

Polk Improving, But Patient Load Problems Persist

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POLK, Pa. — It's an overcrowded, understaffed ward, so the women sit — some naked, some in straitjackets — on wooden benches and do nothing. The stench of urine fills the air.

Not far from this ward for hard-to-handle patients, however, is a new brightly painted, neatly kept floor of private bedrooms for patients who are ready to leave Polk State School and Hospital.

Polk's long neglected problems persist, but 10 months after the turmoil at this 76-year-old state hospital for the retarded, some improvements are under way.

During a surprise visit to the Venango County hospital, state Welfare Secretary Helene Wohlgemuth had found patients locked in five-foot-high wooden cages.

Four days later she fired Supt. James H. McClelland and ordered the staff retrained in the humane care of the retarded.

The 58-year-old superintendent fought his dismissal, saying the cages were needed to separate dangerous patients from others. The state Civil Serv-



JOSEPH J. COLOMBATTO
First days were traumatic.

ice Commission, after long hearings in Pittsburgh in June, denied the appeal.

Since then, the cages have been

stored away at Polk. The discipline cottage, where patients were locked in seclusion rooms or told to carry out manual chores as punishment, is closed.

A dining room for both men and women was set up. Workers were told to find those patients who have received little if any therapeutic care.

"My first days here, I was in an absolute trauma almost daily," recalls Joseph J. Colombatto, who replaced Dr. McClelland in June. Colombatto was director of a Connecticut state hospital for the retarded and lecturer at Yale University Medical School.

"I saw things that were not unexpected, but what frustrated me was how hard the need for change had been crying out for years," Colombatto says.

He immediately ordered all hospital admissions placed on a short-term, emergency basis. He tightened the admissions policy to direct elsewhere patients who seemed more suited to community care.

Until the hospital's population is reduced by about 1,000 patients, there can be no major changes in patient care, Colombatto says. On many wards there

are only three attendants to care for 55 or more patients, he adds.

"At best, you end up with a physical caretaker operation that suppresses potential for human interaction," he says. But chances for a population cut-back are uncertain since the state has not set up a timetable for action, he points out.

Polk's basic problems have hardly changed and Colombatto is the first to note that the solutions are out of his hands. With 2,700 patients, the hospital is well over its bed capacity of 1,800. By federal standards, it is 1,500 persons over capacity.

The per diem rate for each patient at Polk is slightly more than \$20, half the sum spent at other state hospitals for the retarded. The money comes from the state and federal governments and relatives.

The new superintendent's main changes involved policies to humanize

the hospital. He urged attendants to think more about treatment and less about physical care.

Many attendants complain that they did not have time to give individual attention to their patients, and were too overworked to complete their basic chores.

Despite the warnings of hospital workers about the elimination of the cages and many of the restraints, patient and staff injuries have not increased, according to Colombatto.

But the transition to a new way of thinking apparently has been an uncomfortable one for some hospital workers.

"We need some kind of discipline. Before we took away privileges or put them in the discipline cottage, but now we can't. We can't go back to the old ways, but we need something," says a long-time worker at the hospital.

"When we have such difficulty ourselves adjusting to the change, you can imagine how the residents feel," says a

20-year worker who was obviously bitter about Dr. McClelland's dismissal.

He begins to give his list of the hospital's troubles under the new administration, but stops and says he prefers to see bad feelings forgotten at the hospital.

In the wards, however, workers complain most about the lack of help and time. "It's not right that you don't have time to talk to a depressed girl, but you just can't," says one nurse.

Staff absenteeism in the more troublesome wards ranges as high as 10 per cent because of the low pay and few prospects for advancement, says a recently appointed, young supervisor.

During his tour of a ward, the supervisor comes upon a young woman strapped by her hands and feet into a bed. She was severely bitten on the nose by a patient usually tied to a bench. The attack victim was put in the bed because she kept touching the stitches on her nose.

"Don't worry, honey," says the nurse, stroking the head of the patient who stirs uncomfortably in the bed.

"Something like this wouldn't have happened if we had enough staff here," says the supervisor. The nurse nods her head casually, it is a remark she seems to have heard before.

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