President Hall: We will now be favored with an address by Dr. Adolf Meyer, Psychiatrist in Chief, Johns Hopkins Hospital, on "The Philosophy of Occupational Therapy." (Dr. Meyer then read his paper.)

President Hall: Occupational therapy is not an easy profession, but I advise that whenever you become discouraged and find your work dragging, to remember that such men as Dr. Adolf Meyer are backing it. At this time I wish to change the order of the program very slightly, and ask Mrs. Slagle to read her paper next, as it seems to be connected very closely with Dr. Meyer's. I take great pleasure, not in introducing, but presenting to you Mrs. Eleanor Clarke Slagle, Executive Director, New York Occupational Therapy Society, on "Training Aides for Mental Patients."

Mrs. Slagle: Friends, do you know I feel that I shall be reminiscent; instead of reading to you, I would like to throw my paper in the waste basket and go back nine years ago when I came here to introduce occupational therapy. It seems to me as though so much happened within those years and since the period when I was privileged to work here with Dr. Meyer and with delightful nurses and the wonderful medical staff, and in the splendid environment. At that time we could not have had a corporal's guard to hear our papers if we had written them. There was a great deal of good work going on but it was here
and there in different parts of the country and not at all correlated. There was no national organization of occupational therapy; there were no state organizations, no possible time to work up organizations, and I would like to be reminiscent, but I know that I would not be permitted.

Dr. Meyer has presented his remarkable paper this afternoon and the whole field has been opened up before me. In my paper by a curious coincidence, I am quoting from a paper and the first extract is a quotation from an article written by Dr. Meyer in 1892 and which, in the preparation of his paper delivered today, unfortunately he could not find. I will read it. (Mrs. Slagle read the quotation from Dr. Meyer's article, and then proceeded with the reading of her paper.)

President Hall: Next on the program is a paper by Miss Ethel Bowman, Professor of Psychology, Goucher College, Baltimore, on "The Psychology of Occupational Therapy." (Professor Bowman then read her paper.)

President Hall: We have present with us today Colonel James T. Mattison, who will address us briefly.

Colonel James T. Mattison: Mr. President, and my dear friends: I have enjoyed very much, indeed, the papers to which we have listened this afternoon, and while I have enjoyed the exercises exceedingly, it was a very great surprise to be called on to address you. Personally, while my work is medical and surgical, I want to say to you that there is no one who has a greater interest in the work of occupational therapy than I have. The papers that have been read this afternoon by Dr. Meyer, Mrs. Slagle, and Miss Bowman, made such an impression on me that I just made the statement to some one here a few moments ago "I hope that these papers in addition to being published in the magazine connected with your association, would be given wider publicity by being also published in the Journal of the American Medical Association, because these are things which, I feel, have never received the consideration to which they are entitled from the medical profession in general." It is true that the work of occupational therapy in connection with psychiatry and tuberculosis, is receiving more consideration at the present time than ever before, and there is great good to be accomplished. Notwithstanding the fact that Dr. Meyer has stated that
this work has been carried on for many years, yet I feel that it is still in its infancy so far as the great majority of us are concerned, who should be interested in this work.

President Hall: Next is a paper by Mr. Louis J. Haas, Director of Occupation, Bloomingdale Hospital, White Plains, N. Y. on "Is Diversional Occupation Always Therapeutic." (Mr. Haas then read his paper.)

President Hall declared the Convention adjourned until tomorrow morning at 9.00 a.m.

THIRD DAY, MORNING SESSION, OCTOBER 22, 1921

President Hall called the Convention to order at 9.45 a.m. (Mrs. Slagle in the Chair.)

Chairman Slagle: The aides will be interested to know that at the very first meeting—at the organization meeting of this National Society for the Promotion of Occupational Therapy—where there were just six of us who met together to formulate plans for the society, that Miss Johnson and I were very much amused at the suggestion of one of the members who stated that at some time we would invite the President of the United States to our meeting. We have not invited a President of the United States, as yet, but Miss Johnson and I had hysterics from the fact that we think we are approaching the time very rapidly when perhaps we will invite the President. We did invite Brigadier-General Sawyer to attend our meeting here and I had a graceful note from General Sawyer yesterday which I would read if it were in my possession at this moment, in which he expresses great interest in our work and regretted exceedingly that his duties at the White House did not permit his attendance. Perhaps Miss Johnson will at some future time really invite the President, and we may be important enough, to have the President come and meet with us, as our work is important enough for the President of the United States to take interest in it. I wish that every person who is here at this meeting would take a membership blank, or from one to ten blanks, and secure either one or ten new members for our organization so that we may have an increased membership and bring money into the treasury. We have been asked
for aides and we have received letters stating that positions were open for aides who had been trained. One physician has come from quite a distance for some one who can carry on work in a mental hospital. Therefore, if those who are seeking positions will write out their qualifications and something of their training and experience and send it to the secretary, we will try to put them in touch with this, and with such other positions as are open at the present time. I want to say that there are not many positions open in large cities. In placing registrants in the past year, it has been difficult to serve them. Everyone seemed to want a position as director in or near New York. We did not have any of these positions in New York, and while I am sure that at some time in the future every hospital in New York will have a director and many aides, that is not the case at the present time.

(President Hall in the Chair.)

President Hall: I wish to make a statement in regard to the meeting of the house of delegates yesterday, minus a group which we would have been only too glad to include, except for a mistake in our new constitution. The house of delegates met yesterday afternoon following the session of the society at Phipps, and proceeded with considerable discussion followed by fatigue. We were very nearly “all in” after the day’s proceedings. However, we elected, according to the trial constitution, the officers of this society for the coming year, with the exception of the president who, according to that constitution, can only be elected by the society after being nominated by the House of Delegates. Candidates for president may be nominated from the floor of the Convention. I will ask Mrs. Slagle to read to you the names of the officers who have been elected by the House of Delegates and then the meeting will be open for the nomination and election of a president to serve for the ensuing year.

Mrs. Slagle: Dr. Hall has stated that the House of Delegates has nominated a candidate for president, which nomination, according to the constitution must be ratified and may be added to from the floor. The other officers to serve for the ensuing year, according to the constitution, have been elected at a meeting of the House of Delegates held yesterday, but the president is to be elected at this session by this body.
Officers elected to serve for the ensuing year

Vice-president ........................................ Dr. Canby Robinson
Secretary and Treasurer .......................... Mrs. Eleanor Clarke Slagle
Chairman of Finance Committee ............. Miss Marion R. Taber
Chairman of Publicity and Publication ...... Dr. W. R. Dunton, Jr.
Chairman of Research and Efficiency ....... Mr. T. B. Kidner
Chairman of Installation and Advice ......... Mrs. Eleanor Clarke Slagle
Chairman of Teaching Methods ................. Miss Ruth Wigglesworth
Board of Managers ................................ Mrs. Carl Henry Davis
....................................................... Mrs. Cornelius J. Sullivan

Mr. Kidner: I would like to ask, were there any nominations for president?

Mrs. Slagle: Dr. Hall was nominated for president.

(Mrs. Slagle in the Chair.)

Chairman Slagle: Nominations are in order from the floor for president of this society to serve for the ensuing year.

Dr. Dunton moved: The nomination of Dr. Herbert J. Hall, of Marblehead, Massachusetts, already nominated by the House of Delegates, as the nominee of this society, and that the nominations close.

Miss Susan Johnson seconded the nomination.

Dr. Dunton moved and the motion was seconded and carried that the election of Dr. Herbert J. Hall be made unanimous.

Chairman Slagle: Dr. Hall has the floor.

President Hall: Ladies and gentlemen, I want to thank you for your cordial aye and even the “no” which, however, I did not hear. I would like to say that the office of president of the National Society for the Promotion of Occupational Therapy is one which does require for its handling a little experience and knowledge of the field. There are plenty of people who deserve this office more than I. However, I have been president for the past year and have gotten hold of the ropes. I have tried to steer the ship well in the past and I shall endeavor for the coming year to fill the office to which you have so kindly re-elected me perhaps more satisfactorily now with the knowledge I have gained.
If I should make mistakes I want you to feel that they are friendly mistakes, not intended to do harm. I hope there will be in the coming year some real accomplishment of the constructive purposes which we have at heart. Dr. Robinson, who has been elected vice-president by the House of Delegates, to serve for the ensuing year, is a man with very much wider acquaintance; with very much more experience in administrative, medical and social work than I. He should by all rights be our president and I hope he will be next year. I do not think it is wise to make the term two years because there might be times when it would be undesirable but, nevertheless, I think two years is none too long a time for a man in this position to become really acquainted with the needs of the society, and to do his best work.

(President Hall in the Chair.)

President Hall: One of the committees which should have been, according to the constitution, a standing committee, but was not elected may now be appointed as a special committee to be designated by the president. That was the committee on education. We have a Committee on Teaching Methods among the standing committees, but the field of education is so important and the need for a full study on the subject of education is so necessary that I will appoint as Chairman of the Education Committee Miss Susan C. Johnson of New York.

Some of the papers scheduled for this morning are not available and owing to the absence of the readers of such papers as we have, which have been forwarded to us, will be this morning read by title so that they may be included in the annual report of our proceedings. We shall hardly have time now for what is left of the program but if any one here present has anything that will be of interest to the society to submit he is invited to do so during the time which now remains.

Dr. Dunton read the titles of the following papers: By Miss Hilda B. Goodman, Director Curative Workshop, Columbia Hospital, Milwaukee, Wis. on “The Industrial Case, from the Accident back to the Job;” By Miss Edith A. Griffith on “Some Results of Occupational Therapy with regard to Health, Economics and of the General Welfare of the Community.” By Mrs. Ruth B. Harter on “Organizing Occupational Therapy in New York County Hospitals,” By Miss Isabelle L. Whittaker on “Occupational Therapy for Children in Hospitals.”
Dr. Dunton: I have been asked to announce that Hospital Management, a paper published at 503 South Dearborn Street, Chicago, contains an article by Mrs. Eleanor Clarke Slagle.

Delegate Staples: I would like to know if it is possible to get reprints of the issue containing the article by Mrs. Slagle.

Dr. Dunton: In reply to that the only way by which authors can get reprints, with the high cost of printing, is to have them made at their own expense. I do not know if Mrs. Slagle will have them made.

Mrs. Slagle: I will state that there will be reprints for any one who wishes to have them.

President Hall: I want to say for the people who publish The Modern Hospital that they gave me without charge a thousand reprints of the yearly review. When I asked the first day how many read the magazine I was much pleased to find that the circulation among you is so wide. I want to make a request of the people here for short pithy papers on subjects of interest to occupational therapy teachers, everywhere, for the occupational therapy section of The Modern Hospital. If you will concentrate and keep out all the unessentials you can put a great deal of information into a thousand words. I was talking last night with one of our friends about the Four-Minute Men who were put in service during war times. This was volunteer war work to circulate propaganda at public meetings. These men were told at the beginning that they could only have four minutes and no more. Some of them said they could not say anything in that time, and it is well known that it takes many trained speakers more than four minutes to get started. But those who became successful four minute men learned, after a very short time, that they could serve the country with four minute speeches. They were informed, at the start, that Lincoln's Gettysburg speech, which contains no little inspiration, thoughts that are immortal, took just about three minutes to deliver.

What I would like to have the coming year is a short half page or a quarter page of practical points about our work; things which mean something. I cannot ask you to subscribe for The Modern Hospital. I have no interest in the magazine of course. My editorship with Mrs. Davis and the others is entirely gratuitous, naturally, but it is a magazine which is of importance beyond the field of occupational therapy.
for you. It covers the hospital field. If you will read from month to month the articles on hospital administration which are included in that magazine—even if you read only the advertisements you will be in closer touch with the hospital system of this country and its requirements.

Mrs. Rockwell asked yesterday for the opportunity to speak to you, but the day was so crowded that there was no time in which she could do it and I will now call upon her to address you.

_Mrs. Frederick Rockwell, Director of the Philadelphia School of Occupational Therapy:_ Ladies and Gentlemen: I wish to say a word relative to standardization from the viewpoint of working members and aides. Just how are we going to have our standards kept up? Those of us who are interested in the schools and educational side of occupational therapy want to keep in touch and be sure the society is holding something above us constantly. We have always felt that the society held the standard higher than we have all reached. I have always gone home from our conferences with the feeling that we must go on and improve. I want to be sure that this sense of progress is kept before us all. Every aide wants to keep on and what she has already done is to be considered a stepping stone in her growth and she wants to know that the standards of the schools are upheld. The subject of the graduate schools comes before us. It is excellent idea. There is room for one or two or more graduate schools in different localities. In the East, West, and the middle West, possibly, and we are very anxious to have them. Our courses as they now stand are none too long. They should be longer. We want to be sure that the short summer schools are real graduate schools. In fairness to aides who have spent a year on their training, or years in the work, we want our national society to go on record as approving and supporting the graduate school only as such. No student should be accepted at a graduate school without a certificate from a regular long course school or its equivalent in a certain period of years service. I think it might be very interesting if others will express their opinions on the length of course of the schools and of the graduate schools.

_President Hall:_ The meeting is open for discussion. Mrs. Rockwell has asked for an expression of opinion on the subject of graduate school standardization.
Miss Susan Johnson: Dr. Hall has been pleased to express his confidence and has done me the honor of appointing me as Chairman of the Committee on Education. I hope that the committee may consist of a personnel which represents the leading Occupational Therapy schools of the country today. I think there has been a very strong feeling for the need of organization along the lines Mrs. Rockwell has just presented. I hope that Committee will be able to gather together the consensus of the opinion of those people who have been formally trained to help some of these problems. The matter of education in all phases bearing on the problems which come under educational methods, the training of aides, the subject matter of the curricula, the standardization of the salaries, the status of the aide, and the difference in titles as to the assistant aide, and what we require, and what salary shall be paid for certain training—all such problems are more or less difficult to settle. After all, no matter what else we do or how well we do it, if the aide fails all else fails. The aide must, in the end, make success or failure for us all, so, of course, the committee's standard of training of the aide, it seems to me, is essentially one of the live subjects which is all important. I would like to say that I hope for the wide and earnest spirit of every member of the association to do something in this coming year to solve some of our educational problems.

Mrs. Rockwell: Mr. President, I am sure that Miss Johnson, as Chairman of the Committee on Education, will be most effective. We in Pennsylvania will pledge ourselves to help her in every way. It is one of the points we want to remember and that is that many women who take the course make great sacrifices to do it.

Miss Idelle Kidner: Mr. President, we have looked forward for the past year for a great deal of help from the national organization. We have felt the need of assistance in problems which seem to be confronting us all, and have hoped some solutions might be reached through the meetings of the national organization by those so actively connected with the work. Perhaps it is partly because we are out in the West and a bit isolated from those who first started the work.

In our school, in the last three months, we have felt very keenly that there must be a broadening and strengthening of the work in every direction. We are very much interested in having standards held high and training well done.
We believe courses should not be lengthened too rapidly to seriously hinder hospitals in being able to open occupational therapy departments, nor the standards be lowered by shortening courses so that existing and future departments cannot continue with well trained aides. We deem it very much better to ask hospitals to defer opening occupational therapy departments until well trained occupational therapists may be obtained, rather than open departments where they cannot be carried on in a substantial way so as to be of real assistance to the medical men in the good work they are trying to do.

We are anxious to be able to encourage and be a help to those who are beginning the work; it helps us. The short courses (the twelve weeks work) did help in the past during the emergency, but now the patients and the financial conditions must be considered. Graduates, during the short courses, who have seriously stayed in the work, have had an opportunity through experience, without any further school preparation. A longer course now could not be a detriment to any one.

President Hall: We will next hear from Miss Camilla Ball.

Camilla Ball: Chairman, I want to say a work in regard to the Occupational Therapy School conducted by the Red Cross in Detroit, Michigan. At the suggestion of the surgeon general in 1918, a three months or emergency course in occupational therapy was instituted. From that time on the local Red Cross spent approximately sixty thousand dollars a year in furthering occupational therapy or vocational work by conducting the occupational therapy school, carrying on a curative work shop for the blind and crippled, establishing occupational therapy in institutions and instructing a group of shut-ins. One hundred students have been graduated from this school and have been absorbed in the various branches of the profession. I think this same type of work has not been duplicated by any other Red Cross chapter in the country. For the coming year the Board of Education have offered to take over the school of occupational therapy, and place it in the Cass Technical High School. The course will be covered in two years and will be free of any expense to the student. Only high school graduates will be admitted.

The second matter that I want to bring up is one that I want put very clearly so that there will be no misunderstanding. I was sent to Washington for some information on my way to Baltimore. I was
discussing occupational therapy with the chairman of the volunteer
group of the National Red Cross. They asked me to secure an ex-
pression from the national group as to whether occupational therapy
needed any assistance from such an organization as the Red Cross.
I should like an answer from Dr. Hall or Mrs. Slagle as to the need of
assistance so that I can send an answer to Washington.

I suppose all occupational therapists agree that professional work in
hospitals is too difficult for volunteers. However, if professional
workers have the backing of Red Cross interest, it makes the approach
to difficult people and hospitals much easier. I have in Michigan been
able to accomplish through the Red Cross much that would have been
impossible without that backing. The suggestion is that if there is a
great need or assistance to which the volunteer group can give their
time, the volunteer group may incorporate this work for the coming
work. They want the opinion of the National Society. If Dr. Hall
and Mrs. Slagle will express the feelings of the society I will communi-
cate with Washington.

President Hall: In the first session we voted to hold our next annual
meeting in Boston. Since then we have been assured that we shall
receive an invitation from the Public Health Service to meet in Augusta,
Georgia, and in conjunction with the Convention of the Public Health
Service Department. There are going to be quite a number of other
invitations which we have not had earlier in our session and some of
them may be even more attractive than the place that has been selected.
I think, under the circumstances, that the best way out of it is to rescind
our action on the first day's meeting in regard to the place of meeting
of our next annual convention and I would recommend further, that
after the invitations are all in they be taken up by the House of
Delegates to decide for you. This is a matter which in an open meet-
ing can scarcely be considered in all its points and I am sure it would
be better if you would let the House of Delegates represent you and
decide upon that later on. If there is no objection to that I will
entertain a motion to that effect.

Mr. Thomas B. Kidner moved, and the motion was seconded and
carried that the action of the society in deciding to hold the next annual
meeting at Boston be rescinded and that the choice of the next meeting
place be left to the House of Delegates to be made as soon as possible.
President Hall: We have received invitations to meet in Milwaukee, Colorado Springs, Augusta, Georgia, and Boston. The House of Delegates will decide and report at the proper time. We will now listen to a paper read by Miss Nell Green, and prepared by Miss Elsey Taft, Chief Aide, Walter Reed General Hospital, Washington, D.C., on Occupation Therapy for Orthopedic Cases. (Miss Green then read her paper.)

President Hall: We will next have a supplementary paper by Miss Ethel Bowman on Metrotherapy in Orthopedic cases. (Miss Bowman then read her paper.)

President Hall: Next and last is an address, with screen views, by Dr. R. Tunstall Taylor, Clinical Professor of Orthopedic Surgery, University of Maryland, on The Relation of Surgical Reconstruction to Orthopedic Surgery.

Dr. Taylor: Ladies and Gentlemen: It is a great pleasure to again be so closely attached to your president. A few years ago, and I shall not say how many, we were in close touch as internes at a hospital in Boston, and we were delving together on problems just as we are doing now, associated in threshing out matters that are of an orthopedic nature. Of course, as you know, in a great many surgical problems the surgeon is very largely dependent on the aide. In a rather extensive experience covering between twenty and twenty-five years with crippled children and with war experience in the orthopedic department, it may be of interest, that we had over 30,000 patients who were in service in the United States Army and 80 per cent were treated for bone and joint injuries. (Dr. Taylor then demonstrated the pictures as they were shown on the screen.)

A recess was then taken until 2.00 p.m.

Third Day, Afternoon Session at the Sheppard-Enoch Pratt Hospital October 22, 1921

The Society, in a body, proceeded to the Sheppard-Enoch Pratt Hospital, Towson, Maryland, for luncheon, as the guests of the institution, on invitation by Dr. Chapman. After luncheon the convention met in the auditorium of the main building to proceed with a general round table discussion on Administration.
President Hall called the meeting to order at 2.00 p.m.

*President Hall:* Dr. Dunton has something to say at this time.

*Dr. Dunton:* Ladies and gentlemen, on behalf of Dr. Chapman, the superintendent, who had to go to town this afternoon, I wish to say that we are pleased to have you with us and hope you will all come again. On behalf of the committee, I am asked to say that a bus will run all afternoon between the institution and the trolley car line which will take you to the city. The distance is seven-eighths of a mile through the grounds along a pretty walk and I am sure all of you would enjoy taking it. First in order there will be held in this room a general round table discussion upon Administration, as noted in our program and after this we will divide into groups under the leadership of the various persons that are listed. Dr. Brush is unable to preside on the subject of Recreations and Mrs. Price will take charge of that group. The chairman, at the conclusion of this general round table will signify where the different groups will meet.

*President Hall:* I will suggest that some one make a formal motion of thanks to this institution for our entertainment.

Mrs. Slagle moved, on behalf of the Society, a vote of thanks expressing our deep appreciation for entertainment today to Dr. Chapman and Dr. Dunton.

The motion was seconded and carried.

*President Hall:* I will ask Mrs. Slagle to read the program for the afternoon.

Mrs. Slagle read the program as follows:

1. Administration—Auditorium.
2. Metal, Miss Idelle Kidder, Chairman—first floor Casino—Miss Rice, Hostess.
3. Wood, Miss Alice Dean, Chairman—Carpenter shop—Miss Brice and Miss Stebel, Hostesses.
5. Basketry, Mrs. F. W. Smith, Chairman—second floor Casino—Miss Finley, Hostess.
President Hall: The one thing that is hard to do is to get any large association—and we are becoming a large one—into a room small enough so that every one can be heard. It is hard to keep in close touch with discussion.

We come from all over the country with our own ideas, our own success, our own failures, and there can be no more useful part of such a meeting as this than that of the so-called round table discussion. I do not see any round table where we are supposed to be sitting. However, this is that section of the program where we are to discuss administration: keeping records; methods of keeping supplies; sale of products as noted in the program. There is a very wide range of subjects connected with our work which need full discussion. Since we have no formal program on administration I will ask some one to suggest some department, even outside of what is on our list here; anything that any one present would like to discuss in this meeting. Anything pertaining to the large subject of our work; its administration; its relations to the hospital in various ways. If any one has anything to suggest we shall be glad to consider it at this time. To begin with, since no one has responded at the moment, I would like to suggest as the first topic, "The Relationship of the Aide to the Visiting Doctor, and to the Hospital staff, the Position that the Aide should Occupy in Her Relationship with the Other Departments of the Hospital." We are, as occupational therapists, a comparatively new type of assistant. We should not efface ourselves too much and fail to get what belongs to us in the way of opportunity. On the other hand there is danger, possibly, that in our young enthusiasm we shall assume that the hospital could not get along without us and that really the surgery and medical care are quite secondary to our interests. Those of you who have had close touch with the situation in the wards, I wish you would give us some examples of the difficulties which you may have had in getting started; in securing the appreciation and the understanding of the new position; what difficulties have there been to surmount? Have there
been jealousies between the aides and the nurses? Has there been lack of understanding with the physicians? How have you been able, if there have been such, to overcome it?

Mrs. Eleanor Clarke Slagle: We are a large group of women, supposed to be able to talk. If I start the ball rolling some one else will likely be able to send it on more rapidly. In our representation here at this meeting there are many individual problems, so far as hospital administration is concerned, and each one has, probably, a peculiar, a particular element in it that, perhaps, some other group does not have. I think if some one will state what the individual problems have been in getting your department established, and then your plan for administering your department after it has been established, under the medical division of the service, that would be instructive. There is no question about our loyalty to that arm of the service that we are attempting in our small way to help. I do not believe in an ineffectual way, but in its effective way,—but, I know that hospitals do represent just what I said. You may have a state scheme, or a scheme that is statewide, and each superintendent will interpret that program in just a little bit different sort of way and if you are adaptable—and every aide must be adaptable—there must be most cordial cooperation with the superintendent for hospitals have been getting along for a long time without us, but we are going to make our place such a strong and splendid place, that they can not get along without us. We have been living together at this convention the last three days and ought to feel less formal, perhaps, than you did before; why not throw off the restraint just as you did last night in your dance at the revel and discuss our work freely.

Mrs. Smith, Washington: My difficulty is in getting supplies in the hospital; to get materials for the aides to work with.

Mrs. Sands, Philadelphia: I think the reason why we have had the cooperation of the nurses is because of the splendid support that our chief has displayed in Philadelphia. She has her nurses take a short course of training just the same as they would take in other classes. The probationers have a four-hour course. We give them that when they first come in the hospital and they get in touch with the hospital and know what we are trying to do. Then in the senior year an eight-hour course; not enough to make them think they are occupational
therapists. In that way we get the cooperation of the nurses, which I think, has proved to be a very valuable help to us.

Miss Idelle Kidder: One of the things that comes to our notice so frequently is the problem of prescriptions, and when it is not forthcoming, just what the attitude of the aide should be. We have concluded that if this organization could in some way give a little publicity to the medical profession and have it go into the various hospitals throughout the country, that it is expected for them to give prescriptions, and if the work is placed in the hospital, that they have it start in that way.

We have a great many doctors, who are willing to give prescriptions, and want to do it, but do not know what to do or how to go about it.

Mrs. Slagle: The worker needs protection with a prescription from the physician always. It need not be the task or the character of the work, although it might be the type of task that the physician wishes to have carried on with the patient, but that the aide must have, the protection of the prescription, then the patient will have the protection of the prescription.

I am sure there are others here who must have very valuable contributions to make to this discussion. When you go away from here you will be sorry that you have not told us what your problems are. We ought to profit by them and perhaps we might be able to help you to interpret them. I think it is a very important matter in training schools for nurses that they should have the benefit of a little time, at least, in the occupational therapy department. It may interest you to know that when I had charge of the work at Phipps Clinic the principal of the Nurses Training School established then, and I think it is still carried on, the necessity of each student nurse spending a period of time in the department of occupational therapy not necessarily being instructed in the crafts we were using, but rather getting a bird's eye view, as it were, of what occupational therapists were trying to accomplish. I want to tell you of the fine spirit we had there: there never was a nurse, that I can recall, who did not come back to the department in her time off duty and volunteer her services in the department of occupational therapy. I think that is a concrete tribute to the high interest of nurses, as they did not have much time; they were more or less overworked, and it established our work and they spent time there just as they spent it in any other laboratory, or any other special department. It was fine. Now, is there some one else?
Miss Montgomery: In our shop in the metal work and jewelry we invite all the student nurses and all the nurses connected with the hospital and welcome them in there during spare time. We do it to make them understand the work of the occupational therapist, having to help them to get the patients before going into the shop. We do wish to let the idea permeate the entire hospital, that through them she will help her own work with the patient. We have a great many of the nurses who go in during spare time and we show them quite a little bit, and they like to learn.

Mrs. Tompkins: In the Chicago State Hospital, we have a training school with the hospital work where pupils remain for a period of four months. One month of that period is spent in the occupational department. When the occupational aide is there to give them general technical lessons, they get the benefit of that, which is given entirely from the point of conserving waste material, feeling that when they go out into any other field they might have a moment when they wanted to do something at home, and they might make it in their homes where they can always find some waste material. It can be found valuable and a month gives them a considerable knowledge.

Mrs. Slagle: The general hospital nurses affiliate with the mental hospital, the mental training also gives training in gymnastic work, in dancing and games as well as occupational therapy. It is very important because all of their work is under the direction of the occupational therapy department.

Miss Luther: Part of their regular training of Butler Hospital Nurses for which they receive a diploma, includes an occupational course, which is only a side course. It is designed to give assistance under the direction of an aide, and as assistant to the aide, while the aide is doing the work. We have had it for a year now, and it is very successful.

Mrs. Slagle: It is very interesting when you get the nursing division to transfer their authority for even a brief period to another division of service that is not strictly nursing, per se.

Miss Camilla Ball: I want to know if every other state is up against the same proposition we are in Michigan, where there is a standing law against the proposition? The doctors are against it and most of the
people are against it. We hope to encourage the doctors in the proposition of how far we can overcome the financial situation in regard to the material that is used and the expense of it is concerned. It is difficult to get away from it. About half the time we find doctors willing to put it in. It is a most difficult situation as far as the development of such a department is concerned.

Mrs. Slagle: It has to be proven that it is a remedial measure and has an equal value, in some cases with other kinds of treatment.

Miss Sands, Philadelphia: We expect to make our occupational problem self-supporting, as far as our material is concerned. We only give our patients one-fourth of their product.

Mrs. Wilson, Byberry, Pennsylvania: Our institution is away out in the country, and it is very difficult to have any social life for the attendants, or any of the employees there. Last June they organized a social club there, known as the Byberry Social Club, and it has been a good thing. Will not somebody present or discuss the problem of disposing of the finished article in the shop? I would be interested to hear what other people have to say about that.

Mrs. Slagle: I think the question of the disposal of the product is very important. Do not you agree with me, that organizing a social club at Byberry is of still greater importance? However, I am so glad Mrs. Wilson has spoken as she was a little loath to get up on her feet. Perhaps it was unfair for me to ask her, but I feel that what she has given is a large contribution. I would like to have you see what she has tried to do in an institution that is remotely located, and how she is carrying social interest to the group of attendants and employees in a hospital. I hope you will answer Mrs. Wilson's question in regard to the disposal of the product.

Mrs. Offit, Allentown: We are not isolated, and we can dispose of our product. Our department is self-supporting and has been for three or four years.

Miss Ruth Wigglesworth: In the Boston hospital we have tried to work on the definite medical basis, and have no exchange with the patients at all. It is through a single bureau organized for the purpose of buying
materials for the hospital at reduced rates and for selling; and with the exchange of ideas throughout the country and as the connecting link between the public, the patients understand when they come instead of paying fifty cents for a doctor in cash, that they have to pay for their treatment in the return of articles which has been a part of their product. In every instance they are satisfied, and it takes away that feeling of whether they will get a certain amount of money the first time they go to the shop, and in the long run it helps them keep and make a steady gain, better often than where there is money returned.

Mrs. Harter: We have come to the conclusion that the output of the hospital should be disposed of in its own local county. I think we are tending more and more toward that with the development of the work. Just for an illustration: In one part of our sanitarium we have a mat department. They gave an exhibition at the county fair this fall, and it will be away after next April before we will be able to fill the orders for the small mats which were then received. We have a great deal of work on small mats. They have orders which they possibly cannot fill until next spring. It is not through any one in the sanitarium that we have disposed so readily of our product. We have found that each county must, as it were, distribute its local output, and in doing this we can readily dispose of our product in each local neighborhood, and if they can make three dollars or fifty cents, in doing that, they may dispose of it very readily at home.

Miss Sawyer, Minnesota: We have that same condition in Minnesota. It has value and is an addition in tuberculosis treatment. The doctors are very ready to encourage that element because of its value to the public.

Mrs. Offit: We had a system in our hospital for several years which we changed because we found it very detrimental and you could not consider it of a therapeutic value.

Miss Idelle Kidder: I would like to have some one's opinion in regard to the taking of orders and delivering the product?

Mr. Haas: Taking orders is not detrimental to the therapeutic value as long as it is understood by the person working that if the order is taken it must be filled at the time when it was promised and not at the convenience of the one who does the work.
Mrs. Slagle: How do you dispose of the articles in the National Sanitarium?

Miss Shanklin: We have none, except locally. We have a system through which we dispose of articles. We have a sales department and we have disposed of them through that department. We have men who visit our departments when they want articles, and we have an organized way of disposing of them. It has occurred to me at times that there might be some way for all of us in sanitariums that are isolated as we are, if there was a central place where we could dispose of articles for sale instead of having them accumulate; that it would be a very wonderful help to the sanitarium.

Mrs. Slagle: I would suggest that we move on to the consideration of "keeping records of work." Who has a valuable system of record keeping to talk about?

President Hall: This is most important. As I have watched the records, it seems to me that a large part of the paper work is superfluous and will never be read by anybody. We put a lot of work into it and it gets thrown away. One chief object of study should be, that we reduce the record to its lowest effective terms. My own feeling has been that the point we should cover, is to reduce the records to some central specific factor, so that our records may be readily understood. It may be necessary to keep the details, the accounts and all that, as part of our record, but the clinical record, the record of progress is one of the most difficult things in the world. It does not do a single thing but say that the patient was very sick and got better. It will be well if we can measure in some way the actual benefit and effect of occupation upon the patient. When a patient enters the hospital he begins to be treated in several ways; he has different treatments. It is a very difficult thing to say what the occupational therapy part of that treatment is. As we come to reckon the patient's progress in terms of occupational therapy by the length of time in which we can put him to satisfactory work without fatigue, and that you can keep that almost as accurately as a temperature chart. It is the most pertinent thing. Matters of morale and general progress are so mixed up with other medical elements that it is almost impossible to separate them. When we show a patient is able to work one day for an hour and at the end of a week for two hours and at the end of the third week three hours, it
does not mean that occupational therapy has accomplished the whole of that, but it is the record, and the aim generally being to concentrate the use of the faculties effectively on whatever kind of work they may be employed in and after all that comes nursing, being what we want as a record. You would not want to say that occupational therapy did it all. You can say that at the beginning the patient was able to work and make progress with occupational therapy, which is one part of the general treatment. At the end of the month the patient was able to work and it seemed that he could concentrate, probably, constantly for three hours. Generally speaking, it may be assumed that without occupational therapy at the end of four weeks' time in a hospital, a patient would not be able to concentrate for three or four hours—that is at the end of that period, or have done any kind of work, but with the advantages of occupational therapy the patient was sent out to take and do his work in life after having been disorganized to a very considerable extent and had been idle for quite a length of time. I think we may say that without occupational therapy he would have fallen down pretty badly, and under these circumstances lost his grip and his ability to concentrate, and that is the most prominent feature for occupational therapy to record; the length of time that a patient is able to concentrate upon a given project, beginning with a short time and with, probably, imperfect coördination and attention, and ending with three or four hours of work demanding fairly close attention. Some say, with considerable assurance, that occupational therapy has done that, and that is what we want for our records. The actual reporting of the record is a matter of great importance because we want to record it, so that the medical mind may understand it and will be ready to appreciate it almost at a glance or else it would not be read or appreciated; if we took one factor like that where the expression of progress under occupational therapy will be understood by the medical mind, it will be appreciated. The way to do that, and just what to make the record, literally, is a thing I would like to have a discussion about. I think it is a point well worth discussion.

Mrs. Slagle: Dr. Brush, you have some contribution to make on this subject? I am sure you have, and I would like to know if you will not make it at this time.

Dr. Brush: I am merely a looker-on. Some of the points in this discussion have often been brought out. I agree most sincerely with
what Dr. Hall has said, that the point is to find out what the patient can do as he progresses; whether he is fatigued at the end of a week, day, or one hour, or a half hour's work, or at the end of three weeks is not fatigued with three hours' work, which is a valuable point for the information which we want to give the medical community. I have talked with American doctors, who look upon occupational therapy as merely a fad. They all say, "we have passed through various epidemics like this, that, or the other thing, which has come up in the practice of medicine."

I remember very well when I was a young man, a surgeon said to me—we have gone through two epidemics of electricity as the end of all and any medical practice. I expect to survive the third one, which is just commencing. If there is anything to consider I think it is the tendency to over-rate these facts. A great many practitioners are fearful of these things. If you can show me that certain things must follow certain things, I will appreciate the desire that they will bring something about. A man who is forced away from his work for five or six months finds it very hard to get back. I can speak from personal experience. I have been away from my work, more or less, since last Spring. I have had considerable literary work to do, and I found it very, very hard to get back to it simply because I have not been at it continuously; I have lost the habit; lost the grip. Of course, I can take it up again. A sick man, or a man who has been sick, finds it pretty hard sometimes to take up his old work. Patients have said to me many times, "I cannot go back and face the problems of life." We want to teach those men that the problems of life must be commenced and carried on then in the sick room. He must be taken back. If we can teach men to work with their hands and their brains again, without fatigue, and with interest, we are accomplishing what occupational therapy set out originally to do.

Mrs. Slagle: May I speak of something that has nothing to do with record-making. I wish to refer to my first willow-work, which was done in one of the basement rooms of this hospital. On invitation of Dr. Brush, I came here and he borrowed a patient from Spring Grove to teach Dr. Dunton and me the technique of willow-work. Dr. Brush, I do not think I have ever thanked you for it, publicly, before.

Dr. Brush: I am very glad to have you do it upon this occasion.
President Hall: Another word about membership. There was a time when we were a little afraid of getting in people who were not interested in occupational therapy. We want any one who is not afraid to pay $2.00, and is interested enough to come in. That fee should be sent now, according to the new order under the new constitution, to Mrs. Slagle, who is now our treasurer and secretary, and who will be glad to acknowledge your check.

A representative of the Walter Reed Hospital, Washington, extended an invitation to everyone present, to visit the hospital tomorrow (Sunday) between two and four p.m.

Mrs. Slagle, as chairman of the general round table, announced that the time had arrived for the closing of the discussion on administration, and that the several groups under their chairman will leave the room to discuss the various subjects which have been assigned to them.

President Hall declared the Convention adjourned sine die.