

renovated and made available for patients physically able to participate in the varied programs of treatment and rehabilitation which are carried on here at Spring Grove.

In the shadow of the old main building (representative of the past) we have constructed a building which will make it as easy as possible for those who are ambulatory to get about, and for staff to more easily give good nursing care. Beds are low for those who can get up—thus lessening the possibility of falling. Each person has a chest by his bed in which he may keep his own things. Patients who are bedridden have bedside tables that can be adjusted many ways in order to permit them to carry on those activities which are possible. Mattresses and pillows are covered with waterproofed ticking, and the beds can be adjusted to many positions thus adding to the comfort of those whose bodies would tire and get sore if they had to stay long periods in one position. Sixty per cent of the wall space is in windows. Bright-colored walls bring light and cheer. Each ward has its own sitting room. Indeed this building is representative of the trends in the programs for treating the mentally ill in Maryland. This is a specific program for the infirm—most of whom are quite old. I am indeed proud that such a structure bears my name.

We also are developing other specialized services. Under Dr. Tuerk's forward looking leadership we are introducing a number of ideas throughout the Department. Research for the Department is centered here at Spring Grove, but is actively under way at three other hospitals and is being expanded to all. We now have alcoholic units in the four general mental hospitals. Specialized programs for children and adolescents are being developed. A day hospital is planned here at Spring Grove in one of the buildings from which patients will be moved to this infirmary. One has already been opened and is operating at full capacity in the city of Baltimore, financed by the Health Department but staffed and directed by the Department of Mental Hygiene.

Our hospitals have pre-admission services. A patient or his family may meet with a social service worker before a person enters the hospital. The patient's problem is considered carefully with the family in relation to its resources; quite often a plan can be developed that eliminates hospitalization. If this is necessary, then the family understands much more what the hospital can do, and the role the family must play. Its members are given insight into what is happening within the patient and how they can be most helpful. When patients come out of the hospital they are finding more follow-up care open to them. This hospital has such a clinic here on its grounds. Springfield and Crownsville