

Feb. 1, 1933.

TO WHOM IT MAY CONCERN:-

I am in receipt of the report of the Joint Legislative Committee on Organization and Economy and Griffenhagen and Associates, have reviewed same and find, according to my understanding in general of the State Hospitals of Texas, and especially the operation of the Rusk State Hospital, our efforts, intentions, methods and practices so at variance with the report, in order that further investigation, if desired, (which it appears certainly should be instituted if concrete facts are necessary), I am taking the liberty to call your attention to certain portions of the report.

First of all I would like to be understood, and this accepted with all sincerity, that in so far as there is reflected incompetency and the lack of honest effort in the discharge of duty and the administration of the Hospital's affairs, no defense is offered other than to invite any number of reputable physicians or teachers of the State of Texas to visit and investigate the methods, treatment and care of the patients of this Institution, with the assurance that if found to be not in keeping with the standard of present day scientific knowledge and practice, sympathetic and humane treatment of patients, and this in a manner to render Texas with an efficient service, in so far as facilities and equipment may afford, I should be glad to immediately relinquish my services as Superintendent. May I add that this is not offered wholly as criticism of the report but in view of the fact that the report is intended to convey authentic information upon which the law making bodies of Texas are to consider reorganizational measures, it is believed a duty to call your attention to some things that, in my opinion, I am persuaded have been accepted as reflecting conditions not in accord with actual existences. In this spirit and with a desire to be of whatever service I may to the betterment of the laws and Government of the State this is prompted.

In introductory remarks, an explanation of the decline in cost of Hospital operating expense since 1925 was largely due to a decline in the ratio of employees to patients. In this connection your attention is invited to a consideration of decline in prices of all commodities since that time. But few items are now at least fifty per cent less in price than was the case in 1925. Many cost not over one-third of what was the case at that time.

On page 90, part 7 of said report concerning the Rusk State Hospital, possibly as part of justification in the opinion later expressed, states that

the policies of this Institution and "ultimate goal" is that of low cost of operation and avoidance of criticism. This apparently at expense of any other consideration which certainly has not wittingly been the case. Again under policies and procedures, the charge is made that "the policies of this Institution have been to direct its efforts toward the custodial features---rather than---treatment and curative features". My introductory remarks are offered in reply to same.

On page 91, concerning the admission of patients, it is stated:- Patient is first seen by the Superintendent, when after a cursory talk with patient, relatives or escort, a "snap" diagnosis is given, then assignment to ward, etc., "rather than on the basis of actual diagnosis". As a matter of fact an effort is made when a patient reports to the Hospital, to have the physician under whose care the patient is to be placed, with the Superintendent, make the admission and then contact relatives when possible or gather from those who accompany the patient, all possible history in order that it may be used at a later date when final history is written and in connection with the completed examination and procedure, as a part of same, is presented with the patient at the Staff meeting of Physicians when and where Diagnoses are finally established. No report or intention at the establishment of definite diagnosis is attempted at the time patient is admitted.

Concerning criticism relative to methods of handling records will state that a part of this is well applicable. The expense necessary to at once bring about change of our filing system is not believed justifiable. All equipment purchased for use in this connection during the last five years has been of suitable type and with the intention of working out a revised system which is being and should be accomplished.

Concerning comment relative to diagnosis and treatment, on page 92, an explanation as to the examination, diagnosis, etc., of patients has above been outlined.

State Hospitals the country over not only in Texas, are, and to my knowledge have been most of the time, over crowded for the past 15 years. Under present conditions it is admitted that patients cannot be as accurately classified and placed as better judgment and choice working outline would dictate. All patients however are classified and placed on like wards or like groups as nearly as it is possible to carry out.

Near the center of this page is found the statement that:- "the State recently supplied all the insane Hospitals with Electrical Diathermy apparatus for the treatment of general Paresis; and like any new toy it is being utilized"----This Institution has never been furnished a Diathermy machine, not however wholly because we do not appreciate the value of treatment by the use of same but principally for two reasons:-- First, personally our preference for the treatment of general Paresis is that of inoculation with Malarial plasmodia. This practice we have carried on for the past five years and in view of the fact that it has not been so difficult in this

locality, because of Malarial infestation throughout this section, most of the time to make direct transfer of blood, location and conditions have made this practice possible with less handicap than some other hospitals. Secondly, because of the fact that we have had no proper buildings for the operation and placing of the machine, together with other equipment which has proven beyond question of value. While as indicated the comparative value of diathermic treatment in General Paresis may not be definitely proven at this time, in keeping with the Malarial treatment, certainly the concensus of opinion the country over favors efforts by this means in many instances. Confirming this statement you are referred to the November 1932 issue of the American Journal of Psychiatry, Page 531, to a scientific paper read before the Association at Philadelphia, Pa., "Diathermy and treatment of General Paresis" by Hugh A. McKay, M. D. Medical Superintendent Ontario Hospital, together with comments and discussion.

At this time permit me to recall the fact that this Institution was opened for the reception of patients in Sept. 1919. Since 1927 our patient population has doubled. The demand upon the State for the annual care of additional patients has been so imperative and the growth of the Institution so rapid, with necessary slices by the Legislative appropriation Committees and vetos of Governors, it has been impossible to maintain, at any time, a well rounded, balanced operating Hospital. All equipment purchased, all buildings erected and additions to the hospital for the past more than five years have been with a view of permanency and in keeping with an idea of balancing and rounding out eventually, a modernly equipped Hospital. There is now nearing completion the erection of a Hospital building, the appropriation for which was asked for more than two years ago, which when completed will provide for the installation of Hydro-Therapy, Electro-Therapy, (including Diathermy machine), Laboratory, X-Ray and Dental departments as well as modern operating room and room for Staff meetings, affording advantages for complete examination and more scientific care and Diagnosis of patients, carrying as well approximately 100 beds.

It is stated "the trained Therapist has been dispensed with and replaced by a person more artistically inclined". In explanation to this will state that we formerly have employed two graduate instructors in this department whose services as regards worth and value to patients, to say nothing of a decided economical saving, in our opinion were decidedly of less value than the present incumbent who in addition to her "Artistic" talent has proven herself deeply interested and capable and concerning whom, though not a graduate, in my opinion could not be justly claimed as untrained, since aside from several months training here as assistant under one of the graduate instructors, spent considerable time in visiting and familiarizing herself with the department in the State Hospitals at Austin, Wichita Falls and San Antonio. Concerning the X-Ray department and that "its work seems to be that of taking pictures", I will advise that treatments for skin infections, malignant conditions, Thyroid dyscrasias, Uterine disturbances, in connection with the climacteric, and other conditions have been practiced since 1927. While it had not been installed at the time this committees representative visited this hospital there has since been added to the X-Ray department, Fluoroscopic equipment and is, at this time, operating.

Concerning diet of patients referred to on Page 93, where it is indicated very gross lack of proper food values has been maintained, it will be stated that in addition to our own home grown supply, since last October there has been purchased and used as food, what may be termed "Winter vegetables" against which principal criticism was offered:-

1000 lbs., Onions	11,613 lbs., turnip greens
22,500 lbs., Irish Potatoes	11,163 lbs., Sweet Potatoes

Because of our somewhat isolated location and lack of proximity to market and adequate city cold storage provision, we are handicapped to some extent in supplying during very brief periods just what might be selected. Special care has however at all times been given to the question of food and certainly as is generally evidenced by the physical improvement of patients admitted to the hospital, patients could not have suffered nearly to the extent implied in the report. Seasonal recurrent Pellagral outbreaks are not so infrequently noted in any and all Hospitals. The report intimates one such instance here when in fact there have been many show recurrences. Nor have I been able to confirm the knowledge implied as to absolute etiology of Pellagra, a thing the south has sought for years. I know of no instance of true scorbutic conditions developing in this Institution despite the fact there have been those who have, because of refusal to swallow, necessarily been fed only liquids with a tube for periods of 3 years at a time. Another thought in connection with the feeding of the Insane is that because of delusions, to which many react, it is a very difficult matter to feed them. such articles as greens, potatoes, cabbage, etc., Too, in many instances to combat the injurious effect of bolting, over-eating, the swallowing of injurious seeds, pits, bones and like substances, food necessarily is selected in a peculiar manner. Difficult and obstinate patients necessarily are fed in keeping with instructions of Physicians and in justice to the Dietitian and the Store-Keeper, it may be added, these many and perplexing conditions must be over come. All buildings for patients erected since 1926 have been accompanied with independent Kitchen in order that each group and class of patients might be served such diet and foods as are fitted to their peculiar needs, at the same time offering an opportunity of serving in a more tasty and palatable manner.

On page 93, concerning Store-Keeper & Accountant, relative to the local buying of Perishables and comment stated to "invite fraud", it will be stated that our monthly local purchases of such commodities amounts to an average of about \$75.00 a month. Monthly bills are presented with affidavits as to correctness, etc., attached, shown on our books, sent to the State Board of Control for confirmation and payment and checked by the State Auditor. Requisitions for commodities from the Store room are made to the Store Keeper. Items issued listed and checked against regular invoices and Store Room stock, these in turn are checked by the State Auditor as to correctness against Stock report filed and maintained in the Store-Keeper's

Office for inspection. Stock balances regularly furnished purchasing division State Board of Control. Purchases of all types and kind are weighed, checked or measured and examined at the time of receipt at this hospital to insure delivery of quality and quantity of the commodities meeting the requirements of specifications recited in requisitions or contractors agreement.

On page 96, under head of misleading titles and positions with particular reference to Tuberculosis nurses and Butcher, in the sense of common reasoning could not a farmer or a high school graduate, after years of training in a Hospital for the specific purpose, become equally as proficient as a nurse who had been trained in some Institution of a different type of work? Or could not a young man 19 years of age who had served as helper and relief man for two or three years under a recognized Butcher, after four years further experience cutting some 5000 lbs., of beef a week himself become a Butcher, even though he were raised on a farm?

On page 97, as regards nurses who did not understand the operation of a sterilizer, it will be stated that the sterilizer at this hospital has been operated with no serious mishap or appreciable lack of efficiency for at least since 1926. There being not under one-half dozen people, any of whom can be trusted to satisfactorily operate the Sterilizer.

On page 101 mention is made of the fact that "the roof of the main building carries no insulation". Reference to the past appropriation for this hospital will disclose the fact that \$10,000.00 was appropriated for this specific purpose and early in the present biennium a decidedly beneficial insulating roof was placed on this building.

In conclusion may I state that I am aware of the fact that much beneficial change and improvement can be made in this Institution. That with equipment and facilities which should, as rapidly as State finances will permit, be systematically worked toward result in a much more satisfactory plant. That further investigation should be made and then taken into account the States financial ability to provide immediate compliance of demands with consideration for what is now necessarily being utilized before the adoption of radical abandonment of such as the State is at present supplied with.