

LAURELTON STATE SCHOOL AND HOSPITAL

March 9, 1973

Announced visit: Marcella Ganoe, President, Mifflin County ARC - Regional Director; and Ginny Thornburgh, Vice President, Allegheny County ARC.

I. Setting: Beautiful country setting -- all buildings are fieldstone -- 1000 acres, 500 of which are cultivated in corn and hay by paid staff (not residents).

II. Facts:

* Per diem: \$31.20.

* Superintendent and our guide: Benjamin P. Clark, M.D. (pediatrician) Dr. Clark has been Superintendent since 1970. He had previously been Superintendent at the Hamburg and White Haven State Schools and Hospitals.

* Laurelton was founded about fifty years ago as a facility for "defective, delinquent women of child-bearing age" with I.Q.'s over 70. This population peaked at 997 residents. As a result of a fine dispersal plan, for which Dr. Clark does not take credit, Laurelton is comfortably populated now with 430 retarded men and women, only 18 of whom are "more psychotic than retarded" (Johnson Cottage).

* Family visitation -- "any time". (Parents' reports do not confirm this.)

* Board Meetings - "open to the public". (Community reports do not confirm this.)

* Volunteer program - approximately 30 volunteers. Dr. Clark is not satisfied with these numbers or with the Director of Volunteers, to date. Bucknell University, located less than one half hour away, and with a student population of 3,000, sends only 12 volunteers to Laurelton.

III. Residential Cottages

A. Johnson Cottage - Population 18. Girls "more psychotic than retarded". Dr. Clark clearly feels uncomfortable about these girls, their staff and the program. Difficulty getting a psychiatrist to treat the mentally retarded who are psychiatrically involved.

Dr. Clark "pulled a punitive staff one and one-half months ago". Front door unlocked. (Had been locked until recently.)

Staff:

* Child care workers: -
3 on each day shift
2 on 11 P.M. to 7 A.M. shift

* Teacher on the unit M-F 8:30 A.M.-12:30 P.M.

* R.N. on unit - M-F

* Social worker on unit - M. w. F.

* What happens Saturday and Sunday?

Johnson Cottage (Continued)

Three sleeping areas:

- * First floor - 9 girls, sleeping in cell-like rooms with bed, dresser, sink and toilet with no seat. (The girls may decorate their rooms.)
- * Standing order from the physician (labeled "Behavior Modification") to lock girl in her room, or another room, "if necessary". When we visited the most notorious of these girls was incarcerated, but the nurse had not yet contacted the physician.
- * Second floor - treated as privilege areas -- cell-like bedrooms here also.

5 girls one area

4 girls another area

B. Cottages #9, #10, #11 -- all higher functioning women

1. Cottage #9 - not visited

2. Cottage #10 - (Population: 34) -- Cells again used as bedrooms with personal decorations and belongings. One very large dormitory room with twelve beds.

"Girl of the month" - picture displayed - good idea.

3. Cottage #11 - (Population: 47)

Child care workers:

2 - 7 A.M. to 3:00 P.M.)

2 - 3:00 P.M. to 11:00 P.M.)

1 - 11:00 P.M. to 7 A.M.)

C. Cottages #6 and #7 - General

Clean

Colorful curtains

Labor and industry has ruled no sleeping on second floor -- roof might fall in, in case of fire.

Entire second floor used as playrooms with interesting toys and equipment and as a speech and hearing class (Cottage #6) for 6 Laurelton and 6 community children.

IV. Educational Building - Motto - "Education is the path to independence".

A. Unusually well-equipped facility including: 12 teachers

* Piped-in music

* Store

Educational Building (Continued)

- * Library
- * T.V. studio - for closed circuit use
- * Classroom teaching
- * Time and money concepts
- * Mobility training
- * Kitchen
- * Apartment
- * Speech and hearing booths
- * Evaluation program prior to admission to the workshop

B. Most of the residents in the building at the time of the visit were in a large multi-purpose room. It would appear that the Laurelton residents are not given a chance to use this total facility to their greatest advantage.

The program in the multi-purpose room was co-ed.

How did anything as elaborate as this building get built in 1969???

C. Approximately 80 residents in the 5 to 21 age range.

D. Under the Right to Education, Laurelton will get three teacher aides in September, 1973. The program in the Education Building will be supervised by the Central Susquehanna Intermediate Unit. The I.U. has not offered to take students into community programs.

E. The School Principal, Ed Lint, apparently has a good reputation. He is presently on loan to the Office of Retardation.

V. Workshop and Vocational Training Program

A. Evaluation program prior to admission to the workshop - within the Education Program.

B. Within the large workshop building:

1. Vocational adjustment services - color identification, counting, etc.

2. Occupational therapy and crafts:

Rug looms) These items purchased by community before they
) are even finished. Residents receive 9% of the
Placemat looms) purchase price in dollars.

3. Laundry - a few residents working here.

B. Large workshop building (Continued)

4. Contract shop - Possible to earn between 30¢ and \$3.00 daily here. One contact - preparing computer wires. Another contract - separating cardboard strips. At the moment this workshop is preparing residents for community work placement. Dr. Clark sees this eventually as a terminal workshop for residents who will never leave Laurelton.

C. Workshop in the Community:

Sun-Com - (in Sunbury, Pa.)

VI. Canteen

Attractively decorated and friendly atmosphere - reasonable prices. Half a food and soda shop - the other half a shop selling necessary clothing, toilet articles and luxury items.

Residents may smoke here and in specified areas within the cottages.

Real money (not script or token money used here).

VII. Hospital - 40 beds

Presently housing:

- 4-5 residents who are permanently hospitalized
- 5 sick with acute problems
- 4 constant care, non-ambulatory children from Trendler (Philadelphia)
- 4 constant care, non-ambulatory children from Myrna Owens

Dr. Clark wonders if the hospital building were turned into a 4-bed constant care unit (similar to Myrna Owens), would the local hospitals (such as Geisinger) welcome the Laurelton residents?

VIII. Other Facts and Impressions:

A. Staff: Clark: "Staff, not space, is our problem".

- * 3 full-time physicians in addition to Dr. Clark. (Dr. Clark admitted that it was very difficult to get good physicians and physical therapists.)
- * 2 full-time dentists - residents seen at least once a year.
- * 3/5 of a physical therapist - Dr. Clark views this as inadequate. He also would like to hire a registered occupational therapist.

B. Food Service

Cooked in central archaic kitchen and brought to dining rooms in each cottage. Central dining room to serve all ambulatory residents - cafeteria style - is to open within two months. Food looked O.K.

C. Clothing and Belongings

Individualized, clean and generally attractive personal belongings in/on bedside tables noted throughout the institution.

VIII. Other Facts and Impressions (Continued)

D. Behavioral Modification

"Every resident involved to some extent", including rewarding with M/M's (candy).

1. Token Economy within the cottages. Tokens earned by socially acceptable behavior. (Teeth brushed, hair combed, room neat.)

Tokens are used to purchase t.v. viewing privilege, to rent a cell-bedroom, etc.

(More tokens required for corner rooms, rooms with rocking chairs, etc.)

2. Script Economy used within the Educational Program - both paper and coin money - to teach money value.

3. HIP - Federal monies under Hospital Improvement Grant to be terminated June 1, 1973.

Program used to stimulate older residents' work patterns and production.

IX. Follow-up

1. Ebensburg and similar bleak places should (among other things) purchase colorful plastic play chairs for day rooms from, for instance, Carroll's (Institutional Furniture) in Chicago. What should we do about Ebensburg?

2. Staff numbers. There is no waiting list at Laurelton. Dr. Clark said, "Don't send me any more children unless you send me more staff." However, it is rumored that Laurelton will lose twelve staff positions to Selinsgrove -- part of a plan to give Selinsgrove 200 new staff positions and make all State Schools and Hospitals "equally deprived". Should we object to this transfer?

3. There are numerous reports of horrendous conditions at Selinsgrove -- including brutality. Should we visit Selinsgrove?

4. There are 25 foster grandparents in the Foster Grandparent Program. Although many more are needed, it is difficult getting interested in persons within the personal financial ceiling set at \$2,000. Should we urge that the ceiling be raised to \$3,000?

5. What kind of pressure can we bring to get the Right to Education implemented in State Schools and Hospitals by the Intermediate Units? Will Laurelton be allowed to use (for other purposes) the money previously budgeted to the education of those 21 and under and as of September, 1973, assumed by the Department of Education?

IX. Follow-up (Continued)

6. The Laurelton bus has an hydraulic wheel chair lift. If these non-ambulatory wheel chair kids can be driven from their cottages to the Education Building, why can't they be driven to a community school? Who is putting the pressure on the Intermediate Units???

Respectfully submitted,

Ginny Thornburgh

First Vice President, ACC-PARC

Chairman, State School and Hospital
and Interim Care Committee

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