

No Replacement For Dr. Y

State Hospital Chief Still On Job Here, But He Itches To Work On Mental Health Reforms On Statewide Basis In Lansing

By TIM RICHARD

Nearly two months ago, Dr. E. Gordon Yudashkin, superintendent of Northville State Hospital, was appointed assistant director of the State Mental Health Department responsible for services to the mentally ill.

Today, Dr. Yudashkin is still at his desk at Northville State Hospital. He hasn't moved yet to his Lansing post, where he is to be in charge of coordinating and directing all nine state mental hospitals.

And he says, "there's a possibility I may not go for another three to five months. We've got quite a job getting somebody for this place."

In an interview in his office in the east wing of the NSH administrative center, Yudashkin told why his job here is so hard to fill, what he hopes to accomplish in the state capital, and what he thinks he has accomplished in the 2½ years since he came here from Nassau County, New York.

Yudashkin is a cool, slow-talking but intense and outspoken man who deals in philosophical generalizations and the big picture as easily as he does with the administrative details of the janitors' pay chart. The only time he ever seemed even slightly flustered was when TV commentator Lou Gordon introduced him as "ya-douche-kin" instead of "yudashkin." (The NSH staff calls him simply "Dr. Y.")

'We Rank 25th...'

WHY IS HIS CURRENT job as head of NHS so tough to fill?

"There's a shortage of qualified people nationally," he began. "We're looking both outside and inside the state; we have ads going out nationally, but there's little response."

"Michigan, at this stage, does not have the reputation or financial backing of the state government or the programs to be considered a prime place to work in the mental health field," he went on.

"Since I've been here, our resources have not been increased materially. We're falling behind—not growing as fast as the population. Our community service programs are dismally behind."

"We rank 25th among the states," he added. This rank is based on the dollars spent per capita, facilities per capita, and number of patients treated per capita.

Most psychiatrists would rather be in

private practice where you make more money and don't have the headaches," Yudashkin said.

Why, then, did he come to Michigan in the first place?

Yudashkin says he was recruited here—he had been assistant director of the New York State Department of Mental Hygiene (1954-60) and was founder and medical director of the Psychiatric Consultation Clinic in Nassau County when he was lured to Northville in March of 1966.

"I was attracted to the people in the central office in Lansing. I felt that they felt the job was important," he said.

He expects to see some improvement in the supply of qualified administrators, however, in the next two years. "Part of my work here is training the heads of our nine units. Each of these units is like a small hospital. Six of those nine heads should be ready in the next couple of years for a superintendency."

'Civil Service Archaic'

THERE'S PRESSURE for him to get going up to Lansing.

Dr. William H. Anderson, director of the Mental Health Department, said that Yudashkin has "an excellent reputation" for developing hospital programs in the metropolitan area and in furthering ties between his hospital and the community. Many Observer-land churches and clubs have taken part in those programs, and local employers have provided daytime jobs for many patients.

In his Lansing post, Yudashkin would be an assistant director, reporting directly to Anderson, in charge of the nine state hospitals that house 14,000 patients—a population group larger than the City of Farmington and about the size of Plymouth Township.

Yudashkin himself sees the job as even bigger than it looks on paper. "What I plan for the hospitals is dependent on what is being planned for the community programs," he said. Thus, he would expect to become involved in a large part of the state's programs for the mentally ill.

He knows what he wants to do in Lansing.

"I WANT TO INFLUENCE and modernize our relationship with the Civil Service Commission. This archaic Civil Service system is castrating our programs. They don't understand our programs. They don't classify the

jobs at the level we need. They don't classify the people properly."

"They are so removed and aloof of the needs of our times."

He cites a pay raise voted by Civil Service as an example. Top administrators making \$30,000 a year got 10 per cent—that's \$3,000. The guy making \$4,000 a year got 5 per cent.

Ford Motor Co., for one, is recruiting the kinds of people the state hospital used to be able to hire, and paying them more. "Thirty per cent of our staff comes from the inner city. These people can't afford to come out here. And now they don't have to."

Civil Service, he went on, doesn't even give everyone a cost-of-living increase. An attendant who is married "can't make it. He needs an outside job. We went through it at every level. He'd come out behind at the rate of \$100 a month."

"And if a guy is working eight hours at another job, what kind of mood is he in to take care of sick people here?"

A SECOND PROBLEM Yudashkin would like to attack at the state level is the state-county financial arrangements for patient care.

"The county is responsible for the first-year care of a patient, and the state thereafter. We're the only state which has that kind of an archaic arrangement."

"With our increased treatment programs, fewer and fewer patients stay for more than a year. That puts a greater and greater burden on the counties."

He would like to see a system of regionalized mental health programs across the state, "with less distinction between state hospitals and community mental health programs."

It's this part of his goals that carries him outside the limit of his defined job as head of all state hospitals. All mental health facilities, Yudashkin believes, should be planned to complement each other and give a total range of services to the population—not the community health programs going off in one direction and hospitals in another.

A final goal in his Lansing job is one he describes as a "fantasy—to be articulate enough to interpret to the legislators what we're really trying to do."

"They don't know what they're buying and what they're not buying in mental health programs. I want them to know what we can do and what we can't deliver."

'No Dumping Ground'

YET HE THINKS he and his staff have accomplished quite a bit at Northville State Hospital in the last 2½ years.

"We've moved away from being an institution, with long-term custodial care, isolated from the community, a country club. We have a treatment program in every area of the hospital as opposed to custodial care. We've changed from a rest home to a hospital."

"We're not a dumping ground—not a place to leave people because it's socially or financially desirable for the family to get them out."

"We're screening all our geriatric admissions. Every old person who begins to lose his memory doesn't need to be in a mental hospital."

"We've reduced our in-patient census from 2,200 to 1,600. This has allowed us to concentrate our resources, to raise the staff-patient ratio."

The reduction of the patient census has been accomplished to a great extent with drugs that reduce the average period of hospitalization, yet allow more persons to be treated during the course of a year.

Another factor in improved treatment is community programs—letting the patient have more exposure to the outside world and not keeping him cooped up as much as in the past.

"We've protected the staff from the oppression of the administration," Yudashkin went on.

"WE'VE ELIMINATED the waiting list for the adult mentally ill. In so doing, we've been able to become an important influence in the total health planning of the county. It has enabled much of the planning of the mental health board to take place. That was a dimension we didn't have two years ago."

"We have comprehensive mental health services for the area now."

"We have a young adults program. We have a consultative program in geriatrics for nursing homes—a doctor going full time from nursing home to nursing home."

"We're doing some joint planning with St. Mary Hospital in Livonia. It'll be a first if it comes to fruition. It's a program where they would supply some psychiatric beds, and we'll supply the staff. We're excited about that."

Dr. Yudashkin summed it up: "Locally, we're nowhere near the end of all the changes. This staff will be capable of making still more."

"The state hospital five or ten years from now won't be what it was."

Sunday Edition

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DR. E. GORDON YUDASHKIN, superintendent of Northville State Hospital, is due to go to Lansing as assistant director of the State Mental Health Department.