



UNDER THE NEW "UNIT" organization of Northville State Hospital, patients and staff are set up in 10 nearly autonomous groups:

1. "A" building, medical and surgical.
2. "A" building, neurological and infirm geriatric.
3. "B" building, young adults.
4. "C" building, admission and intensive treatment — males.
5. "C" building, admission and intensive treatment — females.
6. "D", "F" and "G" buildings, primarily geriatric.

7. "H" building, adolescent male and female, and acutely disturbed male and female, with a well-staffed rehabilitation program.

8. "J", "K" and "O" buildings, chronic regressed — mostly severely ill patients at NSH.

9. "L", "M" and "N" buildings, chronic convalescent.

10. "Community" unit — outpatient, walk-in patients, 24-hour emergency service, night hospital, family care, consultation and education.

Northville State Hospital was opened in 1953, but it's the last of its kind the state Mental Health Department will ever build. The reason is that the entire field of mental health has shifted its emphasis from custodial care in a large institution to intensive care, often aided by new drugs, in community-level institutions.

The results: A decrease in the number of patients in any institution, a more rapid turnover of patients, a great reduction in waiting lists, more outpatient treatment.

For Northville State Hospital, these changes have meant a freeze on its growth in sheer size and a reorganization of everybody and everything into a number of "units," each nearly autonomous.

Nevertheless, with about 2,000 patients, a staff of not quite 900 and a payroll of better than \$5 million a year, Northville State Hospital, on 7 Mile west of Haggerty Road, remains one of the western suburbs' bigger industries. And the tendency of the people — patients, staff and volunteers — to think of it as a warm "community within a community" has increased as more volunteers have been brought into direct contact with patients and the patients have become more active.

ORIGINALLY, NSH WAS DESIGNED to be expandable to 3,500 patients. It hit a peak of about 2,300 a few years ago, and now it has less than 2,000 at any one time.

"Formerly," says Louis J. Schudt, the NSH director of community relations, "we had a waiting list which numbered 300 to 400 patients. Because of the increased numbers of patients with modern medications leaving for their own homes or for nursing homes, this list has been reduced to zero."

The more rapid turnover of patients shows up in the hospital's statistical summary: Direct admissions in 1961-62 were 239; six years later, they had leaped more than five times to 1,335. Discharges six years ago numbered 297; last year, they had multiplied 3½ times to 1,062.

Heading NSH as medical superintendent for the last 16 months has been Dr. E. Gordon Yudashkin, a relatively young (45) former medical director of the Psychiatric Consultation Clinic in Nassau County, N. Y., and a certified diplomate of the American Board of Psychiatry.

Articulate and public relations-minded, Dr. Yudashkin explained the vast changes that have occurred in the field of mental health and hospitals in the last few years:

"THE OLDER APPROACH involved removing the troublesome patient from the community and his family, and keeping him in the hospital until there was absolute assurance he wouldn't upset anybody — which, in most instances, meant a lifetime.

"It meant most institutions were completely devoted to custodial care. It was 'putting the patient away.'

"The old concept was to build large, impersonal hospitals to treat patients in a mass

way. Michigan wasn't so bad, but New York has some hospitals for 14,000 patients.

"The newer approach is to try to keep the patient close to the community and treat him as close to home as possible, if not in the home.

"The patient is treated more intensively for a shorter period of time, and treatment is continued once they're back at home.

"The newer concept is 300 to 800 patients in a unit. This is why we've broken up NSH into units, each of which functions more or less autonomously.

"Without any increase in staff and budget — we've reduced the staff and number of beds since I came here in April of 1966 — we've increased to almost double the number of patients treated.

"ONE OF THE MAIN complaints from patients is that we've changed our concept from custodial and entertainment to treatment. It means the number of movies and picnics has been cut down. It's more of a hospital and not a resort.

"A number of patients who have been here five or ten years don't have to be here ... but you can't get them to leave. Their illness may have died out, but they've become 'institutionalized' to the point where they can't go back into the community."

"Now, most of our patients are out in three to six months.

"We used to have some patients going out, contracting for gardening at 80 cents an hour.

"Now, they're seeking regular jobs at competitive wages — some work in Livonia Mall and Northville. The acceptance of the community has been quite good. We've had no untoward incidents — no one has had any cause to regret.

"It's kind of nice, in the morning, to see patients waiting to catch the bus and go to work."

HERE'S WHERE NORTHVILLE stands in the entire scheme of things:

"The state Mental Health Department operates 18 hospitals — six (including Northville) for the mentally ill, one for the criminally insane, eight for the retarded, one for the epileptic, and two specialized training, research and treatment facilities.

One of the specialized facilities is Hawthorne Center, on Haggerty Road just east of NSH in Northville Township. Hawthorne is a children's hospital and since December 1965 has been accepting young patients who previously went to NSH.

Serving the 2,100 patients is a staff authorized at 878 persons.

Nearly 600 are professionals who serve the patients directly. Roughly two-thirds are attendants, another 50 are either registered or practical nurses, 15 are psychiatrists, 13 are psychiatric residents, 22 are social workers and 26 are activities therapists.

The other nearly 300 are in food service, maintenance and other "housekeeping" positions.

As an industry, NSH is about 50 per cent larger than Plymouth school district. The hospital's annual budget is \$6.6 million, including a payroll of \$5.1 million. Cost per patient for hospital care has been set by the State Mental Health Commission at \$8.45 a day.

THE SERVICE AREA of NSH is the western suburbs. Said Dr. Yudashkin:

"We've outlined an area of 200,000 population — Northville, Livonia, Plymouth and Redford — for which we will provide comprehensive services.

"The idea is that, ultimately, there will be comprehensive mental health services for each 200,000 persons in Wayne County.

"That way, we can maintain personal contact and provide personalized services."

"Up to now, patients in Wayne County have gone for continued treatment to Wayne County General Hospital, Ypsilanti State Hospital or here.

"But we are now going to divide Wayne County into districts ... Otherwise, we'll be all over the place and duplicating services."

This approach to continued care, he said, is part of the community approach to mental health services.

ANOTHER CHANGE in mental health has been greater and greater use of volunteers.

"We've created the position of volunteer coordinator so we can get them (the volunteers) doing more things. We've increased the number of volunteers working directly with patients," he said.

A recent issue of the NSH newsletter listed 19 different groups helping in one way or another as volunteers. The NSH auxiliary put in about half of the more than 13,000 volunteer service hours for the year, but other major contributors were from clubs, schools or churches in Plymouth, Farmington, Livonia, Redford, Southfield, Berkley and Highland Park.

A report on a volunteers workshop is particularly revealing. The newsletter quotes a speaker as saying:

"Patients don't compliment the hospital on the beauty of its buildings and its equipment; they don't comment on how happy they are that they are in a modern institution.

"Instead, they tell of the care they have received; they compliment the employees who served them; they mention the cheerfulness of Red Cross hospital volunteers and other volunteers."



A BAND is one of many activities patients are encouraged to take part in as part of their

therapy. Scene is a music room in the activities therapy building.



What Volunteers Can Do

To help as a volunteer at Northville State Hospital, you can work either as an individual — preferably on a regular basis, such as once a week — join the auxiliary, or work through your school, church or club. Some of the jobs you can do:

- Assist at arts and crafts.
- In the evening, transport working patients from bus lines to the hospital.
- Help patients read, count.
- Assist activity therapists.
- Lead in group exercises, singing, cooking, groups, games, drama club.

- Aid in clerical work.
- Give a monthly party.
- Take up a fund-raising project; Cherry Hill United Presbyterian Church recently raised enough for a theater-size popcorn popper.
- Transport patients to church on Sunday.
- Visit forgotten patients (under supervision of and in cooperation with area psychiatrist and social worker.)

To offer your services, call the hospital at 349-1800 and ask for John W. Taliaferro, volunteer services coordinator.