61-WTP-AMW State Internation

MEMORANDUM

TO: Superintendents at:

Cambridge Brainerd Owatonna Faribault

ATTENTION Social Service Rehabilitation Therapies and

Industrial Therapist

FROM: Ardo M. Wrobel, Consultant, Rehabilitation Therapies

Medical Services Division, Central Office

SUBJECT: Minutes of Meeting on "Work Training Programs" - 25 September 1961

Centennial Building

- 1) The DPW's Institutional Manual, Section on Mental Deficiency, does not have any program outline to identify procedures with regard to the therapeutic work placement of selected patients in the hospital and community.
- 2) The meeting was called to identify policy and procedures at the individual institutions and to plan for establishing policy and procedure for the DPW Manual. Miss Coakley cited need for long—range planning and referred to Dr. Vail's memo on Industrial Therapy, 29 June 1960 as guide in principle.

3) Brief on present programs.

0.S.S. plan to expand job placement in community homes, shops, yards, in order to gain more realistic job experience. Limited number of students work in town, carry lunch and work along with others. About thirty students (for jobs now) have gone through this sixty day evaluation program in the past. Placement, evaluation of reports, personal observations made in cooperation with DVR for students over 16 years of age. Students "apply" for such "positions".

F.S.S.H. - no community placement of patients now. Investigating possibility of day-work programs. Present plans for supervision, evaluation, and wages to patients center on placement in employee homes for female patients. This is thought of as a counterpart to the "car washing" program for female patients. Committee working on community placement in non-employee work settings.

Basic industrial therapy program places patients generally "by demand" although this is sometimes overlooked in preference to "values to the patients". Progress reports to I.T. by job supervisor made on request. Industrial Therapist attends the appropriate medical conferences. Fourteen-hundred and thirty patients (on I.T. employee) assigned and are paid from 10 cents to one dollar per month. Ivy (female I.T. patients) have certain town privileges for church, personnel buying, etc. and plan on expanding these privileges to the counterpart male patients.

B.S.S.H. - planned program of community placement started with letters to 100 resort owners to explain plans and encourage participation. Two replieds personal visits added four more. In addition to this 25 male and female patients have been placed on the day-work programs with hospital volunteers and employe s. They also plan on starting a training program for employees who supervise patients on hospital I.T. jobs.

C.S.S.H. - Six=hundred and twenty patients assigned to vocational training (I.T.) as trainees I (good prognosis for community placement), trainee II (fair chance for return to community), trainee III (for hospital work training) and trainee IV (little work: for physically impaired psychotic aged).

The employee supervising the patient on the job rates the trainee level and determines whether patient can handle their pay in cash. Pay day is accomplished by units such as laundry, maintenance. Job evaluation includes the social aspects and the evening adult education classes assist patients to "brush up" on personal hygiere, job applications and handling money.

School—work program for students in school is on a trainee basis if they maintain good school performance.

Community job placement now includes 8 "jobs"; 5 in the local nursing home, 1 in the locker plant, 1 with the local mason and another with the local painter. Vocational rehabilitation assists in evaluation with wage levels, hours and legal problems.

4) Comments.

(Mr. Rosenberger, St. Cloud) - patients evaluation in the hospital job setting may indicate good job performance but compared to local production standards the patient may not be making out at all. When we talk about "job specifics" refers usually to a skilled job, a highly controlled program of apprentice training with appropriate and recognized credit for such training. Actually most patients are in the unskilled and partially skilled class and most such job skills can be learned in a matter of hours, however, much more emphasis needs to be placed on the more general aspects of adjustment, attributes, behavior, attitudes, initiative, money, responsibility, taking orders and just plain knowing when one "does a good days work".

5) Resume.

Each institution will prepare "manual material" for next meeting, which will fit their present and projected needs. Send copy to Mr. Wrobel when this is prepared: (guide for preparation).

- (1) Definition of the work training program.
- (2) Purpose.
- (3) Organization and philosophy.

(4) Responsibility of staff.

- (5) Policy changes that might be indicated.
- 6) Next meeting = 6 November 1961 = Central Offic , C ntennial Building.

AGENDA:

- A. Review and consideration of proposed manual material. (If time permits)
- B. Payment or allowance to patients?
 - Is I.T. assignment therapy?
 - Do we pay for therapy?

AMW/jg

cc: Dr. Bartman

A. Wrobel

F. Coakley

Dr. Vail

M. LeRour.

Mr. Rosenberger, St. Cloud Reformatory

Dr. Jmith.

11-22-61.