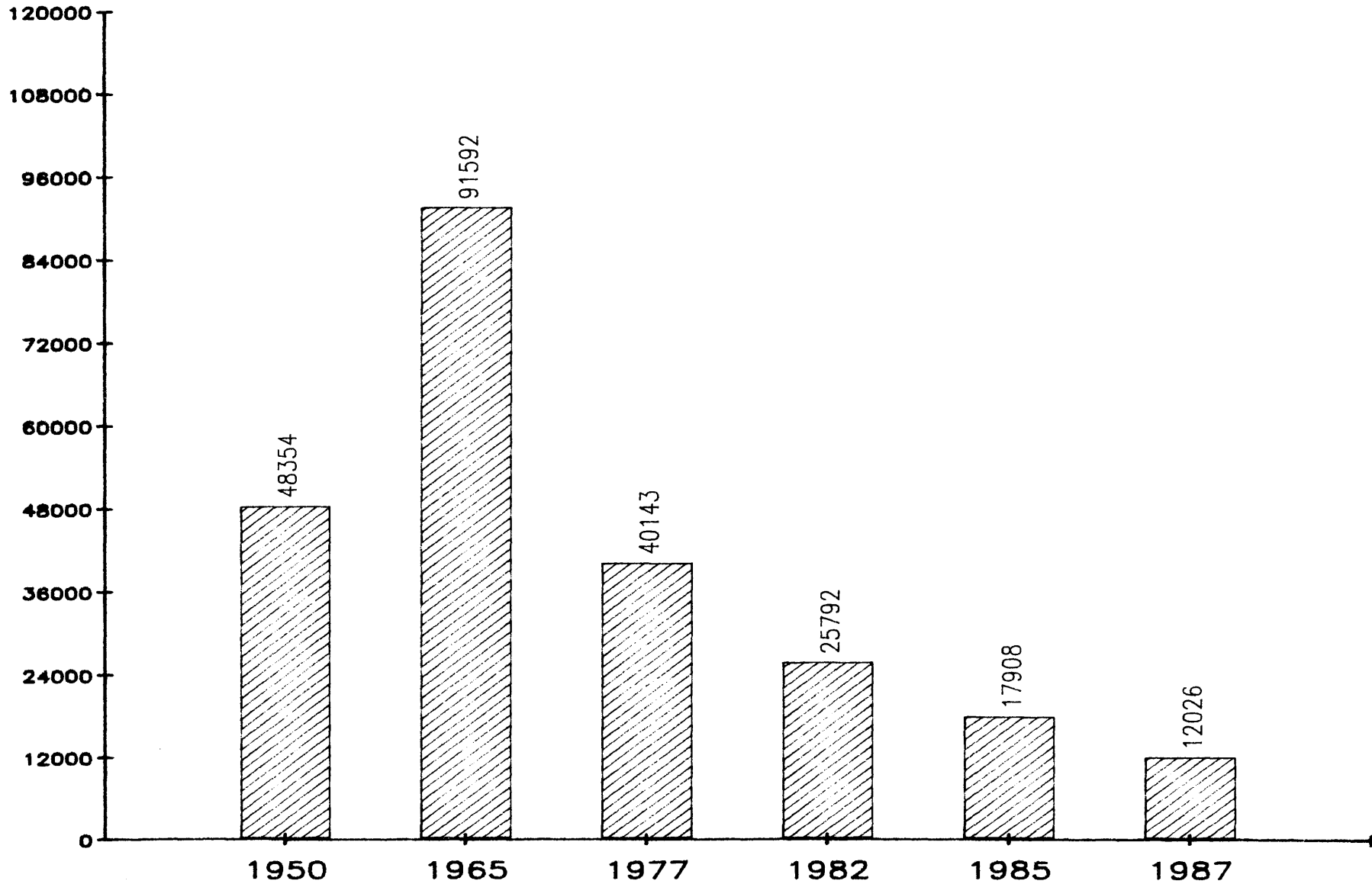
*Age of residents.* Table 2.1 provides a summary of age, diagnostic, and functional characteristics of residents of large state-operated residential facilities on June 30 of 1977, 1982, and 1987. Age brackets for 1982 and 1987 were collapsed to be comparable to the data from 1977. With respect to age, the shift to an older population is evident over the 10-year period. The proportion of children and youth (birth to 21 years) declined from 35.8% in 1977 to 12.7% in 1987 while the elderly (63+ years) increased from 3.7% to 6.0%. Figure 1 clearly shows the reduction in numbers of children and youth in large state facilities from 1965 to 1987.

Table 2.1  
Characteristics of Residents of Large State-Operated  
Residential Facilities on June 30: 1977, 1982, and 1987

Characteristic	1977 (N=151,498)	1982 (N=118,982)	1987 (N=94,942)
<b>Age</b>			
0-21	35.8%	22.0%	12.7%
22-39	41.3%	50.2%	54.1%
40-62	19.2%	22.9%	27.3%
63+	3.7%	5.0%	6.0%
<b>Level of Retardation</b>			
Border/Mild	9.3%	7.0%	7.2%
Moderate	16.0%	12.9%	9.8%
Severe	27.9%	24.3%	20.0%
Profound	46.9%	55.8%	63.0%
<b>Functional Limitations</b>			
Cannot walk	23.3%	25.5%	29.5%
Cannot talk	43.5%	49.1%	54.8%
Not toilet-trained	34.1%	38.0%	45.5%



Figure 1  
Children and Youth (0-21) in Large State-Operated  
Facilities for Persons with Mental Retardation/  
Developmental Disabilities

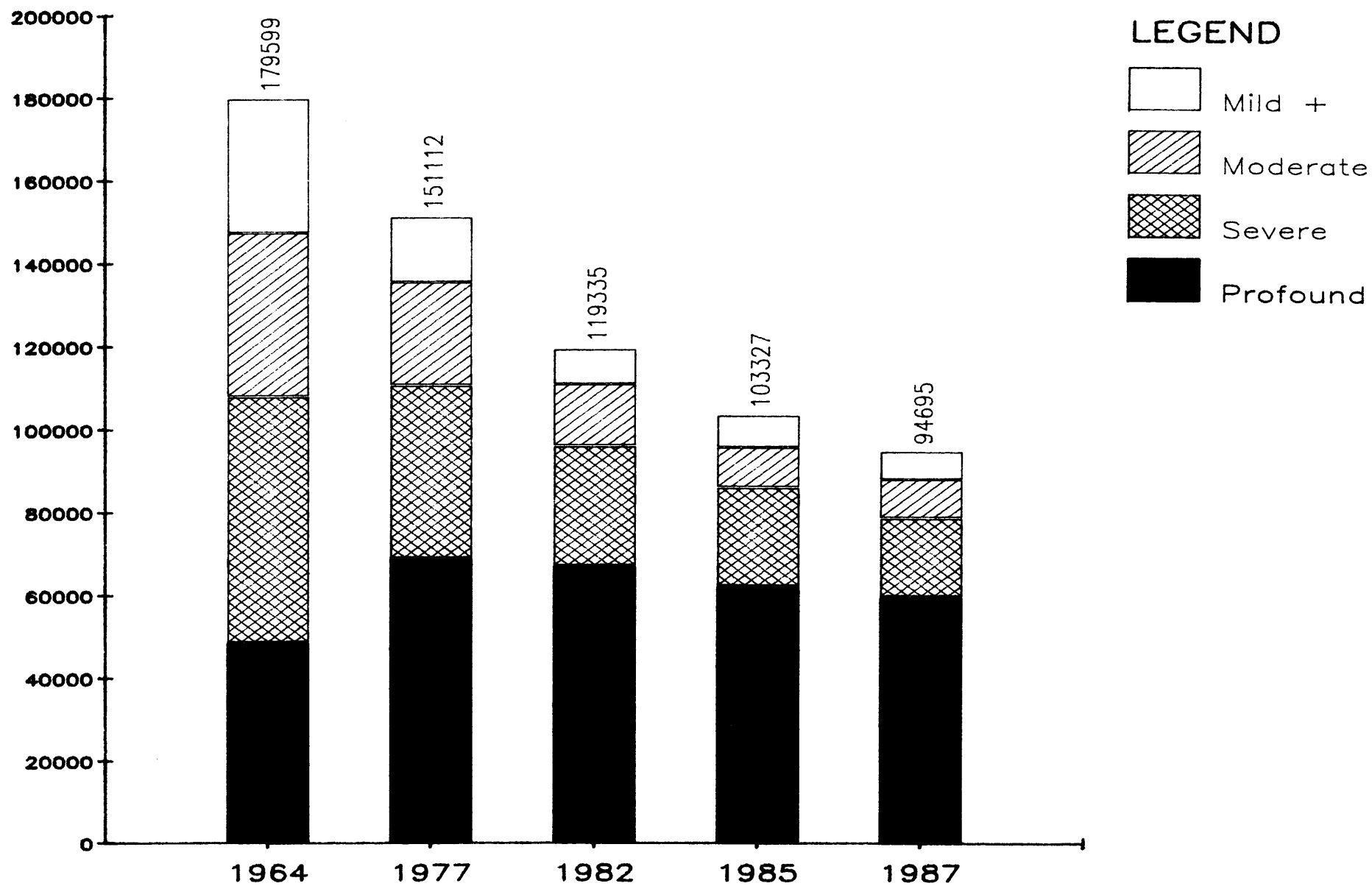


*Diagnostic classification of residents.* Table 2.1 also provides a breakdown of the percentage of residents in state-operated residential facilities by their diagnosed level of retardation. These statistics show the continuing reduction in the percentage of residents with mild or moderate retardation being served in large state-operated facilities as the total population served in those facilities declines. At the same time the percentage of residents who were severely or profoundly mentally retarded increased from 74.8% in 1977 to 83.0% in 1987. The increasing percentage of persons with severe or profound mental retardation is accounted for entirely by a sharp increase in the group with profound retardation. Actually, the proportion of state institution populations with severe retardation has diminished as much as the categories with less impairment. On the other hand as is shown well in Figure 2, while deinstitutionalization has greatly reduced the number of institutionalized persons who are mildly, moderately, and severely retarded, the change for persons with profound mental retardation has been much more limited.

*Functional characteristics.* Table 2.1 also shows the percentage of residents of large state-operated residential facilities reported to have important functional limitations. Each facility was asked to report the number of residents who "cannot walk without assistance," who "cannot communicate verbally," and who "are not toilet trained." As would be expected based on the increasing prevalence of profound retardation in large state facilities, the proportion of the population of those facilities reported to exhibit limitations in independence and self-care has also increased over the 10-year period. This increase was greater between 1982 and 1987 than between 1977 and 1982. While not directly a "cause" of the increasing proportion of serious functional limitations among large state facility residents, clearly there is a strong association between the increased prevalence of these limitations and the increasing proportion of large state facility residents with profound mental retardation (from 46.9% to 63.0% between 1977 and 1987).

*Age by level of retardation.* A cross tabulation of the percentage of residents by age and level of retardation presented in Table 2.2 gives a more detailed picture of the populations of large facilities. It was noted earlier that 83% of residents of large state institutions on June 30, 1987 were reported to

Figure 2  
Level of Retardation of Residents of Large  
State-Operated Residential Facilities



be severely or profoundly retarded. Table 2.2 presents evidence of a clear relationship between age and level of retardation among state institution populations. For example, in large state facilities, there is a steadily decreasing proportion of persons with profound retardation among residents in older age groups, ranging from 82.5% of young children to only 42.0% of persons 63 and older. Conversely, the proportion of residents who are mildly and moderately retarded ranges from 8.3% of those between birth and 4 years to 26.3% of those 63 years or older. Clearly the tendency to retain older persons in large state facilities, even when their level of impairment is similar to or even less severe than the groups being most actively discharged, is leading to an increased average age in state institutions. So, too, is the increasing median age of new admission to state institutions. In 1978 a sample of 75 state institutions reported a median age of 19 years for new admissions (Lakin, Hill, Hauber, Bruininks, & Heal, 1983), while in this study estimated median age of new admissions was 28 years for Fiscal Year 1987.

Table 2.2  
Age by Level of Retardation: Residents in Large State-Operated  
Residential Facilities on June 30, 1987

Level of Retardation	Chronological Age							
	0-4	5-9	10-14	15-21	22-39	40-54	55-62	63+
Mild	6.8%	2.3%	5.6%	8.7%	6.7%	7.1%	8.0%	12.4%
Moderate	1.5%	3.7%	6.7%	9.7%	8.7%	11.4%	12.3%	13.9%
Severe	9.2%	11.6%	12.8%	16.7%	17.8%	23.0%	27.5%	31.7%
Profound	82.5%	82.4%	74.9%	64.9%	66.8%	58.5%	52.2%	42.0%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

#### State-by-State Resident Characteristics

*Age distribution of residents by state.* Table 2.3 presents the state-by-state age distribution of residents in large state-operated facilities on June 30, 1987. This table shows clearly the great variability among states in the ages of persons in their large state-operated facilities, although in interpreting these

Table 2.3  
Age of Residents of Large State-Operated Residential Facilities by State on June 30, 1987

State	Age Level								Total
	0-4	5-9	10-14	15-21	22-39	40-54	55-62	63+	
Alabama	.0%	.0%	.8%	7.7%	51.5%	25.8%	7.0%	7.1%	100.0%
Alaska	.0%	.0%	1.4%	.0%	81.1%	9.5%	2.7%	5.4%	100.0%
Arizona	.0%	.0%	.3%	5.6%	69.5%	22.5%	1.3%	.7%	100.0%
Arkansas	.0%	1.3%	5.1%	18.6%	62.0%	12.4%	.5%	.2%	100.0%
California	1.5%	1.6%	2.3%	11.1%	60.4%	15.7%	3.7%	3.7%	100.0%
Colorado	.8%	1.6%	2.1%	12.9%	64.1%	15.0%	2.3%	1.2%	100.0%
Connecticut	.0%	.0%	.2%	2.9%	47.2%	31.9%	9.7%	8.1%	100.0%
Delaware	.0%	.8%	2.9%	9.4%	49.5%	19.6%	11.3%	6.5%	100.0%
D. C.	.0%	.0%	.0%	5.5%	65.0%	17.5%	5.8%	6.2%	100.0%
Florida	.1%	.2%	.8%	7.8%	61.5%	23.2%	3.6%	3.0%	100.0%
Georgia	.5%	1.2%	3.8%	11.7%	53.1%	21.6%	4.6%	3.6%	100.0%
Hawaii	.0%	.4%	3.4%	6.1%	61.7%	18.2%	5.7%	4.6%	100.0%
Idaho	.0%	.8%	4.9%	7.2%	54.3%	23.4%	5.7%	3.8%	100.0%
Illinois	.0%	.3%	1.1%	9.3%	58.6%	20.6%	5.3%	4.8%	100.0%
Indiana	.0%	.0%	.6%	9.3%	54.1%	28.3%	5.5%	2.3%	100.0%
Iowa	.0%	.7%	1.4%	9.5%	63.6%	18.3%	3.2%	3.4%	100.0%
Kansas	.9%	3.2%	8.8%	18.3%	54.6%	10.4%	2.5%	1.4%	100.0%
Kentucky	.0%	.0%	3.9%	15.0%	65.0%	15.8%	.4%	.0%	100.0%
Louisiana	.8%	2.9%	5.5%	15.1%	48.6%	17.9%	4.7%	4.6%	100.0%
Maine	.3%	.7%	3.7%	8.6%	49.5%	21.3%	11.0%	5.0%	100.0%
Maryland	.4%	1.6%	2.9%	10.1%	62.0%	16.9%	3.7%	2.4%	100.0%
Massachusetts	.0%	.0%	.0%	2.3%	46.4%	30.7%	9.2%	11.4%	100.0%
Michigan	.1%	.5%	1.3%	7.4%	55.6%	19.9%	8.8%	6.5%	100.0%
Minnesota	.0%	.0%	.3%	3.2%	59.7%	26.2%	5.8%	4.9%	100.0%
Mississippi	.2%	1.7%	5.1%	14.1%	47.3%	19.0%	5.8%	6.8%	100.0%
Missouri	.5%	.9%	2.3%	9.9%	58.0%	19.8%	4.5%	4.2%	100.0%
Montana	.0%	.0%	.4%	7.0%	62.6%	23.9%	3.5%	2.7%	100.0%
Nebraska	.6%	1.5%	1.7%	7.5%	53.8%	22.6%	7.2%	5.1%	100.0%
Nevada	.0%	1.7%	6.9%	20.7%	60.3%	9.8%	.6%	.0%	100.0%
New Hampshire	.0%	.0%	.0%	1.8%	51.5%	23.9%	9.2%	13.5%	100.0%
New Jersey	.0%	.1%	1.3%	6.9%	52.0%	21.3%	7.9%	10.5%	100.0%
New Mexico	.6%	2.0%	3.0%	16.4%	58.7%	15.4%	3.0%	1.0%	100.0%
New York	.1%	.3%	.9%	6.6%	44.9%	24.0%	12.0%	11.1%	100.0%
North Carolina	.0%	.2%	.7%	7.3%	60.9%	22.4%	4.4%	4.1%	100.0%
North Dakota	1.6%	2.2%	3.1%	7.2%	46.9%	21.3%	7.8%	10.0%	100.0%
Ohio	.0%	.0%	.7%	5.4%	58.2%	24.9%	5.5%	5.4%	100.0%
Oklahoma	.0%	2.2%	11.3%	35.2%	49.4%	1.7%	.2%	.0%	100.0%
Oregon	.0%	.4%	1.8%	11.4%	63.6%	18.2%	3.1%	1.6%	100.0%
Pennsylvania	.0%	.0%	.3%	3.9%	54.0%	24.5%	8.1%	9.2%	100.0%
Rhode Island	.0%	.0%	.0%	3.1%	51.9%	25.8%	8.1%	11.2%	100.0%
South Carolina	.2%	1.4%	5.2%	12.7%	49.3%	21.6%	5.4%	4.1%	100.0%
South Dakota	.9%	1.8%	3.5%	6.4%	45.3%	25.8%	5.5%	10.9%	100.0%
Tennessee	.3%	1.9%	3.3%	9.1%	52.7%	21.4%	6.4%	5.0%	100.0%
Texas	.0%	.8%	2.6%	12.5%	54.5%	19.2%	5.1%	5.4%	100.0%
Utah	.2%	.6%	4.8%	16.6%	60.5%	15.6%	1.1%	.6%	100.0%
Vermont	.0%	.0%	.0%	6.1%	52.6%	25.0%	6.1%	10.2%	100.0%
Virginia	.1%	.6%	2.2%	8.9%	53.1%	20.9%	6.1%	8.2%	100.0%
Washington	.1%	1.1%	3.1%	13.6%	52.2%	20.3%	8.3%	1.2%	100.0%
West Virginia	.0%	.4%	.6%	8.6%	62.1%	24.9%	2.7%	.6%	100.0%
Wisconsin	.5%	2.3%	3.4%	11.8%	61.8%	15.9%	3.2%	1.2%	100.0%
Wyoming	.9%	2.8%	5.6%	10.1%	37.0%	18.0%	8.2%	17.3%	100.0%
U.S. Total	.2%	.8%	2.2%	9.5%	54.1%	21.1%	6.2%	6.0%	100.0%

data the large differences in the size of institution populations in various states must be recognized. While nationally only 3.2% of large state facility residents are under 15 years old, states vary in the proportion of residents under 15 years--from 13.5% in Oklahoma and 12.9% in Kansas to less than 1% in Alabama, Arizona, Connecticut, District of Columbia, Indiana, Massachusetts, Minnesota, Montana, New Hampshire, North Carolina, Ohio, Pennsylvania, Rhode Island, and Vermont. Three states had over twice the average national percentage (12.7%) of total residents in the age group 21 and younger (Oklahoma, 48.7%; Kansas, 31.2%; Nevada, 29.3%).

With respect to older residents, while the national average proportion of residents 55 years and older was 12.2%, four states reported percentages of more than 20% (Wyoming, 25.5%; New York, 23.1%; New Hampshire, 22.7%; Massachusetts, 20.6%). At the other extreme 4 states reported less than 1% of their large state facility residents as being 55 years and older (Arkansas, .7%; Nevada, .6%; Kentucky, .4%; Oklahoma, .2%). It is also notable that 54.1% of all large state facility residents on June 30, 1987 fell in the age range of 22-39 years and that in all but 12 states most residents were in that age group. While 22- to 39-year-olds constitute a demographic bulge in the U.S. population, on June 30, 1985 they represented only about 30.3% of the total U.S. population.

*Level of retardation of residents by state.* Table 2.4 presents the state-by-state distribution of residents of all state-operated residential facilities. Nationally, 63% of state facility residents are persons with profound retardation. But there is an equally notable tendency for states to vary amongst themselves in this regard. For example, on June 30, 1987, persons with profound retardation made up less than 50% of the state institution populations in only five states (Alaska, 44.6%; Massachusetts, 41.6%; Missouri, 45.0%; Nevada, 46.0%; and Vermont, 48.5%). This compares with 9 states on June 30, 1985. At the other extreme persons with profound mental retardation made up more than 70% of the state institution population in 12 states (California, 71.8%; Colorado, 70.3%; District of Columbia, 85.2%; Hawaii, 78.0%, Idaho, 70.2%; Kansas, 71.6%; Maryland, 78.5%; Montana, 71.0%; Nebraska, 74.0%; North Dakota, 72.5%; South Dakota, 79.7%; and Utah, 71.0%). This compares with seven states on June 30, 1985.

Table 2.4  
Level of Retardation of Residents of Large State-Operated  
Residential Facilities on June 30, 1987

State	Level of Retardation				Total
	Mild	Moderate	Severe	Profound	
Alabama	4.7%	8.0%	19.1%	68.2%	100.0%
Alaska	20.3%	8.1%	27.0%	44.6%	100.0%
Arizona	4.0%	14.2%	27.2%	54.6%	100.0%
Arkansas	4.5%	15.3%	26.7%	53.5%	100.0%
California	7.8%	7.0%	13.3%	71.8%	100.0%
Colorado	6.6%	9.2%	13.9%	70.3%	100.0%
Connecticut	6.9%	12.5%	20.9%	59.7%	100.0%
Delaware	6.8%	12.0%	17.8%	63.4%	100.0%
D. C.	4.3%	2.3%	8.2%	85.2%	100.0%
Florida	12.2%	11.1%	12.9%	63.8%	100.0%
Georgia	5.3%	10.6%	23.1%	61.0%	100.0%
Hawaii	1.9%	8.0%	12.1%	78.0%	100.0%
Idaho	1.5%	7.6%	20.8%	70.2%	100.0%
Illinois	5.6%	11.2%	18.3%	65.0%	100.0%
Indiana	16.5%	11.6%	21.2%	50.7%	100.0%
Iowa	11.0%	19.7%	19.2%	50.2%	100.0%
Kansas	7.0%	8.2%	13.2%	71.6%	100.0%
Kentucky	4.7%	9.4%	30.6%	55.3%	100.0%
Louisiana	5.6%	7.0%	21.6%	65.8%	100.0%
Maine	4.0%	4.7%	27.2%	64.1%	100.0%
Maryland	1.9%	5.4%	14.1%	78.5%	100.0%
Massachusetts	11.4%	16.6%	30.4%	41.6%	100.0%
Michigan	7.1%	9.0%	18.8%	65.1%	100.0%
Minnesota	7.7%	9.4%	20.2%	62.7%	100.0%
Mississippi	7.4%	12.5%	23.3%	56.8%	100.0%
Missouri	12.9%	13.9%	28.2%	45.0%	100.0%
Montana	7.7%	16.2%	5.0%	71.0%	100.0%
Nebraska	5.5%	7.2%	13.2%	74.0%	100.0%
Nevada	13.2%	18.4%	22.4%	46.0%	100.0%
New Hampshire	3.1%	8.6%	25.2%	63.2%	100.0%
New Jersey	8.7%	10.6%	19.6%	61.1%	100.0%
New Mexico	7.2%	7.6%	21.2%	64.1%	100.0%
New York	6.8%	7.8%	20.9%	64.4%	100.0%
North Carolina	3.2%	7.6%	19.4%	69.8%	100.0%
North Dakota	7.5%	5.6%	14.4%	72.5%	100.0%
Ohio	10.9%	14.7%	17.2%	57.2%	100.0%
Oklahoma	7.8%	13.6%	20.3%	58.3%	100.0%
Oregon	8.5%	10.4%	13.4%	67.8%	100.0%
Pennsylvania	3.7%	7.8%	24.2%	64.3%	100.0%
Rhode Island	11.2%	8.4%	14.3%	66.2%	100.0%
South Carolina	6.6%	7.1%	17.0%	69.4%	100.0%
South Dakota	4.6%	2.6%	13.1%	79.7%	100.0%
Tennessee	6.3%	8.8%	16.1%	68.9%	100.0%
Texas	4.1%	9.7%	24.8%	61.5%	100.0%
Utah	6.9%	7.3%	14.9%	71.0%	100.0%
Vermont	5.6%	13.3%	32.7%	48.5%	100.0%
Virginia	5.7%	10.9%	21.4%	62.0%	100.0%
Washington	12.4%	6.0%	17.9%	63.7%	100.0%
West Virginia	9.9%	14.2%	18.1%	57.8%	100.0%
Wisconsin	3.3%	6.5%	22.2%	68.0%	100.0%
Wyoming	19.4%	11.9%	11.9%	56.7%	100.0%
U.S. Total	7.2%	9.8%	20.0%	63.0%	100.0%

Related variability was noted among states in the proportions of their institution populations made up by persons with mild and moderate retardation. Nationally 17% of state institution residents were mildly or moderately mentally retarded. Notably above the national average were five states with over 25% of their state institution populations made up of persons with mild (including "borderline") or moderate mental retardation (Alaska, 28.4%; Indiana, 28.1%; Iowa, 30.7%; Massachusetts, 28.0%; Missouri, 26.8%; Nevada, 31.6%; Ohio, 25.6%; Wyoming, 31.3%). At the other extreme in the tendency to use large state facilities as placements for persons with mild or moderate retardation were four states with less than 10% of the state facility population being mildly or moderately mentally retarded (D.C., 6.6%; Hawaii, 9.9%; Idaho, 9.1%; Maine, 8.7%; Maryland, 7.3%; South Dakota, 7.2%, Wisconsin 9.8%). With respect to borderline and mildly retarded persons only, the states with the highest proportions within their institution populations were Alaska (20.3%), Florida (12.2%), Indiana (16.5%), Iowa (11.0%), Massachusetts (11.4%), Missouri (12.9%), Nevada (13.2%), Rhode Island (11.2%), Washington (12.4%) and Wyoming (19.4%).

Trends in individual state data over the past ten years consistently show decreased numbers of persons with mild, moderate, and severe mental retardation with generally stable to slightly decreasing numbers of persons with profound mental retardation in large public residential facilities. Again, caution must be used in making direct comparisons between states on the proportions of their residential populations in the different categories of mental retardation without also considering the total size and relative size (e.g., residents per 100,000 of the state's population) of large state facilities.

#### Resident Movement

*Net movement.* Table 2.5 presents summary statistics on resident movement into and out of state-operated residential facilities for persons with mental retardation during Fiscal Year 1987. The statistics here are facility based rather than state aggregates. The term "new admissions" refers to persons newly admitted to a specific facility, and the term "readmissions" refers to residents readmitted to a specific facility after previously having resided in the same facility. Among large state facilities outmovement was greater than inmovement. During Fiscal Year 1987, large state facilities operating on



Table 1.3  
Average Daily Population of Persons with Mental Retardation in State-Operated Residential  
Facilities per 100,000 of the General Population in Fiscal Year 1987 by State

State	7/1/87 State Pop.	Average Daily Residents			Placements/100,000			
		1-15 beds	16+ beds	PRF/Other	1-15 beds	16+ beds	PRF/Other	16+ and PRF/Other
Alabama	40.86	0	1,315e	0	.00	32.18	.00	32.18
Alaska	5.44	0	59	3	.00	10.85	.55	11.40
Arizona	34.32	137	423	0	3.99	12.33	.00	12.33
Arkansas	23.86	0	1,333	0	.00	55.87	.00	55.87
California	275.31	0	6,818	0	.00	24.76	.00	24.76
Colorado	33.08	0	912	0	.00	27.57	.00	27.57
Connecticut	32.12	364	2,309	130	11.33	71.89	4.05	75.93
Delaware	6.41	0	383	0	.00	59.75	.00	59.75
D.C.	6.21	0	258	150	.00	41.55	24.15	65.70
Florida	119.62	0	2,038	130e	.00	17.04	1.09	18.12
Georgia	62.44	0	2,121	22	.00	33.97	.35	34.32
Hawaii	10.81	8	272	0	.74	25.16	.00	25.16
Idaho	10.06	0	279	0	.00	27.73	.00	27.73
Illinois	115.69	0	4,468	30	.00	38.62	.26	38.88
Indiana	55.18	0	2,082	0	.00	37.73	.00	37.73
Iowa	28.26	0	1,113	71e	.00	39.38	2.51	41.90
Kansas	24.69	0	1,223	0	.00	49.53	.00	49.53
Kentucky	37.33	0	671	155	.00	17.97	4.15	22.13
Louisiana	45.02	31	2,938	0	.69	65.26	.00	65.26
Maine	11.84	25	291	16	2.11	24.58	1.35	25.93
Maryland	45.32	10	1,518	94	.22	33.50	2.07	35.57
Massachusetts	58.38	24e	3,401	318e	.41	58.26	5.45	63.70
Michigan	91.91	0	1,735e	0	.00	18.88	.00	18.88
Minnesota	42.43	28	1,706	0	.66	40.21	.00	40.21
Mississippi	26.43	182e	1,522e	0	6.89	57.59	.00	57.59
Missouri	51.00	13	1,825	78e	.25	35.78	1.53	37.31
Montana	8.14	0	256	0	.00	31.45	.00	31.45
Nebraska	15.95	0	468	19e	.00	29.34	1.19	30.53
Nevada	9.93	0	170	0	.00	17.12	.00	17.12
New Hampshire	10.58	0	185	32	.00	17.49	3.02	20.51
New Jersey	76.87	0	5,458	161e	.00	71.00	2.09	73.10
New Mexico	15.18	0	486	0	.00	32.02	.00	32.02
New York	177.59	3,062	9,671	682	17.24	54.46	3.84	58.30
North Carolina	64.22	0	2,802	264e	.00	43.63	4.11	47.74
North Dakota	6.74	11	412e	31	1.63	61.13	4.60	65.73
Ohio	107.67	0	2,889	149e	.00	26.83	1.38	28.22
Oklahoma	32.95	0	1,192	0	.00	36.18	.00	36.18
Oregon	27.16	0	1,157	0	.00	42.60	.00	42.60
Pennsylvania	118.74	0	5,004	0	.00	42.14	.00	42.14
Rhode Island	9.82	175e	300e	33	17.82	30.55	3.36	33.91
South Carolina	34.20	22	2,500	0	.64	73.10	.00	73.10
South Dakota	7.07	0	496	15e	.00	70.16	2.12	72.28
Tennessee	48.48	0	2,081	72	.00	42.92	1.49	44.41
Texas	169.37	450e	7,915	0	2.66	46.73	.00	46.73
Utah	16.94	0	540e	0	.00	31.88	.00	31.88
Vermont	5.47	0	194	0	.00	35.47	.00	35.47
Virginia	58.83	0	2,892	85	.00	49.16	1.44	50.60
Washington	45.14	0	1,825e	22e	.00	40.43	.49	40.92
West Virginia	19.02	0	479	50e	.00	25.18	2.63	27.81
Wisconsin	47.91	0	1,900	25e	.00	39.66	.52	40.18
Wyoming	5.06	0	411	0	.00	81.23	.00	81.23
U.S. Total	2,433.05	4,542	94,696	2,837	1.87	38.92	1.17	40.09

**Persons with Mental Retardation on the Rolls of State-Operated Facilities at the Beginning and End of the Year**

Tables 1.4, 1.5, and 1.6 present statistics on the number of persons with mental retardation on the rolls of state-operated facilities on the last day of Fiscal Year 1986 and the last day of Fiscal Year 1987. Table 1.4 presents statistics on the number of persons with mental retardation on the rolls of small PRF/MR (15 or fewer residents), large PRF/MR (16 or more residents), and PRF/Other on June 30, 1986. Table 1.5 presents the same statistics for the three types of state-operated facilities on June 30, 1987. Table 1.6 presents statistics on the net change in the number of residents with mental retardation in large and small PRF/MR and PRF/Other from June 30, 1986 to June 30, 1987.

As shown most clearly in Table 1.6, there was a consistent tendency for states to reduce the number of persons with mental retardation on the rolls of large state-operated facilities in Fiscal Year 1987. Overall, nationally there was a decrease of 5.1% in the on-rolls population of persons with mental retardation in state-operated facilities from the beginning to the end of Fiscal Year 1987. Only 7 states showed a net increase in large state facility population over that period. Some of the increase in these states was a result of the 1987 survey request for data on all PRF/Other serving one or more persons (1986 definition was 10 or more) with mental retardation. The state showing the greatest effect of the new definition was West Virginia. It went from 0 PRF/Other in 1986 to 8 PRF/Other with 50 residents with mental retardation in 1987, showing a 9% increase in state institution populations while PRF/MR population actually decreased by 1%. Six states showed a net reduction of more than 10% in the number of persons with mental retardation in their large state-operated facilities from June 30, 1986 to June 30, 1987. The largest decreases were in Maryland (32.1%) and Rhode Island (23.3%). The number of residents in small PRF/MR increased by about 2% during Fiscal Year 1986. This increase would have been substantially greater without decreases of 140 and 128 residents in small state-operated facilities in Utah and South Carolina, respectively, in both instances the result of a change from state operation of those facilities to nonstate operation. PRF/Other populations were indicated to be about 4% less nationally, even with the definition change noted above.

Table 1.4  
Persons with Mental Retardation on the Rolls of State-Operated  
Residential Facilities at the End of Fiscal Year 1986 by State

State	PRF/MR		PRF/Other	Total
	15- beds	16+ beds		
Alabama	0	1,333	0	1,333
Alaska	0	59	0	59
Arizona	66e	429	0	495e
Arkansas	0	1,359	97	1,456
California	0	6,902	0	6,902
Colorado	0	969	0	969
Connecticut	347	2,438	120	2,905
Delaware	0	394	0	394
D.C.	0	285	134e	419e
Florida	0	2,094	112e	2,206
Georgia	0	2,127	0	2,127
Hawaii	8	279	0	287
Idaho	0	287	0	287
Illinois	0	4,475	37	4,512
Indiana	0	2,302	0	2,302
Iowa	0	1,143	0	1,143
Kansas	0	1,345	0	1,345
Kentucky	0	678	179	857
Louisiana	34	3,042	37	3,113
Maine	24	304	13	341
Maryland	13	2,203	90	2,306
Massachusetts	0	3,438	250	3,688
Michigan	0	1,930	0	1,930
Minnesota	0	1,780	0	1,780
Mississippi	216	1,628e	0	1,844e
Missouri	16e	1,858	151	2,025
Montana	0	257	0	257
Nebraska	0	468	0	468
Nevada	0	166	0	166
New Hampshire	0	198	28	226
New Jersey	0	5,453	157	5,610
New Mexico	0	482	0	482
New York	2,905	10,910	729	14,544
North Carolina	0	2,880	302	3,182
North Dakota	12	437	38	487
Ohio	0	2,895	178	3,073
Oklahoma	0	1,354	0	1,354
Oregon	0	1,294	0	1,294
Pennsylvania	0	5,647	0	5,647
Rhode Island	155	366	42	563
South Carolina	150	2,628	0	2,778
South Dakota	0	497	0	497
Tennessee	0	2,159	75	2,234
Texas	530e	8,267	80	8,877
Utah	140	671	0	811
Vermont	0	195	0	195
Virginia	0	3,047	92	3,139
Washington	0	1,839	24	1,863
West Virginia	0	485	0	485
Wisconsin	0	1,969	25	1,994
Wyoming	0	414	0	414
U.S. Total	4,616	100,059	2,990	107,665

Table 1.5  
 Persons with Mental Retardation on the Rolls of State-Operated  
 Residential Facilities at the End of Fiscal Year 1987 by State

State	PRF/MR		PRF/Other	Total
	15- beds	16+ beds		
Alabama	0	1,308	0	1,308
Alaska	0	60	3	63
Arizona	134	423	0	557
Arkansas	0	1,337	0	1,337
California	0	6,880	0	6,880
Colorado	0	901	0	901
Connecticut	383	2,298	129	2,810
Delaware	0	383	0	383
D.C.	0	258	150	408
Florida	0	2,061	136	2,197
Georgia	0	2,089	14	2,103
Hawaii	8	260	0	268
Idaho	0	263	0	263
Illinois	0	4,436	23	4,459
Indiana	0	2,270	0	2,270
Iowa	0	1,057	71	1,128
Kansas	0	1,298	0	1,298
Kentucky	0	686	168	854
Louisiana	33	2,889	0	2,922
Maine	25	290	16	331
Maryland	12	1,452	106	1,570
Massachusetts	24	3,367	318	3,709
Michigan	0	1,658	0	1,658
Minnesota	28	1,653	0	1,681
Mississippi	182	1,522	0	1,704
Missouri	16	1,874	80	1,970
Montana	0	254	0	254
Nebraska	0	472	19e	491
Nevada	0	175	0	175
New Hampshire	0	160	30	190
New Jersey	0	5,304	166	5,470
New Mexico	0	500	0	500
New York	3,218	10,022	669	13,909
North Carolina	0	2,720	283	3,003
North Dakota	12	398	45	455
Ohio	0	2,900	149	3,049
Oklahoma	0	1,276	0	1,276
Oregon	0	1,145	0	1,145
Pennsylvania	0	5,127	0	5,127
Rhode Island	175	280	33	488
South Carolina	22	2,534	0	2,556
South Dakota	0	485	15e	500
Tennessee	0	2,074	69	2,143
Texas	446e	7,856	0	8,302
Utah	0	554	0	554
Vermont	0	196	0	196
Virginia	0	2,970	90	3,060
Washington	0	1,810	22	1,832
West Virginia	0	480	50	530
Wisconsin	0	1,868	25	1,893
Wyoming	0	409	0	409
U.S. Total	4,718	94,942	2,879	102,539

Table 2.5  
 Movement of Residents in Large State-Operated  
 Residential Facilities in Fiscal Year 1987  
 as Percent of June 30, 1987 Population on Roll

State	New Admissions	Re-Admissions	Releases	Deaths
Alabama	8.5%	.7%	7.9%	1.5%
Alaska	27.4%	3.2%	6.5%	1.6%
Arizona	7.8%	2.3%	8.8%	1.0%
Arkansas	6.0%	.8%	8.8%	1.0%
California	7.0%	2.1%	9.5%	2.4%
Colorado	4.5%	1.9%	11.7%	2.4%
Connecticut	1.5%	.5%	6.6%	1.9%
Delaware	1.6%	.5%	2.4%	2.1%
D. C.	.0%	NA	3.1%	1.5%
Florida	5.7%	1.4%	6.7%	1.1%
Georgia	3.1%	1.8%	5.2%	1.3%
Hawaii	.0%	1.5%	3.9%	3.1%
Idaho	2.3%	.8%	8.4%	1.9%
Illinois	2.8%	2.0%	6.1%	1.3%
Indiana	3.8%	2.3%	9.5%	.8%
Iowa	1.6%	3.5%	11.6%	.8%
Kansas	5.3%	4.2%	10.4%	1.3%
Kentucky	NA	NA	NA	NA
Louisiana	3.4%	.6%	5.9%	1.3%
Maine	16.9%	32.2%	33.5%	NA
Maryland	8.3%	1.5%	19.4%	2.1%
Massachusetts	1.1%	.5%	4.2%	1.4%
Michigan	4.7%	6.1%	22.4%	2.6%
Minnesota	2.3%	2.3%	12.7%	1.0%
Mississippi	3.1%	.4%	6.3%	1.5%
Missouri	6.8%	3.1%	7.4%	.6%
Montana	6.2%	2.7%	5.4%	1.9%
Nebraska	.6%	3.6%	2.3%	1.1%
Nevada	20.7%	17.2%	33.9%	.6%
New Hampshire	1.5%	.6%	19.9%	2.4%
New Jersey	2.6%	.6%	4.3%	1.6%
New Mexico	11.0%	1.6%	6.9%	2.9%
New York	5.3%	1.7%	9.2%	2.5%
North Carolina	3.7%	2.3%	5.7%	1.1%
North Dakota	1.6%	.8%	32.0%	.6%
Ohio	5.5%	2.5%	6.3%	.8%
Oklahoma	2.9%	1.1%	10.1%	.6%
Oregon	1.9%	2.8%	20.5%	1.3%
Pennsylvania	2.4%	.8%	9.8%	1.5%
Rhode Island	2.2%	.6%	19.6%	2.6%
South Carolina	2.2%	1.5%	7.9%	1.5%
South Dakota	6.9%	3.7%	15.9%	1.9%
Tennessee	3.2%	1.2%	8.4%	1.4%
Texas	1.4%	.7%	7.3%	1.6%
Utah	2.6%	3.4%	23.7%	1.5%
Vermont	1.5%	1.0%	.5%	2.0%
Virginia	3.4%	2.4%	7.1%	1.6%
Washington	3.3%	2.6%	4.3%	1.1%
West Virginia	14.8%	6.6%	16.7%	1.7%
Wisconsin	2.0%	1.2%	6.4%	1.5%
Wyoming	2.6%	3.8%	5.2%	1.9%
U.S. Total	3.9%	1.8%	8.5%	1.6%

Note. Data represent movement into or out of specific facilities.  
 NA indicates not ascertained.

June 30, 1987 reported movement statistics indicating a net loss of residents equal to 4.4% of their June 30, 1987 residents. The comparable net loss for those facilities for Fiscal Year 1985 was 3.5%. The number of residents moved out of large state facilities was actually somewhat larger than reported because these statistics do not include outmovement from facilities that closed during the period July 1, 1986 to June 30, 1987. Nationally releases equalled 8.5 % of state institution residents on June 30, 1987, up from 8.0% in 1985. New admissions and readmissions equalled 3.9% and 1.8% of the resident population respectively, as compared with 4.2% and 1.8%, respectively in 1985. The death rate of 1.6% was somewhat higher than the 1.4% rate in 1985. Long term movement trends are discussed in greater detail in Part III.

*Previous Place of Residence.* Table 2.6 presents summary statistics on the previous place of residence of persons newly admitted and readmitted to large state facilities. With respect to previous placement of new admissions, some notable differences were evident between 1985 and 1987 statistics. For example, although the most common previous placement of persons admitted to large state facilities was parents' or relatives' homes for both years, with large state institutions (at least 64 residents) being second, the size of the difference between those two previous placements was much greater in 1985. New admissions from parents' or relatives' home were down 10% in 1987 while admissions from large state institutions rose over 7% to almost equal the proportion from natural family homes. These statistics suggest that states are relying less on large state facilities as a point of entry into their long-term care systems and may indicate increasing transfers due to the closing of units or entire institutions.

*Previous placement of readmissions.* Table 2.6 also presents summary statistics on the previous living arrangement of persons readmitted to large state facilities during Fiscal Year 1987 with comparable data from 1985. For the most part readmissions to large state facilities appear to follow efforts to reestablish persons with mental retardation in community living arrangements, including the family home. In Fiscal Year 1987, 29% of readmissions were reported to follow the return of individuals to their natural families, down from nearly 37% in 1985. Another 28% of readmissions were reported to follow efforts to place persons in other community living arrangements, a percentage very close to that of 1985. The

proportion readmitted from other state institutions (15%) in 1987 is reported to be double that of 1985, a further indication of transfers among large state-operated residential facilities as units and entire facilities are closed.

Table 2.6  
Previous Placement of Persons Admitted or Readmitted to Large  
State-Operated Residential Facilities: Fiscal Year 1985 and Fiscal Year 1987

Previous Placement	New Admissions		Readmissions	
	1985	1987	1985	1987
Parents/relatives	39.2%	29.0%	36.8%	29.1%
Foster home	3.5%	3.4%	7.1%	7.5%
Group home (1-15)	5.6%	7.0%	19.7%	17.9%
Residential facility (16-63)	3.5%	4.2%	4.1%	3.9%
Private institution (64+)	1.8%	2.6%	2.5%	3.8%
State institution (64+)	20.6%	27.9%	7.4%	14.6%
Boarding Home	.5%	.7%	1.2%	.4%
Nursing Home	1.6%	2.4%	2.0%	2.4%
Semi-independent living	.3%	.4%	.4%	.8%
Independent living	.7%	.4%	.6%	.9%
Mental Health Facility	13.6%	10.0%	8.5%	8.4%
Correctional Facility	2.3%	2.7%	1.7%	1.5%
Other	6.7%	9.3%	7.9%	8.9%
Total	100.0%	100.0%	100.0%	100.0%

### **PART III: LONGITUDINAL TRENDS IN LARGE STATE-OPERATED RESIDENTIAL FACILITIES, 1950-1987**

Part III of this report presents a longitudinal view of changing patterns in the placement of persons with mental retardation in large state-operated residential facilities from 1950 to 1987. As noted in Part I and Part II, in recent years states have begun to develop small (i.e., those with 15 or fewer residents) state-operated facilities. The 649 small state-operated facilities and their 4,712 residents on June 30, 1987 were an important part of state-operated residential programs. Nevertheless, the statistics presented in Part III are limited to large state-operated facilities (i.e., those with at least 16 residents).

The data used in Part III to demonstrate trends in residential services derive from several sources. Data for 1950 to 1968 are from the National Institute of Mental Health Surveys of "Patients in Institutions" (for persons with mental retardation and mental illness). Data on state mental retardation facilities for Fiscal Years 1969 and 1970 come from two state agency surveys conducted by the Division on Mental Retardation, now the Administration on Developmental Disabilities. Data for 1971 through 1977 come from the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded biannual surveys of state institutions conducted by Richard Scheerenberger.

Data for 1969 to 1977 on persons with mental retardation in PRF/Other come from the National Institute of Mental Health surveys of "Patients in State and County Mental Hospitals" from 1970 to 1977. Data for 1978 through 1987 come from the Recurring Data Set Project. They were gathered by Richard Scheerenberger, under the auspices of the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded, and the CRCS of the University of Minnesota. Data from the latest survey in this series are presented in Part I and Part II of this report. The reference list includes specific sources of the surveys and statistical summaries used to complete this report. Appendix C provides notes on the specific uses of data from these sources.



### **Average Daily Population of Persons with Mental Retardation in Large State-Operated Residential Facilities**

The gradual depopulation of state-operated residential facilities for persons with mental retardation has been apparent in national statistics since 1967. There has been a decreasing total residential population in state institutions for all types of mental disability since 1956. Although the total population in state mental hospitals peaked in 1955, the number of persons with a primary diagnosis of mental retardation in state-operated facilities primarily for persons with mental illness (i.e., PRF/Other) continued to increase until 1961. In 1961, there were nearly 42,000 persons with mental retardation in such facilities. The combined total of persons with mental retardation in state-operated residential facilities (PRF/MR and PRF/Other) in 1961 was 209,114. By 1967 the number of persons with mental retardation in state hospitals for persons with mental illness had decreased to 33,850, but the total number of persons with mental retardation in all state-operated residential facilities had increased to 228,500, 194,650 of whom were in state mental retardation institutions. This was the highest total ever.

Since 1967 the number of persons with mental retardation in all state-operated residential facilities has decreased by about 57%. During this period the numbers of persons with mental retardation in PRF/Other decreased much more rapidly than did the number of persons with mental retardation in PRF/MR. The different rates of depopulation reflect a number of factors. For one, the total rate of depopulation of state mental health facilities has been much more rapid than the rate of depopulation of state mental retardation facilities. Between 1965 and 1975 the total population of state mental health institutions decreased from about 475,000 to 193,500 residents. This rapid depopulation and frequent closing of facilities caused major reductions in residents with all types of mental disability, including mental retardation. Relatedly over the years, many PRF/Other became primarily dedicated to mentally retarded populations. Certainly a driving force in the reduction of residents with mental retardation in PRF/Other has been the general movement toward deinstitutionalization and specific concerns about the appropriateness of placement in psychiatric facilities. However, extremely important, too was the Medicaid legislation in the late 1960s and early 1970s which allowed states to obtain federal

cost-sharing of residential services to persons with mental retardation in mental retardation facilities and in nursing homes, but continued exclusion of institutions for "mental diseases."

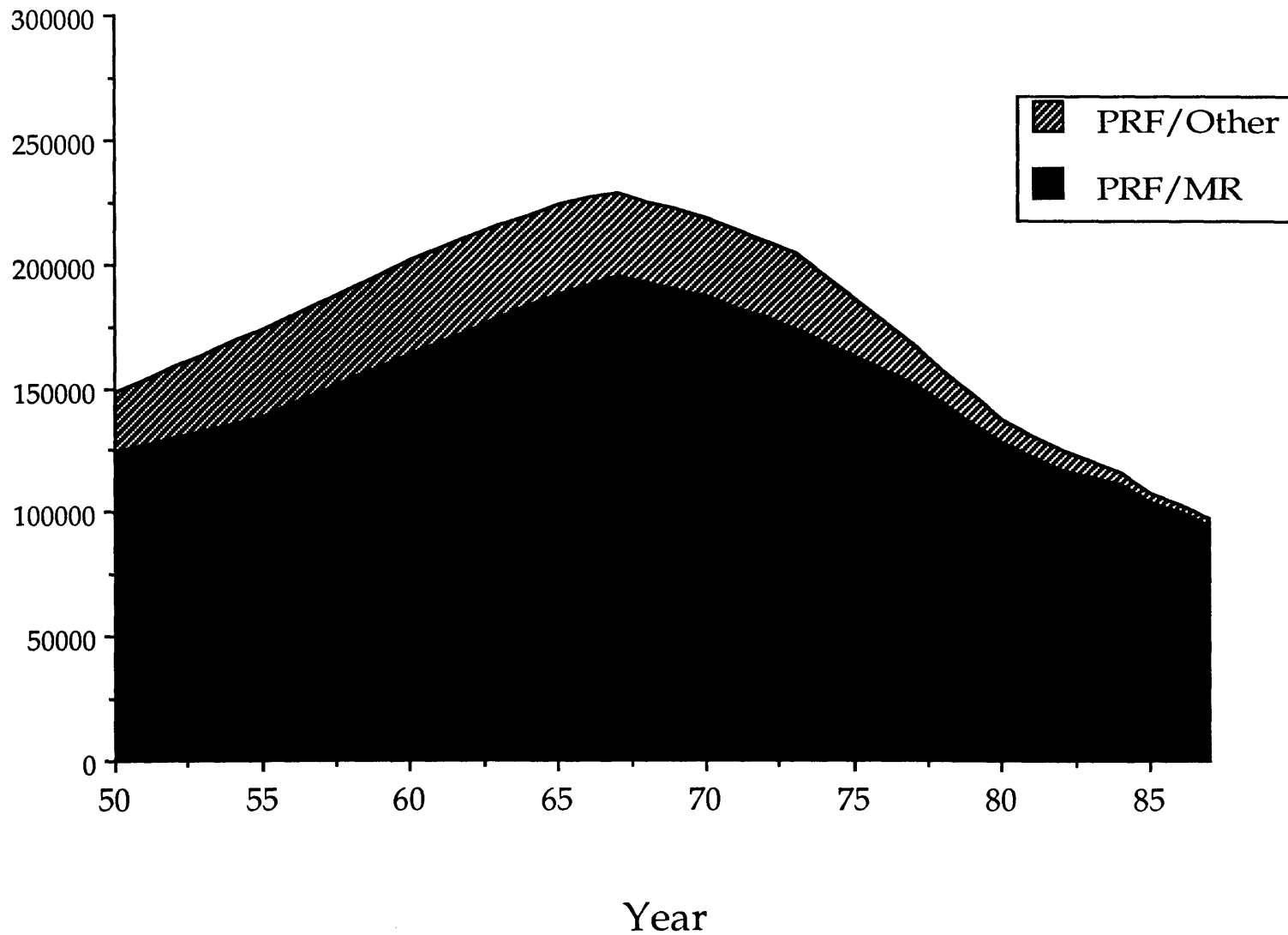
Figure 3 shows the relative contribution of PRF/MR and PRF/Other programs to the total average daily population of persons with mental retardation in large state-operated residential facilities. The average daily number of persons with mental retardation in large PRF/MR in FY 1987 (94,696) was only 48.6% of the average number in large PRF/MR in 1967. More impressively the average number of persons with mental retardation in all large state institutions in FY 1987 (97,533) was just 42.6% of the average number in FY 1967 (228,500). Although Figure 3 does not go that far back in time, the combined national total of people with mental retardation in PRF/MR and PRF/Other in 1987 was the lowest total since 1935.

Data Points for Figure 3: Average Daily Population of Persons with Mental Retardation in Large State-Operated Residential Facilities, 1950-1987

Year	PRF/MR	PRF/Other	Total
1950	124,304	23,905	148,209
1955	138,831	34,999	173,830
1960	163,730	37,641	201,371
1965	187,305	36,825	224,130
1967	194,650	33,850	228,500
1970	186,743	31,884	218,627
1973	173,775	30,237	204,012
1977	151,532	15,524	167,056
1980	128,058	9,405	137,463
1981	122,898	7,866	130,764
1982	117,160	7,865	125,026
1984	111,333	5,096	116,429
1985	103,629	4,536	108,165
1986	100,190	3,106	103,296
1987	94,696	2,837	97,533

Note. PRF/Other data are estimated (see notes in Appendix C).

Figure 3  
Average Daily Population of Persons with Mental Retardation in  
Large State-Operated Residential Facilities, 1950-1987



**Average Daily Population of Persons with Mental Retardation in Large State-Operated Residential Facilities per 100,000 of the General Population**

Since 1967 there has been a substantial decrease in the number of people with mental retardation in state-operated residential facilities (see Figure 3). But as notable as the reduction has been in the total number of residents, it appears even more substantial when indexed for the growing total population of the United States. Comparing the population of state-operated facilities to the general population of the U.S. permits a better picture of the relative use of state-operated facilities as residential placements for persons with mental retardation. The average annual placement rates per 100,000 of the general U.S. population for PRF/MR and PRF/Other are shown in Figure 4.

The trends in the placement rates of persons with mental retardation in state-operated residential facilities are generally similar to those for the total population with mental retardation. However, the rate of change in the placement rate is substantially greater because the U.S. population has increased as the population of state-operated facilities has decreased. Another notable difference between the two figures is in their peak years. While the total number of persons with mental retardation residing in all state-operated residential facilities and the number residing in facilities primarily for persons with mental retardation peaked in 1967, the placement rate of persons with mental retardation in all state-operated facilities peaked in 1965 at 115.8 per 100,000 of the general population. This compares with 40.1 in FY 1987. The highest placement rate in state-operated facilities primarily for persons with mental retardation was in 1967. That year's placement rate of 98.6 compares with the 1987 rate of 38.9. The 1987 placement rate for state-operated mental retardation facilities actually fell below the rate of 39.3 in 1922.

As noted earlier, some of the decrease in the placement rate in "PRF/Other" facilities between 1973 and 1977 may reflect changing definitions. During that period some facilities historically serving mentally ill populations either through official or operational designation became facilities primarily serving persons with mental retardation. Others developed specific administratively distinct units of traditional psychiatric facilities for these purposes. The decrease shown between 1977 and 1980 was

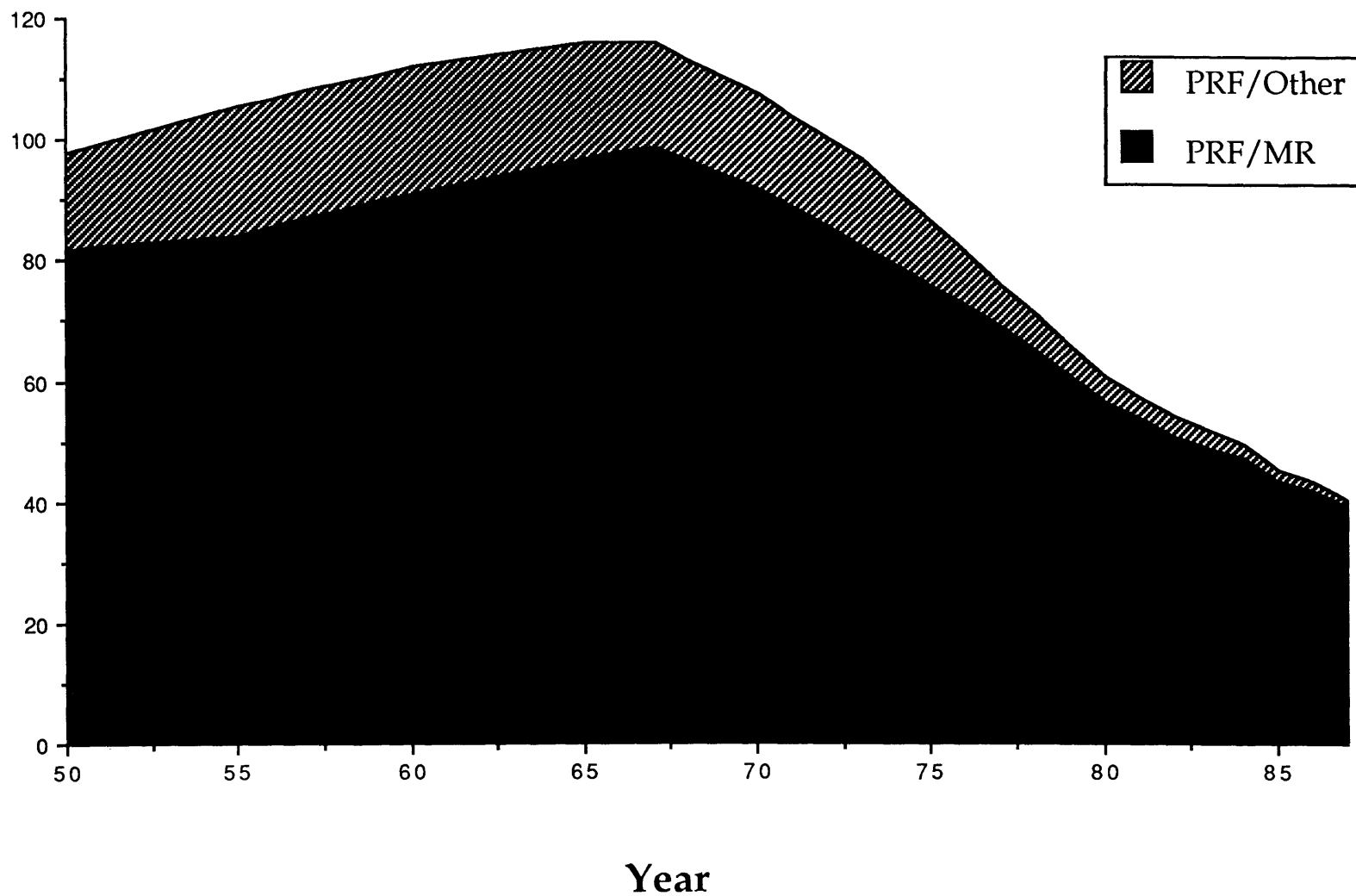
to a minor extent affected by the inclusion in the PRF/Other totals only those residents with mental retardation in mental retardation units or in PRF/Other with 10 or more residents with mental retardation. But far more important in this trend were the major changes in philosophy and federal reimbursement of the costs of care that brought considerable disfavor to providing residential services to persons with mental retardation in psychiatric facilities. The statistics in Figure 4 show clearly a substantial decrease in the rate of placement of persons with mental retardation in state-operated residential facilities. The placement rate in 1987 for large PRF/MR was only 39.5% of the 1967 placement rate. The placement rate for all large state-operated facilities in 1987 was just 34.6% of the 1967 placement rate.

Data Points for Figure 4: Average Daily Population of Persons with Mental Retardation in Large State-Operated Residential Facilities per 100,000 of the General Population, 1950-1987

Year	U.S. Population in 100,000s on 7/1	PRF/MR	PRF/Other	Total
1950	1,518.68	81.85	15.74	97.59
1955	1,650.69	84.10	21.20	105.30
1960	1,799.79	90.97	20.91	111.88
1965	1,935.26	96.79	19.03	115.82
1967	1,974.57	98.58	17.14	115.72
1970	2,039.84	91.55	15.63	107.18
1973	2,113.57	82.22	14.31	96.53
1977	2,197.60	68.95	7.06	76.01
1980	2,272.36	56.35	4.14	60.49
1981	2,295.42	53.54	3.43	56.97
1982	2,318.22	50.54	3.39	53.93
1984	2,361.58	47.14	2.16	49.30
1985	2,382.91	43.49	1.90	45.39
1986	2,387.70	41.96	1.30	43.26
1987	2,433.05	38.92	1.17	40.09

Note. PRF/Other data are estimated (see notes in Appendix C).

Figure 4  
Average Daily Population of Persons with Mental Retardation  
in Large State-Operated Residential Facilities per 100,000  
of the General Population, 1950-1987



### **Movement Patterns of People with Mental Retardation In Large State-Operated Residential Facilities**

From the beginning of this century until the mid-1960s, resident movement statistics of state-operated residential facilities for persons with mental retardation were relatively stable. During that period first admissions and discharges both steadily increased, but state facility populations grew as first admissions substantially outnumbered discharges. During this same period readmissions remained relatively low because once placed, people tended to remain institutionalized. From 1903 to 1965 the annual number of deaths in state institutions increased substantially, but death rates (deaths per 1,000 average daily population) decreased steadily from 41.3 to 19.1.

By the mid-1960s these historical patterns began to change. In 1965 the number of first admissions to state-operated facilities began to decrease, dropping below the increasing number of discharges by 1968. The number of readmissions increased substantially throughout the 1970s as return to the institution was a frequently used solution to problems with community facilities. Since 1980 readmissions have been reduced fairly steadily and the sum of first admissions and readmissions has remained consistently between 2,300 and 3,000 less than the number of discharges. Because of difficulty reported in separating transfers, first admissions and readmissions, all types of admissions have been combined for 1950 to 1987. These are reported as the data points for Figure 5.

In recent years, the number of discharges has fallen below the numbers apparent in the first 12 years of institution depopulation. The greatest number ever was almost 17,000 in 1979. In 1987 there were only about 8,000 discharges, down considerably from 9,400 in 1986. Deinstitutionalization literally connotes a process of discharging people from institutions, but Figure 5 shows clearly that it has also encompassed important efforts to avoid initial institution placements. The resident movement patterns shown in Figure 5 indicate that this latter "preventative" policy (i.e., reducing admissions to state institutions) has actually accounted for relatively more of the reduction in state mental retardation facility populations over the past decade than has the number of releases, although both clearly have been crucial to the deinstitutionalization process. In the eight year period from 1979 to 1987 there were

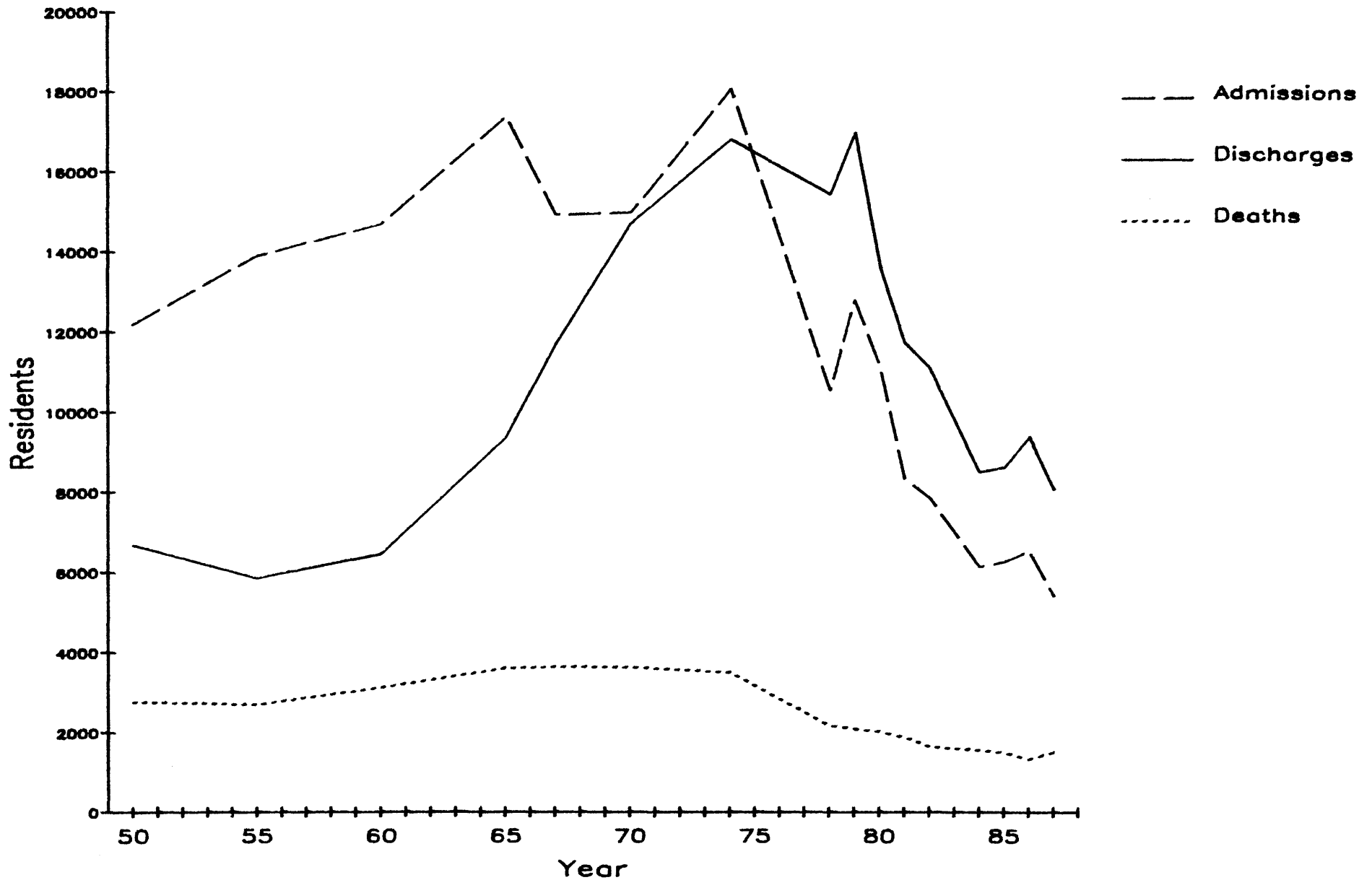
substantial decreases in both admissions to and discharges from state-operated facilities (from 12,802 to 5,398 and from 16,980 to 8,049 respectively). However, admission and discharge rates have been relatively stable in the last four years. While state institutions would appear from the statistics to be considerably less dynamic in terms of resident movement than in earlier years, it must be remembered that the 1987 populations of these facilities were less than half the size of those in 1967. Total deaths reported for 1987 showed a slight increase over recent years, probably reflecting the more severely handicapped and older state institution populations. In 1987 the number of deaths as a percentage of residents at the end of the year was 1.6%. This compares with 1.4% in 1985, but as shown in Figure 5 in the general range evident since 1978.

Data Points for Figure 5: Movement Patterns of Persons with Mental Retardation in Large State-Operated Residential Facilities, 1950-1987

Year	Admissions	Discharges	Deaths
1950	12,197	6,672	2,761
1955	13,906	5,845	2,698
1960	14,695	6,451	3,133
1965	17,367	9,358	3,585
1967	14,904	11,665	3,635
1970	14,979	14,702	3,621
1974	18,075	16,807	3,496
1978	10,508	15,412	2,154
1979	12,802	16,980	2,087
1980	11,141	13,622	2,019
1981	8,329	11,713	1,873
1982	7,844	11,076	1,634
1984	6,123	8,484	1,555
1985	6,276	8,619	1,508
1986	6,535	9,399	1,322
1987	5,398	8,049	1,513



Figure 5  
Movement Patterns of Persons with Mental Retardation in  
Large State-Operated Residential Facilities, 1950-1987



### **Annual Per Capita Costs for Care in Large State-Operated Residential Facilities for People with Mental Retardation**

The costs of care provided in state-operated residential facilities for people with mental retardation have increased dramatically since 1950, when the annual cost of care for state-operated facility residents was about \$750.00. Thirty-seven years later the cost of care in state residential facilities was on the average about \$55,000 per year. Even in dollars adjusted for changes in the Consumer Price Index over this period, costs of care in 1987 were over 15 times as great as in 1950. Figure 6 shows the trends in residential care costs in both actual and adjusted dollars (\$1=1967) between 1950 and 1987. In terms of "real dollar" equivalents, the annual cost of care in state residential facilities for people with mental retardation increased from just over \$1,000 to nearly \$16,000 over the 27 year period. That rate of increase represents an annual after inflation compounded growth of over 11% per person per year.

A number of factors have contributed to the increasing costs of residential care. One contributing factor has been the increasingly disabled population of persons served in state-operated facilities. For example, in 1940 about 65% of all residents of state-operated facilities for people with mental retardation had borderline, mild, or moderate retardation. In 1964, 40% of residents were so classified. By 1977, that proportion had decreased to 27% and in 1987, only 17% of all residents were identified as having borderline, mild, or moderate retardation (see Part II). Associated with these changes have been increased intensity and specialization of professional staff and the relatively lower reliance on residents in operating and maintaining facilities.

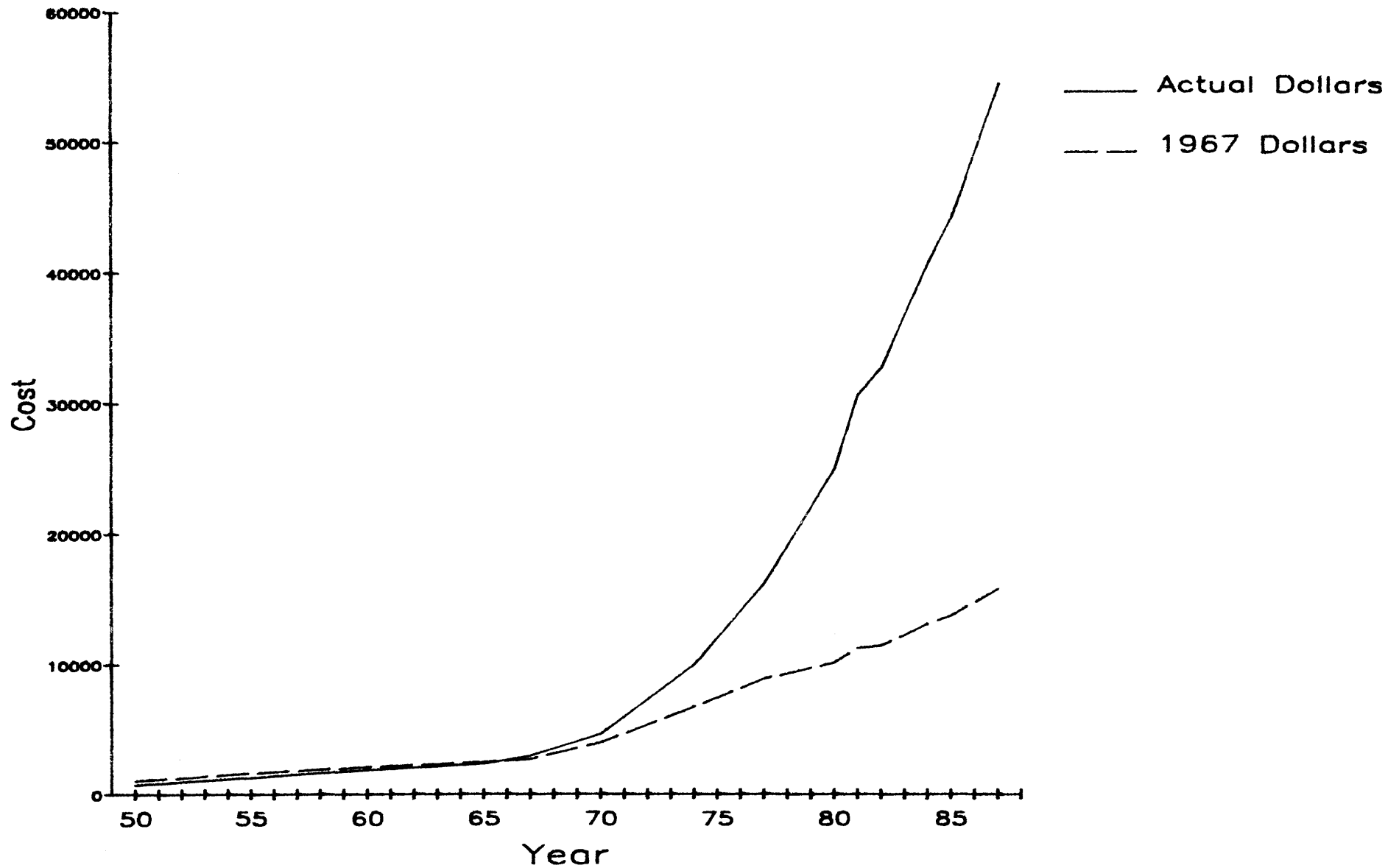
Other important contributions to increasing costs have come from legislative and judicial efforts to upgrade the quality of living and habilitation provided within public residential facilities. While the desire to improve care in state-operated facilities was evident in the 1950s and 1960s, two major factors began to exercise considerable upward pressure on the costs of care in the early 1970s. The first of these was the Intermediate Care Facility for the Mentally Retarded (ICF-MR) program enacted in 1971. This program currently offers Federal sharing through Medicaid of 50%-78% of the costs of residential

care under the condition that facilities meet fairly demanding program, staffing, and physical plant standards. This program has significantly cushioned the impact of rapidly increasing institution costs for the states. For example, in 1970, one year before enactment of the ICF-MR program, the average annual per resident cost of state institution care was about \$4,000. In 1987, with the average annual per resident cost in real dollars over \$11,000 more, states' share of those increases was only about \$2,800 per resident per year. Court decisions and settlement agreements have also had significant impact on institution costs nationally in their frequent requirement of substantial effort by states to upgrade the quality of supervision, habilitation, and residential environments in state-operated residential facilities.

Data Points for Figure 6: Average Annual Per Capita Costs of Care in Large State-Operated Residential Facilities for People with Mental Retardation, 1950-1987

Year	Cost	Cost (\$1=1967)
1950	745.60	1,034.15
1955	1285.50	1,603.02
1960	1867.70	2,104.90
1965	2,361.08	2,498.02
1967	2,965.33	2,965.33
1970	4,634.85	3,985.25
1974	9,937.50	6,728.17
1977	16,143.95	8,894.74
1980	24,944.10	10,127.30
1981	30,645.40	11,246.86
1982	32,758.75	11,400.04
1984	40,821.60	13,103.73
1985	44,270.85	13,723.96
1986	47,555.85	14,456.98
1987	\$54,516.40	\$15,755.24

Figure 6  
Average Annual Per Capita Cost of Care in Large  
State-Operated Residential Facilities for  
People with Mental Retardation, 1950-1987



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December 20, 1987

Dear State Data Person:

From 1978 to 1986 the Center for Residential and Community Services (CRCS) has conducted state surveys to gather statistics on persons with mental retardation in state and nonstate-operated residential facilities. Statistics gathered in the Recurring Data Set Project last year are reported in three publications: 1) Project Report #24, *Persons with Mental Retardation in State-Operated Residential Facilities: Year Ending June 30, 1986 with Longitudinal Trends from 1950 to 1986*, which was mailed to you approximately one month ago; Project Report #25, *Medicaid's Intermediate Care Facility for the Mentally Retarded (ICF-MR) Program: An Update* (enclosed); and 3) *The 1987 Sourcebook on Long-Term Care for Persons with Mental Retardation and Other Developmental Disabilities* (in preparation). Your assistance in this effort is greatly appreciated. Additional copies of any of these reports are available to you free upon request.

This year's questionnaire requests data for Fiscal Year 1987. It again consists of three parts. Part 1 asks for data regarding state operated facilities; Part 2 asks for data on nonstate-operated facilities (usually private, but in some states operated by counties or regional agencies); Part 3 asks for additional data on state and nonstate ICF-MR certified facilities (ICF-MR certified facilities should also be included in Parts 1 and 2).

We would greatly appreciate receiving the completed questionnaire by January 30, 1988, if at all possible. If you have any questions about any aspect of this survey, please call **Carolyn White (612-624-5510)** or **Charlie Lakin (612-624-5005)**. Please return completed surveys or individual sections, using the enclosed envelope to: Carolyn White, CRCS, 207 Pattee Hall, 150 Pillsbury Drive S.E., Minneapolis, MN 55455.

Thank you for your help in completing this survey. As usual, we will send you a summary of state statistics before the report is published for confirmation of the data you provide.

Sincerely,

Carolyn White  
Project Coordinator

Enclosures

**Part 1. Residents with Mental Retardation in State-Operated Residential Facilities, Fiscal Year 1987.**

In this section statistics are requested for state-operated (staffed by state employees) facilities. Please mark estimated numbers with an "e". If data are not available for specific cells, please indicate this with "UNK" (unknown) and use "0" to indicate "0". If the totals provided are from a date other than 6/30/87 please indicate the date used: \_\_\_\_\_.

	Small (1-15 bed) state-operated MR residences	Large (16+ bed) state-operated MR residences	Total state-operated MR residences	Other state- operated residences (with MR res.)
Number of state-operated facilities (6-30-87)		+	=	
Residents with MR on roll end of year (6-30-87)		+	=	
Average daily MR residents in FY 1987		+	=	
Per diem (avg. daily cost of care per resident)				

Definitions

State-operated MR residence - a state-operated institution or community-based facility, staffed by state employees, which as a whole or as distinct, administrative units are designated to be primarily or exclusively for persons with mental retardation.

Other state-operated residence - a state-operated institution or other residential facility, staffed by state employees, designated primarily for persons with disabilities other than mental retardation (e.g., a mental health facility) but in which reside persons with a primary diagnosis or formal dual diagnosis of mental retardation.

Residents with MR on roll - the number of people with mental retardation on the rolls of state-operated facilities on 6-30-87, including residents on temporary leave or trial placement that lasted less than one year.

Average daily MR residents - the average number of residents with mental retardation who were on site in these facilities each day during Fiscal Year 1987.

Completed by: \_\_\_\_\_

Phone: \_\_\_\_\_

Please return to: Carolyn White  
CRCS - University of Minnesota  
207 Pattee Hall, 150 Pillsbury Drive S.E.  
Minneapolis, MN 55455  
Phone: 612 624-5510

Sent to:



**APPENDIX B****State Notes**

- AL Number of "Residents on Roll" June 30, 1987 in 1987, in state-operated facilities include some residents on respite and evaluation status.
- CA Data reported are from December 30, 1987.
- GA Georgia has eight physically separate facilities that are considered to be separate for licensing purposes. Two of the facilities have "sister" facilities that share administration. Southwestern State Hospital Thomasville (a mental health facility with a unit serving persons with mental retardation) shares administration with Bainbridge State Hospital and School (a facility exclusively for person with mental retardation). Georgia Retardation Center-Atlanta shares administration with Georgia Retardation Center-Athens. Both of these facilities serve only mentally retarded populations. Georgia also has group residences that are state funded, contracted to local Boards of Health for operation, and staffed by county employees who work under state guidelines and the state merit system. These facilities are not included in this report.
- IN Average daily residents on site counts only those present and those on short visits.
- NY Population data for two discrete mental retardation units are included with PRF/MR, 16+ beds, but are not counted as separate facilities. Data are for fiscal year ending March 31.
- SC Several small (15 beds or less) facilities, reported as state-operated in Fiscal Year 1986, were transferred to private providers on June 30, 1987, according to state plan.
- TX Data are reported for Fiscal Year ending on August 31.
- UT Small (15 beds or less) facilities that were temporarily under state operation in Fiscal Year 1986 were transferred to private operation by June 30, 1987.

**APPENDIX C**  
**Procedures, Assumptions, and Limitations in**  
**Longitudinal Data Presentation**

The following notes refer to the statistics used to develop Figures 3-6 of Part II of this report. The notes appear under the Figure to which they pertain. Full citation of these documents referred to here are found in the "References" section of this report.

**Figure 3: Average Daily Population of Persons with Mental Retardation in Large State-Operated Residential Facilities, 1950-1987.**

Data presented in Figure 3 for years 1950, 1955, 1960, 1965, and 1967 are from the National Institute of Mental Health, "Patients in Institutions." Data for nonreporting facilities were proportionally adjusted from the data of reporting facilities. Data for 1970 are from Office of Mental Retardation (Current Facility Reports) and NIMH (1975). Data for 1973 are from Scheerenberger (1974) and NIMH (1975). Data for 1977 are from Scheerenberger (1978) and NIMH (1979). Data for 1978-1987 are from the Recurring Data Set Project of the Center for Residential and Community Services in this series.

Because of the rapidly dwindling numbers of people with mental retardation in mental hospital units not primarily for people with mental retardation, and because of the tendency toward regionalization of state facilities (whereby a facility is used for both mentally retarded and mentally ill populations in a particular catchment area), a clear distinction between PRF/MR and PRF/Other cannot always be made. For example, in FY 1986 state-operated facilities in both Minnesota and Indiana were reclassified from PRF/Other to PRF/MR. For comparability in the most recent statistics, data from the Minnesota and Indiana facilities classified as PRF/Other in 1984 and 1985, but as PRF/MR in 1986, have been incorporated into the longitudinal movement data for FY 1984 and FY 1986. Some minimal duplicative counting may have occurred in the 1960s and 1970s in the statistics of mental retardation facilities and units for people with mental retardation within mental health facilities. After 1977 state reported statistics on PRF/Other evidenced two problems leading to some degree of undercounting: 1) a number of states were unable to report statistics on persons with mental retardation in PRF/Other,

and 2) respondents were asked only to report persons with mental retardation in facilities with 10 or more mentally retarded residents (until 1987). The former problem has improved considerably in the last few years, the latter has a minor effect on statistical trends after 1977.

Totals for the mentally retarded population of PRF/Other for nonreporting facilities for the years 1950-1977 were estimated from the totals of reporting facilities. During this period, the facility response rate for the annual NIMH surveys was never less than 87.7%. Totals for the mentally retarded population of PRF/Other for nonreporting states for the years 1980-1986 were estimated from the totals of reporting states. During this period the number of states not reporting PRF/Other populations ranged from 2 to 8. In FY 1987, average daily residents of PRF/Other were estimated by 12 states.

Figure 4: Average Daily Population of Persons with Mental Retardation in Large State-Operated Residential Facilities, 1950-1987.

The statistics presented in Figure 4 are drawn from the same sources as the statistics present in Figure 3. The average daily resident population statistics have been indexed by the Bureau of the Census population statistics for U.S. population in 100,000s for each year presented in Figure 2. (See Bureau of the Census. Statistical Abstract of the United States [annual]. Washington, DC: U.S. Government Printing Office.) The value of these statistics is that it controls increases and decreases in the use of state institutions for growth in population.

Figure 5: Movement Patterns of Persons with Mental Retardation in Large State-Operated Residential Facilities, 1950-1987.

Data for total admissions, discharges, and deaths are from National Institute of Mental Health reports from 1950-1967, Administration on Developmental Disabilities surveys for 1968-1970; National Association of Superintendents (Scheerenberger) survey for 1974; Center for Residential and Community Services surveys for 1978-1987. Estimations were made for nonreporting states by assuming rates of first admissions, readmission, and discharge equal to those of reporting facilities.

**Figure 6: Average Annual Per Capita Costs of Care in Large State-Operated Residential Facilities for People with Mental Retardation, 1950-1987.**

Data for Figure 6 come from the same sources as the statistics on populations of state-operated mental retardation facilities reported in Figure 1. Missing data were minimal (reporting rates were 95% or greater for data elements). Because points are means of state averages until 1984, no adjustments were made for nonreporting facilities. State cost statistics for 1984, 1985, 1986, and 1987 have been weighted by the number of PRF/MR residents in that state. Adjustments of cost to 1967 dollars are based on the Department of Labor's Consumer Price Index multipliers, as reported in the Statistical Abstract of the United States (published annually by the U.S. Bureau of the Census).