The Young And The Old Live Together At Oak Hill



COMPETITIVE SPORT---Three of the Living Opportunities residents play a fast game of shuffleboard in the recreation room. From left,

How do a group of young people and eld-erly patients function when living together? Is this a feasible method of treating the young handicapped persor? These are just some of the questions being explored in a pilot program called "Liv-ing Opportunities." which operates out of the Oak Hill Nursing Home in Farmington. The pilot program—the only one in the country—is an attempt to see what can be done to give opportunity for a selected group of handicapped people to live away from home and learn to manage their lives. There are nine young adults between the ages of 21 and 31 now living in Oak Hill. All are confined to wheelchairs and are seriously afflicted by a variety of diseases and inju-ries.

THES. TENTATIVE CONCLUSIONS that can be drawn after five months are: Oak Hill personnel, the Living Oppor-tunities participants and the elderly patients are all enthusiastic about the inter-relating and mutual help between the two age groups. On the other hand, the walls are closing in on the nime Living Opportunities partici-pants and one hears grumbles about "lack of freedom. The Living Opportunities residents also say that they want additional physical thera-phy that isn't currently available under the setup.

THERE ARE FREQUENT visits be-tween the Living Opportunities participants and the geriatric patients. Oak Hill Adminis-trator James Knight asys that the sight of the groups visiting each other in their rooms-elderly patients pushing wheelchairs for their young friends and even helping some of the handicapped to eat-is not uncommon. Parties scheduled by either group are frequently open to the other age level.

Knight says that one of the most pleasing reactions has been the positive acceptance of the families of the elderly patients to having the younger people in the nursing home.

The young people say that helping the geriatric patients makes them feel useful and this seems to be a mutual reaction.

Joyce Laidton, one of the Living Oppor-tunities residents, sums up the feelings of her counterparts when she says that 'I'd like to find some way for us to help the other pa-tients."

The young people talk about the possibil-ity of using their skills to help market some of the needlework and handiwork done by the older residents and about sponsoring pro-grams and activities for their neighbors, Ralph Harzey says that "more activity livens a place up" in support of these desires.

BEING CONFINED TO WHEEL-CHAIRS, the Living Opportunties people find that simple tasks such as visiting the library shopping or even keeping a doctor's appoint-ment depends upon help from another person

For group outings, Living Opportunities hires a special van, but the lack of qualified drivers has curtailed the outings. Even in these projects one person is needed to assist each patient who makes the trip.

each patient who makes the trip. Barbara Hay, coordinator of volunteers for the Living Opportunities program, says that people are needed to help with the special activities and parties in the home. to help with the group outings with the ultimate goal of having one outing a week and providing transportation for individuals who have spe-cific errands. In addition to this volunteer assist-

ance. Living Opportunities also seeks people who have a particular knowledge or skill to help with the program or even people to help the residents write letters and make phone calls.

Presently there are scout troops and church youth groups who have volunteered time, but additional help is still needed. If you would like to participate as a volunteer, con-tact Mrs. Hay at 474-5665.

KNIGHT AGREES that all of the people in the program would like more therapy, but cites the cost factor and the shortage of therapists as roadblocks.

Funds for the program come from a three-year grant from the United Cerebral Palsy Association of Michigan, the Junior League of Birmingham and the First Society of Detroit. Maximum capacity of the pro-gram is 20 people. Oak Hill has a total of 80 beds.

Total budget for a year is \$10,500 and this covers special equipment, transportation and recreational costs and pays the salaries of the special therapists. Nursing and medical costs are paid under the state medicaid pro-gram.

Knight says that the \$14.48 per pareint -per day pays about half of the medical and nursing costs and Oak Hill is subsidizing the program by paying the rest of these costs.

IN A LITTLE MORE than two years, the

decision about whether or not to continue Liv-ing Opportunities will be made. It could be dropped because of economic, medical or so-cial reasons.

On the other hand, maybe the state will

increase its medicaid payments or one of the large foundations will help to underwrite the costs-

The planners might, even discover ~ that the patients—both young and old— are responding better than anyone hoped.

Whatever the decision. it's great to hear Mary Lou Green, one of the first patients to join the program, says: "I'm really moving since I came to Oak Hill. I was in my shell before that, but now I'm buys from the time I get up in the morning until I go to bed at night. There just aren't enough hours in the day."

The planners can make their decision about the merits of Living Opportunities, but Mary Lou has already made hers.





EXAMINES PRODUCT—Bill Brooks, a journalism graduate of Central Michigan University, reads the news-paper with the eye of a professional.

FRIENDLY VISIT—Ron Bailey chats with his roommate te" Royce. "Pete

