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DEPARTMENT OF INSTITUTIONS AND AGENCIES

ANNUAL
REPORT

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1958 ANNUAL REPORT

DEPARTMENT OF INSTITUTIONS AND AGENCIES



NEW JERSEY STATE BOARD OF CONTROL

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STATEMENT



Mr. Lloyd B. Wescott, President
State Board of Control
Department of Institutions & Agencies
135 West Hanover Street
Trenton, New Jersey

Dear Mr. Wescott:

I have the pleasure of transmitting to the State Board of Control the Annual Report of the Department of Institutions and Agencies for the fiscal year ending June 30th, 1958.

It is, of course, impossible to give a complete accounting of the many and varied activities and programs of our Department without going into encyclopedic detail. Rather, we have, prepared this condensed report which outlines some of the highlights of 1958.


This report outlines our progress in meeting problems, and suggests some of the strains placed on our limited resources by demands for improved welfare services. While we take pride in the rather substantial accomplishments of the last fiscal year, all of us in the Department are painfully aware of what remains to be accomplished. The aim of this report is to tell the Board and all the citizens of New Jersey the directions in which we have been moving, and some of the problems we face in the year ahead.

Very truly yours,

Handwritten signature of John W. Tramburg in cursive script.

John W. Tramburg, Commissioner

JWT:22



STATISTICS IN BRIEF

Programs Administered or Financially Aided by

THE STATE DEPARTMENT OF INSTITUTIONS AND AGENCIES

Mental Hospitals

Admissions to mental hospitals increased from 8,124 in 1957 to 8,513 in 1958. Despite this, the number of psychiatric patients in hospitals decreased from 21,877 on June 30, 1957 to 21,533 on June 30, 1958, indicating a continued trend toward shorter average stays.

Mental Health Clinics

The end of the first year of the 1957 Community Mental Health Act finds 17 clinics receiving grants-in-aid with the number authorized for fiscal 1959 rising to 27.

Mental Deficiency

Admissions to schools for the mentally retarded decreased from 599 in fiscal 1957 to 368 in fiscal 1958. This reflects the abnormally high admission pattern of 1957 because of the opening of the Johnstone Training and Research Center. The resident population at the end of the year (including persons on seasonal vacations) rose from 5,652 on June 30, 1957 to 5,742 on June 30, 1958.

Chest Disease Hospitals

Admissions to hospitals for chest diseases (mostly tuberculosis) decreased from 3,729 in 1957 to 3,553 in fiscal 1958. Resident population figures as of June 30 decreased from 2,038 in 1957 to 1,899 in 1958.

Correction Facilities

Court commitments to correctional institutions increased from 2,723 in 1957 to 2,810 in 1958, especially at Bordentown and Annandale Reformatories. The resident population of correctional institutions increased from 4,896 on June 30, 1957 to 4,945 on June 30 of 1958. The active parole caseloads on the two days were 3,563 and 3,844 respectively, an increase of 7.9 per cent.

Diagnostic Center

Inpatients examined at the Diagnostic Center decreased from 526 in 1957 to 508 in 1958. Outpatient examinations increased from 4,220 in 1957 to 4,476 in 1958.

Child Welfare

Children accepted for care by the State Board of Child Welfare numbered 12,372 in 1958, an increase of 23 per cent from 1957's 10,061. The number of persons under care of all child welfare programs (including adults aided under the Home Life Program) rose from 32,500 in 1957 to 38,050 in 1958.

Blind

No significant change in any of the programs for the blind occurred insofar as numbers of persons aided are concerned. Persons accepted for assistance in 1958 were 161 as against 1957's 146. On assistance rolls as of June 30 were 904 in 1958 and 923 in 1957. These changes represent casual fluctuations rather than trends.

*Old Age
Assistance*

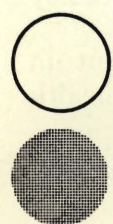
Cases approved for care under the Old Age Assistance program increased from 3,726 in 1957 to 4,003 in 1958; despite this the number of persons under care on June 30 of the two years decreased from 19,456 in 1957 to 19,197 in 1958.

*Disability
Assistance*

Cases approved for care under the Disability Assistance program increased from 1,828 in 1957 to 2,007 in 1958; the number of persons under care on June 30 increased from 4,734 in 1957 to 5,177 in 1958.

*General
Assistance*

The General Assistance experience reflects the impact of the recession. The number of persons accepted for assistance increased from 22,539 in 1957 to 31,948 in 1958; the number under care on June 30 from 19,554 in 1957 to 36,900 in 1958.



DOLLAR ANALYSIS OF THE BUDGET



TOTAL INSTITUTIONS \$ 46,227,353

CENTRAL OFFICES \$ 2,055,336

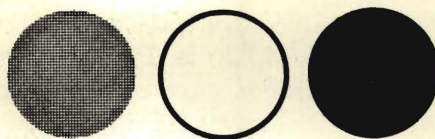
NON-INSTITUTIONAL ITEMS \$ 2,570,250

DEBT SERVICE \$ 4,647,145

STATE AID \$ 21,343,783

TOTAL \$ 76,843,867

MENTAL HEALTH



The Division of Mental Health and Hospitals administers the State's mental health program. Coming within its jurisdiction are the Bureau of Mental Deficiency and its institutions, the State Hospitals at Greystone Park, Trenton, Marlboro and Ancora, the New Jersey Neuro-Psychiatric Institute at Princeton, the Arthur Brisbane Child Treatment Center at Allaire and the State Sanatorium for Chest Diseases at Glen Gardner.

Knowledge, skilled personnel, and adequate financing are essential to any program.

In the mental health field there are tremendous areas of ignorance. Our State pro-

gram is helping to reduce these areas of ignorance.

In the mental health field today it is necessary to train skilled personnel or do without them. New Jersey's training facilities have been augmented.

The acquisition of knowledge, the training of personnel and the provision of direct services to people costs money. The people of New Jersey, through their Legislature, provided funds in the 1958 budget for an orderly extension of these functions.

There has resulted an improvement in both quality and quantity of mental health services to the people of New Jersey.

THE PURSUIT OF KNOWLEDGE



The Bureau of Research in Neurology and Psychiatry has been established within the Division of Mental Health and Hospitals. The Director of Research in Neurology and Psychiatry serves as a special staff officer to the Director of Mental Health and Hospitals and is his representative in matters concerning research in State psychiatric facilities. In this capacity he provides services to assist these facilities in the development and maintenance of their individual multidisciplinary research programs.

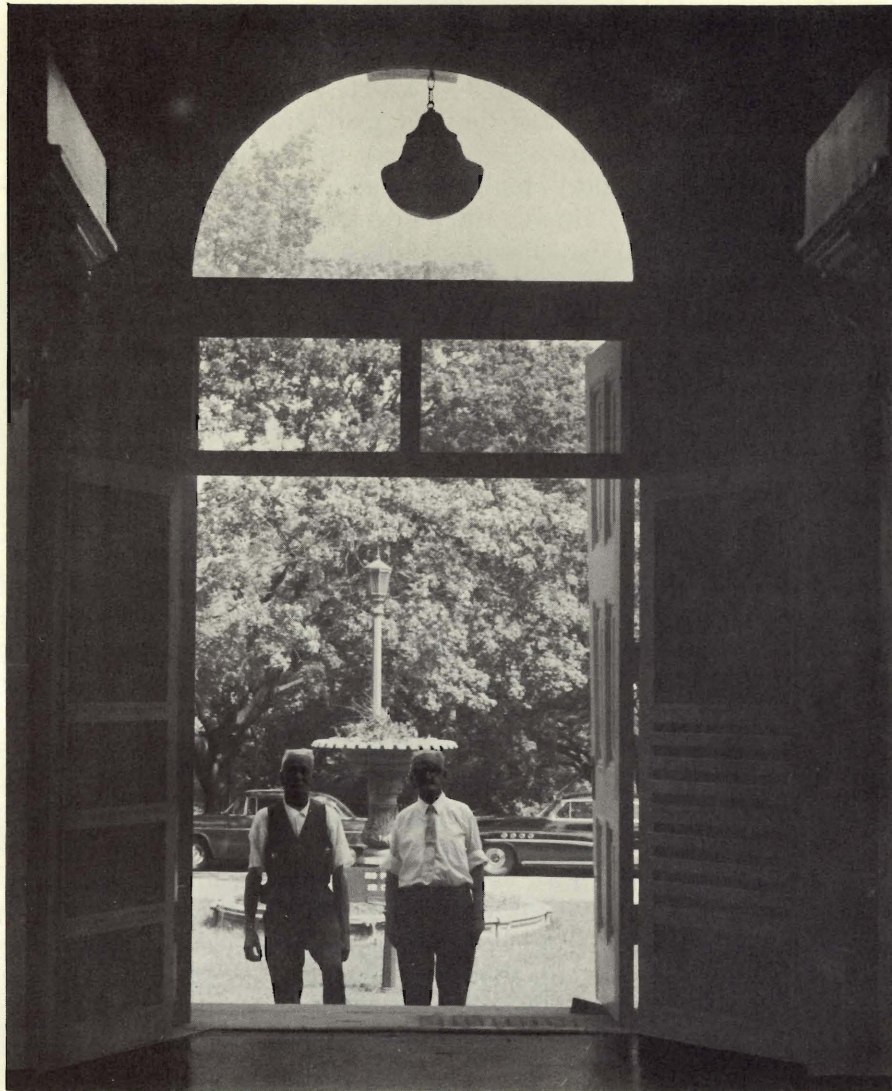
The laboratory for the Bureau of Research in Neurology and Psychiatry is located at the New Jersey Neuro-Psychiatric Institute where the Director of Research works in close liaison with the Medical Director of the Institute. There is a free exchange of available services commensurate with the limitations imposed by other commitments.

The sound planning and the operational efforts of Dr. Joseph M. Tobin, Director of Research in Neurology and Psychiatry, have resulted in an increase in the State appropriation for mental health research from \$50,000 to \$108,000, an \$18,000 grant from the Russell Sage Foundation for a two-year program of

social environmental studies in connection with mental illness, and in the granting by the National Institute of Mental Health of \$158,000 for a two-year study of depression to be carried out under the joint sponsorship of the Department of Institutions and Agencies and the Department of Psychology of Rutgers University. Dr. Tobin and his staff will be collaborating with Dr. Wittenborn in this controlled clinical study which will utilize the professional and clinical resources of our State mental hospitals and the State University.

It is expected that a careful study of current practices and legislation making provision for the admission, retention, and discharge of patients from our mental facilities will reveal knowledge which will enable us to make changes in our legislative rules and in our practices resulting in a more effective, more humane, and more efficient program of care for the mentally ill. The Division has been actively supporting and assisting the work of the Joint Legislative Commission appointed to do this task.

The Community Mental Health Services Act of 1957 has already demonstrated its value in extending knowledge about mental health



and in the development of effective resources in dealing with mental illness. Its ultimate value, in terms of improved mental health, will probably be measured by its effect in stimulating an adequate interest on the part of local people in the growth and development of their community mental health services. Within the first eleven months of its existence, 18 of the 21 counties had established county mental health boards. Many persons are now having to formulate their ideas, and there is developing a broad exchange of information with an increased mutual understanding. The county mental health boards are growing aware of the existing medical, social, and mental health resources in their communities. They are recognizing special areas of need for mental

health facilities, and the limitations of existing facilities.

The Milbank Memorial Fund provided a grant to the Division which made it possible for the Director of Psychiatric Education, the medical directors of the five mental institutions, and the President of the New Jersey Neuro-Psychiatric Association to spend three weeks in Great Britain visiting mental hospitals. The purpose of this visit was to study at first hand the experience which the British had had in developing the "Open-Door Policy." The "Open-Door Policy" is basically a symbol of recognition that the disturbed and aggressive behavior of most mentally ill patients is the result of the way they have been treated in the past, rather than the result of a vicious ill-

ness with which they are afflicted. This visit has been an invaluable aid in giving the medical directors the necessary knowledge to proceed with confidence in the improvement of the quality of their patient-care programs.

The Bureau of Community Mental Health Services has continued one of its important functions, that of providing mental health education services to the community. In order to make more staff time available for direct educational services, the library of films which heretofore has been maintained in the offices of the Bureau has been transferred to the

State Museum.

New Jersey is one of the few states in which some of the counties have undertaken to provide institutional services for the treatment of the mentally ill. In order to assure the most effective State-wide mental health program, the Board of Control authorized the Division of Mental Health and Hospitals, in conjunction with the Bureau of Community Institutions of the Division of Administration, to make an annual survey of each of the county mental hospitals and county tuberculosis hospitals.

TRAINING



During the year the position of Director of Psychiatric Education was established in the Division of Mental Health and Hospitals. Dr. Paul Haun, a psychiatrist with a background of experience in clinical psychiatry, psychiatric teaching, and administration, took over the duties of this position on August 1. In the special areas of psychiatric nursing, psychology and psychiatric social work, provision has been made, through the establishment of positions of Consultants within the Division of Mental Health and Hospitals for training programs to be developed in these professional areas. The Director of Psychiatric Education serves to coordinate these programs.

In a psychiatric treatment diagnosis and care program the psychiatrist is the key figure. The adequate training of the psychiatrist is essential for the effective functioning of all the professionals. There now exist fully accredited three-year residency programs in the State Hospitals at Trenton, Ancora and Marlboro; two-year accredited residency programs exist at the Neuro-Psychiatric Institute and at the State Hospital at Greystone Park. Every provision is being made to screen applicants carefully for these residency training programs, and to record accurately their progress to the end that only those individuals with demonstrated competence will complete the required course of training and become eligible for appointment to staff positions as psychiatrists in New Jersey institutions or for assum-

ing positions as practitioners of psychiatry in our communities.

The reappraisal and improvement of staff training programs in psychology and in nursing and psychiatric technician areas have been carried on by the Consultants in Psychology and Psychiatric Nursing. These training programs are directly responsible for an improved staffing picture in these professional areas.

A special highlight in the area of training was the participation of the nursing staff at Greystone Park State Hospital in the production of a special training film entitled *Psychiatric Nursing*. This film has been acclaimed by the American Psychiatric Association, as well as by the American Nursing Association, for its value as a teaching instrument.

As of June 30, 1958 there were in training:

Hospital Attendants	1,440
Psychiatric Technicians	108
Undergraduate Affiliate Nurses	777
Graduate Nurses	37
Practical Nurses	107
Undergraduate Occupational Therapy Trainees	21
Graduate Occupational Therapists	15

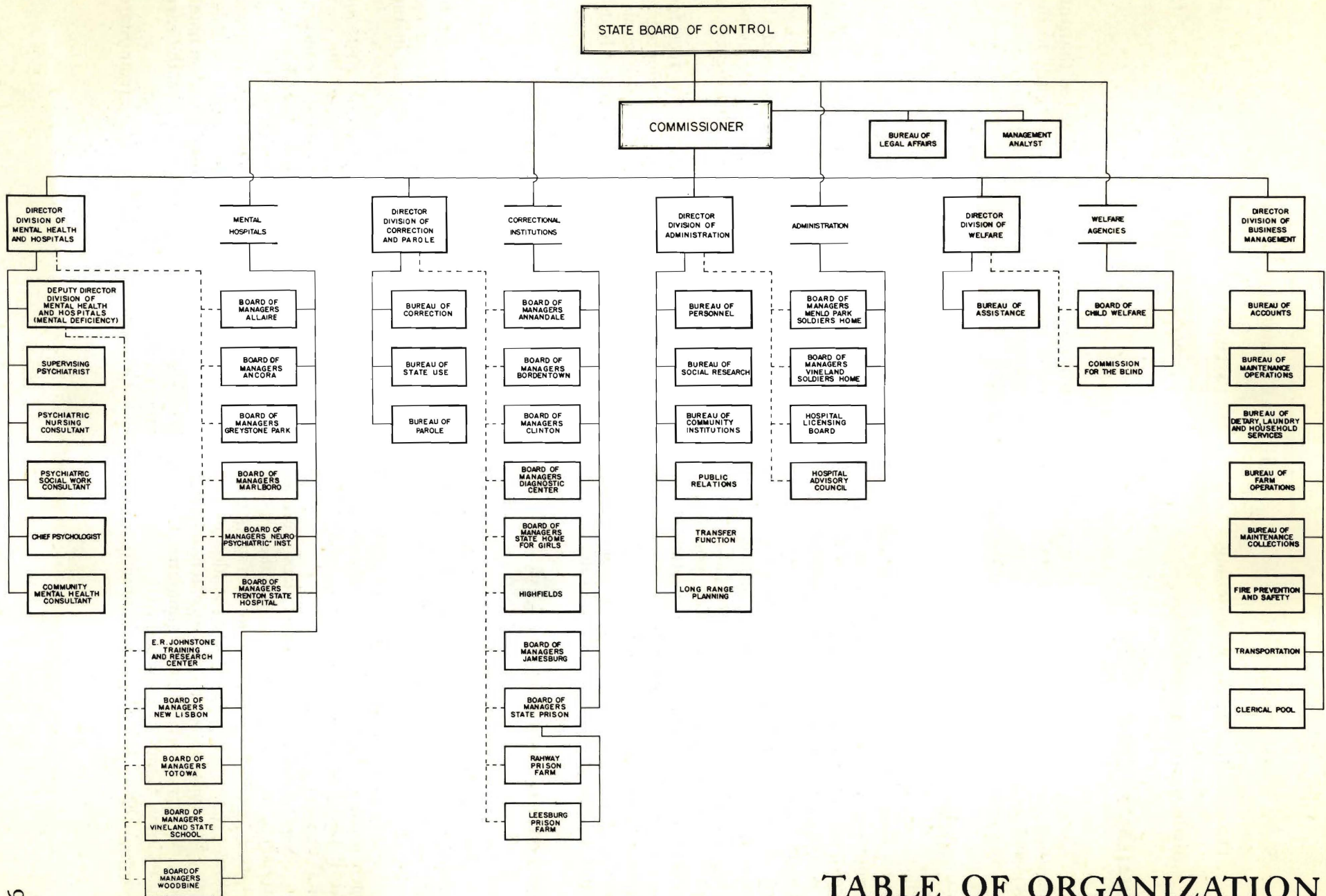


TABLE OF ORGANIZATION

Social Work Students	5	Psychiatric Residents	36
Trainees in Pastoral Counselling	52	Psychological Internes	11
Medical Students	67	Trainees in School Psychology	15

AVAILABLE FUNDS

The one new item in the budget is the \$250,000 for the Community Mental Health Services Program clinics.

In the area of institutional operation, however, it was possible to make even greater improvements in patient-care services than the budget increases would indicate at first glance. The Commissioner developed a program for the operation of most of the farm areas and laundries at the mental hospitals with labor from the correctional institutions. This made possible the elimination of 87 positions in the laundry and farm departments and the individual employees and funds budgeted could be reassigned to other positions, making for a more significant contribution to patient care. This whole program was made possible by increasing knowledge and understanding of the treatment of the mentally ill and the realization that long-term hospital care is not indicated, except for a very small minority of patients who are not suitable for either laundry

or farm operations. It is not believed that the farm operation contributes significantly to the economics of running a mental hospital and certainly is not necessary, or even desirable, in the total program of rehabilitation of the mentally ill.

Through a carefully planned and supervised program of abolishing and creating positions and increased recruitment, the number of unfilled positions have been reduced and patient care improved without further budgeted requirements.

The Department, through better methods of follow-up, has significantly increased the amount of funds returned to the State by patients and relatives as reimbursement for services provided.

A policy of the establishment of fees for psychiatric clinic patients has been adopted in most of the community mental health clinics being supported under the Mental Health Services Act.

EXTENSION OF SERVICES

During the fiscal year, accommodations for thirty additional children were made available at the Arthur Brisbane Child Treatment Center.

Accommodations for 400 patients in an open ward setting were made available in the Abell Building at the New Jersey State Hospital at Greystone Park.

New community clinic services were established in Bergen, Essex, Middlesex and Morris Counties. In addition, existing community clinic facilities were expanded in Bergen, Burlington, Essex, Gloucester, Hunterdon, Mercer, Middlesex, Monmouth, Passaic and Union Counties. A total of 17 clinics received support under the Community Mental

Health Services Program.

In spite of an increase in admissions to mental hospitals, which can be accounted for as resulting from an over-all increase in the population in the State, a relative increase in the number of individuals over 65 years of age, and an increased realization on the part of the public that hospital treatment for mental illness is better early than late, there has continued to be an over-all decrease in the total number of patients hospitalized on any given day. This can be attributed directly to a decreased average period of hospitalization made possible by the increased facilities for the care and treatment within our institutions.

Although not resulting directly from State

appropriations, it is significant enough to mention in this report that the Tri-County Children's Center was opened in Morristown, New Jersey. This is a residential home for emotion-

ally ill youngsters set up under the auspices of the social agencies in Morris, Essex and Union Counties.

INCREASE IN QUALITY



Improving the quality of care and services provided to the citizens of New Jersey has been an important aspect of the Division's program. It has taken a long time to learn that increasing the quality of the services provided in the care of the mentally ill is not an extravagance. It has been a source of intense satisfaction to see that the provision for the amenities of life, for the preservation of human dignity, and for the continuation of an American standard of living within the institutional walls has resulted in a decreased total cost for the care of each patient.

Total cost may go down even when the per diem goes up, if the length of hospital stay goes down.

The most striking increases in quality of care can be reported from our mental hospitals

where increases in budget allocations and improvements in administrative practice and procedure have resulted in the establishment of "open wards" for one-third of the patients; sufficient household supplies so that all patients may receive bath towels and not have to be issued condemned sheeting because of shortage of bath towels; increased privacy in dormitory and living accommodations so that many patients now may retain personal possessions; improved laundry service so that more patients are wearing outer garments which have been conventionally laundered and pressed and contribute to a sense of pride in personal appearance; and a balanced diet attractively served from sanitary kitchen operation.

MENTAL DEFICIENCY

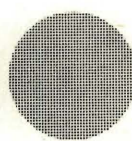


TABLE I
COTTAGE STAFF REQUIRED FOR 100 RESIDENTS
BASED UPON TIME FACTORS IN TABLE II

	SURVEY I	SURVEY II	SURVEY III
Minutes per Resident X100	15,790	13,210	22,850
Employee Hours (min) (100) (60)	263.17	220.17	380.83
Tours (min) (100) (60) (8)	32.9	27.5	47.6
Relief (Tours X.6)	19.7	16.5	28.6
Total Employees Required	52.6	44.0	76.2
Ratios—Employees: Residents	1:1.9	1:2.3	1:1.3

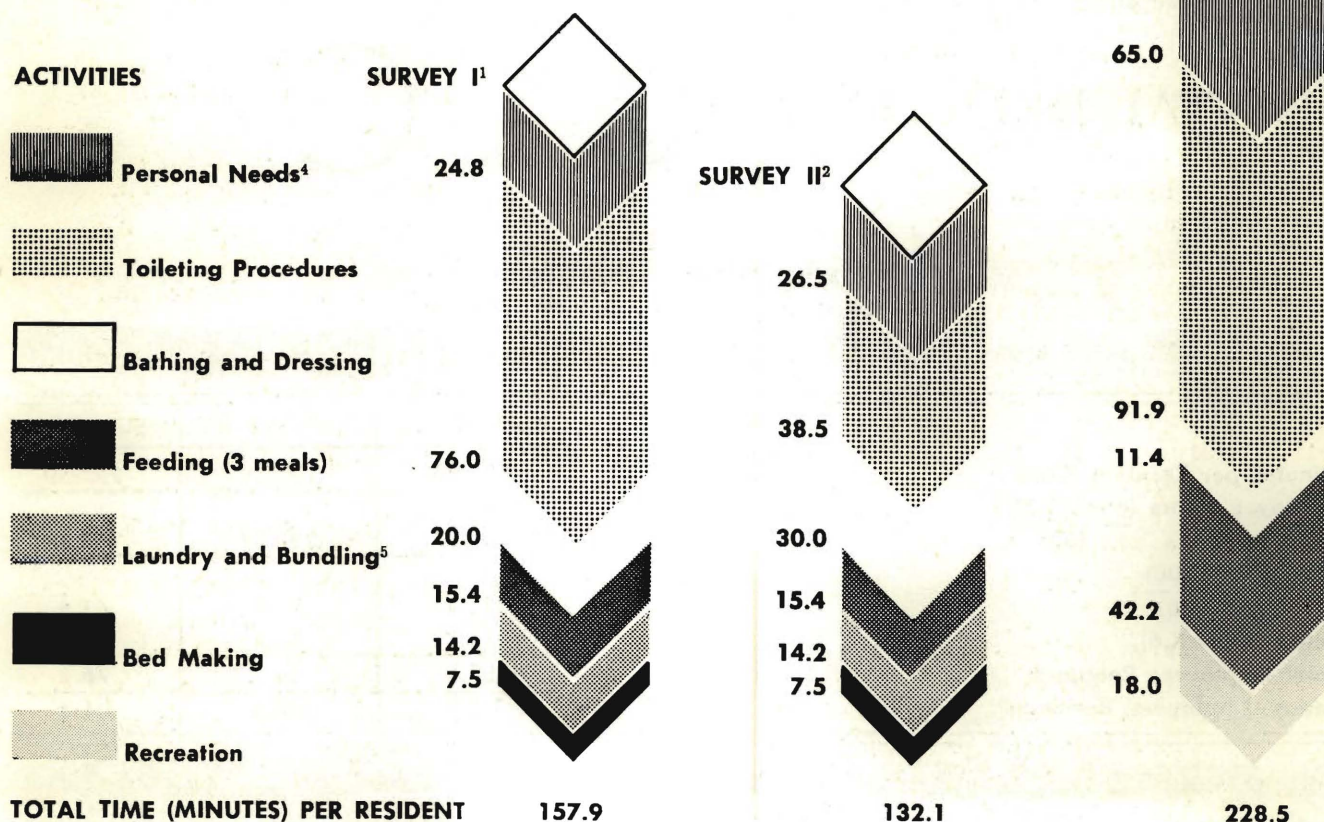
The Bureau of Mental Deficiency administers a broad, integrated program for the mentally deficient who are under Departmental supervision or come to its attention as needing care or training. It also sponsors regional programs of field services. Institutions: Vineland State School, North Jersey Training School at Totowa, State Colony at Woodbine, State Colony at New Lisbon and the Edward R. Johnstone Training and Research Center at Bordentown.

The national trend toward younger and more severely retarded residents in institutions for the mentally deficient has been duplicated in New Jersey where between 1948 and 1957

there have been appreciable increases in the percentages. The change may be attributed to a growing demand for bed space for the severely retarded and the continual discharge of high grade population and their replacement by residents with a greater degree of handicap.

The effect has been most strongly felt at the cottage level. Clearly, the amount of care required by the grossly handicapped exceeds that required by residents less afflicted who have a capacity for self-help. The latter, too, have provided essential service in the care of lower grade patients and their diminishing numbers have required the employment of more attendant personnel.

TABLE II
TIME (IN MINUTES) REQUIRED TO PROVIDE
BASIC CARE TO SEVERELY AND MODERATELY
RETARDED PHYSICALLY HANDICAPPED RESIDENTS
DURING A TWENTY-FOUR HOUR PERIOD



¹ SURVEY I	Findings of a study conducted by a nine-member group in two low grade cottages at the Almond Road Colony—corrected by Woodbine study of toileting procedures.
² SURVEY II	Summary of a study conducted by staff members of the Vineland State School in several low grade cottages.
³ SURVEY III	Summary of a study conducted by various members of the North Jersey Training School at the Nursery in Totowa.
⁴ E. G.	Grooming, cutting nails, skin care, oral hygiene, nursing care, dispensing medications, securing nets over cribs, lifting and carrying residents.
⁵ E. G.	Daily removal of soiled linen and clothing, preparation and distribution of each resident's clothing.

In recognition of these factors, the Department has requested funds for the immediate construction of a new 1,000-bed facility for the severely retarded and recommended certain program changes:

1. Conversion of cottage structures used by the higher grade residents to accommodate the both physically handicapped and severely retarded.

2. Establishment of a minimum standard of care for the severely retarded resident.

3. Use of higher grade institutional residents having some vocational competence as "institutional aides" in a sub-employee category.

4. Development of plans to reduce the amount of work done by the "helper" groups at the various training schools.

Two 100-bed structures at New Lisbon have already been modified to permit the residence of children of lower grade than the institution had formerly accepted. At Totowa, one new cottage will be converted to accommodate children received from the Nursery. Hand in hand with this conversion policy, the Department has stepped up reclassification among the institutions. Yet there remain large waiting lists for the Totowa Nursery and Woodbine.

In January, 1958 a small group of observers assembled at the Almond Road Colony of the Vineland State School to study services required by the children and provided by attendant personnel and "helper girls" in certain of the cottages. The problem was to establish

standards of care required by severely retarded and physically handicapped residents. For five days around the clock, the observers made time studies which were discussed afterwards and compiled into a summary report. The observations were conducted from vantage points permitting a view of bathrooms, dayroom and feeding areas. As an attendant or "helper girl" entered an area, her activity was clocked. Separate studies were totalled by activity and by 24-hour period and computed on a per resident basis.

The accuracy of the Vineland observer team was compared by staff of the Vineland State School at Woodbine. They also made small resamplings of severely retarded residents in Almond Road. Still another independent survey was conducted at Totowa. The results of the surveys are presented in Table II and the projections for 100 residents and "relief" factors in Table I.

In the Field Service Program, two significant changes were effected. The first involved the termination of the home training program and the reclassification of teaching positions to social case work positions. The second was marked by the significant involvement of this aspect of Bureau operations with pre-admission or pre-institutional services. Case work personnel now provide an integrated social history for classification purposes, an annual review of the case on the waiting list, and service to the family on planning for the interim between commitment and admission.



cbs news photo

CORRECTION AND PAROLE



The Division of Correction and Parole has general supervision over all State penal and correctional institutions, the Bureau of State Use Industries and parole activities.

Dangerous overcrowding at Annandale and Bordentown prevailed, partly as a result of the unusual number of court commitments during May, 1958. The situation was not helped by the unavoidable delay in getting an enlarged High Point work camp and another Highfields into operation.

Some progress was made toward launching this second residential treatment center for boys when the State Board of Control decided

to acquire the Sherwen property off Brass Castle Road near Washington, New Jersey. At the end of the year the necessary legal steps were well under way. A similar approach to the problems of delinquent girls has been made possible by a Turrell Fund grant. The Turrell Residential Group Treatment Center (Girls) will be erected on a site adjacent to the Arthur Brisbane Child Treatment Center at Allaire.

Two other small units were completed during the year. One, the former patients' dormitory at the Jones Farm of the Trenton State Hospital was rebuilt and expanded to house some fifty prisoners from the State

Prison who will operate the hospital farm. The other, a new dormitory for fifty men was erected at High Point State Park to replace an old CCC barracks which formerly housed twenty-five boys from Annandale. With the concurrence of the labor unions, this work was done by the Annandale boys themselves using salvaged materials. Complications in obtaining a sufficient water supply made it difficult to get the enlarged camp into operation.

The Division participated with the editors of *Life* magazine and the Public Affairs Department of the Columbia Broadcasting System in public education ventures which drew national attention. *Life* magazine for October, 1957 contained a picture article outlining the work of the New Jersey Diagnostic Center as one of a series on crime in the United States. On January 26, 1958, as part of The Twentieth

Century Series, CBS-TV exhibited an hour-long television film showing the work of the Diagnostic Center and the group therapy program at Bordentown.

In the same area, the Division arranged, at the request of the Chief Justice, for all newly-appointed judges to visit the penal and correctional institutions and through lectures and demonstrations, to familiarize themselves with the resources available to them.

Perhaps the most disconcerting aspect of the year's operations was in relation to the psychiatric consultation program of the Diagnostic Center. Because of the difficulty of recruiting competent personnel in sufficient numbers, the Center has not been able to give the several penal and correctional institutions as much consultation as had been hoped.

BUREAU OF CORRECTION

At Annandale: program reorganization consistent with lowering of the age limit (Chapter 93, P.L. 1957).

At Jamesburg: program revision and reinforcement along the lines set forth in a working paper dated September, 1957.

The Bureau, jointly with Personnel, submitted a proposal for a major revision of per-

sonnel recruitment and development in the uniformed correctional service.

A rapidly developing aspect of the Bureau's work is in meeting increased demands for educational training services at the local county jails and workhouses.

Least gratifying progress has been made in the area of community services.

PAROLE

Although total caseload increased during the year, the average caseload per officer decreased as did turnover in staff. The opportunity to leave to Field Services in the Bureau

of Mental Deficiency much of the responsibility for supervising mentally retarded persons and improvements in the in-service training program were heavily contributing factors.

BUREAU OF STATE USE INDUSTRIES

Major importance has been given to achieving the recommendations of the New Jersey Taxpayers Association within budgetary limits.

1957-58 was a year of transition because of three major Departmental policies:

1. No industries are to be maintained in training schools for the mentally defi-

cient.

2. All industries are to be operated by maximum custody inmates wherever possible.

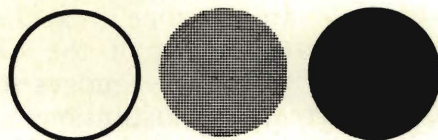
3. All minimum custody inmates are to be assigned to work on farms and in laundries.

Sales were \$2,157,383, down 7 per cent;

net income \$24,402, down from \$56,292 (1.1 per cent down from 2.4 per cent). Twenty-eight shops in six institutions (down from 37

shops in eight institutions) employed 1,090 inmates and 158 patients.

WELFARE



The Division of Welfare has jurisdiction over the Bureau of Assistance, the State Board of Child Welfare and the State Commission for the Blind in the administration of assistance and social services. It carries out related welfare functions, among them civil defense welfare services supervision and consultation.

Programs: Old Age Assistance, Assistance for the Permanently and Totally Disabled, General Assistance. The Bureau has broad jurisdiction over 21 county welfare boards and a more limited one over some 375 municipal welfare departments in the operation of the General Assistance Program.

BUREAU OF ASSISTANCE



A nation-wide recession sent welfare cases and costs skyrocketing in New Jersey and was the outstanding concern of administrative effort during the fiscal year.

Principal impact was on the General Assistance Program, but even the relatively stable Old Age and Disability Assistance Programs were affected by mounting intake rates and rising costs.

20,000 persons were recipients of general assistance in July, 1957. By March, 1958 the high water mark had been reached when almost 43,000 persons were receiving assistance. Although their number began to ebb in April, the 37,000 on the rolls at the end of June were still 88.2 per cent greater than a year previously. Supplemental appropriations by the Legislature totalled \$2,885,000, a sum greater than the total initial appropriation of \$2,530,000.

Old Age Assistance case load continued to decline, but at a very much retarded rate. Within total case load, the "institutional cases" continued to increase both in numbers and percentage, while the initiation of disability benefits under Social Security helped to abate the trend of increasing case load in the disability assistance program.

"Pending applications" in the two categorical programs remained 16 per cent above the level at the end of the preceding year.

Staff limitations made it impossible to conduct an organized program of social audits or administrative review for either county or municipal welfare departments on a scheduled basis.

The most critical needs affecting the administration of the State's public assistance programs:

1. Creation of an effective, comprehensive program for medical care, including hospitalization, that would operate on a uniform State-wide basis, and would encompass both actual assistance recipients and the so-called "medically indigent."

2. Substantially greater operational and fiscal integration, both at the Departmental level, and more particularly at the local level, of the several public assistance programs which come within the jurisdiction of the Department of Institutions and Agencies.

3. Development within the Department of more effective and more constructive coordination of the public-assistance programs with other Departmental welfare-related activities.

4. Extension and improvement of staffing patterns and training facilities.

CIVIL DEFENSE WELFARE SERVICES

Much emphasis has been placed on emergency mass feeding courses to stimulate interest and planning, particularly at the county and local levels.

During the year there were two alerts and a New Jersey State Operational Survival Plan was initiated to compensate for the lack of local planning.

HOME ECONOMICS CONSULTANT

The home economics consultant completed two studies, one an evaluation of the revised and simplified budgeting procedure, the other

an evaluation of the capacity of legally responsible relatives to share in the support of assistance clients.



STATE BOARD OF CHILD WELFARE

An integrated program of services to children, principally, Home Life Assistance, Guardianship, Care.

Recruitment and retention of qualified personnel was the most critical problem faced by the agency during the year. One hundred twenty-five new case worker appointees attended orientation, considerably more than half the total number of authorized positions in this classification. So many trainees dictated the need for changes in course content and procedure.

A study and report on neglect of children and protective services were completed by a special consultant with funds from the Children's Bureau. The study encompassed analysis of records and current interviews pertaining to children who had been brought un-

der agency supervision because the parents were found guilty of neglect.

During the year district autonomy and responsibility were increased and plans completed for direct submission of bills from the district offices to the finance division, rather than through the health division, so that personnel of the latter could be released for more field activity.

This was the first full year of the program for purchase of psychological services from private practitioners to supplement the activities of agency staff. A total of 702 children received service, 502 being seen privately at a cost of \$12,560. Total cost of the agency program was \$18,686,166 compared to \$15,610,783 or an increase of 19.7 per cent over the previous year.

COMMISSION FOR THE BLIND

The Commission aids blind persons and persons with failing vision. Program: eye health services for the prevention of blindness, educational programs for visually handicapped children, instruction of adult blind, occupational therapy, and programs for making blind persons employable and self-supporting.

Of 886 persons served during the year by the Eye Health Service, 176, or nearly 20 per cent, had a diabetic condition.

The number of children registered for educational services has increased 44 per cent

in ten years. Offsetting the steady decline in pre-school case load (recent discoveries have reduced infant blindness from retrolental fibroplasia) has been the increasing number of multiply handicapped children who make up 40 per cent of all children registered.

Addition of staff and expanded facilities have resulted in an increase of 20 per cent in competitive employment placements.

Recipients of blind assistance declined from 933 to 904, probably reflecting the greater number of persons becoming eligible for Old Age Survivors' and Disability benefits.

BUSINESS MANAGEMENT

The Division of Business Management coordinates the activities of the financial, supply and service bureaus of the Department: Bureau of Accounts (accounting, budgeting, auditing), Bureau of Institutional Mainte-

ance, Bureau of Transportation, Bureau of Dietary, Household and Laundry Services, Office of the Fire Marshal and Office of the Farm Supervisor.

BUREAU OF MAINTENANCE

Construction contracts totalling \$4,161,575 were awarded and 133 projects completed. Additional institutions were provided with

diesel generators to furnish electricity in the event of power failure.

BUREAU OF DIETARY, LAUNDRY AND HOUSEHOLD SERVICES

The plan to staff laundries with prison inmates was effected at Ancora and Marlboro State Hospitals and the North Jersey Training School. The new laundry within the walls of the Bordentown Reformatory was also acti-

vated.

When this plan became implemented, some 53 positions were abolished and more than 200 patients released from laundry assignments.

FIRE MARSHALL AND SAFETY DIRECTOR

Fire loss sustained for the year was \$20,533, reduced from \$39,980 in 1956-57 and \$151,212 in 1955-56. This figure, when balanced against the \$88,220,000 worth of insurance in force, shows an infinitesimal percentage of fire loss.

The Departmental Accident and Safety Program has been carried out at the institutional level where individual actions have resulted in the elimination of literally thousands of hazards.

OFFICE OF FARM SUPERVISOR

Farming operations are going through a period of transition as patient labor is gradually being replaced by inmate labor from the neighboring prison and reformatories.

Small scale farming at Totowa, Woodbine, the State Home for Girls at Trenton and Glen Gardner has been closed out and modified at Clinton. The Neuro-Psychiatric Institute at Princeton has been assigned the function of supplying heifers for institutions which do not

have sufficient pasturage. Prisoners from the State Prison are now operating the Trenton State Hospital Farm.

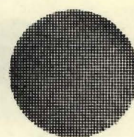
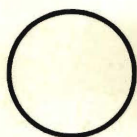
Weather conditions were erratic and moisture, for the most part, insufficient. Nevertheless, the total value of food production for the year was \$1,313,358 and the grand total of all production \$1,504,030, down from 1956-57 which was one of the better production years.

MAINTENANCE COLLECTION

Reorganization and standardization of maintenance collections at 14 institutions has gone on apace and will result in placing them on a uniform and current basis. To this end

the mechanical preparation of all bills in a central unit has been projected with the tentative starting date fixed as of January 1, 1960.

ADMINISTRATION



The Division of Administration coordinates the functions of the Bureau of Social Research, Community Institutions, Personnel, Public Relations, and Long Range Planning.

It also has jurisdiction over the Soldiers' Homes at Vineland and Menlo Park and the Firemen's Home at Boonton.

BUREAU OF SOCIAL RESEARCH



The 1958 activities of the Bureau of Social Research have pointed in two major directions:

1. The Bureau has sought to improve its operations within its traditional role of maintaining a census of the populations of the State and county institutions administered or financially aided by the Department.

The introduction at the start of fiscal 1958 of a *Uniform Daily Census Report* program was a major development in the first area. Through this program, the Bureau can now issue reports of current operations within a few working days from the close of a month. Another was the formulation of a Mental Health Clinic Statistics Program, in cooperation with the Bureau of Community Mental Health Services, through which it is hoped for the first time to obtain a comprehensive body of data about the operations of these clinics, which now serve approximately

3,000 patients.

2. The Bureau also has sought to lay the groundwork for a far-reaching program of data processing which will simplify and enhance the over-all administration of the Department.

This long range program has been forwarded by the establishment at the close of fiscal 1958 of a Methods Section in the Bureau. This section is charged with responsibility for continuously reviewing and evaluating methods. Ultimately this section will be expected to formulate new ideas for standardizing and clarifying administrative methods in many phases of the Department's operation with simplification also being a goal held constantly in mind.

The initiation of a cooperative program with the Department of Sociology of Rutgers University through which four graduate students will be assigned as research interns is awaited as fiscal 1958 ends.

BUREAU OF COMMUNITY INSTITUTIONS



During the last year this newly designated Bureau carried on the dual function of inspection and licensure of some 700 community institutions and also administered the program for Federal grants to hospitals and other medical facilities within the State.

Federal (Hill-Burton) funds were allotted to the City of Hoboken for a public Health Center and to Hudson County for the erection of a treatment building at its mental hospital. In addition, two general hospitals (Perth Am-

boy and South Amboy) received grants to provide needed new facilities. Two other counties (Union and Cape May) received aid in projects designed to provide beds for the chronically ill. Six general hospitals were allotted funds to assist in projects of added diagnostic and treatment facilities, and another hospital (The Hospital Center at Orange) received a grant to provide a Rehabilitation Center.

In all, more than two and one-half million

dollars was made available for hospitals and related facilities.

The program of inspection and approval of hospitals, nursing homes, County "Medical Institutions," and sheltered care facilities continued. Much time and effort were expended particularly in the field of institutions for long

term care, since the need in this area is particularly acute and many new facilities were licensed or approved during the year. At present, 164 nursing homes are licensed as well as 21 County institutions and 34 infirmaries in Homes for Aged.

PERSONNEL

There was a marked decrease in the number of vacant positions throughout the Department: 465 vacancies out of 11,225 positions in 1958 as compared to 879 vacancies out of 10,855 positions in 1957.

Two plans were drawn up and submitted to the Department of Civil Service for consideration. One covers the custodial service of the adult, male correctional institutions. Its acceptance will provide a more effective and disciplined service through the provision of more intensive selection procedures, in-service

training programs, increased promotional opportunities, standardization of penalties for infraction of rules and the provision of uniforms by the State.

The other covers the various social workers throughout the Department and provides for uniform titles and salaries for positions with similar requirements and job content.

Standardized payroll and timekeeping procedures were instituted as Departmental policy.

LEGAL AFFAIRS

\$145,384 was recovered from patients and legally responsible relatives for institutional maintenance.

The deputy attorney general appeared for the Department in a number of actions. The following highlight some of the legal points which were determined by judicial decisions:

1. The adoption of a ward of the State Board of Child Welfare may not proceed without the board's consent.

2. A consecutive sentence imposed by a court subsequent to the prisoner's present "term" means consecutive to his aggregated sentences.

3. Funds of a patient on deposit in the Patient's Trust Funds may be utilized for maintenance on appropriate court order under R.S. 30:4-67.1.

4. Legally responsible relatives can be required by judgment of court, to support mental patients under R.S. 30:4-66, 74.

5. Superior Court rather than county court may issue writ of habeas corpus to test legality of continued hospitalization of mental patients.

6. Chancery Division, Superior Court, refused to return child to parents where child's welfare required further guardianship of the Board of Child Welfare.

7. Defendant under Sex Offender Law (N.J.S. 2A:164-3, et seq.) shall be permitted to examine Diagnostic Center report.

8. Inmate's failure to notify Parole Board that he did not wish his consecutive sentences to be aggregated shall be deemed to constitute consent in determining parole eligibility.

9. Failure of court to specify exact length of sentence under R.S. 30:4-148, where it is specified that the five-year maximum shall not apply, does not invalidate the conviction but merely requires imposition of correct sentence.

EXPENDITURES FOR THE FISCAL YEAR 1958

		Expended Fiscal Year Ended June 30, 1958
<i>Mental Hospitals</i>		
Greystone Park		\$ 8,400,648
Trenton Hospital		6,675,439
Marlboro		5,041,157
Ancora		3,859,755
	Total Mental Hospitals	<u>\$23,976,999</u>
<i>Mental Deficiency Institutions</i>		
Vineland State School		\$ 2,572,366
Woodbine		1,586,987
Totowa		1,462,935
New Lisbon		1,337,011
Johnstone Training Center		764,663
	Total Mental Deficiency Institutions	<u>\$ 7,723,962</u>
<i>Correctional Institutions</i>		
Jamesburg		\$ 1,272,022
Annandale		1,033,415
Clinton		762,308
Girls Home		657,096
	Total Correctional Institutions	<u>\$ 3,724,841</u>
<i>Penal Institutions</i>		
Trenton Prison		\$ 1,891,461
Rahway		1,359,647
Bordentown		1,240,819
Leesburg		436,258
	Total Penal Institutions	<u>\$ 4,928,185</u>
<i>Soldiers Homes</i>		
Vineland		\$ 282,702
Menlo Park		160,279
	Total Soldiers Homes	<u>\$ 442,981</u>
<i>Other Institutions</i>		
Neuro-Psychiatric Institute		\$ 3,288,806
Glen Gardner		1,166,733
Diagnostic Center		621,905
Arthur Brisbane		310,278
Highfields		42,663
	Total Other Institutions	<u>\$ 5,430,385</u>
TOTAL ALL INSTITUTIONS		<u>\$46,227,353</u>

Expended Fiscal Year
Ended June 30, 1958

Central Office

Administration—General	\$ 669,732
Division of Mental Health	166,791
Bureau of Mental Deficiency	153,859
Division of Correction and Parole	617,497
Division of Welfare—Bureau of Assistance	398,088
Parole Board	49,369
Total Central Office	<u>\$ 2,055,336</u>

Non-Institutional Items

Purchase of Care and Maintenance for Mentally Retarded	\$ 106,912
Commission for the Blind	739,735
State Board of Child Welfare	1,723,603
Debt Service	4,647,145
Total Non-Institutional Items	<u>\$ 7,217,395</u>

State Aid

County Mental Hospitals	\$ 4,085,611
County Tuberculosis	335,924
Old Age Assistance	6,176,570
Maintenance of Dependent Children	4,265,956
General Assistance	4,780,989
Permanently and Totally Disabled	1,507,756
Community Mental Health Services	190,977
Total State Aid	<u>\$21,343,783</u>

TOTAL DEPARTMENT INSTITUTIONS AND AGENCIES

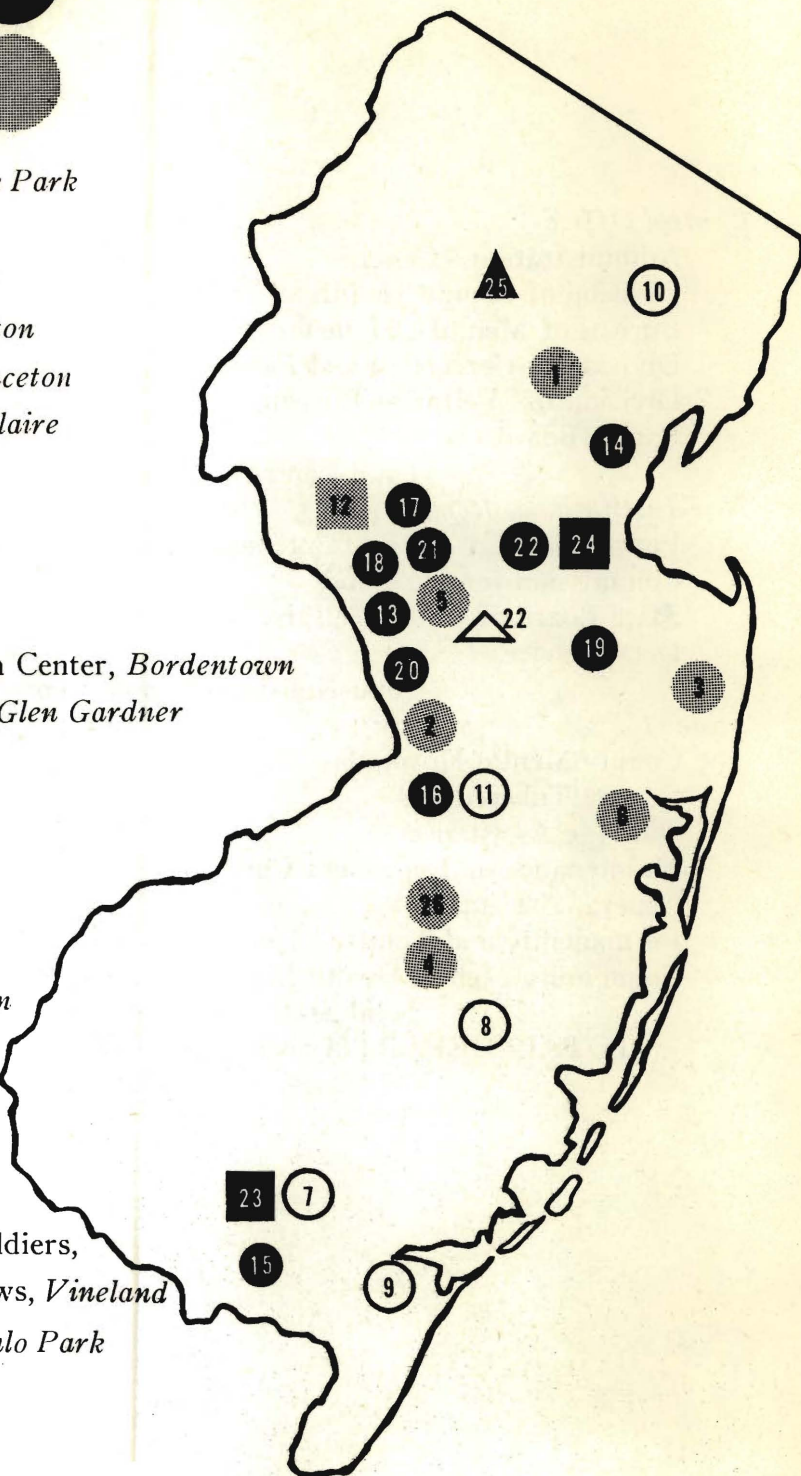
*\$76,843,867

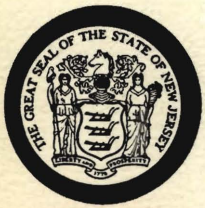
*Does not include Capital Expenditures



THE INSTITUTIONS

- 1 State Hospital for Mental Disease, *Greystone Park*
- 2 State Hospital for Mental Disease, *Trenton*
- 3 State Hospital for Mental Disease, *Marlboro*
- 4 State Hospital for Mental Disease, *Hammonton*
- 5 New Jersey Neuro-Psychiatric Institute, *Princeton*
- 6 Arthur Brisbane Child Treatment Center, *Allaire*
- 7 Vineland State School, *Vineland*
- 8 State Colony, *New Lisbon*
- 9 State Colony, *Woodbine*
- 10 North Jersey Training School, *Totowa*
- 11 Edward R. Johnstone Training and Research Center, *Bordentown*
- 12 New Jersey Sanatorium for Chest Diseases, *Glen Gardner*
- 13 New Jersey State Prison, *Trenton*
- 14 New Jersey State Prison Farm, *Rahway*
- 15 New Jersey State Prison Farm, *Leesburg*
- 16 New Jersey Reformatory, *Bordentown*
- 17 New Jersey Reformatory, *Annandale*
- 18 New Jersey Reformatory for Women, *Clinton*
- 19 New Jersey State Home for Boys, *Jamesburg*
- 20 New Jersey State Home for Girls, *Trenton*
- 21 Highfields Treatment Center, *Hopewell*
- 22 Diagnostic Center, *Menlo Park*
- 23 New Jersey Memorial Home for Disabled Soldiers, Sailors, Marines and their Wives and Widows, *Vineland*
- 24 New Jersey Home for Disabled Soldiers, *Menlo Park*
- 25 New Jersey Firemen's Home, *Boonton*
- 26 State Hospital for Mental Disease, *Ancora*





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