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STATE OF MINNESOTA

DEPARTMENT PUBLIC WELFARE - Medical Services

Office Memorandum

TO

Dr. E. J. Engberg, Superintendent Faribault State School & Hospital

DATE: November 9, 1965

FROM

David J. Vail, M.D. Posedical Director

SUBJECT:

Continuing evaluation of Institutional Living Conditions and Institutional Career I (regressive)

I would like to once again thank you for your tremendous cooperation on this project. The last evaluation was carried out during the second week of May. I would like to have this evaluation carried out during the week of November 15 through 19. It will be done in a manner identical to the last one: (1) The scale called "Physical & Other General Aspects of Ward or Cottage" is to be filled out on each living unit and (2) The scale entitled "Institutional Career I" is to be filled out on all patients not bearing a diagnosis of mental retardation, alcoholism, brain damage or being over the age of 65. If a living unit has changed in function between the second week in May and the present, please indicate its previous function and its present function at the top of the scale "Physical & Other General Aspects of Ward or Cottage". We would deeply appreciate the return of the completed scales by Tuesday, November 23rd. Your kind cooperation in this project which will yield information of value to you is, if I may repeat, deeply appreciated. (Institutional Career I forms are being sent under segmente kover.)

DJV:lz

Experimental - 2B

Ward	(Cottage, etc.)	Hospita
1.	How many patients on ward? a. Classify ward. Receiving, Regressed, Hyperactive, Geriatric ambu Geriatric bed patient, Independent living (self-care), Medical (infirmary), Surgical, Mixed. (If mixed, check as many of the above items as are necessary to swhat type of patients.) Other (explain)	
2.	How many patients allowed nap whenever desired?	
3.	How many allowed a nap at some time?	
4.	How many dorms and sleeping rooms on ward?	
5.	How many dorms locked all day? How many sleeping rooms locked all day?	
6.	How many live plants on ward?	
7.	How many live plants in ward office?	
8.	How many toilet bowls on ward?	
9.	How many have seats?	
10.	How many have partitions?	
11.	How many have doors to partitions?	
12.	How many showers? a. How many have partitions? b. How many have shower curtains?	
13.	How many patients allowed to shower as desired?	
14.	How many patients must take supervised showers?a. Is the door to the shower room always open?	
15.	How many patients watch the late show?	
16.	How many patients watch late late show?	
17.	When is bedtime?	
18.	How many patients allowed up after bedtime?	
19.	At what time are all patients up in the morning?	

20. What time is breakfast for your ward?__

21.	How many pictures on the walls?
22.	How many pictures in patients' rooms or dormitories?
23.	Is this ward open?
24.	If so, until what time in winter? in summer?
25.	Are patients allowed to smoke at night?
26.	How many patients have a place by their bed to keep personal possessions?
27.	How many of these have a lock to which the patient has a key?
28.	How many bureaus (dressers) are there on your ward?
29.	How many windows on your ward? a. How many of these have curtains?
30.	Is there a coffee (snack) room for patients? a. If not, are there some facilities for coffee for patients on ward? b. Is it open until bedtime?
31.	Can patients cook an occassional meal for themselves on ward? a. Is there a stove on ward for patient?s use?
32.	How many irons on the ward?
33.	Is there a washer and dryer on the ward?
34•	Do patients have own clothes (personal or state)?
35.	Do patients carry own money?
36.	Is there a bathtub on the ward?
37.	How many patients need help with bathing?
38.	If a number of patients need help in bathing, how many is it necessary to insist they bathe?
39•	If above true, how many are ambulatory and this can be accomplished with hosing?
40.	How many patients are in seclusion at this moment?
41.	How many have been in seclusion in the past month?

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42.	How are they released from seclusion? a. Doctor's order b. After one hour and if still disturbed, back in (automatically) c. After one day (automatically) d. Other means (automatically) (1) Explain
43.	How many patients served on ward? (If ward has dining room skip and check here)
44•	If some patients served on ward, what time are they fed? a. When does food come from the kitchen? b. Is it kept in hot food cart?
45•	If patients go to a main dining room, do they go mainly in a group? Or can the majority go whenever they feel like it (within the hours the dining room is open)?
46.	Do patients go by themselves to canteen (store) or are there certain days and hours for each ward or are store orders made up .
47.	Can they sit down with employees in the canteen?
48.	Is there a pop machine on the ward?
49.	Is there a water cooler on the ward?
50.	Is there a telephone on the ward for patients use?
51.	If not, how many pay phones that patients can use in the hospital?
52.	Are there places where more than one patient at a time can visit with visitors in private?
53.	How many patients make their own beds?
54.	Can patients from other wards visit patients?
55.	Do patients have free access to razors (cosmetics)?
56.	How many patients would lie on the floor if allowed?
57,•	How many patients are lying on the floor this instant?
<i>5</i> 8.	Are the patients on your ward so untidy that, despite anything you can do, there is a slight odor?
59•	How many "pacers" are there on your ward?
60.	Is there a full length mirror on the ward?
61.	Is current reading material easily available?

Faribault Stat School & H spital

David J. Vail, M.D., Medical Director Department of PublicWelfare

E. J. Engb rg, M.D., Superint ndent

11-22-65

Continuing evaluation of Institutional Living Conditions

In accordance with instructions received in your memorandum of November 9, 1965, we are attaching herewith evaluations of scale called "Physical and Other General Aspects of Ward or Cottage," filled out on each living unit, which were carried out during the week of November 15.

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