

It might be interesting to summarize what the State of South Carolina has appropriated for the State Hospital for the Insane during the past five years.

	Total No. Patients Under Treatment During the Year.	Appropriations.	Per Capita.
1910	2,193	\$291,401.00	\$144.22
1911	2,283	293,529.00	132.76
1912	2,428	318,380.00	168.33
1913	2,505	305,247.00	155.86
1914	2,738	319,124.00	176.18

Two hundred dollars is the average per capita in modern and well-equipped hospitals for the insane. A per capita of less than \$175.00 means custodial care, which, in the long run, is the most expensive.

PRESENT CONDITIONS.

In a report, with recommendations, read April 7th, 1914, at the meeting of the Lackawanna County Medical Society, by Dr. Thomas W. Salmon, Director of Special Studies, National Committee for Mental Hygiene, on "The Treatment of the Insane in the Scranton Poor District," he states:

"For the treatment of any special class of the sick these fundamental provisions are required: Sanitary housing, good food, good clothing, kindness and appreciation of the aims of the hospital on the part of those charged in any way with the care or supervision of patients. These fundamental provisions must be effective by a sound administrative system, free from political or other selfish control, in which the medical and scientific purposes of the hospital are primary considerations. With these provisions constituting absolutely essential ground work for the treatment of any special class of the sick, the following may be stated to be the facilities needed for the best modern treatment of mental diseases:"

1. Direction of the administration of the hospital and leadership in its medical work by a physician trained in diagnosis and treatment of mental diseases.

2. An adequate medical staff, organized so that duties are divided in accordance with the training of its different members and with the requirements of the clinical work.

3. Regular and frequent conferences of the medical staff at which the diagnosis, treatment and prognosis of each new case admitted

are considered, and at which cases about to be discharged are presented; training in psychiatry for new members of the staff being considered a special object.

4. The reception of all new cases in a special department or in special wards where they may receive careful individual study, and where those with recoverable psychoses may receive continuous individual treatment.

5. Classification of all patients with reference to their special needs and their mental condition, such classification being flexible enough to permit frequent changes.

6. A system of clinical records which permits study and review of the history of cases even after they have been discharged.

7. A laboratory in which some of the most useful tests required for the study and diagnosis of mental diseases as well as those required in general clinical diagnosis can be made and in which pathological material can be studied.

8. Provision for special treatment, such as hydrotherapy, electrotherapy, etc.

9. Provision for examination and treatment by dentists, ophthalmologists, gynecologists, etc.

10. An adequate number of trained nurses and the maintenance of a school for nurses, under the direction of a supervisor of nurses, who should have not only training in general nursing, but special training in nursing those with mental diseases.

11. The employment of female nurses in the reception and infirmary ward for men.

12. The systematic use of occupations for their therapeutic effects under the direction of workers especially trained for this duty.

13. Special attention to recreations and diversions with reference to their therapeutic value.

14. Liberal use of parole, especially for quiet, chronic patients who can live in farm houses.

15. Special provision for the tuberculous patients.

16. Special provision for the pellagrins.

After having presented the above as the essential requirements in a hospital for the insane, which are recognized and accepted by the medical profession, I will answer each of these statements as applied to the present institution, based upon personal study and observation.

(1) The present superintendent is a gentleman who was in general practice in the rural districts before his appointment to his pres-

formed. There is, however, sufficient work in a hospital of this size to require the services of an experienced pathologist.

(8) There is no provision for any form of special treatment.

(9) There is a dentist in regular attendance, but no regular visiting consulting staff. A small operating room has been equipped in the hospital ward of the women's department. This room is neat, clean and apparently satisfactory for present needs.

(10) The nurses' training school in the female department is the most hopeful and attractive feature about the institution. The superintendent of nurses is a graduate nurse and well equipped for her duties of general nursing. Unfortunately she has had no previous experience in a hospital for the insane. The male nurses are not required to take the training nor do they wear any distinctive uniform.

(11) Female nurses are not employed on the male wards.

(12 and 13) There is no systematic use of occupation and recreation. Some of the patients work about the wards and in various departments of the hospital farm. The most distressing phase of life in this institution is the utter lack of work and play for the patients, under the supervision of a teacher. The weekly dances are given in winter and the moving picture show during the summer. Diversional occupation is unknown.

(14) During the past year 224 patients were discharged as improved and 109 as unimproved, while 560 died. There is no after care or placing out system.

(15) There is no special provision for the tuberculous insane.

(16) There is no way to separate the pellagrins. The importance of this is shown in the following table, taken in part from the 90th annual report of the hospital:

PELLAGRA STATISTICS FOR A PERIOD OF 8 YEARS.

	Admitted.	Recovered.	Died.
1907	4
1908	46	..	33
1909	112	4	68
1910	213	14	106
1911	284	28	154
1912	273	35	228
1913	366	36	165
1914	462	7	356

requirements of a modern hospital; and that, with all of these handicaps, it is hardly to be expected that modern care and treatment for the insane can be secured. So that I wish to make it perfectly plain that we should not criticise those who are in immediate attendance of these patients, but that on the other hand, they should be given credit for doing as much as they do under the unsurmountable difficulties. The overcrowding of the wards and lack of attendants, and need of sufficient money, are all contributing factors in the present state of affairs.

There is appended to this report a tentative estimate of the cost of carrying out the permanent improvements to the present buildings and of erecting new buildings, as above outlined. Also two sketches, one showing the present location of the buildings, and the other indicating the proposed changes, both in the old and the location of the new. I believe that an appropriation of \$600,000, to extend over a period of about five years, would meet the expense of reconstructing the present institution and establishing a colony for the negroes at State Park, especially if we take into consideration that we can save from five to eight per cent. on the total cost of the buildings by utilizing the labor of the patients.

"PLAN OF REORGANIZATION."

In suggesting plans for improvements at the State Hospital for the Insane, I have kept ever in mind the fact that, first of all, it must be practical and at the same time sufficiently adequate and elastic to meet all future requirements, and in the second place that it should be within reasonable financial limits.

We will consider first the general plan of arrangement of the buildings and distribution of the patients. The internal organization of the hospital will be included under a separate heading.

The most evident step at the present time is to remove all of the negro insane, the idiots and imbeciles, the tuberculous and pellagrous patients, to the State Park. By doing this sufficient accommodations will be secured at the present hospital for all of the white insane for a great many years to come. In fact, by developing the farm colony idea there will never be the overcrowding of these buildings that exist at the present time.

We will consider now that we have decided to remove the above mentioned patients, and reconstruct the present buildings for the white patients of both sexes, and that we are planning for a model institution.