

PHYSICAL FITNESS PROGRAM SURVEY
FARIBAULT STATE HOSPITAL

TO: Mr. Erickson, Program Director from Rehabilitation Section
Mr. Knack, Director of Rehabilitation

Mr. Kroska and Mr. Hanson

I. School Children

The program carried out for our school age population is a combination of physical education and recreation. There are six buildings in Center Unit comprised largely of school age children. There is either a physical education teacher or a rehabilitation therapist assigned to each building in the unit, except Spruce and Pine. There are recreational activities in which physical fitness programming is stressed. Our physical fitness program as carried out makes use of obstacle courses, playground equipment, tumbling mats, trampoline and exercisers in the gymnasium, and such recreational activities as dancing, swimming when possible, baseball, races, relays, etc. A measure of the physical fitness of the participants is made, and is compared to an earlier one, to record annual gains or recessions. (Metropolitan Toronto Retarded Children, Physical Fitness Rating Scales)

Approximately three sevenths of the school age population or about 150 are involved. The other four sevenths are not involved in the above mentioned program for the following reasons:

1. Some have a day-time work schedule.
2. There is a shortage of staff to carry out the program*
3. The report covers four out of six buildings in our unit. The other two buildings, Spruce and Pines included in the project teach program have a comprehensive program of its own.

In order to make this a realistic program we feel that every resident in Center Unit should be involved in some sort of a physical fitness program daily.

Some of the problems at the present time are:

1. Lack of space to carry on the activities we would like to conduct.
2. A shortage of staff.
3. Shortage of funds for desired equipment.

Working residents:

In both Skinner and Sunnyside Units the respective female and male adult population range in I.Q. from profoundly to wildly retarded. Excerpt for the male population of one building, Pawnee, there is no physical fitness program as such* Activities pertaining to physical fitness are conducted, but not on a consistent follow through basis. Rather, they are incidental.

At Pawnee, for severely retarded males, 45 are involved in a modified sports program once each week* The same group also participates once weekly in an organized "game time" session at which relays and circle games are conducted* About 50 percent of the population in these two units take part in a dance session once a week. About one-third of the population takes part in seasonal recreational activities such as nature outings, swimming, Softball, tobogganing, ice skating, etc.

- II. It would be desired that the majority of the residents in these two units were involved regularly in recreational activities which stress physical fitness.
- III. A recreational program oriented toward physical fitness should involve those residents who have the physical and mental capacity to take part. The participants would be grouped according to physical and mental functioning.
- IV. two-thirds of the population in these two units are engaged in work assignments during the day and are not available for other programming during that time. Currently, the majority of the two units are programmed in evening social activities.

Grandview Unit and East Grove

Grandview unit and East Grove unit are each comprised of men and women 30 to 80 years of age and have a wide range of physical and mental disabilities. East Grove residents are activated twice weekly. Weather permitting, recreational activities are conducted outdoors. About one-fourth of the population participates twice weekly in a structured recreational program which promotes physical fitness.

In Grandview, residents are grouped according to their abilities for physical activities. About three-fourths of the population are engaged twice weekly in specific mobility activities consisting of : calisthenics, relay games, Softball and such seasonal activities as hiking and tobogganing.

For the population confined to wheelchairs, recreational activities are progressed at two levels: Those having the mental ability to comprehend instruction take part in modified softball throwing and batting, and exercising the upper trunk and limbs. For the profoundly retarded individual confined to a wheelchair, exercising is non-existent*

We would like to consider as realistic, a program which would be individualized for the majority of Beat Grove and Grandview residents, and one which would be carried out on a daily basis.

Our primary problem in both of these areas is lack of staff. To conduct an effective program it is necessary to work with these individuals on a very small group basis.

For the hyperactive, profoundly retarded children and many multi-physically handicapped children and adults in Green Acres Unit, Physical fitness is not specifically emphasized. Instead, physical fitness is an integral part of recreational activity. It is reasoned that physical health will result through

participating in organized active play.

The ambulant children and adults are routinely involved in activities which include jumping, hopping, skipping, running, walking, climbing hills, swinging, sliding, climbing ladders and jungle gyms, simple ball bouncing and catching, and simple circle and relay games.

Participants in these activities are scheduled on an average of not less than twice weekly. The population of Green Acres Unit is a most varied one, being comprised of all levels and degrees of physical and mental dysfunction. Because of the necessity to conduct activity in small groups, preferably homogenous, it is short of impossible to reach every resident with regular frequency.

At present, only one-third of the residents of Green Acres received a consistently programmed recreation program in which there is concerted effort toward physical development. Ideally, every resident should be engaged daily in a type of physical fitness whereby they would benefit. A realistic program in physical fitness for Green Acres residents would have to be very basic, and repetitive, and conducted in small grouping with routine frequency. Because of the many bed patients, wheelchair patients, and other physically disabled, an ideal arrangement would require two staff per six patients in a physical fitness and activation program,

With the trends currently taking place at this institution, and in view of the total Rehab Team being integrated into the unit program in the planning for the residents* it is anticipated that in due time ward personnel would be very closely allied with Rehab in always carrying out varied forms of physical activation and development. When this occurs, it can be anticipated each resident would properly benefit, as he is rightfully entitled to do.

Summary:

We feel very optimistic as to what the future has in store. Although we are trying our best to implement a better physical fitness program at Faribault State Hospital, we feel much more can be done when we have a reduced population and consequently more space to work in. The various disciplines are beginning to work together more closely as a team and consequently any physical fitness programs introduced can, hopefully, be continued in the various buildings on campus by the nursing staff as well as physical education teachers and physical therapists. With this in mind, we are looking forward to seeing our residents getting a chance to maintain and improve both their physical well-being and mental health.