

GENERAL

RESEARCH

All programs are oriented from the broadest psychiatric points of view to meet the total needs humanely of pts. and staff. They are organized and followed by the multi-disciplinary team of pt's. building chaired by the physician. The concept of the therapeutic community with freedom to achieve self-control and responsibility is the social guide. No changes are made by fiat and teams are allowed to evolve and restructure roles.

The Process: During Pre-admission relatives are urged to visit us and ask questions. On admission pt. is placed in hospital for shortest period possible for evaluations and Case Conf. by Supt. and general staff, where inst. placement is determined and program broadly outlined; unusual cases are re-schedules as may be such referrals from the Building Team. The latter refers transfers to the Clin. Director, day-time community experience to the Training Committee and Community placement to the Discharge Committee. Emphasis is on movement both within and outside the inst. to secure pt. and public confidence and when possible return the patient to the community.

PKU
Orthopedic
Surgery
CP:relaxant
drugs

Hyperkinetic unit in construction.
Lobotomies.
Antipsychotic drugs.

Comparisons with placements in nursing & rest home.
Cholesterol studies. Volunteer visitor effects.

Projective testing correlations.

Local community work with "independent living" in inst.

Music, deaf, Emotionally disturbed.

Hospital Improv. Project: Comprehensive Data Collection on Pt. census.

U.S.S.

PROPOSED PHYSICIAN ASSIGNMENTS, August 1961 (On Operating Linds)

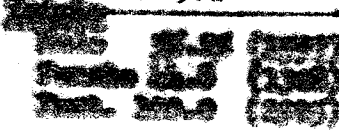
| | SUBSYSTEM | GREENACRES | RUST GROVE | SKINNER | OTHER | PHYS'N TOTALS | | | |
|---------------|-----------|------------|------------|---------|--------|---------------|--------|----------|-----|
| Watts | Sioux | 73-3 | | | | 760 | | | |
| | West | 63-3 | | | | -40 | | | |
| | Hillcrest | 84-4 | | | | 700 | | | |
| | Panther | 120 | | | | | | | |
| | Chippewa | 194-24 | | | | | | | |
| | Dakota | 106-6 | | | | | | | |
| | Seneca | 100 | | | | | | | |
| Brahm | Mohawk | 60 | Osage | 80 | Rose | 42 | 651 | | |
| | | | Maple | 110-10 | Laurel | 59 | -10 | | |
| | | | | | Cedar | 100 | 641 | | |
| Shannon | | Linden | 120 | Pine | 106-8 | Hoop. 62 | 398 | | |
| | | | | Spruce | 108-8 | | -16 | | |
| | | | | | | | 382 | | |
| Kennedy | | Springdale | 85 | Cedar | 110 | Fern | 195-25 | Dairy 25 | 614 |
| | | Elm | 115-5 | | | | | | -34 |
| | | Hickory | 114-4 | | | | | | 610 |
| Londs | | | | Birch | 100 | Ivy | 204-34 | | 742 |
| | | | | | | Iris | 50 | | -92 |
| | | | | | | Daisy | 71-11 | | 650 |
| | | | | | | Holly | 113-33 | | |
| | | | | | | Poppy | 94-14 | | |
| | | | | | | Willow | 110 | | |
| Div. Totals | 800 | 624 | 627 | 837 | 87 | 2975 | | | |
| Reduction | -40 | -19 | -16 | -117 | | -192 | | | |
| Tot. Fall '61 | 760 | 605 | 611 | 720 | 87 | 2783 | | | |

MALE BEDS 1589 - 67 = 1522
 FEMALE BEDS 1386 - 125 = 1261
 TOTAL BEDS 2975 - 192 = 2783

Handwritten notes:
 2nd floor
 1st floor

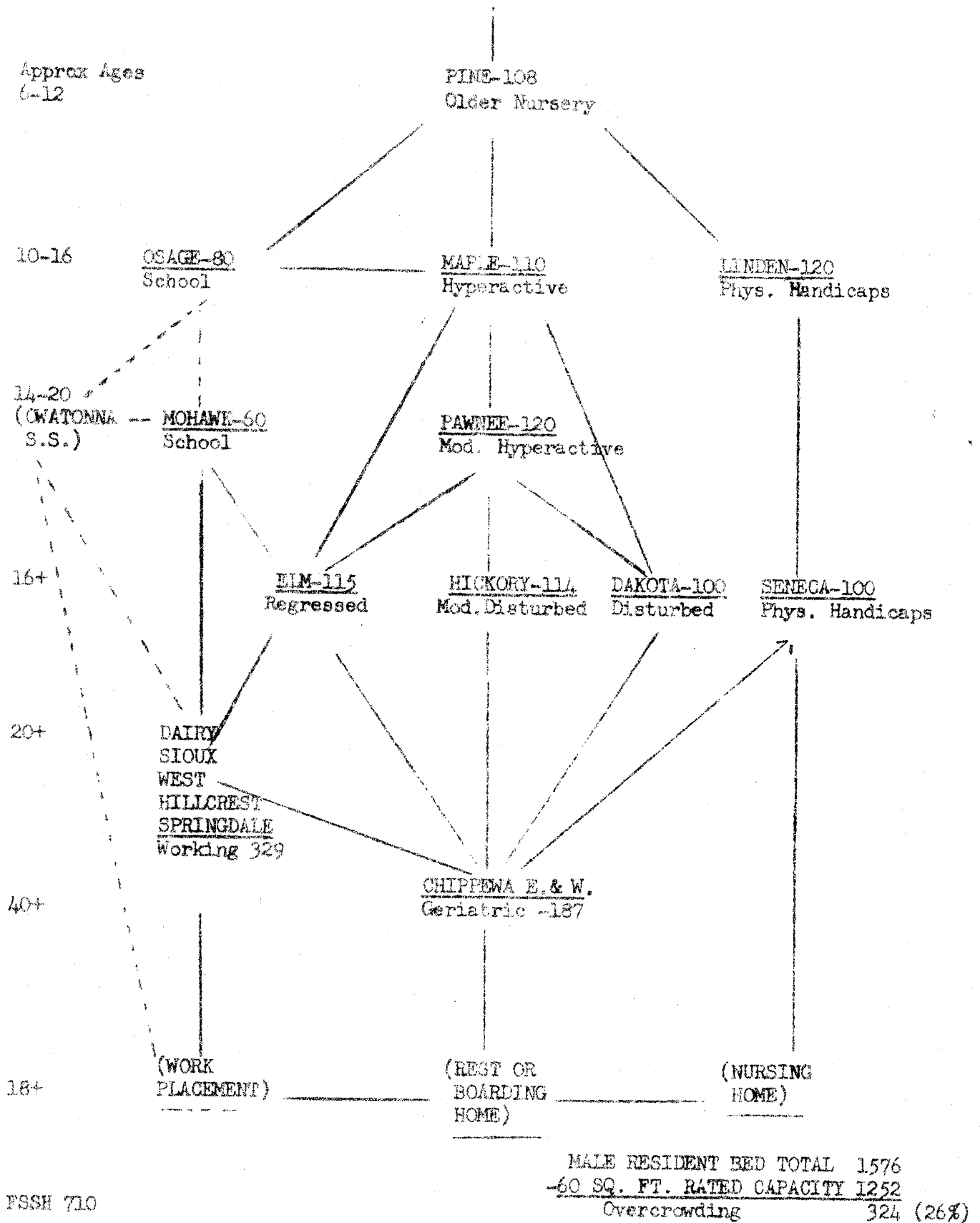
M.P.

WARREN STATE SCHOOL AND HOSPITAL PROGRAMS - JULY 1964

| PT. CLASSIFICATION | DEFINITION OF CLASS. | SPECIFIC DESCRIPTION OF PROGRAMS |
|---|--|---|
| Intensive Nursing Physical Male 12.4% Female 12.0 Total 24.4 | Close supervision and treatment of physical needs and medical problems are required; (nursery, pediatric areas, infirmaries; hospital receives acute medical problems from all areas.) | Reconstructive surgical and medical procedures. Self-care curriculum in 6 sequential phases. Intensive PT, OT, RT and Nursing to follow definite prescriptions but also meet needs for emotional and social growth. |
| Intensive Nursing Psychiatric Male 11.1% Female 9.0% Total 20.1 | Close supervision and treatment of emotional disturbances, severe behavior problems, hyperkinetic pts. sociopaths, frank mental illnesses. | Group and individualized treatment and activities to reduce anxiety, modify attitudes and improve relationships in small units to meet specific problems. Psychology, social work, rehab. involved. |
| Geriatric Male 6.4% Female 6.7 Total 13.1 | Ambulant elderly patients in moderately good health, but usually with sensori-motor and social handicaps or marked dependency | Physical, at least ambulatory, activity encouraged by RT. Nursing and Rehab. stimulate initiative to overcome dependency, isolation. Surgical and medical correction of geriatric disorders. |
| Regressed Male 8.0% Female 6.0 Total 14.0 | Newly admitted adults who are under-achievers or deprived; apathetic or unmotivated adults with potential. Some improved hyperkinetic or disturbed patients. | Medical procedures. Remotivation groups later leading to directed group therapy. Music stimulation, bands, dances; arouse latent interests. Volunteer visitors. |
| Chronic Dependent Male 6.3% Female 3.0 Total 9.3 | Patients who cannot relinquish the security of the institution or who have been unable to adjust to community living with maximum support, but find productive lives in inst. | Patient council participation needed to reduce dependency. Repeated exposure to community with pleasant experiences and prepare for trial in smaller institutional setting with friends if possible. |
| Vocational and Community Living Male 5.0% Female 5.0 Total 10.0 | Patients who are achieving emotional maturity and appear to be making social and vocational progress for community placement to be at least partly self-supporting. | Patient council activities to improve initiative. Training in work habits and an agreeable successful vocational skill that provides job opportunities. Classes in social skills, daily living, leisure-time use. |
| School and Pre-Vocational Male 6.0% Female 3.1 Total 9.1 | Children who can benefit by a "trainable" curriculum or who may be potentially eligible for Owatonna. Pre-vocational education; adult evening classes. | Individualized scheduled "trainable" curriculum in classroom in conjunction with rehab. therapies. Repeated checks for vision, hearing, speech, reading, special defects followed by treatment here or at Rochester State Hospital. |
|  | Total population in continuing process of increase in numbers of pts. with additional physical, emotional & social handicaps requiring more spec. staff with psychiatric integration, OPD and community relationships. | A Building Team is composed of all available disciplines: Medicine (psychiatry) nursing, psychology, education, social work, rehab. psych. aides and the Chaplain who is involved on all teams. |

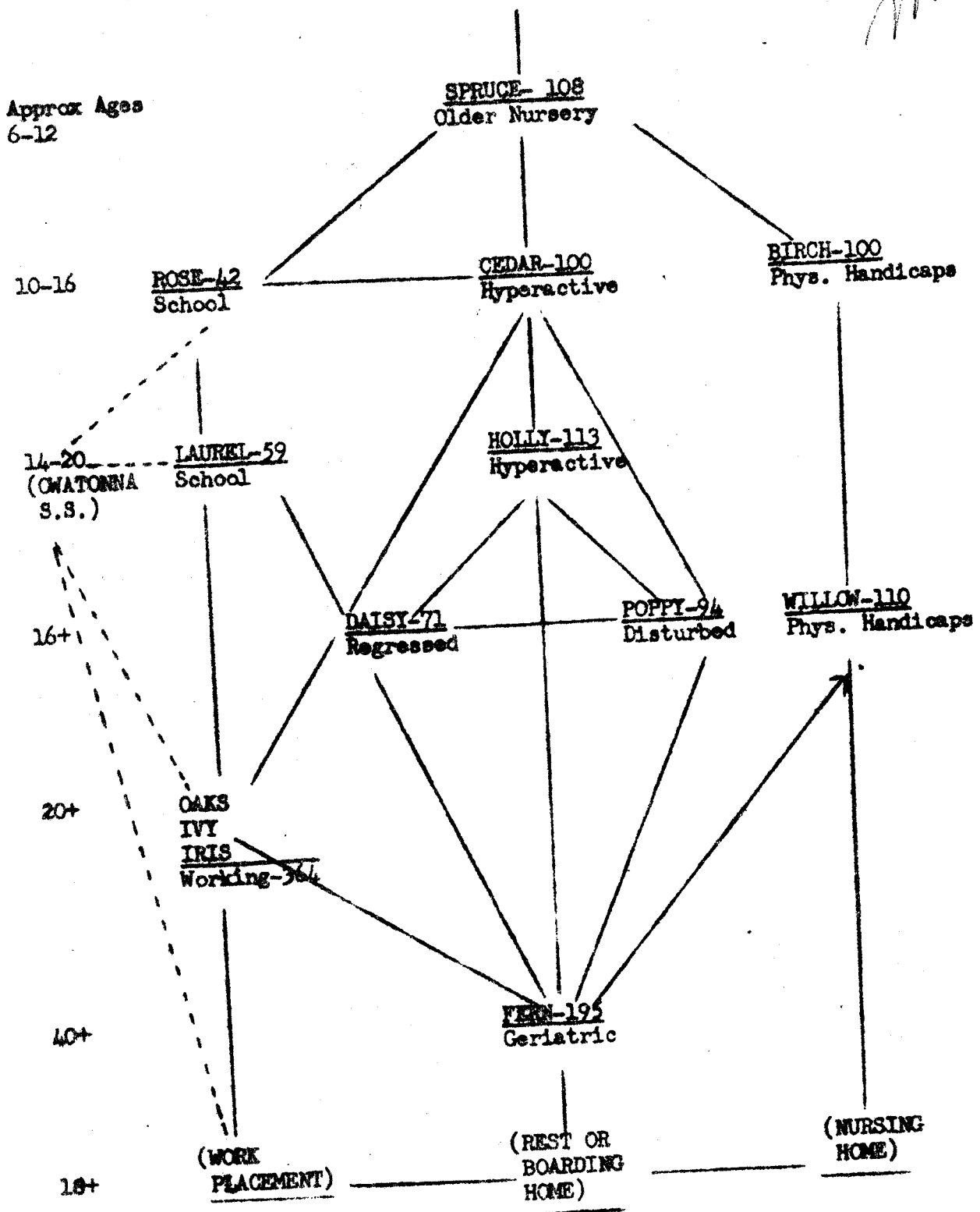
PATTERN OF MALE PATIENT MOVEMENT, JULY 1964

HOSPITAL NURSERY - 62 BEDS (32 MALE - 30 FEMALE)



PATTERN OF FEMALE PATIENT MOVEMENT, JULY 1964
 HOSPITAL NURSERY - 62 BEDS (32 MALE - 30 FEMALE)

Ver- 5 ea 5w
Mel Hecht



| | |
|-------------------------------------|-----------|
| FEMALE RESIDENT BEDS TOTAL | 1386 |
| - 60 SQ. FT. RATED CAPACITY | 1021 |
| OVERCROWDING | 365 (36%) |
| (If Reduce Fem. Resident Beds- 100) | |
| (Equitable Overcrowding | 265 (26%) |