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## **The annual report of the Winnebago State Hospital to the State Board of Public Welfare October 9, 1963. October 9, 1963**

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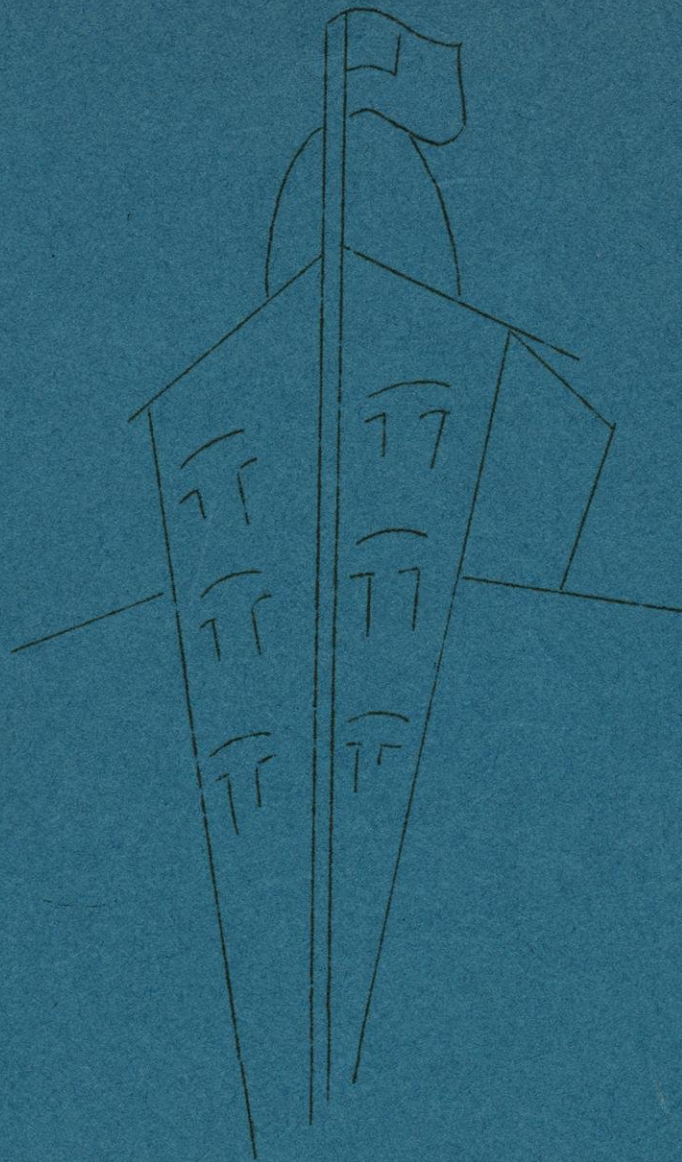
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J. Farrow



the annual report of the  
winnebago state hospital to  
the state board of public welfare  
october 9, 1963



# WINNEBAGO STATE HOSPITAL

## ANNUAL REPORT

October 9, 1963

This annual report of the Winnebago State Hospital to the State Board of Public Welfare covers the year from October 1962 to September 1963. The most noteworthy occurrence during the past year has been the reduction in resident population. Our primary interest has been in dealing with the problems that this reduction entails. We are quite pleased to note that since March 1962 our resident population has been below 1000. Since August 1962 it has been below 900, and since February 1963 below 800. This reduction of population has been in the face of a rising admission rate. The ability to reduce our population has met with much enthusiasm within the hospital. Here is concrete evidence that our expenditures of energy and monies have been worthwhile. *yes*

### MEDICAL STAFF:

The total number of medical staff has not increased over the 16 full-time physicians listed last year. There has been surprisingly little turnover in our medical staff (one retirement and one death). There has been a continuing improvement in the caliber of medical care offered. This improvement in patient care has been reflected in improved records and greater self-discipline *yes*

on the part of the physicians. Also noteworthy is a more pervasive involvement of the physicians in administrative responsibilities.

The medical staff has been divided into a number of committees, including Medical Records, Tissue and Drug Committees. These committees have kept a continuous audit of the caliber of medical care and have been instrumental in upgrading medical care.

#### SURGICAL DEPARTMENT:

There were 423 surgical operative procedures performed during the past fiscal year, 68 of them under auspices of the County Hospital surgical transfer program. There has been some curtailment of surgical operations due to ineffective filtration of the air entering the surgical suite. Specialized filters of high efficiency have been installed in our air conditioning system, which makes our operating room one of the safest in the state. *yes*

#### PARALLEL SERVICES:

The six parallel services have been in operation for over one year. Unfortunately, certain compromises were necessary in the parallel services due to building layout. It has not been possible to have each service contained in a single building. Nevertheless, the responsibility for the patient remains with the service regardless of his location. As such, there has been a minimum of backward chronic patients and the tendency to neglect less demanding patients is much less. *yes*

*see  
newspaper  
article  
Post on  
Dec 6  
62*



With the development of parallel services there has been a much more meaningful utilization of all available personnel, including the doctors, social workers, nurses and aids. There has been a remarkable surge of enthusiasm and cooperativeness on the part of the majority of our personnel.

When the Infirmary Building is opened it will be possible to admit geriatric patients directly to this unit without passing through the psychiatric services. Arrangements have been made for psychiatric consultation for the Medical-Surgical-Geriatric units so there is little likelihood of psychiatric neglect.

#### ACCREDITATION:

On October 12, 1962 the hospital was accredited for one year by the Joint Commission on Accreditation of Hospitals. It was the recommendation of the Commission that elimination of patient accommodations in the Main Building should be expedited and that there be better written evidence of patient care. The latter recommendation has been carried out. We have again been examined and have been accredited for another year. *yes*

#### CHILDREN'S UNIT:

Our Children's Unit has been an area of pride. This unit includes the living area for approximately 50 teenage and pre-adolescent boys, the school facilities for both boys and girls, and the ancillary treatment facilities for the children. *yes*

While there is some segregation of the younger girls who attend our school, the girls are not officially under the

jurisdiction of our Children's Unit psychiatrist. There are now in the hospital 24 girls age 18 or under. It appears to us that it might well be desirable to establish an official girls' unit adjacent to the boys'. This I believe would result in more efficient care of these patients and more efficient use of personnel.

Our school has been functioning quite effectively and is now housed in a completed school area in the Hughes Hall basement. We now have five teachers and are able to teach the majority of subjects through high school. The majority of our students upon release have been able to return to their classes without difficulty. In fact, a number of them have been more advanced than their classmates in their home schools. In addition to formal classroom instruction here, we have been able to have three children attend high school in Oshkosh, and a number of teenagers and young adults have been able to complete college correspondence courses with some assistance from our teachers. *in*

#### OUTPATIENT CLINIC:

Our Outpatient Clinic has continued to expand. Approximately 100 visits are made each month. During the past year a total of 917 individual appointments were made. The ability to refer patients to the Outpatient Clinic has contributed in part to the reduction of the inpatient population. A few patients have been seen in the Outpatient department in lieu of inpatient hospitalization. *in* Unfortunately, only those patients within commuting distance of the hospital can be seen in the Outpatient Clinic.



NURSING SERVICE:

Under the parallel treatment services the role of the nurse and the institutional aid has changed quite dramatically. Both are expected to participate in the therapeutic activities on the ward. The response of both the nurses and the aids has been gratifying. This modification of nursing function has increased the need for a higher employee-patient ratio. This need has been met in part by a considerable reduction in the resident population, with the ability to close several wards, and by some additional reduction in non-nursing functions. There also continues to be further refinement in nursing activities, such as more extensive use of written nursing care plans for individual patients, improvement of nursing procedure manuals, more effective use of written progress records, and improved in-service education.

770  
170

Physical care of the wards has suffered because of the reduction in available patient help. More emphasis therefore must be placed on housekeeping activities by nursing personnel.

SOCIAL SERVICE:

During the year Social Service became more highly focused on admission and discharge services. There was considerable reduction in individual casework. Travel outside the institution was reduced to 12% of that of the previous year. Due to the fact that the social worker is now an integral part of the service team, written referrals are no longer necessary. The social worker tends to be involved in the individual case from the time of admission, and,

920

as such, there is much less delay in instigation of social service activities.

The changing emphasis to internal operations has of necessity led to greater utilization of community resources. There has been improvement in communication and integration with these community resources, in part due to the help received from the district consultants. There still remains much to be done.

The change in emphasis to an active short-term treatment has intensified the need for active participation between the hospital and the various community agencies, particularly in the area of pre-hospital evaluation and post-hospital planning and treatment. In the majority of cases the local agencies have responded quite wholeheartedly to this challenge but they still need considerable support and direction from the Division. The addition of Social Service positions authorized for the present biennium will be a welcome addition.

*all in*

#### CHAPLAINCY SERVICES:

Our Chaplain coverage has increased from three one-third positions to two full-time positions and two part-time positions. Through the efforts of the Lutheran Welfare Society of Wisconsin we now have a full-time Protestant chaplain. The Lutheran Welfare Society not only recruited the chaplain but pays part of his salary. This chaplain is in addition to the part-time Wisconsin Synod Lutheran chaplain. There have also been increased services available for Catholic patients. Such increase in coverage has made possible adequate spiritual help for our patients and some educational services for clergymen in the surrounding area.

*no*



INDUSTRIAL THERAPY:

During the course of the year both the industrial therapist and his assistant resigned. At the present time both of these positions are vacant. There has been some retained improvement, however. Our patient payroll more realistically reflects patient work. There are better procedures for supervision and reporting of patient work assignments. By-and-large, patient assignments tend to be more therapeutic. There has been considerable informal training of non-clinical supervisors for more therapeutic supervision of patient help.

The increase in efficiency in use of patient help has been more than offset by a decrease in available patient workers. The increase in rapidity of treatment and the lack of delay in release following treatment has decreased markedly the availability of patient help. This decrease has been particularly critical in Food Service and in Housekeeping. 910

VOLUNTEER SERVICES:

More than 9800 hours of services were volunteered by Good Samaritans of the surrounding communities. Such services are greatly appreciated by hospital employees and quite therapeutic for patients. 121

There was considerable expansion of the volunteer teen-age program. These groups have had quite a dramatic impact, particularly with the elderly patients.

VOCATIONAL REHABILITATION:

This department continues to be quite effective in job placement and training. All told, 209 patients have benefited from this service during the past year. Through the auspices of the State Board of Vocational and Adult Education, Rehabilitation Division, patients have received on-the-job training, they have been assigned to the Work Adjustment Center in Menasha, and some patients have received psychotherapy paid for by the Vocational Rehabilitation division. yes

PSYCHOLOGY DEPARTMENT:

This is still a one-man department, although we have been fortunate in recruiting students and part-time psychologists for the summer months.

Because of the limited size of staff, psychological tests have been limited to those most urgent, primarily the criminal observation cases. Traditionally, the Psychology department has had the job of supervising the Alcoholics Anonymous program and being active in the in-service and professional nursing training. no

With the summer help we have been able to begin some relatively superficial self-evaluation, such as compilation and interpretation of various bits of factual information as to diagnosis, severity of symptomatology, types of treatment, response to treatment, etc. yes  
It is hoped that this pilot program may be expanded into a worthwhile project that would justify a research grant.



PHARMACY:

In spite of the 20% drop in resident population, there has only been a 15% decrease in the cost of psychochemicals dispensed. In large measure, this decrease in cost is on the basis of more stringent accounting, use of less expensive dosage forms, and more careful evaluation of drug needs. This is another area that clearly illustrates that there is not a direct relationship between the number of patients and the number of personnel and dollars required for adequate treatment. *in*

FIRE AND SAFETY COMMITTEE:

This committee as well as the majority of employees has worked diligently throughout the year in matters of fire and safety. We were fortunate that there were no major fires during the year and no employees or patients injured by fire. *no*

REGISTRAR'S OFFICE:

This department is still plagued with rapid turnover in personnel with subsequent inexperienced or unavailable stenographic help. This problem is compounded by the fact that the demands placed on this department are increasing.

During the year stenographers were assigned to each parallel service who worked directly with the service team. This has resulted in a reduction in the amount of nonprofessional work done by social workers and physicians. It has also resulted in more vigorous prompting of physicians to complete their necessary *yes*

paper work. This in turn has placed a greater demand upon the registrar's office.

We have been able to recruit a part-time Medical Records Librarian. As such, we are now able to code and index our records and in general collect some more meaningful statistics. no

There has been a gradual implementation of our plan to have the Registrar's service take over many non-nursing functions now handled by the Nursing Service. Such areas include keeping of census, patient transportation, patient clothing, etc. With help of the Department Analyst a more formal delineation of Registrar's services will soon be made. yes

#### FOOD SERVICE:

With a 20% decline in number of meals served, the Food Service department was able to meet the challenge of holding down both waste and the per capita cost.

The midnight meal for employees was discontinued early in the year due to the lack of patronage and due to more urgent need for paid help during the daytime. no

#### MAINTENANCE AND ENGINEERING:

Due to modification of building use for the parallel service there was considerable pressure placed upon this department. In fact, there were 3130 work requisitions completed during the past year. In addition, this department supervised eight outside contracts and unofficially oversaw the building of the Infirmary Building, the iron filtration system, and the boiler plant addition. no



Of these three major projects, only the iron filtration system has been completed. It is anticipated that the Infirmary Building probably will be available for occupancy by the 1st of January, 1964. The boiler plant addition should be complete this fall.

### PLANS

#### PSYCHIATRIC RESIDENCY PROGRAM:

We have received tentative approval of our residency program from the Educational Council of the American Medical Association. We have also received Department and Legislative authorization for six residency positions. The beginning date is scheduled for July 1964. *yes*

#### APPLIED RESEARCH PROGRAM:

As discussed in our Psychology section, we have begun a tentative pilot program on establishing some measurable variables on patient behavior, symptomatology, and response to treatment. If all goes well, this program may well justify expansion into a formal hospital-wide evaluation of patient care and merit an NIMH grant. *im*

ESTABLISHMENT OF A GIRLS' ADOLESCENT UNIT:

A gradual increase in the number of girls 18 years or less makes it appear feasible to establish a girls' unit in the near future. 920

GENERAL:

We have been authorized an adequate personnel budget. The responsibility is now ours to see that this budget is translated into efficient and worthwhile service to the mentally ill of Wisconsin. 720



## Personnel by Function on June 30, 1963

Administration		Social Service	9
Superintendent	1		
Business Office	5	Laboratory	3
Clerical	22		
Telephone Operators	5	X-ray	3
Storekeepers	2		
Nursing Service		Physicians	
Nurses		Full-time	12
Full-time	81	Part-time	11
Part-time	4	L.T.E.	3
Lic. Practical Nurses	17		
Aides	272	Engineering	
Barber	1	Power Plant	11
Beauticians	3	Craftsmen	22
Activity Therapy			
Therapists		Food Service	65
Full-time	5	L.T.E.	1
Part-time	1		
Therapy Assistants	8	Children's Unit	
L.T.E.	5	Teachers	4
		L.T.E.	1
Volunteer Coordinator	1		
		Housekeeping	38
Psychology			
Psychologist	1	Laundry	22
L.T.E.	7		
		Canteen	3
Dental			
Dentists		Farm	3
Full-time	1		
Part-time	1	Pharmacy	2
Dental Assistant	1		
Chaplains		Watchman	1
Full-time	2		
Part-time	2	Motor Vehicle Operator	1
		Total	662

## Winnebago State Hospital

## Patient Population

(Last Day of the Month)

	<u>1961</u>	<u>1962</u>	<u>1963</u>
January	1048	1043	800
February	1048	1019	769
March	1001	969	771
April	1049	939	786
May	1085	912	755
June	1019	925	717
July	1102	922	751
August	1061	879	747
September	1089	847	
October	1096	830	
November	1075	813	
December	991	734	



## Winnebago State Hospital

1962 - 1963

	<u>Rated Bed Capacity</u>	<u>Population June 30, 1962</u>	<u>Population June 30, 1963</u>
Main Building	266	374	287
North Cottage	46	44	42
Barracks	51	64	--
Kempster Hall	209	197	183
Hughes Hall	<u>196</u>	<u>246</u>	<u>205</u>
	768	925	717

Population Movement

<u>Additions</u>			<u>Separations</u>		
	<u>1961-62</u>	<u>1962-63</u>		<u>1961-62</u>	<u>1962-63</u>
First Admissions	958	974	Releases	726	722
Readmissions	663	501	Cond. Releases	503	515
Ret. from C.R.	}	210	Deaths	64	72
Ret./Family Care		4	Transfers Out	366	507
Ret. from Court		9	Ret. to Court		24
Transfers In	114	155	Deportations	57	29
	<u>1735</u>	<u>1853</u>	Family Care		4
				<u>1716</u>	<u>1873</u>
Ret. from HV	1488	1206	Home Visit	1561	1362
Ret. from UA	62	57	Unauth. Absence	102	89
				<u>1961-62</u>	<u>1962-63</u>
Decrease in average population				9%	20.6%
Increase in admissions over last year				8.6%	6.8%
Percentage of Readmissions				38%	39.07%
Average Daily Population				1022	811
County Hospital Surgical Transfers In				68	68
Transfers from Wisconsin Home for Women				6	4
Sect. 957 commitments (criminal)				6	8
Number of Autopsies				19	27
Percentage of Autopsies				29.68%	37.5%
Alcoholics				17.74%	276, or 14.89%



