Faribault State Hospital

Dr. Roger A. Johnson, Medical Director

A. Nemethy, Director of Nursing

February 21, 1969

Utilization of Senior Psychiatric Technician

A review of our existing nursing organization and its effectiveness points out three major areas of concern:

1) A need to carry out an effective nursing program for each resident of this hospital.

2) A need for a skilled nursing staff member to implement and carry out that portion of the patients' total program that is the responsibility of nursing in the direction of patient care ward areas.

3) A need to provide direct ward supervision on early and late shifts, seven days a week in order to insure continuity in resident care plans through direction and assignment of specific duties to the patient care staff.

4) A need to provide significant promotional opportunities for our Psychiatric Technician staff.

The Faribault State Hospital has 41 resident care areas which require a skilled nursing staff member to direct and assist the patient care staff in implementation of programs on both the early and late shifts, seven days a week. We have a professional registered nurse staff other than the R.N.'s assigned to general supervision and nursing education of 28g. While it would be desirable and preferable to have direct professional nursing supervision in all ward areas, this is not possible at this time. We cannot physically supply this, so must utilize other specially trained staff to accomplish the task. The Nursing Education Department is very much involved in clinical evaluation and follow-up of our new employees. They also are devoting a greater portion of their time to providing in-service training for our longer term staff. However, there is a very great need to have someone in the immediate patient care area who has background knowledge of program techniques and interpersonal skills to be able to give supervision and assistance on the ward. We will use Nursing Education to train lead people in the patient care staff areas who can spread this knowledge to direct patient care staff.

The primary responsibility of the Senior Psychiatric Technician will be for the accomplishment of patient programs. The Senior will attend team meetings to contribute his evaluation of the patient, his suggestions for program and his immediate knowledge of the individual patient. As the team develops a specific program and delegates responsibility for its parts to team members, the Senior will accept responsibility for the parts of the
program assigned to Nursing and will implement this in conjunction with ward programs. The Senior will train nursing staff members to carry out programs, will make specific assignments, will participate as a lead worker in these programs, will evaluate in terms of effectiveness, goal attainment and finally will interpret his evaluations to the unit team to make such changes or adjustments as are necessary.

Each individual patient must have a 24 hour program. This program must meet the goals agreed upon for this patient, must be practicable and must be coordinated and provided for in the general ward program for all patients. A properly trained Senior can be of critical value in his immediate knowledge of individual patients. He can effectively interpret to the unit team the basic behavioral information essential to optimal programming and can serve as a communication between professional staff and patient. Programs, regardless of how well planned, cannot be effective without the presence in each ward area of skilled persons who are able to implement and successfully accomplish them.

A senior Psychiatric Technician with specialized training in Behavior Modification will be able to work with the severely retarded and hyperactive. The degree of dependence and the necessity for custodial-type care can be reduced through behavior shaping, resulting in more staff time being available for increasing the general functional level. Specialized training in the area of physical disabilities will alleviate many of our problems in infirmary buildings. "Physical care" levels can be greatly improved. Also the services of Physical Therapists and Occupational Therapists, etc. can be amplified significantly through the use of properly trained Seniors. Other specialized areas offered in the Senior Psychiatric Technician curriculum directed toward meeting the needs of specific groups of patients are Self-Care and Self-Help Skills, Special Education and Vocational Rehabilitation.

Effective supervision is essential to provide the level of patient care and programs we desire. The present arrangement using supervisors who do not receive additional pay in a separate Civil Service classification has proven inadequate to our needs. Presently, we are dependent upon Psychiatric Technicians who have been designated supervisors or "straw bosses" to be in charge of their shift. This creates the paradox of additional responsibility without commensurate pay advancements. This supervisory arrangement is not effective. We feel that our program planning is progressing and that we are developing individual programs for each of our residents. This supervisory arrangement has been so weak that our unit teams are aware that programs are not continued when they are off duty evenings and weekends. We are also concerned about essential care furnished our patients during these hours. We have detected many instances of insufficient care due to a lack of proper supervision. These instances included patients being burned while being bathed, patients being physically abused, patients being neglected, patient food and other supportive materials misappropriated to employee use, cards playing while on duty, employees leaving duty shifts to run errands off campus and a general failure to perform effectively and efficiently.
Alternation of supervision (straw boss) in some areas has resulted in a "get even" situation between employees who resent being supervised by equals. We also have had instances of sleeping on duty, drinking on duty and illicit sexual relationships while on duty.

Presently direct promotional opportunities for our complement of 565 Psychiatric Technicians is limited to six Hospital Service Assistant positions. Other promotional opportunities involve positions outside of Nursing Service which is resulting in the loss of trained and proficient Psychiatric Technicians. We have a significant reservoir of Psychiatric Technicians who are interested in, qualified for and can benefit from an advanced in-service training program and the assumption of greater responsibility. It is precisely this kind of Psychiatric Technician that we now lose as salary and job challenge become inadequate. It is fruitless to continue to recruit Psychiatric Technicians and lose them through advancement opportunities to positions such as Janitors, Deliverymen, Special Schools Counselors and Laundry Assistants.

It is our conclusion that Senior Psychiatric Technicians who have received advanced training in program development, behavior modification, vocational rehabilitation, rehabilitation nursing, community aspects, supervisory techniques, group dynamics and growth and development can most appropriately be used to satisfy these needs. We have identified 41 separate buildings or wards which should be staffed in this manner. This will require the establishment of 173 Senior Psychiatric Technician positions. This number of positions will permit us to have a Senior Psychiatric Technician on each early and late shift, seven days a week in each of these 41 areas. We must provide coverage to this extent in order to insure continuity of individual patient programs and optimal levels of general patient care. Without continuity our programs and care objectives cannot be met. We have no intention or desire to return to the old pattern of so-called charge technicians. This plan includes deliberate specification of appropriate patient care responsibilities and specifically deletes administrative, ancillary or supportive duties suggestive of the old charge. We will further avoid the old connotation by the equal distribution of patient care responsibilities on a rotating basis.

Finally the administration of this hospital is presently developing a plan to utilize Hospital Service Assistants and other kinds of personnel to provide for the supportive services necessary in resident care. This plan will be independent of the utilization of Senior Psychiatric Technicians.

The Senior Psychiatric Technician curriculum contains a minimum of 226 hours and a maximum of 256 dependent upon the area of specialization. The basic curriculum of 206 hours will establish proficiency in program concepts such as recognition of normal and abnormal behavior, identification of needs, development of total programs, implementation and evaluation of programs, group dynamics and supervisory techniques. Each student, with the approval of Nursing Service, will then select an area of specialized training such as Behavior Modification, Physical Disability, Self-Care/Self-Help, Special
Education or Vocational Rehabilitation. This specialization will enable the student to make a direct application of the basic curriculum in the attainment of specialized goals. Measured, demonstrable proficiency in each unit of the entire curriculum will be required for successful completion of the course. The initial training program will train 123 people plus a reserve of 15 for future placement. Persons who qualify for training and are not trained during the first program will remain on the eligible list for future training. Proposed duties for the Senior Psychiatric Technician are attached.

An: aj
Enc.

cc: Mr. Krafve
    Mr. Saufferer
    Mrs. Heskeett
Senior Psychiatric Technician Duties

The Senior Psychiatric Technician will:

1. Interpret, implement and evaluate the total program at the ward level.
2. Assure that program is carried out in a humane manner.
3. Instruct personnel in procedures and techniques necessary to carry out the program.
4. Coordinate the use of personnel, equipment, and physical surroundings to gain the most effective use of each in the total program.
5. Effectively supervise and delegate specific patient care duties to the ward staff. Function as a lead worker.
6. Assure that employees are functioning appropriately and efficiently.
7. Evaluate certain aspects of the quality of nursing care given under the guidance of registered nurse.
8. Recognize normal and abnormal development (physical, emotional, behavioral).
9. Recognize, interpret and react appropriately to behavior patterns of patients, staff members and self.
10. Counsel patients, individually and in groups; providing appropriate information and seeking further assistance as needed; counsel Psychiatric Technicians.
11. Maintain a therapeutic milieu.
12. Maintain appropriate communications channels.
13. Serve as a contributing member of unit teams.
14. Coordinate ward programs with other disciplines.
15. Perform appropriate related duties.
Faribault State Hospital

Alvira Hiltz, Chief of Nursing Services
Department of Public Welfare

Roger A. Johnson, M.D., Medical Director

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Utilization of Senior Psychiatric Technician

Attached is our plan to utilize the position of Senior Psychiatric Technician at the Faribault State Hospital. As you will note, our need is immediate. I will appreciate your assistance in implementing this plan as soon as possible.

RAJ:aj
ens.

cc: Mrs. Nethery
Mr. Krafve
Mr. Smufferer
Mrs. Hesett
Mr. Gardner, DPW