66-PPM



WAYNE COUNTY TRAINING SCHOOL

48167 Northville, Michigan

August 30, 1966

Medical Superintendent

EDWARDS J. HERSHIPS, M.P.A. Business Manager

> E. J. Engberg, M.D., Superintendent Faribault State School and Hospital Station A Faribault. Minnesota 55021

Dear Dr. Engberg

To guide our employees in behavior control, we are surveying the prevailing patient management techniques in the American Association on Mental Deficiency.

We will sample fifty percent of the facilities listed in the latest American Association on Mental Deficiency Directory.

The study will be conducted in two phases: 1) a brief reconnaissance questionnaire, and 2) a more detailed questionnaire and results for those who return phase one.

From experience with a trial mailing, the persons in direct charge of patients, policy, and action, qualify best to complete the form. Those busy administrators who returned the trial questionnaire did an excellent job.

Very truly yours,

Pasquale Buoniconto, M.D. Medical Superintendent

BEHAVIORAL CONTROL TECHNIQUES

Rating Modifies from The Aggressive Child by Fritz Redl and David Wineman

DIRECTIONS:	Please rate each of the following patient management techniques from 5 - most frequently used, to 1 - least frequently used. Unused techniques may be rated zero.
<u>5</u> V 1.	ANTISEPTIC BOUNCING Removing the individual from the scene of conflict or group. Care is taken to avoid giving the child a feeling of rejection or disturbing his relationship to adult or group.
	AUTHORITATIVE FORBIDDING Simply saying NO in a manner which shows this kind of action will not be allowed or accepted, and not discussing or arguing, which may weaken the point. The technique must be used by an authority figure like the child's counselor or supervisor.
3/3.	COUNSELING
114.	DETENTION Placing the child in a locked detention unit for the control of problem individuals in a group.
	DIRECT APPEAL Using the "inner" value zones of the child or children; sense of fairness, sense of group pride, established group codes, etc.
3 V 6.	HURDLE HELP Lending a hand with a suggestion, tool, or example when a child is bogged down by frustration.
7.	HYPODERMIC AFFECTION _ An on the spot display of affectional interest.
3 /8.	INTERPRETATION Explaining the social reality of a situation the child has misinterpreted, or clarifying to him his own misunderstood motivation.
<u>31</u> 9.	INVOLVEMENT IN AN INTEREST RELATIONSHIP Interacting with the child and showing interest In him and his toy, (e.g., new gun, just when he is about to get into mischief with it. Not a direct "No, put it away.")
4 Y 10.	ISOLATION OF THE INDIVIDUAL FROM THE GROUP.
1/12.	ISOLATION OF A GROUP OF MISBEHAVING INDIVIDUALS.

	LIMITATION OF SPACE AND TOOLS Allowing the use of certain implements only in certain areas (e.g., hammers only at the work bench) or of certain areas only for certain purposes (e.g., the clothes room only for storage of boots and overcoats.
<u>2</u> 23.	PERMISSION Verbally permitting a piece of behavior in order to take the child's rebellious thrill out of getting away with it.
2,14.	PHYSICAL RESTRAINT _ Holding the child's limbs immobile during complete loss of control and aggressive action.
15.	PLANNED IGNORING Letting the behavior run its cours by choice, feeling it will burn itself out.
	PROMISES AND REWARDS Using these means as the "carrot in front of the donkey."
17.	PROXIMITY AND TOUCH CONTROL _ Standing near a child or putting a hand on his shoulder.
<u>4</u> /18.	PUNISHMENTS AND THREATS Following "bad" behavior with denial of some privilege, restrictions of activity, or other unpleasant consequence (e.g., threatening to do so if a certain behavior does not cease.)
<u>2V</u> 19.	REGROUPING Changing the interaction possibilities within or between groups. Within a group it means repositioning of individuals. Between groups it means putting different groups together. In short, it is moving the individual or moving the group.
<u>3 V</u> 20.	RESTRUCTURING Changing the activity or life-pattern structure that has become inappropriate for something more suited. An example would be stopping the reading of a story in favor of an outdoor activity when the children become bored, or changing an ineffective rule that prevents conformity.
<u> 4 / 21.</u>	SECLUSION Locking a child in a (treatment)room by himself for a period of time.
_2√22.	SIGNAL INTERFERENCE _ The use of facial expressions, eye contact, hand movement, or other visual devices.
23.	TENSION DECONTAMINATION THROUGH HUMOR Seeing the funny side of a situation and turning It into a joke. This technique excludes biting wit.

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