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Community Services and Support Systems for Flood Victims
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Report To
THE PENNSYLVANIA DEPARTMENT OF
COMMUNITY AFFAIRS
From
THE AMERICAN CITY CORPORATION

DRAFT

NOT FOR PUBLICATION

# A REPORT

# ON

# COMMUNITY SERVICES AND LIFE SUPPORT SYSTEMS

# FOR

# FLOOD VICTIMS WHO WILL LIVE IN MOBILE HOME UNITS

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Prepared For

THE PENNSYLVANIA DEPARTMENT OF COMMUNITY AFFAIRS

By

THE AMERICAN CITY CORPORATION
A Subsidiary of The Rouse Company
Columbia, Maryland

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## ASSUMPTIONS AND GOALS

1. Re-establishment of normal community life is the highest priority for every local government agency in the flood-impacted areas and for state and federal agencies that have services and resources required for total human and physical recovery. Every institution and voluntary organization in the flood-impacted areas share this priority.

2. Temporary housing on improvised sites, with interim services, are seen as a necessary step toward the rebuilding and reorganizing of permanent, sound neighborhoods and communities.

3. While everything must be done to make this step as brief and as efficient as possible in time and money, the quality of living for people in these temporary conditions will be maintained at as high a level as possible. The "refugee camp" psychology must be avoided at all costs. The people who must live in temporary quarters will be accorded every consideration and dignity due a fully functioning citizen.

4. The Governor and the State Legislature are considering a comprehensive recovery program for the flood-impacted areas, going beyond the immediate restoration of survival services. They are seeking extensive federal support, aggressively and persistently, to implement such an approach. They see this disaster as an opportunity for a massive revitalization of a large and important part of the state.

5. The people directly affected by the flood disaster want to remain independent, self-reliant citizens living in their own homes, in sound neighborhoods, employed in productive jobs as soon as possible. Financial and other assistance provided to them is seen as an investment in human resource development and not as any kind of "handout". The very young and the elderly will require special support to help them function properly.

6. The economic interests in the entire region see the need to restore and revitalize the economy. They also see the need for a comprehensive recovery process and will respond with investments of time and money in amounts above and beyond the usual corporate civic duty. They are prepared to become full partners with governmental and citizen groups in designing and implementing a dynamic process of community development.

## LIFE SUPPORT SYSTEMS

People living in any community need a number of services, programs and opportunities in their daily lives to:

....maintain health

....raise families and be part of a family

....relax with friends

....hold a job and make a living

....get to and from places to work, play and shop

....be part of what's going on in their neighborhood

....solve personal and family problems

To do these things, systems and sub-systems are needed that deliver services and provide programs. These services and programs can be divided into three basic areas:

1. Community Environment

   a. Home and immediate space around home

   b. Neighborhood or block

   c. Shopping facilities

   d. Relaxation and play areas and facilities

   e. Health facilities and services

   f. Schools and other learning opportunities

   g. Security of person and property

   h. Traffic and Transportation

   i. Cultural and spiritual activities

2. Counselling

   a. Personal and family problems

   b. Employment and Training

3. Communications

   a. Information from local government and to elected representatives

   b. Other local sources of information

   c. Access to press, TV and radio

   d. Citizen participation in local decision

   e. Opportunities for "neighboring"

The flood has seriously disrupted existing systems and sub-systems. Recovery will require several months or longer. Therefore, it will be necessary to improvise interim services and programs to support daily life for all those people who must live in temporary units away from their neighborhoods, institutions and local organizations. Six general principles should be observed in designing these interim life support systems:

1. The systems should be strictly mission-oriented. That is, every service and program should be designed to assist directly in making the community environment work more efficiently for everyone concerned--and assist each person and each family in specific ways to return to a fully recovered position in the community.

2. They should be flexibly designed and flexibly funded. This means dollars should not be so rigidly earmarked for one purpose that they cannot be put into programs that cross agency lines and require funding from several sources.

3. There must be an overall management mechanism to make sure all programs and services are working together and not competing for funds, facilities and personnel.

4. Management must include concern for human relations and community participation in major decisions and policies.

5. To the extent possible, existing agencies and jurisdictions should be used to provide services and programs. However, when these are not available, there should be no hesitation about improvising or "inventing" a technique or program that can respond immediately to real needs. In other words, delivery systems must be user oriented.

6. To the extent possible, local people in temporary mobile units should be given priority on jobs in the mobile home parks. They should be paid at prevailing salary and wage rates and paid daily or weekly to provide immediate disposable income. If training is needed, it is a good investment to train local people to do these jobs in their own areas rather than hiring outside help. When outside help is absolutely needed, those brought in should be given a careful orientation as to the nature of the situation and people involved. "Refugee" psychology and "handout" attitudes must be eliminated from the outset.

## COMMUNITY ENVIRONMENT

### Site Layout

Due to extreme emergency conditions, it was practically impossible for all concerned to explore alternative site layouts or relate physical layout to social requirements in any significant way. As a result, current site layouts do not provide the best context for delivering needed human services and programs. Nor do they encourage the development of a sense of community and neighborliness. Site design is important because it can generate maintenance costs, social problems and therefore, increase management costs. In addition, there may be created resentments and tensions that could seriously erode morale of the people involved. Under separate cover, we have transmitted illustrative alternative site layouts which may prove helpful in completing the design of remaining sites.

### Living Units and Immediate Area

a. Laundry facilities: Every unit has space and connections for a washer/dryer. Effort should be made at once to arrange rental or purchase of such appliances for each unit with one service contract for all units. Special credit terms should be worked out for purchase under existing flood relief measures to permit families to take appliances with them when they move into permanent housing. If this is not feasible, HUD should be asked to include this in the purchase cost and/or any rental arranged after the full year of rent free use is completed. It is estimated that washer/dryer appliances retail at a combined cost of $350. Wholesale purchase should reduce this cost significantly. An alternative is to erect clotheslines that can be used in good drying weather. With bad weather months ahead, it is questionable if this

will work out. Families that have been flooded out will not have extra clothing supplies to permit this. Another alternative is to erect community laundry facilities on each site. This is costly and requires special management and supervision. It also places the burden on residents to wait in turn for washers and dryers and delays caused by breakdowns. Our best judgment at this point is that washer/dryers in each unit solve many problems and prevent many others. The engineering questions of water and electrical hook-ups should be explored immediately.

b. Storage Space: Every family will have 2 major problems: (1) storing items used in everyday living - strollers, tires, bikes, large toys, clothes; and (2) items saved from home that include furniture, personal records and other possessions. The first class of items need to be stored in and around the mobile home unit in safe, dry quarters that are immediately accessible, around the clock. The second may be stored off-site in warehousing arranged by the management and paid out of available relief and recovery funding programs. Off-site storage may include private garages, basements and other spaces in buildings. Storage of items used on site requires storage space very near the living unit. Metal units 10 X 10, 10 X 14, and 14 X 14 are available on the market at retail prices from $90 to $260 each. These are all steel, all-weather units with ample headroom and sliding doors which eliminates the problem of snow blocking the doors. Perhaps one unit can serve two mobile homes or one of the larger units might serve 4 mobile homes. An alternative would be to provide community storage facilities, using lockers or bins with locked doors. These would require more ground

space and would require some families to walk longer distances than others. In bad weather, this might be a real factor. Also, a common facility would require security measures which would increase costs. Ideally, each unit should have its own storage space attached to it. The next best thing would seem to be storage units for 2 to 4 families to share. Site layout will have much to say about this.

c. Lighting and Identification

Current specifications do not call for outside lighting. We understand that local utility companies have been asked to prepare plans for exterior lighting. There are well documented experiences that demonstrate the need for exterior lighting to prevent accidents and personal injury and to discourage unlawful acts against people and property. Again, this is an investment that will return many benefits for all concerned. In good weather, people will be able to be outdoors in comfort and safety and communicate as neighbors. In emergencies, it will be easier to find living units and provide services more effectively. Physical identification of living units is very necessary. Numbers must be assigned and a system arranged for finding units by street, quadrant, etc. Signs will have to be erected to assist service people and visitors find living units easily. A full directory and a site layout with names and locations must be erected as soon as possible near the entrance to the site or in front of the site manager's office.

Mail delivery is of great importance. We recommend temporary cluster mail boxes be erected to serve 16 to 20 units. These are weatherproof

boxes grouped in one structure with individual locks, held up by one pole in concrete base. The estimated cost is $ 132.00.

d. Pathways, Streets and Walks

These are determined by site layout. We note no provisions for flat, hard surfaces. We recommend consideration of boardwalks and certain inexpensive paving materials. Hard surfaces are needed to permit bikes, strollers and other wheeled vehicles to be used. Internal circulation will be greatly hampered if people must either walk or ride cars. Safety is impaired and people will have to bear the added costs of dust, mud and gravel on clothes and furniture. These may seem like small items, but they wear on people's nerves day after day and become matters of great irritation. Even more important, an efficient, attractive walkway and street system helps create the sense of neighborhood and community that is sorely needed to make temporary conditions more livable.

Community Facilities

Site office

Each site should have a site office. The site office should have space for the site manager and whatever staff he has plus a large bulletin board for notices, space for people to sit and visit. For sites of 250 units or less, one unit can be converted into a site office. For larger sites, more office space is needed. For the largest site, it seems reasonable to put 2 units together and join them by a common entrance.

Multi-Purpose Center

Each site will need a multi-purpose center. The center will vary in size depending on the site, number of units served and the availability of community facilities

nearby. For example, sites within 12 blocks of a public school or other public building with meeting facilities might arrange use of these existing spaces for meetings and social occasions. On the other hand, another solution is needed for Slocum State Park site which is 6 miles to the nearest existing facility. In midwinter, it would be a hardship to schedule a meeting or other occasion that would require a 12 or 15 mile round trip for people with families or elderly people. At Barnum, another problem exists to provide a facility to serve 1,000 units planned for that site. Inflatable, flexible structures are now commercially available that can cover up to an acre of space with full, weather-tight insulation, heating and cooling. We have looked into this and find it to be a practical possibility from every aspect - cost, use and design. Such a structure is quickly erected and just as quickly taken down. It can be removed and put into use elsewhere for year around enclosed space for sports, storage space, special events like garden shows, art exhibits, etc. It is much cheaper and quicker than any other form of temporary building we have been able to find. Cost estimates range from 1/5 to 1/2 the costs of conventional structures. Leasing arrangements are also available. A list of companies that produce these structures is attached in an appendix. The center would be used for meetings, instruction and training, interviewing sessions for job placement and permanent housing assignment, day care programs, selected indoor recreation for elderly, and, on occasion, social events planned by the residents. Health education activities might also be held there on certain days and nights. Tutorial and study hall facilities might be provided for students on certain evenings and week-ends. The mobile library might make it a scheduled stop every week. Certain kinds of religious services might be held there if the occasion arose.

The cost for a multi-purpose center depends on the size and the program. Local residents might be enlisted to manage the facility and the program should certainly be responsive to needs expressed by residents. In fact, there could be a board of managers or a program committee established. The site manager would retain responsibility for budget and personnel but much of the programming could be left to the residents. In addition to inflatable structures, modular and conventional structures should be considered for sites which will remain in public use and for which some permanent use might be found for the center.

Education

The public and parochial schools are making an heroic effort to start school on schedule and accommodate all children. No one needs to call attention to the obvious problems that will arise for children in strange schools - overcrowded schools - and the many adjustments facing teachers, administrators and parents. Transporting children from mobile home parks to schools may create traffic problems within the parks as well as scheduling problems for parents who must get to work themselves. The schools affected should consider appointing someone to work directly with site managers and residents in each mobile home park on schedules, assembly areas and sheltered waiting spaces. In addition to the schools, there should be a special effort made to provide special adult learning opportunities to people in temporary home sites. These should include recovery activities like sewing clothes, making and repairing furniture, learning how to plan the rehabilitation of their homes, how to budget and finance their recovery,

specific job training, health education and leisure time learning. We understand the State Department of Education has initiated a program in local vocational technical schools dealing with construction jobs. Each site manager should organize a program with the help of residents and enlist local educational groups to operate them. The recently enacted federal education program has provisions for funding community education programs. These should be investigated immediately. Whenever possible, residents should be hired to perform certain administrative and support roles. The Board of Education should be asked to assign one full time professional adult education specialist, with a budget, to coordinate programs. Local school teachers and other qualified local people should be recruited to provide instruction on either a paid or volunteer basis. These programs could be conducted in the multi-purpose center, in nearby schools (especially when special equipment is needed). For special classes in family life education small groups of 5 or 6 can be held in individual mobile units. When families move in, they should be asked what learning opportunities might interest them. However, it is to be expected that such interest may be slow in being expressed since these people have many pressing problems on their minds. Programs should be organized and offered without waiting for any great vocal demand. Within 6 months, it will be possible to decide what people really need and will support. The important thing is to start offering training and instruction as early as possible. Obviously, one problem will be transportation to and from home sites to educational programs. It is assumed that regular school

buses can be used evenings and weekends to provide transportation for those who need it.

Shopping Facilities

Some sites are close enough to existing shopping facilities so that residents can manage to buy food and other needed items. Other sites are not close enough, nor are the closest existing facilities adequate. For these residents it will be necessary to do at least two things: (1) arrange shuttle bus service for shopping on specific days; (2) arrange for mobile units to come out to the sites with food and household articles on specific days. For example, with the end of summer it should be possible to get produce from nearby farms brought into these sites by truck and sold from the truck or left at the multi-purpose center for selling. Local merchants should be asked to arrange delivery services to these sites and permit more ordering by telephone. The site manager can organize a committee of residents to devise a schedule and a plan for getting merchants to come out to the site with his products. The same might be done for certain services - cleaning, shoe repair, etc. On the larger sites, one mobile home unit or another temporary structure might be used for limited shopping facilities. Franchise and chain food stores should be asked if they would be interested in serving this special, "captive" market. So called "fast food" and "take-out" operators should be invited to make proposals much as concessionaires in public parks, stadiums and civic arenas. First opportunity should be given to local retailers to capture this market but there should be no hesitation about going to national chains if local groups cannot respond adequately.

Recreation

A useful set of suggestions has been prepared by Mr. Temple Jarrell, Senior Associate: Technical Information, National Recreation and Park Association. A copy of his report is attached as an appendix to this report. We support his suggestions entirely. We understand funding is being sought to implement Mr. Jarrell's suggestions. The Wilkes-Barre Department of Recreation seems a willing and capable coordinator and manager of such programs for all the mobile home sites. Since many are outside Wilkes-Barre, it may be necessary to retain the Wilkes-Barre Department of Recreation on contract to play this role. There should be immediate attention given to the play spaces provided in each site. Here, again, layout is all important. There is danger that some sites will have little or no planned space for outdoor recreation. Equally serious is the fact that thus far no plans have been made for indoor recreation. With the coming of winter, it is imperative to plan the use of indoor facilities. As soon as possible arrangements should be made with nearby schools and otherpublic buildings to rent gymnasiums and swimming pools for specific nights and days with bus transportation to and from sites. It will be especially important during winter months for children to have the chance to leave the mobile home unit for supervised recreation and give parents and older people some privacy and relaxation. Parents and older people will also need opportunities for supervised physical recreation during the long winter months. Trips to bowling alleys and swimming pools should also be arranged by the site manager and the appropriate recreation

agencies and facilities. For more remote sites, there is need for a "hangout" for teenagers and a community "pub" for adults. Local commercial operators should be sought who might see a good business opportunity in serving these needs.

Traffic and Transportation

A serious shortage of transportation may develop for people in more remote sites. Many people have lost their cars in the flood and others who never had cars now find themselves in entirely different physical locations requiring transportation to schools, churches, medical facilities, shopping and their own homes. There should be organized, as soon as possible, a variety of transportation services for people in temporary homes. Consideration should be given to having every site office acquire and operate one or more mini-bus (20 passengers). It could begin as a demand-response system for a few weeks to determine where people need to go. A local resident could be selected and paid to work out the service in each site. The very large sites may justify more than one bus. Of course, all drivers should be hired from local residents. Special funding for all costs should be sought from the Department of Transportation. It is possible that the federal government may have surplus buses to contribute. In addition, people with cars should be enlisted in regular car pools and be paid for the use of their cars. Public and private transportation companies may wish to establish schedules between each site, the central business district and selected shopping centers. The pattern of need will vary from site to site. Each site manager should be

urged to work out transportation to serve those people in his site. It may be desirable to provide bus service for those who live elsewhere but want to visit friends and relatives living in temporary quarters. The idea is to make the sites accessible to the rest of the community as well as make the rest of the community accessible to people living in temporary homes scattered among several sites. A charter bus service can be initiated with the help of employers to get workers to and from jobs. Traffic control within each site is of paramount importance. Speed control is especially crucial. Traffic signs and directions should be erected as soon as possible. Wherever site layout permits, one-way streets, loop streets and cul-de-sacs should be installed. The separation of vehicular traffic from pedestrian traffic is a basic requirement. Lighting of intersections and parking areas will be needed to prevent accidents and possible tragedies.

## ASSESSMENT OF HEALTH CARE NEEDS OF MOBILE HOME SITES

Those individuals and families who will be living in the mobile home sites will have a variety of health needs which must be met. Approximately 29% of the applicants are over 55 years of age and 26% are under 15 years of age. Both of these categories demand more than their proportionate share of health services.

Generally, the needs of these individuals fall into categories of acute and sub-acute inpatient care, primary and ambulatory care, emergency care, and home health care.

The disruption of normal patterns for the delivery of health care caused by the flood, coupled with the relocation of new population groups of 100-3,000 persons in different parts of the region has further documented the need for health care. The development of a system of health care for the Mobile Home Sites should take into consideration the existing institutions which have historically provided health care to those individuals. The burden of responsibility for deciding on the system of care should not be placed upon the relocatees. An organized approach to satisfying these needs is necessary.

The planning, development, evaluation and monitoring of health services provided to the relocatees must also be organized and centralized. The allocation of federal, state and local funds for health services should be integrated into the process, with an attempt to develop bloc-funding for health care.

### Inpatient or Hospital Service

Approximately 43% of the acute bed capacity in the Wilkes Barre area are temporarily lost because of the flood. Though there was a strain on the system, it was relieved by the creation

of a 100-bed field hospital at Misericordia College, early release and/or transfer of sub-acute patients, postponement of elective surgery, addition of temporary beds and transfer of patients to surrounding hospitals. The reopening of both Nesbitt and Mercy Hospitals in early August, coupled with the capacity of the unaffected hospitals should provide adequate facilities for inpatient care of relocated residents.

Access to these hospitals including the issues of transportation and financing should be considered in planning to meet the needs of the mobile home residents. Also, consideration should be given to the utilization of CEP resources available to the damaged hospitals to better coordinate services which would benefit the relocatees.

Emergency Services

Prior to the flood each hospital in Luzerne County conducted emergency room activities. During the crisis, emergency care has been provided in a number of temporary locations throughout the county, including evacuation centers and the Misericordia field hospital. As Nesbitt and Mercy hospitals reopen their emergency rooms, the temporary sites will phase out. Temporary communications between ambulance sites and emergency rooms established during the flood will phase out.

It is not believed necessary to establish a 24-hour emergency care system on the sites, even those which are more isolated and highly populated. Rather, access to emergency care in the hospitals for those individuals in the mobile home sites must be provided. The problem of providing voluntary ambulance service to the temporary sites must be considered.

One approach to meeting the emergency transportation need might be to provide each site with an ambulance for transporting residents to emergency facilities. The management of the health system would be responsible for the ambulance service in general, however one or more

residents of each community could be trained and paid for actually providing the ambulance services. Whatever the approach, emergency care should be integrated into a system of health care for the residents of the sites via a comprehensive approach which includes dispatch and communication linkages with the rest of the system.

## Primary and Ambulatory Services

### Physicians

Prior to the flood, outpatient services in Luzerne County were provided, for the most part by solo-practitioners operating on a fee-for-service basis. This was augmented by outpatient activities at Wilkes Barre General Hospital which averages approximately 95 outpatient visits per day, and to a lesser extent at the other hospitals. While the distribution of physicians appears adequate in more densely populated areas, with clusters in South Wilkes Barre and Kingston, there are shortages in many rural areas. The average age of physicians in the area is 60 years old, and the county ratio is better than 1 physician per 1,000 population.

### Dentists

There are approximately 199 dentists in the county. Most of these operate independently throughout the area. 29 dentists were affected by the flood.

### Nurses

It is estimated that there are approximately 5.1 active nurses per 1,000 population. This ratio has been sufficient for meeting most of the health needs in the community. There is an untapped source of unused nursing talent however, for approximately 42.6% of the nurses in the area are inactive.

Para-medical Personnel

The few physicians assistants in the county are being utilized by the (OEO) rural health program.

During the flood emergency, local physicians supplemented by military and public health service physicians staffed the emergency care centers. Allied health personnel, particularly Medical Corpsmen and R.N's were used to treat minor emergencies, administer some basic primary care and screen and refer more serious cases.

The flood has created many problems which have implications for the delivery of primary health services:

1. All pharmacies in the county were affected by the flood.
2. Of the 147 physicians affected by the flood, 34 have reestablished their practice at the original site. 89 physicians are in temporary or new locations, including approximately 30 at Wilkes Barre General's Nursing Home. (Status as of 7/28/72). Since the average age of physicians is 60 years, it has been suggested that many physicians may choose to retire rather than reestablish practices.
3. A preliminary analysis of the mobile home sites, particularly of the 4 prototype sites of Slocum Park, Scanlon Field, Barnum and Casey Park indicates the proximity of physicians and health services is remote in some cases. (See Chart)
4. Because of the distance involved, persons who will relocate in the sites have lost access to their family physician. Accessibility to health care for those over 55 who comprise about 30% of the relocatees is further exacerbated by the circumstances.

5. Emergency Room visits to hospitals continue at four times the normal rate.

Nursing Homes and Home Health Services

Prior to the flood, nursing homes in Luzerne County were operating with a uniformly high occupancy rate. Hospitals were experiencing some difficulty in discharging patients, particularly public assistance cases. Concern was expressed by hospital and nursing home regarding the need for intermediate care facilities.

During the flood, five nursing homes were evacuated and patients placed in hospitals and nursing homes in both Lackawanna and Luzerne counties. Emergency certification has been obtained to increase the bed complements for the use of flood victims in both counties. Patients have been transferred from the general hospitals to these beds except for those who will be returning to the one nursing home which will be reopening on August 7th.

Increasing requests are coming from evacuation centers and the community for nursing home care. Hospitals are experiencing great difficulty in discharging patients. The chronically ill are crowding some of the general hospitals' facilities.

The conditions of stress which prevail in the area suggest that the need for nursing home care will continue to escalate in the near future. Arrangements should be made for transfer to nursing homes from mobile sites when the need is clearly exhibited.

Home care was being provided in Luzerne County by Home Health Services of Luzerne County, Inc. Most of their patients in Wilkes Barre were dislodged by the flood. The full utilization of home care services will offer some alternative to nursing home care if conditions at the sites are appropriate for disabled or chronically ill patients.

## PROVISION OF AMBULATORY CARE TO THE TRANSIENT POPULATION AT MOBILE SITES

It is apparent that there are a number of variables which will result from the existing conditions which make obvious the need for developing a system of care which is flexible and which will relate to the changing needs of the relocated population.

Among these variables are a continually shifting population, a network of ambulatory care which is also shifting as physicians re-establish their practice, an unknown patient lead for those physicians currently practicing in non-flood stricken areas, and what the primary care needs will be of a transient population which is housed in large trailer parks.

Given these unknown variables and the constraints which exist within the traditional health delivery system, it is recommended that a new approach to primary care should be developed which is capable of responding to changing and variable patient needs.

The Health Department in Scranton, the Public Health Service, the Health and Hospital Planning Council, etc. have suggested various approaches to the delivery of ambulatory service to this population.

In the following discussion we shall outline the method in which alternative approaches to the delivery of care should be chosen as well as some specific suggestions as to our recommendations.

### General Description

Any ambulatory Health Service approach should be arranged in a manner which provides each of the Mobile Home sites with a clinic-like out patient care program. The health needs of all

the residents should be taken into consideration in developing services for all the sites, and needs which are peculiar to individual sites should be met.

The overall purpose of the program should be to make out-patient services available to residents of the Mobile Home Sites so that those who have suffered so much loss and discomfort will not have to suffer the consequences of insufficient access to ambulatory care.

Essential elements of any alternative selected

Three essential goals will be necessary to any approach which provides ambulatory care to these new communities.

First, the out-patient services which will be provided to the residents must include the fundamental objective of maintaining continuity of care, emergency capability, and significant hospital backup.

Second, any alternative offered must be capable of changing to suit the changing needs of the population. As people return to their homes or move in and out of a transient situation, the medical system must be able to respond. Thus, an ongoing system of monotoring patterns which may affect the delivery of care in the mobile sites must be established.

Third, coordination, administration, planning, and evaluation to meet the medical needs of the population must be centralized. A central location allows for the ability to monitor and respond to changing patterns of care.

Administration

There are several factors which lead us to suggest a centralized administrative approach to the

ambulatory care program. A centralized program allows for:

1. coordination of personnel and materials of the overall program
2. a total perspective for program planning, operation and evaluation
3. efficiency resulting from central purchase of equipment and medical supplies
4. centralized information and record keeping for purposes of health evaluations of site residents
5. the ability of a central agency to monitor and change the delivery system according to the changing needs of the population

The administrative unit should operate as a management arm of the ambulatory care program performing budget and finance, personnel, research and record keeping functions.

Physicians

There are three alternative arrangements for physicians which could be utilized.

1. Physicians serving these populations could operate independently with individuals on the sites visiting their own private physician, or those physicians nearby the various sites. In many cases, the increased patient load would be difficult for many of the physicians to handle.
2. Physicians could form in one or more general practice groups which would be hired by the program to provide some of the ambularoty care to the residents. When specialist care was needed, they could be hired on a fee-for-service basis to provide additional care.
3. Physicians could form a multi-specialty group practice which would be hired to provide most of the ambulatory care to the residents.

While there is no group presently organized which could be hired immediately for Luzerne County only 15 out of a total of 364 physicians are organized in groups, and of this number, none function as a multi speciality group. There may be a number of physicians in the area, particularly those who were dislocated because of the flood, who would be interested in organizing in a group practice. If no local interest were generated, or if it would create severe physician shortages in other parts of the community, the recruitment could be initiated in other parts of the state.

Physician payment could take several forms. There could be a fee-for-service agreement in which individual physicians or one or more groups could be reimbursed for services rendered. Another alternative is to contract with physicians on a capitation basis where by a per capita rate is established and a set amount is paid for providing health care for each individual.

Nurses

There should be a reassessment of the traditional role of nurses with the hope of expanding their role to include a wide range of activities. The utilization of the nurse-practitioner should be explored.

In the event that additional nurses are needed for the ambulatory care system, there could be nurses recruited from the many inactive nurses in the area.

Para-medical Personnel

The use of para-medical personnel should be encouraged. Any ambulatory care system should make use of allied health personnel.

Client Group

Under no circumstances should health care from the proposed system of ambulatory care be compulsory. Rather, there should be options available to the residents to utilize their own personal physicians. However, an attempt should be made to provide service to a cross section of the population so that it is not just utilized by the residents who are poor or have specialized diseases.

Location of Services

There are three alternative locations for providing the health services.

1. There could be transportation available for individuals to travel from the sites to nearby physicians for ambulatory care.
2. There could be an ambulatory care unit located on each site, near the site management office. On some of the smaller sites, a room of the management trailer could be utilized as the "clinic." On some of the larger sites, module or inflatable structures might be utilized.
3. There could be several ambulatory care units dispersed throughout the county that could be made accessible to the site residents by providing transportation from the sites to the different facilities. This might be more efficient than establishing twenty or more separate facilities on each of the sites.
4. There could be one central location, preferably in or near a hospital, in which all residents on the sites could receive ambulatory care. As with the second alternative, transportation would have to be made available from the sites to the facilities. In addition to being more efficient, the availability of a nearby hospital would integrate the ambulatory with the delivery of inpatient as well as emergency care.

Operation

The "clinic" atmosphere could be established by setting clinic hours when physician services and registered nurse services as well as public health and mental health programs were available. Services could be available on a 24-hour basis if the need existed. The staffing, size and focus of the ambulatory care program and hours of operation should be flexible and determined by the needs and demands of the residents of the mobile home sites rather than on the basis of choosing.

Payment

There should be no financial barriers to the availability of outpatient care to the residents of the community.

It is possible to establish a small fee, much like the hesitation fees which exist in prepaid group practices, however, such fees should not be established at a rate which could cover the costs of providing care.

Funding Considerations

Categorical funding for developing a system of ambulatory, as well as acute, sub-acute and emergency care for the residents of the mobile home sites should be avoided.

It is recommended that costs for the entire system of health care for the relocatees, a system which includes emergency care, acute and sub-acute care as well as ambulatory care be paid for by the government with financing via bloc-grants from special federal disaster funds.

Cost Estimates

Depending on the alternative chosen and the health care expenses of individuals in the sites which are financed, costs of such a program range from $1,000,000 to $3,000,000.

Before making a final decision on a program of care, the Health organizations in Luzerne County and the Health and Hospital Planning Council and Health Management Corporation should be consulted.

Planning

The Health and Hospital Planning Council of Northeastern Pennsylvania is the recognized Comprehensive Health Planning agency responsible for identifying needs and establishing priorities for personal health services in the region which includes Luzerne County.

In view of the necessity for inter-relating federal and state as well as local planning, any planning resulting from these recommendations should be coordinated by HHPC. The flow of Federal and State emergancy appropriations should be consistent with their planning.

Management

While there might be a number of organizations which would appear to be appropriate managers of the newly developed Health Management Corporation, the Health and Hospital Planning Council is recommended as the organization responsible for the overall management of the program of health care for site residents.

The Health Care Management Corporation will be the logical place for analyzing the feasibility of programs to respond to the immediate needs of the emergency or to examine the feasibility of translating emergency delivery programs into longer term and perhaps rather permanent new and innovative methods of delivery care.

Summary

The establishment of this type of ambulatory care system could integrate health care into the daily living of the residents and in effect could result in a productive health maintenance

approach to health care.

The system of services which is established could be transplanted as a system into any new and permanent mobile home community which might be developed. The overall system for the new community could be developed with the inputs of the site residents as well as the producers and managers of the Mobile Health Program.

It is suggested that the development of a prepaid group practice could be a spin-off of this program, for there would be an established multi speciality group, a focal client group, and a time-frame in which the appropriate consumer and provider educational process as well as the planning process could take place.

In effect we are suggesting an experimental approach to change which would result in a different, yet greatly improved approach to health care.

## Existing Availability of Health Service to 4 Prototype Sites

| Health Care | Recreation Sites | | | |
|---|---|---|---|---|
| | Slocum Park (350-400 units / 1,000 people) | Scanlon Field (52 units / 100 people) | Casey Park (60 units / 180 people) | Barnum (1,000 units / 3,000 people |
| Hospitals: | | | | |
| Mercy Hospital | within 11 miles | within ½ mi. | within 2 mi. | within 2½ m |
| Nesbitt Hospital | | | | |
| Wilkes Berre General | | | | |
| Wyoming Valley | | within 2 mi. | | |
| Pittston Hospital | | | | |
| Physicians | about 6 miles to physician services | 7 available within 1 mi. | 4 available within 1 mi. | 1 available - 1½ mi. |
| Pharmacies | about 6 mi. to pharmacy services | 2 available within 1 mi. | 1 available within ½ mi. | 2 available within 2 mi |
| Dentists | about 6 mi. to dental services | 2 available within 1 mi. | 2 available within 1 mi. | 1 available within 2 m |
| Emergency services | Voluntary Ambulance Service throughout the county<br>Emergency Service Available within Hospital Emergency Room | | | |

## CONSIDERATIONS FOR OLDER PEOPLE

Figures from census as well as flood-related data reveal that approximately 7,693 of the flood victims are in the 55 years and over category, or about 30% of the total. According to data from evacuation centers, population configurations of the mobile home sites will contain 5,644 elderly out of a total of 19,200 residents on all sites. This large number of older residents, with many specialized needs, will require special consideration in providing support services.

Scanlon Field has been designated as a housing site for the elderly. It is estimated that there will be approximately 100 residents living on the site. While Scanlon Field has 100% elderly, other sites such as Slocum Park and Barnum will house even more elderly in absolute numbers with estimates of 297 and 768 respectively.

1. Housing

Mobile homes cannot accommodate elderly people who are seriously impaired physically. i.e. wheel-chair cases. Because of this and other special problems relating to older people, the Luzerne County Bureau for the Aging, would be helpful in placing older people in temporary housing. It might be advisable, for example, to group older residents within one area of the larger sites to give them some peace and quiet but also permitting them to move freely throughout the entire site.

Two considerations are basic to all units for older people:

(1) Units should be placed as close to the ground as possible to be more accessible and to avoid accidents on wet or slippery steps. Currently, units are about 36 inches off the ground, requiring 2 or 3 steps. These

should be lowered to 18 inches.

(2) Ramping must be provided for some units to permit use of wheel chairs and walkers. The closer to the ground the unit is, the easier it will be to provide ramps.

2. Health

The health needs of older people tend to be somewhat different than for the population as a whole. Chronic illness is more prevalent. 1 in 8 of the population over 65 in the Wyoming Valley have at least one chronic health problem. Recent studies suggest that approximately 27% of this age group are limited in capacity to perform major activity and approximately 15% are unable to carry on major activity. This group also tends to require more frequent hospitalization with increased length of patient stays.

Special attention must be given to the acute and chronic hospital needs of the elderly. Those communities with larger numbers of elderly residents, particularly those which are great distances from inpatient facilities, must have close ties between their mobile Health Unit Program and inpatient care facilities (including nursing homes), so that as little time as possible is lost in providing ready access of the elderly to hospitals and nursing homes.

An important part of the ambulatory health program will be the provision of health services in individual's homes such as:

- special diets (i.c. diabetes, heart disease)
- physical impairments (i.e. arthritis, bone disease)

- special medication (both internal and external disorders)
- emergency needs (i.e. stroke, accident)

The ambulatory care services such as that proposed in the Mobile Health Services Program will be necessary if elderly people are to function outside an institutional setting. Institutionalized care for elderly is estimated to cost twice as much as care provided in their own homes.

3. Education

Although there seems to be little done in adult education on the part of older people at the present time, the local public schools and the community college should attempt to generate some interest and provide adult education courses in such things as art, drama, music, and furniture repair or woodworking. This would provide leisure time activity with longer range interests. Space in nearby churches or schools should be utilized and transportation to local facilities would need to be provided in some cases.

4. Transportation

Bus service for all kinds of things will be a major need for elderly people. Shopping will be a special problem since few of them have cars and walking with packages will be difficult even if the shopping facilities are nearby.

Another serious consideration for sites in congested areas such as Scanlon Field is for proper signals at crossing intersections. Elderly people need more time for crossing busy streets.

5. Security and Safety

Each site will have special security and safety needs which will tend to be magnified

for the elderly population. Special consideration of safety for older people should be given in some areas.

- fire protection is particularly critical for those who move about more slowly or who might be more apt to have kitchen fires due to slower response. Therefore, fire extinguishers should be in each trailer and careful personal instructions as to their use in addition to the careful fire protection training given to all residents.
- every unit with elderly people living in it should have a telephone. A telephone emergency number should be posted in every unit and 24 hour service available. Unit telephones are installed, an emergency bell system should be installed. Lack of telephone service or an alarm system may encourage breaking and entering.

6. Leisure Time Activities

If nearby facilities are not available, a temporary place should be designated to provide:

- arts and crafts area
- game area
- conversation area

7. Day Care

Day care for older people may be critical. The Luzerne County Bureau for the Aging has a proposal for foster care and may be able to expand it to include day care on some of these sites.

8. Community Participation

Older people have more free time than most and can participate in more neighborhood activities. The site manager should make a special effort to enlist the interest of older people in helping to organize and manage various social and administrative activities. This could become a real factor in management costs.

Projected Population of Residents
55 years and over on 4 Prototype Mobile Home Sites

| | SITES | | | |
|---|---|---|---|---|
| | Slocum | Scanlon Field | Casey Park | Barnum |
| Number of Residents | 1,011 | 100 | 192 | 3,200 |
| Residents in 55 - plus category | 297 | 200 | 56 | 968 |

Future Considerations and Opportunities

Programs and services for meeting the needs of the elderly cannot be thought of as temporary. While most mobile home sites are to be utilized for 1 year, special consideration is needed for the future living arrangements of older people beyond that time. It is an unusual hardship for many older people to take all the steps necessary to move into permanent quarters.

As with the Mobile Health Services Proposal, the planning and development of a system of services for the elderly can be an unusual opportunity to develop a long-term program for

older residents, giving them the opportunity to participate in planning for their own needs.

A permanent housing location should consider:

Housing: Independent living arrangements, desirable for most individuals, are often difficult for older people. Alternatives such as congregate living with limited supervision, boarding, domiciliary, extended care and chronic care.

Health: Non-institutional services such as out-patient care, emergency services, home care services, home nursing services, out-patient therapy. Services should in effect "chase" the client with someone providing information about the services and contacting providers who can then bring the services to the people.

Social Services: Transportation is generally considered the key to a system of services for the elderly. If transportation is not available, residents will not be able to take advantage of the many services and opportunities in the community which will allow them to function as independent individuals.

Senior centers are usually considered to be the environment in which leisure activities take place. This, of course, is important, and various forms of entertainment, cultural activities, discussion groups, counselling and adult education can be a part of the senior center. It is also possible to integrate communal dining (as a form of entertainment) and health care (as a community need) into the senior center. Planning for an elderly community should look at these alternative uses.

For those individuals who cannot cook for themselves or who are unable to utilize communal dining facilities, "meals-on-wheels" programs should be available. Such programs have been very successful in improving the nutritional status of the elderly as well as providing those who are isolated and lonely with some contact with the outside world.

The general objective for the planning phase, and ultimately for the future should be to provide non-institutional support services within the community which will allow individuals to maintain themselves in an independent living arrangement. While both institutional and non-institutional services must be made available, generally there will be an emphasis on the non-institutional services (i.e. "meals-on-wheels", foster grandparents, transportation and protective services) which will help older people stay out of institutions and allow those individuals who need acute and chronic facilities to re-enter the community once their condition has improved.

The discomfort and heartbreak older people in flood-impacted areas have suffered can be converted into the beginning of a new day for them. Temporary housing can serve as the basis for reorganizing all the services required for a happier, more independent old age.

## MANAGEMENT

Effective management is a major key to successful recovery for all the families and individuals who will live in the mobile home units. In turn, effective management will depend upon four basic conditions:

1. Comprehensive responsibility and adequate authority in one management organization to provide the life support services needed by mobile home residents.

2. Maximum participation by residents in regulating their own activities and maintaining their units.

3. Decentralized and responsive administrative personnel with adequate budgets and facilities to be held accountable for getting the job done at the level of each site.

4. Maximum cooperation among all State, Federal and local agencies and jurisdictions to permit flexible, pragmatic management instead of management "by the book" -- since "the book" was not written to deal with a disaster of this magnitude.

There are five management objectives:

1. Every unit will be maintained as a safe, sound dwelling to standards equal to existing local codes for dwelling units.

2. Every family will have all the basic life support services as outlined in the foregoing pages of this report.

3. Every site will work as a real neighborhood with maximum effort placed on providing opportunities for "neighboring", self-help, and communication.

4. Every site manager will cultivate and maintain close working relations and liaison with the public officials, institutions and civic groups in the community to be sure they are fully apprised of the needs, rules, and interests of the people living in mobile homes and to make certain all his rules and activities are compatible with local community laws and customs.

5. "Refugee" and "handout" psychology will be avoided at all costs. People will be made to feel welcome and enabled to supervise their own lives as far as possible. Prevailing wages and salaries will be paid for jobs on-site. Site residents will have first priority in holding on-site jobs.

## THE COMMUNITY SERVICES CORPORATION (ServCo)

It is proposed that a non-profit community services corporation be organized as soon as possible to assume full management responsibilities of all sites and mobile home units.

ServCo should be organized by a group of key people including:

1. Public and private agencies that provide services at local and state level (including but not limited to DCA, Public Welfare, Health, PennDoT, and Education)
2. Governor's representative
3. Mobile home resident representative
4. Representative of the Valley business community
5. One public official from each local jurisdiction that will have one or more sites
6. HUD representative

DCA should convene the organizational meeting as early as possible -- hopefully within two weeks. The agenda for the organizational meeting should focus on a critical review of the entire ServCo concept. Assuming the concept passes muster, assignments should be made to develop a full scale management structure and budget within two weeks for action by the organizing committee. All incorporation work should be prepared for action by the organizing committee.

ServCo should be asked to:

1. Devise and carry out a management plan
2. Organize services and see to it they are delivered to sites and families in the most efficient way possible

3. Act as "broker" to negotiate arrangements with public and private providers of service to get the best deal for residents.

4. Enter into service contracts and monitor the performance of such contracts

5. Hire and fire all management personnel

6. Be accountable directly to its board of directors and the people living in the mobile home units

ServCo has one mission: to organize and deliver needed community services to the people living in mobile home units. It should use private managerial skills and organizational structure to achieve its public purpose. ServCo could be fully operative by October 15.

We recognize that there are immediate managerial jobs that need to be carried out every day. We understand DCA and HUD are checking out private management firms that might be available to take up these tasks on a short term contract. In view of the great need for on-site management now, thought should be given to hiring local people in real estate and housing management jobs on a week to week basis.

The contract with a professional management firm should specify both tasks: (1) immediate management of sites; and (2) providing professional guidance to the organizing committee to set up ServCo.

## A MANAGEMENT FRAMEWORK

Each site will have:

A Site Manager

Responsible for:
(1) maintenance of units and area
(2) information and referral activities
(3) community organization and liaison
(4) contracts for services

In sites of less than 250 units the site manager will have an Assistant Manager to assist with the four major responsibilities and a night man.

In sites with 250 to 500 units the site manager will have two Assistant Managers:

one for maintenance and service contracts

one for information and referral, community organization and liaison

Sites over 500 units will need 3 or 4 Assistant Managers.

The Site Manager's office may be one unit converted to office use. It needs waiting room space that can also be used for small meetings; table and chairs for ten people in living room section; partition and door to permit area to be closed if meeting is in progress and rest of site office is doing its business.

A receptionist--clerk/typist is needed to handle requests for information and arrange appointments for residents and others who have business with the

manager and his staff. In the case of the larger sites, 2 receptionist--clerk/typists will be needed. Local residents should be considered for these positions. Site office must be open 8 hours per day with full staff, seven days per week. Night person keeps office open for meetings and emergency calls--until 11:00 P.M. Site Manager or Assistant Manager should be reachable 24 hours per day. A free emergency telephone should be placed outside the site office which permits any resident to reach police, fire, hospital and other key emergency numbers only. This telephone should be connected only to the operator switchboard and not be available for personal calls.

Every 25 units should have:

A Resident Service Coordinator - This is a site resident; operating something like a shop steward, available for all kinds of help and information. Also transmits information and tries to deal with situations before they become major problems. Helps residents help themselves--gets them together to settle purely local disagreements or to head off some trouble or spike rumors or crystalize a valid complaint and then acts as advocate.

ServCo will need:

a. An Executive Vice President (or Director) with overall policy and budgetary responsibility who reports directly to the Board of Directors.

b. A Vice President (or Associate Director) for maintenance and contract services.

c. A Vice President (or Associate Director) for information, referrals, community organization and liaison.

d. Two secretaries

e. Two clerk-typists

ServCo's entire staff then might look like this:

Executive Vice President

Two Vice Presidents

Two Secretaries

Two Clerk-typists

20 to 30 Site Managers

30 to 40 Assistant Site Managers

240 Resident Service Coordinators on-site

40 to 60 Receptionist/Clerk-Typists on-site

Estimated cost for a full year operation is $1.5 million. This comes out to $250 per family per year or less than $25 per family per month. It is our judgment that this level of investment is necessary to insure the full and speedy return of these flood-impacted families to a productive position within their own communities. To cut corners on this framework may prolong the period of temporary housing and cost much more in the long run. Also, it is estimated that perhaps 50% of the jobs listed here can be filled by residents in the mobile homes, thus adding significantly to their personal income recovery and permitting them to learn new skills for the future.

## THE FAMILY RECOVERY PROGRAM

Entrance and Orientation:

Family recovery begins with the proper entrance and orientation into temporary living quarters. As soon as the family is assigned its unit, here is what might be done to get them properly launched.

1. Walk through unit with explanations of every feature, stressing safety precautions and need for careful maintenance. Fact sheet with all items covered should be given both parents and checked as they walk through with Resident Service Coordinator.

2. Directory of services should be given out and explained. The directory should be in plain language and include all major facts of the site with special precautions about safety. This will be especially relevant in Barnum, Slocum and Moon Lake but all sites will have certain traffic hazards to be cited in the directory. All emergency numbers should be highlighted, with directions to the outside telephone and any alarm system that is established. Public and private agencies with services for families and individuals should be listed with brief descriptions in plain language. All rules and regulations of the site should be spelled out. Addresses of nearest food stores, pharmacy, cleaners, school, churches. If possible a simple map showing the site in the center and all key destinations with suggested routes and estimated walking and driving times. Bus routes should be indicated.

3. The Resident Service Coordinator should explain how the site is organized and will be managed. A simple fact sheet should be given out that shows the management

names, site office, telephone numbers, office hours and a map of the entire site with all units shown so person can orient himself to the site and be able to tell friends and service people how to find his unit.

4. The Resident Service Coordinator should get the following information:

   a. Family names and ages

   b. Place of current or former employment and current job status--what the person does for a living

   c. Other skills besides those used on job

   d. Need for day care services either for very young or very old.

   e. Any special health problems--diabetics, arthritics, heart condition

   f. Recreational preferences--leisure time activities, hobbies, etc.

   g. Transportation needs--car pool or bus--to work, church, shop, etc.

5. The results of this interview should be analyzed and incorporated in the Site Manager's files. The Manager should see to it that relevant information is sent to specific health, education, recreation or employment service agencies. This can be done simply by duplicating copies and sending them to the central management office of ServCo which will see to it that the information is used in planning and delivering services.

It is estimated that one Resident Service Coordinator can do 4 interviews daily. Other residents can be trained to do orientation interviews also. Interviewers can work days, evenings and weekends. The family interviews should be done within the first 5 days

of the family's move-in and with both parents. The Resident Service Coordinator should do as many of these in his cluster of 25 units as possible. This would be the best way for him to know his families and for them to know him. Assuming $5.00 per interview for 6000 families, the total cost will be $30,000. Analysis and records keeping may cost another $10,000 or a total of $40,000--$7.00 per family.

The emphasis in the entrance and orientation period must be towards both self-reliance and neighborliness. The message to be conveyed by management is that every effort will be made to provide help, but at the same time everyone is expected to help oneself and pitch in to help others. This message will be reinforced by the Resident Service Coordinator in everything he does. Car pools, baby sitting cooperatives, shopping groups, do-it-yourself information, improved recreation in and around the units by residents--all can develop independence through neighborliness and reduce the burden of the manager and other supporting service agencies.

Drawing Up Individual Family Recovery Programs:

Within 2 weeks after the results of the orientation interview, the family should be helped to draw up a Family Recovery Plan. This may take a couple of hours of counseling or several sessions, depending on how disorganized and complex the family is. Local residents should not be used in their own sites since people may not want to discuss personal plans and problems with neighbors. However, residents with counselling aptitudes can be recruited and trained and used in sites other than their own.

The Family Recovery Plan will have components:

1. A Permanent Housing Plan--this will be a description of what the family needs and wants; whether they will rehabilitate their former home or seek other quarters; what financial arrangements are needed to obtain permanent housing; what skills they have to help rehabilitate their own home and help construct a new home.

2. An Income Improvement Plan--this will be an assessment of what income the family will need to be rehoused; what current income sources are; what employable skills are available now in the family; what training might be arranged to improve employability; and job placement.

3. Income Management Plan--each family should be offered help with income management; this will include budgeting, getting legal advice on debts and damage claims, getting loans, and planning large purchases.

Every family in temporary housing should have a Family Recovery Program worked out on paper as soon as possible after settling into the mobile home unit. They should be made future oriented as early as possible and make a commitment to full recovery as their number one goal. Management should see this as the best investment it can make. The Family Recovery Plan should be reviewed every 3 months to revise it or simply reaffirm it.

It is estimated that one trained person can handle 100 families in a 3 month period. Assuming 6000 families, it would take 60 people in the first 3 to 6 months. Skilled professional personnel may be "borrowed" from existing agencies to perform this vital service. If all new people had to be hirec, it is estimated that $500,000 would be needed to get this

job done properly. This comes to $500 per family in counselling services for developing their own recovery program.

If this program shortened the stay of every family by one or two months, the entire investment would be justified. If the service results in accelerating the total recovery of even a few hundred families, it will be the best investment possible in human resource development. Of course, it is impossible to calculate the value to each family in social, economic and psychological terms.

Since so much hinges upon finding permanent housing, it is clear that the housing supply of the Valley and opportunities for increasing that supply must be thoroughly and quickly analyzed by qualified housing and community development practitioners. The worst fate for the Valley would be to lose the opportunity to rebuild whole, sound neighborhoods while rebuilding housing. Increasing the housing supply at the price of lowering the overall quality of community living is a poor bargain for all concerned. Therefore, the Family Recovery Program must be directly related to a total recovery program for the Valley.

## GUIDELINES FOR SITE MANAGEMENT

In consultation with DCA, three sites were selected for analysis to determine in more detail the site conditions, residents' characteristics and available community services. These were analyzed in sufficient detail to provide guidelines for site management. Clearly, Site Managers will have to carry the analysis further.

Several points made are common to all sites and are specific applications of principles and proposals in the earlier pages of this report. Other points are unique to the site analyzed but are important because they indicate the variety of conditions and needs to be met by site management.

FRANCES SLOCUM PARK (Kingston Township, Luzerne County, 6,500 population, 13.7% increase 1960-70)

1. Site Description

a. Size - 282 units in 3 phases

phase I 73 units

phase II 95 units

phase III 114 units

The park is 1,000 acres with 165 acre lake. The area on which homes are placed.

b. Parking - Each trailer has one parking site adjacent to mobile home. Off street parking for visitors.

c. Topography - Rolling hill, trees, and lake. Located in a State Park. Very little flat land other than home sites. Two fairly large flat areas are behind the maintenance buildings and lower parking area by the lake.

d. Layout - Homes are located on four sites some distance apart. Phase I units are placed dangerously over a rise. According to park officials, severe winds blow across this site and can create problems for these units.

2. Surrounding Area

a. Access - One entrance to Park - 2 lanes

Slocum Park is isolated from services. Special hourly bus service has been started to Wilkes-Barre with one stop on the way. This increases the accessibility for people coming and going directly to or from Wilkes-Barre

but does not help those who have other destinations.

b. Shopping - Closest and probably most complete is in Dallas (5.5 and 8 miles)

c. Recreation - No supervised recreation near site. Outdoor recreation in the State Park is available such as boating, fishing, and hiking. No other recreation closer than Dallas schools (4 miles) Trucksville (6-7 miles) and Shavertown (7 miles). Summer recreation programs are operated by Kingston Township. One program was scheduled for Slocum Park before the flood but has not been carried through. This should be rescheduled as soon as possible.

d. Employment Centers - Closest possible employment is Dallas - 5.5 miles. Major employment other than flood damage related is Wilkes-Barre or Scranton. The Park itself will need to employ more people. (See manpower estimates made by park officials at end of this section).

e. Churches - A Catholic church is $\frac{1}{4}$ mile from the Park. Nearest other churches are in Dallas.

f. Schools - Dallas High School (4.0 miles)

Dallas Jr. High (4.0 miles)

Dallas Elementary School

Dallas Kindergarten

Catholic Elementary School - Gate of Heaven in Dallas (5 miles)

High School, Catholic Central is in Kingston (8 miles)

g. Jurisdictional Service Areas

Police - State Police  Kingston Township

Fire - Trucksville Fire Company (6 miles)

Schools - Dallas School District

Recreation and Playfields - Kingston Township

Garbage Collection - Kingston Township

Social and Health Services - Luzerne County

h. Medical - No medical services closer than Dallas. Dental Clinic in Back Mountain (5 miles)

3. Residents Characteristics

As of 8/1/72 there are 47 families located on the site. The majority of the families are elderly. Although one family has 10 children there are comparatively few otherwise. As of 8/1/72 about half of the families are on public assistance. It is probably true that a larger percentage of early residents will be welfare families because people in evacuation centers were to get mobile homes first and it is likely that they had no alternative to these centers. Based on census tract information from the flood damaged area the characteristics would be as follows:

Average number of persons per family 3.18 = population in Slocum estimated 1,011 people

7.8%  children under 5 = 78.8 children

18.6%  children between 5 and 14 years = 188

10 %  between 15 - 19 years = 101

13.8% between 20 - 34 = 139.5

20.4% between 35 - 54 = 206

29.4% over 55 = 297

64 families on public assistance (20%)

About 60% of the families own cars.

4. Schedule

Phase I to be completed by July 15

Phase II to be completed by August 1

Phase III to be completed by August 8

This schedule is already behind and may be as much as one month later than stated above.

5. Needs

a. Health - (See Assessment of Health Needs of Mobile Home Sites for detailed description of Health needs.)

b. Education

1. Early childhood education programs are needed. Head Start Programs can be funded for mobile homes. There is the possibility that all victims will qualify. Space needed for 79 children. This program should be on site. Use of the Catholic church ($\frac{1}{4}$ mile) might be possible. Child Development Council should be asked to develop this program. Commission for Economic Opportunity will provide funding for Child Development Council to operate

Head Start program. This program should relate to family education program.

2. K through 12 will be bused to public schools. Arrangements should be made to bus parents to PTA meetings. Serious consideration should be given to busing High School students to the school they attended before the flood.

3. Family education programs will be developed according to the needs of the residents. They could include such things as prenatal instruction, sessions on parenting, teen/parent relationships, and family budgeting. It is important that the early childhood programs be closely associated with family education. A resident committee should be established to develop this family life education program. The Luzerne County Child Welfare Services should be asked to help organize this.

4. Adult education should include career and non-career programs. Luzerne County Community College and Wilkes-Barre Vocational Technical School should be asked to arrange as soon as possible career programs for residents of the mobile home parks. If it is necessary to have these classes off the site, transportation arrangements should be made.

It should be noted that the mobile home park will require new kinds of jobs for which training may be necessary. (See Site Management)

Non-Career opportunities for learning will be necessary for those men and women who do not go to a job regularly. Such things as woodworking for refinishing furniture or sewing for making draperies could contribute to the refurnishing of their flooded homes.

Facilities needed - Existing schools will be utilized whenever possible. Space in on-site multi-purpose center will be needed for 2 classrooms during the day and evening (300 sq. ft.)

c. Recreation

Outdoor recreation opportunities should be provided such as basket ball backboards and ball fields and closely supervised programs should be established. Wilkes-Barre Recreation and Parks Department, with the cooperation of Temple R. Jarrell, National Department of Parks and Recreation, prepared a proposal for a comprehensive recreation program for mobile home sites. Funds are being sought for this proposal. If local jurisdiction cannot provide adequate recreation services the Wilkes-Barre Dept. should be contracted to provide such services.

If their proposal for mobile units is funded this would be very possible. Each mobile home community should have a recreation committee to determine their own recreation program. Luzerne County Parks and Recreation should be asked to coordinate recreation in all sites. Indoor recreation will be necessary and can operate in the multi-service center.

Indoor recreation will be needed during the bad-weather months. Inventory should be made of all school, church, YMCA and other public buildings within a 15 minimum driving range. These facilities should be rented for after school periods, evenings and weekends. Residents should be enlisted in recreation programs. As far as possible residents should work out car pools and other transportation arrangements. However, there will be needed bus transportation.

d. Shopping

Two alternatives are suggested here. One a weekly mobile shopping unit that includes food items, notions and sundries. The other possibility is to winterize the concession stand or use a mobile unit to provide daily access to basic food items, notions and sundries as well as a quick sandwich and ice cream counter. In addition to either of these, bus service to grocery shopping should be provided a few times a week. Cooperative buying should be explored.

e. Transportation

Transportation from this site will be particularly difficult. The already functioning bus service provides good connections to Wilkes-Barre. To supplenent this, a mini-bus should be provided to be used for special needs such as a daily "shopper special" to a grocery store or transportation to school functions.

In addition, the Resident Service Coordinator should have a list of volunteers who can provide emergency transportation to doctors, hospitals, schools, etc.

Since the Multi-Service Center will probably be located as far as 3/6 mile from some residents, the mini-bus should provide local service when public meetings and activities are being held.

If many people are employed in the same location, a special bus could be chartered to transport them. Employers should be enlisted in planning and paying for this service.

f. Garbage Collection

Garbage can continue to be collected by the company now serving the area. The cost is $.50 per unit per pick-up. They are picking up 3 times each week. This totals $78 per unit per year.

g. Laundry service

Washers and dryers should be provided in each unit. According to park officials there is enough water pressure for this. If this does not happen, clothes lines must be furnished and community laundry facilities provided. Clothes lines are unsightly and dangerous in unlighted areas. If laundry facilities are not available on site, transportation must be made available to facilities in nearby towns.

h. Storage

Outside storage units 6 X 9 should be stationed at the end of each driveway area. This would eliminate neighborhood problems and provide a safe and neat way to take care of bicycles, strollers, tires, etc.

i. Security and Safety

Security and safety will have to be given special consideration in Slocum Park. The darkness and open areas will invite undesirable acts such as molesting and robbery. Therefore, security guards must be on duty at all times. This will require three security guards. These guards should have a close working relationship with Resident Service Coordinators.

Fire protection for this site is particularly difficult. The closest fire department is about 6 miles away and is not prepared to serve another community. If possible a fire truck should be located on the site and can be stored in a park building. Volunteers should be organized to man the fire protection unit. Regular fire protection training programs should be mandatory for residents. Fire extinguishers must be put in every unit.

Clearing roads of snow and ice will need to be done. Kingston Township should be approached to take on this responsibility.

j. Multi-purpose Center

Large inflatable structure with sliding partitions. Room enough for two classes and recreation or meetings on any given evening. One space must double as day care space. Storage area must include space for art supplies, games, tables and chairs. There must be space for restrooms and kitchenette.

k. Day Care

Day care is an important need for working mothers as well as drop in day care for mothers who must go some distance to shop or just need to get away from children in small quarters in order to maintain mental health. These kinds of programs seem feasible.

Family day care may be arranged. Luzerne County Child Welfare Services can provide technical assistance and professional guidance to develop the program.

Cooperative baby sitting program developed. Residents can organize this.

A day care program in the community center that includes some drop-in slots. Approximately 80 children will be at the age that will need all day or half-day care. Subtracting 20% of those from families on public assistance leaves 60. Certainly not all of these will need day care every day. However, it is assumed that 25 will be in a community day care, 10 in family day care, 10 cared for by neighbors and 15 would use drop in care once or twice weekly. Therefore, community space must be for 30 children (28 reg. + 5 drop-in) or 450 sq. ft. This is no problem because partitions can open as needed. Portable cupboards for supplies and toys would be desirable. The Luzerne County Child Development Council should be consulted in developing this program. They will be able to operate them also.

l. Site Office

The managers office should be located in the multi-purpose center. However, since people have already moved into this area, a manager must be appointed immediately. Temporary arrangements should be made in a mobile unit until the multi-purpose center is erected.

A receptionist who can give information of all kinds must be on duty in the multi-purpose center day and evening hours. This will require 2 people.

There will need to be 11 Resident Service Coordinators for this site who are part of the management team even though they operate out of their mobile home.

m. Communication Services and Community Organization

This site will need a more self-contained information network because of its remoteness. The residents should become involved in community organization and develop some ability to help each other as well as speak to the needs of the community as a whole. The Resident Service Coordinators can play an important role in this organization.

An information and referral service should be available at the community center and the receptionist will be the most likely staff person to handle it.

CATV would be a valuable communication vehicle for community

information, for flood area rehabilitation information and for learning experiences of all kinds. It would also contribute to the safety of all residents.

SCANLON FIELD - A Geriatric Community (Kingston Borough)

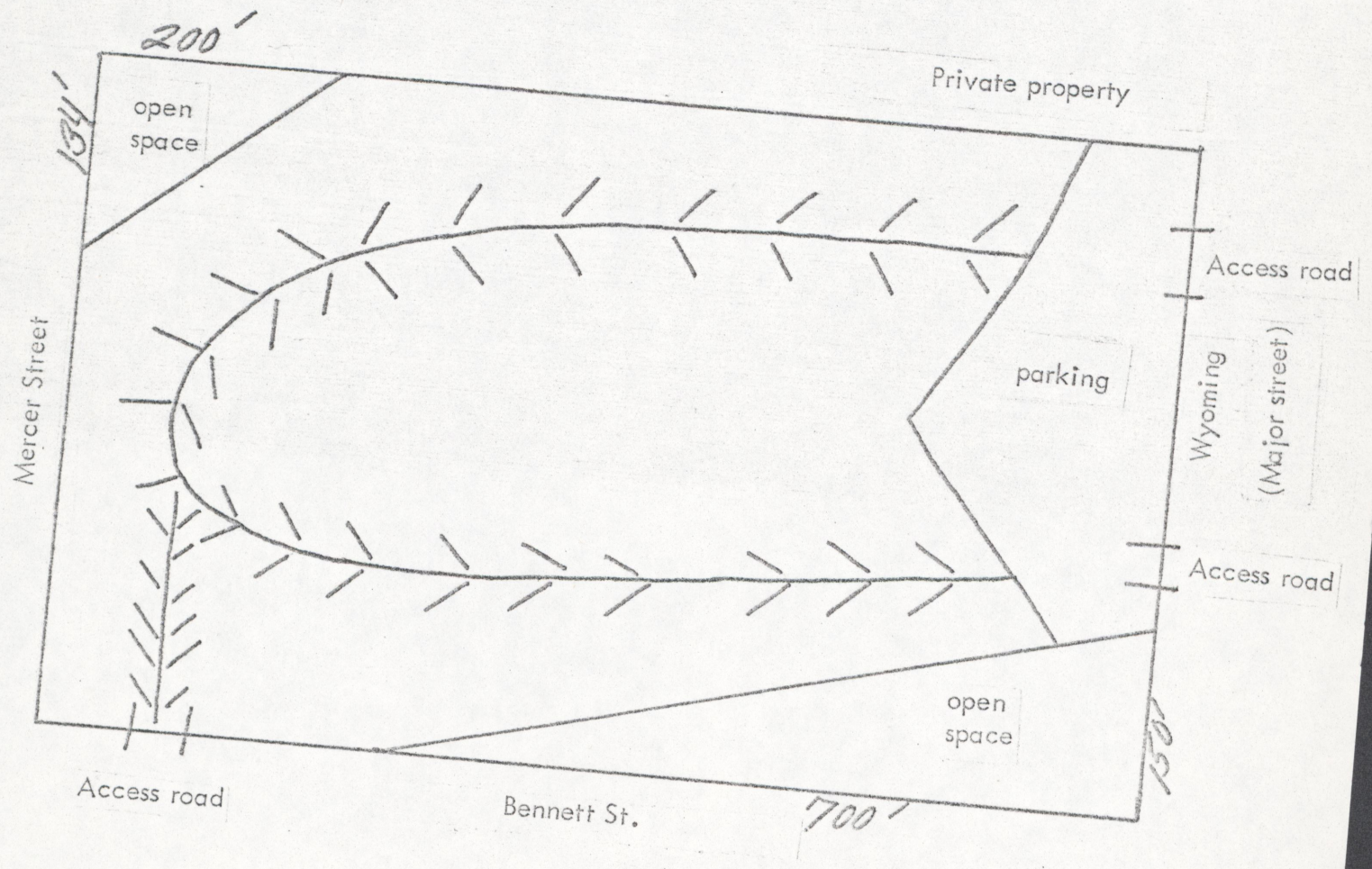
1. Site description

Size 52 units 5.2 acres Estimated population - 100

Parking Area - one off street site per unit - parking area for guests off Wyoming Avenue.

Topography - flat grassy expanse - no trees in center but some on periphery.

Layout



2. Surrounding Area - located on Wyoming Avenue

a. Access

Scanlon Field is on a moderately busy thoroughfare which provides the site with public transportation that gives access to more populated areas of the county.

There are 3 access driveways into the park but no room for cars to drive directly to the mobile homes. (See sketch of site).

b. Shopping

Park is located near shopping. However, the business area has a great deal of flood damage and there is no insurance that these shops will be open by the time Scanlon Field has residents occupying homes.

c. Recreation

The site has some open space for out door recreation such as bowling on the green. Nearby churches will provide facilities for indoor recreation. Wilkes-Barre Department of Recreation and Parks can provide recreation services if contractual arrangements can be made with Kingston Borough.

d. Employment Center

Local businesses may provide the kind of employment some of these people need.

e. Churches

Several major churches are in the immediate vicinity. Lutheran Social Service Bldg. and Christian church across the street.

f. Schools

The average education level of elderly people in the area is 9th grade. Few are presently involved in any adult education programs and there is seemingly little interest. However, if interest is generated existing public schools and a community college can be utilized.

g. Jurisdictional Agencies

1. police - Kingston Borough
2. fire - Kingston Borough
3. schools - Kingston Borough
4. garbage collection - Kingston Borough
5. recreation - Kingston Borough
6. services - Bureau for the Aging - Luzerne County

3. Residents Characteristics

a. Age - 55 and over

b. family size - one or two

c. Average fixed income - $1,400

4. Needs

a. Housing

Housing requirements that should be considered are as follows:

- mobile homes should be placed as low as possible to make the homes more accessible to physically impaired persons and to avoid accidents on wet or slippery steps.

- ramping should be done for all mobile homes. The cost of this will be

much less if the mobile homes are lower.

- fire extinguishers must be in each unit that can be used by older people who are arthritics or their hand grip is weakened. (According to the Paul D. Veitch Company, Mount Union, Pennsylvania - telephone (814) 542-9779 - such fire extinguishers cost about $6.00 and $12.00 depending on kind and size.)

b. Health

The needs of elderly people for health care tend to be somewhat different than for the population as a whole. They have greater tendency toward chronic illnesses and more physical impairments. A detailed description of Health Care is given in the part of this paper that gives the assessment of health needs.

In addition to that and particularly significant for Scanlon Field will be provision for health related services in individual's home such as:

- meals on wheels that includes special diets (i.e. diabetes, heart disease)
- homemaker services for those with physical impairments (i.e. arthritis, bone disease)
- home health-aide services for those who need special medication (both internal and external disorders)
- someone ready to respond to emergency needs (i.e. stroke, accident)

c. Education

Although there seems to be little done in adult education on the part of older people at the present time, the local public schools and the community college

should attempt to generate some interest and provide aduat education courses in such things as art, drama, music, and furniture repair or woodworking. This would provide leisure time activity with longer range interests. Space in the Lutheran Social Service offices or the Christian church across the street. Transportation to some local schools will need to be provided if classes are held there. The Bureau for the Aging will cooperate in setting these programs up.

d. Recreation

The Wilkes-Barre Department of Recreation and Parks in cooperation with Temple R. Jarrell, Senior Associate: Technical Information, National Recreation and Park Association, has proposed a comprehensive plan for recreation programs on mobile home sites. A non-profit recreation corporation is being proposed. Funding for this proposal is being sought through the Commission On Economic Opportunity. There are some jurisdictional questions but contracts could be made with the non-profit corporation or the Wilkes-Barre Department if local jurisdictions cannot provide appropriate recreation programs. The Bureau for the Aging of Luzerne County should be consulted and their cooperation sought.

Walkways and benches should be provided near all recreational areas so older people can watch even if they do not participate.

e. Shopping

"Shoppers special" buses should be provided regularly to major shopping centers at least until local shopping is restored. Mobile shopping services should be encouraged as they would be an asset to elderly people who find it difficult

to get out. Cooperative buying would help their overworked fixed income. The Bureau for the Aging should be asked to investigate cooperative buying plans.

f. Transportation

Bus service will be a major need for elderly people. Few of them have cars and walking with packages will be difficult. Mini buses should be on each site to provide regular shopping and excursion opportunities.

Another serious consideration for sites such as Scanlon Field is for proper signals at crossing intersections that lead to shopping areas. Elderly people need more time for crossing busy streets. Scanlon Field has access to shopping but it is across a major thoroughfare.

g. Garbage Collection

Garbage cans must be placed near the door and provision must be made to put cans out for garbage collection in some cases. Site managers or Resident Service Coordinator must find out who needs this kind of help. Otherwise older people may not want to ask and garbage piles up in their homes rather than admit they cannot carry a full garbage can out to the road. Kingston Borough will collect the garbage and it will cost $15 per year per unit for pick up twice a week.

h. Mail Delivery

Mail delivery should be as close to units as possible. In smaller sites, mail could be left at the management site. If group mail boxes are used they should be placed in very accessible locations.

i. Storage

Storage needs for older people are similar to most families. However, consideration should be given to their physical limitations to reaching high or bending low. Outside storage units may be important for them to store things thatwould be stored on high shelves.

j. Laundry and Cleaning Service

It would be most desirable to have washers and dryers installed in each unit. If this is not possible, special provision should be made for transporting people to laundromats. Dry cleaning can probably be taken care of by commercial companies serving the areas.

k. Security and Safety

Each site will have special security and safety needs which will tend to be magnified for the elderly population. Special consideration of safety for older people should be given in some areas.

- Fire protection is particularly critical for those who move about more slowly or who might be more apt to have kitchen fires due to slower response. Therefore, fire extinguishers should be in each trailer and careful personal instructions as to their use in addition to the careful fire protection training given to all residents.

- Every unit with elderly people living in it should have a telephone. A telephone emergency number should be posted in every unit and 24 hour service available. Until all telephones are installed, an emergency bell system (even old fashioned dinner bell in the park square) should be

implemented. Breaking and entering may be a real problem without telephone services.

- Security guards will be important for older people. In addition to regular daily security, elderly people are more apt to be gone from their homes for longer stays - to visit families or in hospitals. This requires special consideration for empty houses.

l. Multi-Purpose Center

Scanlon Field, being a small site with only about 100 people will not require a large community center. The management office could be a mobile unit shared with the community. This would provide small meeting space and a coffee lounge. Larger meeting space and indoor program activities can be held in the local churches across the street. Storage space for games and art supplies should be sought. The Bureau for the Aging can help obtain these community spaces.

m. Day Care

Day care for older people may be critical. The Bureau for the Aging has a proposal for foster care and may be able to expand it to include day care on some of these sites. An older couple who has one partner that is ill may need day care for that partner when the one who is well shops, participates in activities, or works.

n. Site Office

Every site must have a management office physically accessible to older

people. To be physically accessible it must be on site and at or very near ground level. Chairs in the reception area must be of the type that most older people can get up out of without help - not low and soft.

o. Communication & Community Organization

Older people have a great amount of free time and should be included in community organization activities. Their experience should be a contributing factor. CATV is the best possible communication vehicle for older people but may not be practical for Scanlon Field. Local television and radio should be encouraged to provide some communication services. Bulletin boards and newsletter can be used but must be supplemented with opportunities to hear about activities since many older people have poor eye sight and reading becomes difficult. The Resident Service Coordinator becomes an important communicator for older people.

Note:

The Bureau for the Aging, State Department of Welfare, and Health and Hospital Planning Council have been involved in preparing and submitting a proposal for services to elderly people. This is a $1 million proposal and if funded will be a great resource.

BARNUM

1. Site Description (See page 78)

a. Size - 1,200 acres, total land area.

b. Number of units - 1,000

c. Parking - in designated areas throughout site

d. Topography - on mountain top, with gentle grade throughout, mostly level near crest. Site is exposed to all weather elements with no protection provided by trees.

e. Layout- Mobile homes are arranged in rows along roadways, with a 200' X 1100' seeded mall in the site's geographic center for manager's office, mail pick-up, community building, recreation, and picnic area. (See revised site plan by The Rouse Company). Special note should be made of the hazardous entry from site onto Foote Avenue.

2. Surrounding Area

a. Transportation - The Wilkes-Barre Transit Corporation has a line operating from Old Forge to downtown Wilkes-Barre via Duryea Main Street. The schedule operates every half hour on the half hour from 5:30 a.m. to 9:00 p.m. Barnum Street at Main (about 1 mile from Barnum site) would be the pick-up point. The cost is 65¢ for all ages.

The Laurel Line Transportation Company of Pittston has a line operating from Old Forge town center to Scranton. This is a distance of 3 - 5 miles from the Barnum site. The cost is 80¢ for all ages.

b. Commercial Establishments - Duryea tour center contains more than one large super market, a variety of convenience stores, a hardware store, several clothing stores, a bank, a pharmacy, shoe repair, cleaning, barber shops and the like.

c. Recreation. - Healy Memorial Playground and Gilmartin Playground, each with swings, slides, basketball courts, are within a mile of site. They are not in convenient walking distance for Barnum children.

d. Employment Centers - Better Togs, Inc. is within walking distance of site. The remaining centers are in downtown Duryea or the surrounding area.

e. Churches - Three Roman Catholic, three Protestant and one Jehovas Witness Churches are within 2 miles of the site.

f. Schools - Bussing will be required for parochial and public school children. Information we received indicated the availability of space for parochial school children in Duryea Center, and public school children, K - 6, in the Pittston School District. It is our understanding that space for Junior and Senior High School would have to be found outside the Pittston School District.

g. Jurisdictional Agencies -

police - Duryea Borough

fire - Duryea Borough

ambulance - Duryea Borough

schools - Pittston School District

mail - Pittston Area

recreation - Duryea Borough

garbage, trash, snow removal - Duryea Borough

3. Residents' Characteristics

Information from census tracts having considerable flood damage shows the following relative to age. It is assumed that a similar age grouping will relocate at Barnum.

| Age | Total | % of Total |
|---|---|---|
| Under 5 | 6,935 | 7.8 |
| 5-9 years | 7,850 | 8.8 |
| 10-14 years | 8,708 | 9.8 |
| 15-19 years | 8,817 | 10.0 |
| 20-24 years | 5,049 | 5.8 |
| 25-34 years | 7,037 | 8.0 |
| 35-44 years | 8,087 | 9.2 |
| 45-54 years | 9,866 | 11.2 |
| 55-57 years | 7,150 | 8.0 |
| 60-64 years | 5,985 | 6.5 |
| 65-74 years | 8,287 | 9.3 |
| 75 and over | 4,746 | 5.3 |
| Grand Total | 88,517 | |

Assuming three persons per unit, the 1,000 unit Barnum site should be planned for a 3,000 population. The above figures would indicate for example;

234 pre-school children eligible for day care, or nursery school

900 students eligible for kindergarten - Senior High School

970 elderly (over 55)

Public announcements have stated that priority for mobile home units is going to those chronically ill, or handicapped in some way. Therefore, a more dependent population than normal is being assumed.

4. Schedule for Units to be Occupied

First units are scheduled to be in place the first week of September, 1972. The phasing of units is as follows:

| | |
|---|---|
| Phase I | |
| 1st increment | 274 |
| 2nd increment | 246 |
| Phase 2 | |
| 1st increment | 179 |
| 2nd increment | 300 |
| | 999 Total |

5. Needs

a. Education - As previously stated, all children K - 12 will be bussed.

The Pittston School District and the State Department of Education are responsible for planning.

An early childhood program is needed. Space is available for such a program in churches located within $1\frac{1}{4}$ mile of the site.

Perhaps the multi-purpose facility could base a portion of the program. Cost would range between $50,000 - $75,000.

b. Health - (See attached Assessment of Health Needs In Mobile Home Sites)

c. Elderly - (See section on the Elderly)

d. Recreation - Two areas within one mile of the site - Healy Memorial and Gilmartin - should be expanded to serve Barnum residents who would reach the site by bike or auto. A 5 acre area adjacent to the site with athletic fields, swings, slides and picnic area would be desirable. This would be within walking distance of all residents.

e. Shopping - A convenience store near the center of the site with day-to-day grocery and household items would be desirable for all residents, especially the elderly.

f. Mail - The population of Barnum would warrant the location of a sub-station on site, with a postal clerk providing service four hours per week-day. Space could be provided in the multi-purpose center. This is in preference to clusters of rural-type boxes located at entry points to the site.

A sub-station indoors would overcome the security problem and make the delivery of packages easier. According to postal authorities, door-to-door delivery is beyond consideration.

g. Transportation - Public transportation would be more accessible if the Wilkes-Barre Transit Corporation ran its Old Forge to Wilkes-Barre line via Foote Avenue at the Barnum site. Also, the Laurel Line Transportation Company should consider re-instating its schedule on Foote Avenue which would give access to the Pittston, West Pittston, Old Forge Areas.

Private transportation would suggest one or more 20-passenger mini-buses.

h. Police - Assuming the standard of one policeman for every 1,000 population, Barnum would require 3 sworn officers. Eight para-professionals would be useful for desk work, directing traffic and assisting in non-criminal enforcement. A Duryea sub-station is warranted, with radio hook-up to Luzerne County. One patrol car is suggested. The cost for the above is around $50,000.

i. Fire - The existing Hose Company $\frac{1}{4}$ mile from site with two engines is sufficient coverage. Fire hydrants are needed on site, as well as monthly sessions in fire prevention for residents.

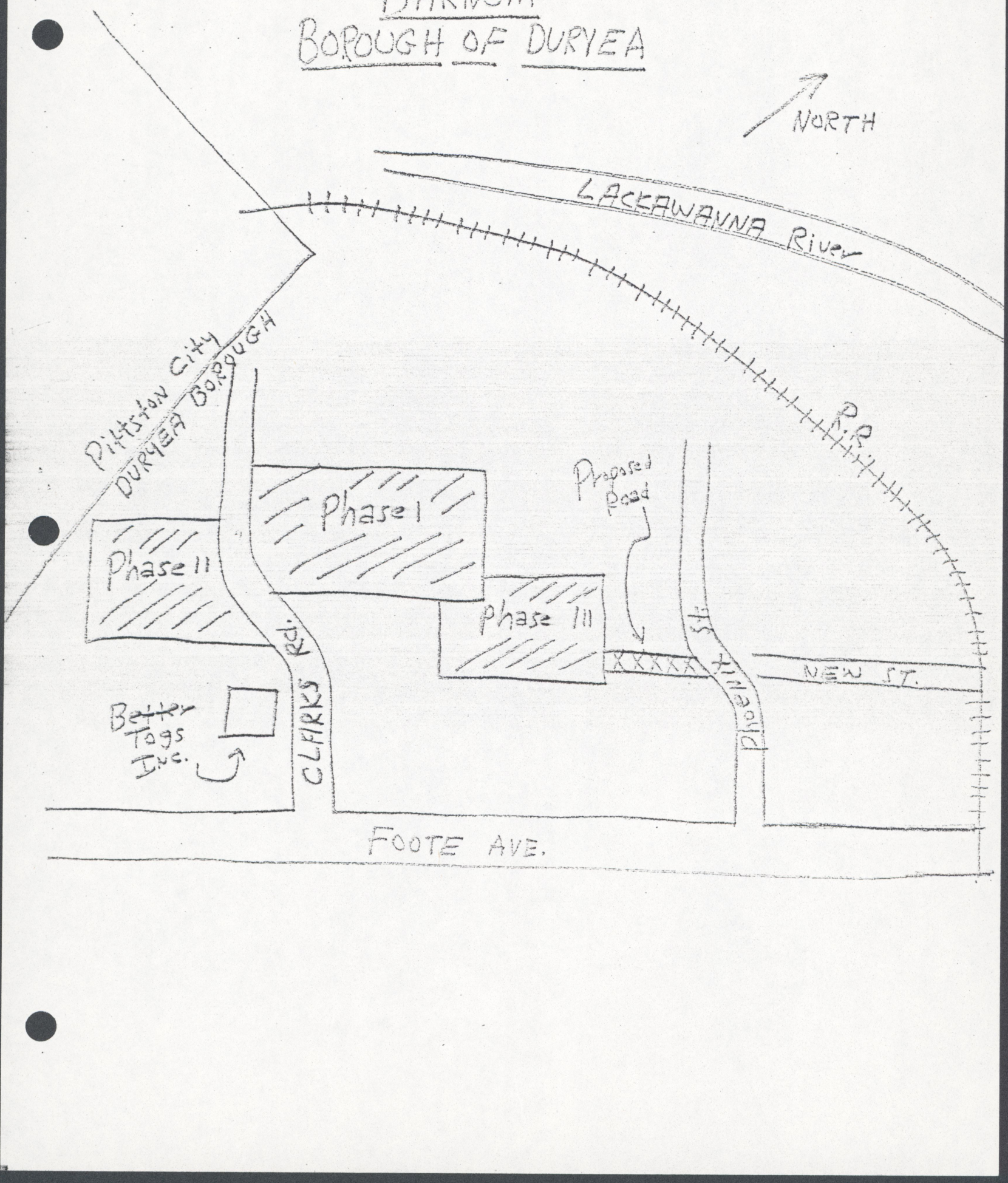
j. Ambulance - One ambulance on site would reduce the call on the volunteer service provided by Duryea for its residents.

k. Garbage, Trash, Snow Plowing - Duryea contracts with Lackawanna Refuse Company for garbage collection, and utilizes its own trucks for removal, and snow plowing. Barnum could contract with the same company at $6 per year per unit or $6,000 per year. An arrangement could be made with Duryea for trash removal, and snow plowing.

l. Multi-Purpose Center - This should be large enough to accommodate the delivery of such vital services as: mail sub-station, police sub-station, convenience store, day-care center, community meeting room, and recreation area. The site currently planned for a "community building" can be made level to permit a flexible structure to be installed.

m. Site Officers - Due to Barnum's anticipated population, consideration should be given to an assistant manager's office in each of the four quadrants. This is in addition to the manager's office near the site's geographic center.

# BARNUM
## BOROUGH OF DURYEA



# EPILOG

## Temporary Communities: A Point of View

Response to a community emergency cannot be neutral. The physical, economic and social implications of temporary solutions can either accelerate or retard the recovery process in the years that follow.

In 1917-18, for example, the U. S. Shipping Board was called upon to cope with extreme housing shortages in major industrial centers. The architectural director, Henry M. Wright, became deeply and permanently interested in redesigning neighborhoods and later worked with Clarence Stein the chief designer of the famous new town, Radburn, New Jersey. Many of the ideas came out of the emergency work.

In the second world war, Henry J. Kaiser recognized the urgency of health care for a mushrooming community of shipyard workers and developed the famous Kaiser Plan which has influenced so much of the new thinking in community health services planning.

The point here is that temporary communities need not be a negative experience for those responsible for managing them or for those who must live in them. All communities have some capacity for self-renewal and recovery after misfortunes. The point of view proposed here is that the temporary communities now needed in the Wyoming Valley be conceived, planned and operated as opportunities for personal and family self-renewal and recovery.

One final thought. The "Hawthorne Effect" is a well documented psychological phenomenon. It simply demonstrates that any effort perceived by people in a situation as an effort to improve that situation generates greater effort on the part of those people to improve themselves. This "ripple effect" is enormously important in the lives of the

people who must live in temporary communities. Therefore, temporary communities planned in Wyoming Valley should be conceived as the start of recovery and improvement rather than salvage operations.

## ACKNOWLEDGMENTS AND STAFF

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