

7/26/63

Miss Perkins, Chairman

Mrs. Rappe
Mrs. Myers
Mrs. Goodwin
Mrs. Skogrand (For Mrs. Gates)
Mrs. Coughlin (For Mrs. Haugh)

The purpose of this committee is to suggest a plan for the creation and continuence of an independent living program. The following suggestions were made:

Minimum for launching - 2 males, 2 female.
Maximum number at any time - 6 males, 6 females.

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Program to commence late fall, not earlier than October 1st.
Length of patient's inclusion to be determined on an individual basis*

3. AREAS DESIGNATED

Male patients - 6 single rooms on second floor of Osage, includes toilet facilities and sharing of a kitchenette.
(Other areas such as Chippewa not compact, consist of apartments and some employees would necessarily be living there, not recommended.)

Female patients - 6 single rooms on second floor of Holly, includes toilet facilities and sharing of kitchenette.
(Ivy, Fern and other areas not recommended as too spread out and additional employees may have to be rooming there from Women's Building)

Entire adoption of employees' house rules.

Possession of key to room.

Personal laundry bag and supplementary opportunity for hand washing and ironing.

Meals in patients cafeterias at any time during meal hours on an individual basis.

Suggested curfew for being at home: 10:30 p.m., unless arranged in advance with, house mother.

Provisions for entertaining friends or relatives in reception room of Division or perhaps Chippewa reception room for the males

Identification card and social security card, if any, to be carried with money in billfold.

Medical and dental care would continue to be provided by staff

HOUSEMOTHER (Probable landlady)

For all intents and purposes the Division Supervisor or relief in the Division will play the role of the Housemother around the clock so that patient may have someone who will not be actually checking but who will be aware of patient's program personally. All other staff and institutional personnel, including patients in building from which selection is made, should be oriented as to the nature of this program and who is participating, so that tolerance and friendliness prevails. In particular, the aides in Holly and Osage should not feel that this program is too arbitrary and entails additional responsibility. There is a possibility that a patient from another Division might be included. If so, the Housemother would still be the Supervisor in the Division where the rooms are situated.

COUNSELLING:

A social worker is to be the Counselor for any patient assigned to this program.

The members of the Committee agreed that the fewer rules the better. The patient should be capable of exercising self determination and should plan his or her schedule. The Counsellor would suggest and perhaps pave the way for the initial contact with a recreational facility, as well as community activities. The Chaplain might, at the request of the patient, indicate to a downtown minister or priest the reason for the community Church affiliation. The patient should feel free to discuss with the Counsellor any matter, such as, communicating and visiting with other patients, employees and friends, acceptable conduct in work and social life, business procedures. (perhaps even to writing checks, depositing and drawing out funds, if funds are available) taking trips away from the City, (perhaps by bus). Many other matters will present themselves as time goes on. A patient participating in this program would not necessarily be working downtown. He or she might be receiving work training on the institution grounds.