# Networking: The Linking of People, Resources and Ideas

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About the Network

Computer Use in Social Services (CUSS) Network is a nonprofit association of professionals interested in exchanging information and experiences on using computers in the human services. Members participate in the Network by:

- Sending materials for the CUSSN Newsletter, such as: member needs, interests, hardware/software use, activities, resources, ideas, experiences, computer applications, and events.
- Participating in the electronic network, skills bank, software clearinghouse and subgroups.
- Distributing newsletters at workshops and conferences. It will send newsletters to distribute or place on a resource table.
- Referring vendors to advertise their services and products through the CUSSN.
- Holding local CUSSN meetings. Local meetings in Dallas/Ft. Worth, Chicago, Baltimore and Australia have been successful.

Network Dues: $10 individuals, $15 institutions (payable in U.S. Funds). Contact Dick Schoech, Associate Professor, School of Social Work, The University of Texas at Arlington, Box 19129, Arlington, TX 76019.

The Newsletter is published approximately 4 times a year and is sent free to all network members. Back issues $5 each.

The Electronic Network (CUSSnet) establishes local bulletin boards, national and local mail and file transfer, downloading of public domain software, and access to numerous repositories of electronically available information on human service computing. CUSSnet builds on FIDONET, approximately 900 microcomputer-based local bulletin boards across the U.S. and in 9 continents. Contact Dick Schoech for your local node, or

To Use CUSSnet

If a CUSSnet node is in your city, you're in luck. Simply dial it up using your computer and a modem and follow the directions. If no CUSSnet node exists in your city, check with a local computer store for your local FIDOnet node or call any CUSSnet node listed below. Communications are at 300-2400 baud, 8 data bits, 1 stop bit and no parity. Almost any computer or terminal and modem will work.

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<thead>
<tr>
<th>City &amp; State</th>
<th>Net/Node</th>
<th>Phone #</th>
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<tbody>
<tr>
<td>Arlington TX</td>
<td>130/5</td>
<td>817 273-3966</td>
<td>D. Schoech</td>
<td>Recent Publications</td>
</tr>
<tr>
<td>St. Louis MO</td>
<td>100/999</td>
<td>314 635-4996</td>
<td>B. Butterfield</td>
<td>Bible Info.</td>
</tr>
<tr>
<td>Murray KY</td>
<td>11/301</td>
<td>502 792-3140</td>
<td>B. Albritten</td>
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<tr>
<td>Denver CO</td>
<td>104/814</td>
<td>303 671-2912</td>
<td>W. LaMendola</td>
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<tr>
<td>Milwaukee WI</td>
<td>139/455</td>
<td>414 963-4515</td>
<td>W. Gingerich</td>
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<td>Raleigh, NC</td>
<td>150/101</td>
<td>919 851-6606</td>
<td>M. Bowden</td>
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<tr>
<td>Garden City NY</td>
<td>107/24</td>
<td>516 228-7938</td>
<td>G. Geiss</td>
<td>9pm + Skills Bank</td>
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<td>130/10</td>
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<td>114/15</td>
<td>622 606-6563</td>
<td>W. Hall</td>
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<td>Las Cruces, NM</td>
<td>15/4</td>
<td>505 642-2688</td>
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<td>to be announced</td>
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To start a CUSSnet node, call Steve Ice in Seattle at 206 442-2430
# Services Available

<table>
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<tr>
<th>Illinois</th>
<th>Contact Person</th>
<th>Services</th>
</tr>
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<tbody>
<tr>
<td>OUTP ST, Inc.</td>
<td>F. Dean Luse, Ph.D., CSW, President</td>
<td>Consultation on feasibility and information system planning. Provides help with accountability, forms &amp; report design, decision support systems, database development, software selection &amp; evaluation, training your staff to use computer systems. Extensive micro and mainframe computer experience.</td>
</tr>
<tr>
<td>Synergetic Office Systems (SOS)</td>
<td>Joseph Zehner, MSW</td>
<td>The SOS team of human service/computer professionals help you with ready-to-use SOFTWARE exclusively for nonprofits - Fund Accounting, Donor/Fundraising, Client Services/Receivables - and a full range of SERVICES - feasibility studies, programming, training, and support.</td>
</tr>
<tr>
<td>Florida</td>
<td>Contact Person</td>
<td>Services</td>
</tr>
<tr>
<td>Community Service Council of Broward County, Inc.</td>
<td>Susan K. Buza, Executive Director</td>
<td>Full range of consulting and technical support in the automation of Social and Human Services. Systems include Agency Inventory/Directory Production, Information &amp; Referral, Client Case Management, Mental Health Client Tracking, Statewide Networking, Transportation Scheduling, Carpool Matching.</td>
</tr>
<tr>
<td>Maryland</td>
<td>Keren Levitan, Ph.D., President</td>
<td>Services to help you use information, technology, and systems as professional resources. We work for you, we work with you, we help you do it yourself.</td>
</tr>
<tr>
<td>New York</td>
<td>Michael A. King, D.S.W.</td>
<td>Producers of AMIS — flexible off-the-shelf software for hospital social work and discharge planning departments. Customized programs are also available.</td>
</tr>
<tr>
<td>Rhode Island</td>
<td>Applied Innovations, Inc.</td>
<td>A developer and manufacturer of numerous software programs designed to operate on popular microcomputers. The programs are fully supported, documented and operational in hundreds of locations. Programs assist with Psychological testing (eg MMPI) office management (eg billing/insurance forms) or Assessment (eg psychosocial histories).</td>
</tr>
<tr>
<td>Australia</td>
<td>Human Services Information Systems</td>
<td>Consultation for Human Services, feasibility studies, training, system design and implementation. Software Development and hardware vendors.</td>
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The above paid advertisements represent no endorsement or favorable review by CUSS. When choosing a consultant, remember the standard advice: (1) talk to more than one consultant, (2) obtain several comparable bids, and (3) ask for several recent clients and talk to them about their satisfaction.

## Service Listing Announcements:

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<th>Description length</th>
<th>Rate per issue</th>
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<tr>
<td>under 15 words</td>
<td>$ 5</td>
<td>$18</td>
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<td>under 30 words</td>
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<td>$20</td>
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<tr>
<td>under 45 words</td>
<td>$10</td>
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<tr>
<td>under 60 words</td>
<td>$12</td>
<td>$40</td>
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## Space Advertisements:

- Advertising space is available in the CUSS Newsletter at the following rates:
  - one eighth page in one issue = $15
  - one full page in one issue = $75
  - three fourths page in one issue = $120

## Mailing Labels:

Mailing labels are available at the cost of 5 cents per label.
Notes From The Editor

Many thanks to Kim Lambert, (Professor, Faculty of Social Work U. of Toronto 246 Bloor St. West, Toronto, Ontario M5S 1A1) for organizing the issue. Others helping Kim were Irene Schweiter, WRK, CSW, The Applied Program Technology Unit, Ministry of Community and Social Services, 4th Floor, 680 Bay Street, Toronto, Ontario, M7A 1E9; Nagdy M. Tarasoff, CSW, Program Coordinator, Ontario Association of Professional Social Workers, 410 Jarvis St., Toronto, Ontario M4Y 2G6, and Noel Thomas, CSW/NSA, Consultancy, Interaction Network, Inc., 215 Carpet­ hans Tr; Trail, Ontario MV 1X4.

This issue focuses on computer use in social service activities, with special emphasis on legislation, legal issues, and computer science.

Articles, Reviews and Reports

Results of a Survey of English Speaking Professional Canadian Social Workers by Richard W. Nutter, James M. Gripton, & Mary Ann Murphy*, c/o U. of Alberta, Social Welfare Dept, 9825 112 St #300, Campus Twr, Alberta Canada T6G 1 KB.

This survey was a part of a state-of-the-art review of social work research in Canada funded by the Social Sciences and Humanities Research Council of Canada and sponsored by the Canadian Association of Social Workers and the Canadian Association of Schools of Social Work. The survey was conducted to document and understand better the potential utility of social work information systems as data bases for social work research in the personal social services. Particular emphasis was placed on the use of computers in social work practice settings and their roles in the information systems in those settings. Only those portions of the survey dealing with computers will be reported here.

METHOD

Population. The population for this survey was the February, 1986 mailing list for The Social Worker/Le Travailleur Social. This was a complete list of all members of provincial professional social work organizations in Canada. Thus, the operational definition of professional social worker for purposes of this study was a person who belonged to a professional social work organization in Canada in February, 1986.

Sample. Every fourth name was drawn from each provincial mailing list. The draw from each provincial list started on a different random number less than sixteen. The questionnaire from which results are reported here was sent to every second person in each of the resulting provincial samples. A coin was flipped for each province to determine if the odd or even numbered persons would receive this questionnaire. Thus, the 286 individuals to whom this questionnaire was sent were a 3.3% provincially proportional, random sample of professional social workers in Canada.

Survey methodology. Each questionnaire was mailed in an individually addressed envelope which also contained a letter briefly explaining the operation, purposes, and sponsorship of the survey, and a self-addressed, return postage metered, envelope. The questionnaires were first mailed from Edmonton on March 23, 1985. Reminder/thank you postcards were mailed on March 29, 1985. Fifty nine questionnaires were returned from the Province of Quebec were unopened persons would receive this questionnaire. Thus, the 266 persons in each of the resulting provincial samples. A coin was flipped for each province to determine if the odd or even numbered persons would receive this questionnaire. Thus, the 286 individuals to whom this questionnaire was sent were a 3.3% provincially proportional, random sample of professional social workers in Canada.

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It would have been very desirable to have provided French and English editions of this questionnaire to all respondents. Unfortunately, resources did not permit translation of the questionnaire into French. Thus, all the respondents whose data are reported had a working knowledge of English. Eleven of the questionnaires returned from the Province of Quebec were unusable. There was some indication on most of them that the addressee was French speaking and did not feel confident to complete this English questionnaire. Thus, the results of this survey should be generalized to the practice settings of English speaking Canadian social workers only.

Questionnaire. The questionnaire was sixteen pages long including the front cover which contained the introduction and the back cover which solicited respondent's comments about "these or other important issues of information systems and social work research in the personal social services," and gave a "Thank you." Only respondents currently employed in some social work capacity or in social work practice setting were asked to complete the items dealing with computers in or planned for their settings.

RESULTS

Hopes for computers (N = 181). All respondents were asked whether they disagreed or agree that, "Computers will soon make it very easy to get useful information from most social work information systems." On a five point Likert type scale from 1 = Strongly Disagree to 5 = Strongly Agree, the responses were: 5% = 1, 9% = 2, 19% = 3, 28% = 4, and 22% = 5 with 18% responding "Can't Say."
Articles, Reviews and Reports cont.

Increase use of computers (N = 141). Respondents were asked, "Is there a plan to increase the use of computers in your practice setting in 1985? A few (12%) indicated that their "practice setting is already fully computerized." More (16%) indicated that, "The equipment has been ordered" and others (14%) indicated, "The plan has been approved." Thus, nearly a third of the respondents indicated a fairly advanced stage of activity toward increasing their computer capabilities. About a quarter (27%) indicated some other, less advanced stage of planning. Nearly a third (31%) checked "no," there was no plan to increase the use of computers in their practice setting in 1985. Proportion of practice settings with computers (N = 140). Over half of the respondents (56%) indicated computers were used. Very few indicated that mini (8%), time sharing (8%) or other external (5%) computer set-ups were used in their practice settings. Nearly half (46%) indicated they didn't know what kind of computers were used in their practice setting.

Direct access for data entry (N = 80). When asked, "Who, in your practice setting has direct access to the computer(s) for information entry," most (93%) checked "Clerks & Technicians." Over a third reported "Top-Managers" (40%), "Middle-Managers" (37%), and "Supervisors" (36%) had direct access for information entry. However, only about a quarter (26%) of "Line social workers" had direct access for information entry. A few "others" (20%) and very few "Board Members" (4%) had such access.

Direct access for data retrieval (N = 80). The pattern of individuals with direct access to the computers for information retrieval was similar to that for information entry. "Clerks & Technicians" (74%) most frequently had direct access, followed by "Supervisors" (67%). "Top-Managers" (44%), "Middle-Managers" (39%), and "Line social workers" (32%) also had direct access for information retrieval. Only about a quarter (21%) of "Board Members" had direct access for information retrieval. Those who rely on the computer (N = 80) The pattern of responses to the question, "Who in your practice setting generally rely on the computer(s) for information to support their decision making," indicated a perceived hierarchical reliance upon computers. Nearly two thirds of "Top-Managers" (68%) and over half of the "Middle-Managers" (56%) were thought to generally rely upon the computers to support their decision making. "Supervisors" (39%) and "Line social workers" (28%) were perceived as much less likely to rely upon the computers for information to support their decision making. Relatively few "Clerks & Technicians" (20%), "Board Members" (15%), or "Others" (15%) rely upon computers for information to support their decision making.

Functions performed by computers. Respondents were asked, "In your practice setting, are the following functions performed mostly, partly, or not at all using computers?" Details of these responses are presented in Table 1. These responses indicate that most practice settings with computers use them for "Client Records" (83%) and "Finance" (80%), with an indication that the finance functions are more completely computerized than the client records functions.

"Word Processing" (70%), "Personnel" (69%), "Service Records" (65%), and "Research" (64%) are computerized, at least to some extent, in about two thirds of the practice settings with computers. "Mailing List" (45%), "Billing" (41%), "Membership" (19%), and "Fund Raising" (17%) were less widely computerized. However, few "Not Applicable" responses to these items indicate that these functions are not performed in many of the practice settings described in this survey. Introducing computers into formal information systems: Respondents were asked to indicate on a five point Likert type scale whether they disagreed or agreed with statements about how computers were introduced into the formal information system in their practice settings. Over one third of the respondents agreed that, "Just the same information you had always recorded was put into the computer" (27%). About a quarter of the respondents disagreed with this statement. The mean response was 3.2, slightly above the midpoint of the scale.

The distribution of responses to the statement, "A lot of planning was done to make sure the information on the computer was what was needed to make good practice decisions" was almost perfectly flat, including the "Can't Say" response category. This indicates a very wide range of perceptions about the degree to which planning was done to make computerization useful to practitioners. Social workers didn't get very involved in the switch to computers. It was too technical," was agreed to by half (50%) and disagreed by one in four (25%) of the respondents. Very few (8%) checked the midpoint indicating neutrality on this item. The mean was 3.5, a 50% of a standard deviation above the midpoint of the scale.

About half (53%) of the respondents disagreed with the statement that, "Our computers are NOT part of our formal information system." Only a small minority (16%) agreed with this statement. The mean of 2.4, nearly half a standard deviation below the midpoint of the scale, reflected the apparent situation that half or more of practice settings with computers are using those computers in their formal information systems.

Computers and information systems. Respondents indicated relatively strong agreement with the statement, "Computers will soon make it very easy to get useful information from the degree to which planning was done to make computerization useful to practitioners." Social workers didn't get very involved in the switch to computers. It was too technical," was agreed to by half (50%) and disagreed by one in four (25%) of the respondents. Very few (8%) checked the midpoint indicating neutrality on this item. The mean was 3.5, a 50% of a standard deviation above the midpoint of the scale.

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the “Line social workers” relied on the computers for information to support their decisions to other respondents with computers in their practice settings. Of the four items related to the introduction of computers, only “Our computers are NOT part of our formal information system” was related to line workers relying on computers. This analysis indicated that computers were much more likely to be perceived as part of the formal information system in settings where line social workers relied upon computers for information to support their decisions.

The items exploring the manner in which computers were introduced into formal information systems in practice settings were explored in a correlational analysis presented in Table 2. This analysis indicates that, at least in the opinions of the respondents, when “Social workers didn’t get very involved in the switch to computers” then it was likely that “Just the same information you had always recorded was put into the computer.”

Table 2
Introduction of Computers into Formal Information Systems
Correlations: SAMINFO PLANINFO NOTWSWS NOTSYS
SAMINFO .100 -.32 48** .21
PLANINFO -.32 1.00 -.30 -.12
NOTWSWS .48** -.30 1.00 .32
NOTSYS .20 -.12 .32 1.00

Minimum pairwise N of cases = 58
2-tailed Signif. * = .01 ** = .001

DISCUSSION
The results of this questionnaire can be generalized with confidence to English-speaking Canadian social workers because the gross return rate was 77%, the net return rate was 79%, and the net usable return rate was 70%. These are quite acceptable coverage figures. This relatively high return rate is un-doubtedly due in part to the follow-up technique employed. It also indicates that the structure and content of the relatively long and complex questionnaire was sensible to the respondents. In other words, completing this questionnaire was perceived as a meaningful and important task. Internal checks on the reliability and validity of responses indicated high levels of both.

Computers are used in about half (56%) of the practice settings. These uses would appear to be largely administrative. In only about a third (36%) of the settings with computers are client records mostly on those computers. In only about one quarter (23%) of these computerized practice settings do line social workers generally rely on the computers for information to support their decisions. These results indicate that, at least at the present time, computers have not substantially increased the access of line social workers to useful information. The optimism expressed about the degree to which computers will increase access to useful information seems not to have been fulfilled.

A third (32%) of practice settings appear to have well advanced plans for increasing their use of computers. However, this may not do much to increase access to data bases which are sufficient for social work practice decisions. Over half (56%) of the respondents indicated that, “Social workers didn’t get very involved in the switch to computers.” When social workers didn’t get involved, there was a relatively strong tendency for just the same information as always recorded to be put into the computer. If these trends continue, the net result may be that computerization will not lead to any increase in the quality of information, and that information will be less accessible to line social workers.

The results of this survey are consistent with the interpretation that the computer based information systems in social work practice settings are perceived as most useful to management and for the production of statistical reports. It is clear that these computerized systems are not the primary basis upon which practice decisions are made.

The results of this survey give rise to the following question. Can information which is not adequate as the basis for individual case decisions be adequate for decisions affecting hundreds or thousands of cases? As currently developed, computer based formal information systems in social work practice settings seem based on an implicit yes answer. Is it a more sensible answer. If taken seriously, the no answer will mean a major redirection in the design of computer based social work information systems.

FOOTNOTES

“Butch Nutter is an associate professor in the Edmonton Division and Jim Grinton is a professor at Calgary in the Faculty of Social Work, University of Calgary. Mary Ann Murphy is currently a Ph.D. candidate at the Heller School of Social Work, Brandeis University.”

Computer Interviews for Personality Evaluation by Anthony Meszaros, M.D., Elizabeth Meszaros, MSW, and Lucy Whitby, R.N., St. Mary’s Hospital, Department of Psychiatry, 3830 Lacombe Ave., Montreal, P.Q. H3T 3JE.

Computer-patient interviews provide a method for personality assessment. The Diagnostic and Statistical Manual is utilized for the construction of a computer administered questionnaire. The program arranges the responses in the manner of a rating scale and generates a report describing the personality profile of the patient. The reaction of patients to this method of evaluation shows that the interactive process facilitates an objective, comprehensive appraisal of the personality.

All modalities of helping services, particularly those which go beyond the immediate situation and aim at a long-term assistance, are contingent upon the personality of the recipient. Decisions of management and treatment plans are shaped not only by situational factors and clinical data, such as the diagnosis of a psychiatric illness, but also by enduring personality patterns. Clinical experience at a Psychiatric Out Patient Clinic shows that the course of a psychiatric illness and the response to treatment is often influenced by an additional element, a disorder of the personality. In many cases, the personality of the patient absorbs most of the attention. Similarly, at a medical clinic, there are many patients whose illness is associated with, and influenced by a personality factor.

In spite of the importance of personality evaluation the practical application of personality diagnosis remains uncertain. Many of the methods which have been in use are often not relevant to the needs of practice or the method of examination and evaluation is cumbersome, time-consuming and requires special training. There remains a need for a method of personality evaluation which
- could be utilized in a wide range of social and psychological problems;
- is relatively simple to employ in a standard manner; and
- yields results which are consistent with current diagnostic concepts concerning personality disorders.

The definitions commonly encountered in clinical usage and in the literature usually imply that personality disorders involve the whole individual and have a certain ending quality. It is also
Computer Interviews for Personality Evaluation cont.

inherent in the concept that the disorders interfere, to varying degrees, with the adaptive functioning of the individual. The Diagnostic and Statistical Manual of the American Psychiatric Association (DSM III) provides a comprehensive system for the investigation of personality disorders. According to the Manual, a diagnosis requires

a) recognition of signs, symptoms, attitudes, experiences and
b) the listing and the numerical manipulation of these elements.

The diagnosis is the result of a linear, additive process. This process requires that the evaluation should be comprehensive and should follow a predetermined schedule. These requirements could be met by adhering to the method of a structured interview.

While the validity of a rigidly structured interview is well demonstrated by the Diagnostic Interview Schedule (D.I.S.) of the NIMH for the illnesses listed in the DSM III, there is a need to develop a similar instrument for the evaluation of personality disorders.

The scarcity of interview schedules for personality disorders may be due, partially, to the predominant interest of the clinicians in the diagnosis of an illness. Another difficulty encountered in constructing an interview schedule for personality disorder is the nature of the variables. In regards to an illness—such as a schizophrenic or affective disorder—one deals with clearly definable signs and symptoms. In regards to personality disorder the variables to be ascertained often elude exact description. A further, more subtle difficulty may arise from the social and moral meaning of certain questions. Questions about illness are free from judgmental connotations. Questions about personality traits may focus on issues tinged with social judgments and disapprovals. This problem is then to find the phrase which mutes the possible judgmental connotation, without losing the target, the personality trait, at which the question is aimed.

By applying computer methods to the DSM III it is possible to have

1) a standard formulation of variables to be observed;
2) a quantitative assessment of the symptoms and signs;
3) predefined schemas for translating the quantitatively expressed, standard observations into diagnostic concepts.

This method of personality evaluation is related to the views expressed by Frances in 1980: “a patient should be rated for each personality characteristic rather than being diagnosed within one or another distinct personality type. This dimensional system successfully renders continuity that is lost in the forced choice of just one or another category.” He acknowledges that “dimensions may provide more information than can be conveniently used and often seem to be too complicated for routine clinical discourse” but he predicted that “with the future widespread availability of computers, psychiatry will prefer a dimensional system, at least for personality diagnosis.”

Method

The diagnostic Manual contains lists of descriptive items, criteria, which define the personality categories. For the purpose of a computer administered structured interview, sets of questions were constructed which correspond to the criteria. The questionnaire employed in this project is arranged in a manner which approximate the natural flow of a diagnostic interview. The questions are presented to the patient by the computer. Along with the questions, the screen shows introductory comments and instructions regarding the selection of a response to the initial question. Each question is presented separately on a full screen. The choice of answers is arranged on a scale indicating the strength or frequency of the questioned behavior or experience.

After completion of the questionnaire, the program does the evaluation and produces statements concerning not only the presence but also the degree of the personality disorder.

The degree of a category of personality disorder is derived from two measures: a) the number of criteria present for each category. The criteria within a category are handled as being of equal value. b) the rating or the degree. The degree of a disorder is expressed in reference to the ideal prototype which would contain the highest scores for all the criteria in that category. The scores on the criteria are added and then converted into a percentage of the hypothetical maximum. Each patient is then represented by a spectrum of the quantitatively expressed categories. Thus the computer generated report describes the patient in terms of (1) the list of the categories of personality disorders (2) the degree of each category and (3) a narrative composed of the responses to the questions.

Results

The questionnaire has undergone several revisions. This paper includes only those patients who completed the presently used version. The randomly selected group consisted of patients who are attending the Out Patient Clinic of a General Hospital. There were a few patients (only three) who scored under 50 in all the categories. About one quarter of the group showed moderate scores, that is less then 50, often with a diffuse, non-specific distribution but frequently a dominant pattern was present such as Dependent-Avoidant, or the Passive-Aggressive category. Another quarter of the group showed high scores—above 75—in more than 3 categories. These patients could be designated as cases of “undifferentiated severe personality pathology”. This designation was particularly justified if the high scores applied to the severe forms of pathology, the schizotypal, border line or paranoid categories.

About half of the group show a mixed pattern in which a constellation of peak scores could be discerned. These cases are described according to the dominant category. The most frequently occurring category is the Avoidant type; almost half of the patients showed, in varying degree, this characteristic. The Passive-Aggressive pattern was also frequently found.

Discussion

The interactive aspect of the computer presentation has several advantages. The capacity of branching allows detailed exploration of areas according to the responses of the patient; it also allows repetitions and confrontation to achieve greater precision and clarity of the patient’s responses.

The reactions and the comments of the patients who have shown that the computerized interview created an attitude of interest, concentration and self-reflection. Sometimes there is an initial apprehension which is quickly compensated by curiosity and then a working involvement prevails.

In contrast to the pencil questionnaires, here the questions are presented separately, one by one. There is no interference from other questions, which would be conducive to skimming, skipping, erasing and correcting.

The essential difference between a computer administered questionnaire is the rating scales used in personality evaluation. In the present interview, the computer questionnaire is an interview, having its own dynamic characteristics. Being confronted with a machine in a question-and-answer situation initiates a process in which most of the patients become positively involved. Several patients felt that they were less restrained, less defensive and more spontaneous in this situation than in other forms of examination. They felt that they were in control of the pace of the examination and were immersed in a process of self-exploration. The neutrality of the computer provides a truly non-judgmental atmosphere.

This method provides essential elements of communication, it attracts and engages attention and stimulates active participation. The active, active involvement of the patient and the neutrality of the computer facilitate objectivity of the evaluation.
Since August 1984 we have had our IBM PC which is coming as our programs seek to meet the needs of trainees and those with emotional disabilities and work tolerance limitations, and varying degrees of educational experience and intellectual aptitudes. The experience with the computer—patient interview has shown that it could be a valuable method for a standardized evaluation of the personality. It affects not only the position of the patient but also changes the role of the examiner. It engages the patient in self-reflection and facilitates a subsequent clinical interview. The interviewer is relieved from the burden of conducting a question-answer type of interview and does not have to be concerned about omissions or selective overattention on his part. He can utilize the profile he receives from the program as an overview of the personality and then he is free to proceed towards an intuitive, in-depth exploration.

The program could stand alone and produce written reports or it could be incorporated into a file system allowing subsequent retrieval and statistical comparisons.

REFERENCES


Integration is a word, which today is commonly associated with high technology as in integrated circuit boards and integrated computers. As a social reference, integrate means being made available to all people of all races and ethnic groups on an equal basis.

At Toronto Goodwill Industries we refer to our IBM Personal Computer in both senses, in the way it is an integrated part of our Business Training Program. As a part of our Vocational Rehabilitation Program, our Business Training Centre provides assessment and training in various skills needed or employment in the modern office. We have the unique challenge of providing this service to adults with emotional difficulties, physical disabilities and work tolerance limitations, and varying degrees of educational experience and intellectual aptitudes. To this end our Personal Computer serves a multitude of purposes.

Since August 1984 we have had our IBM PC which is comprised of a Amidon monitor, a 256K memory with 6 disk drives, and a Texas Instruments printer. We have an array of standard software programs such as WordStar, Lotus 1-2-3, dBASE II and the accompanying tutorials and system tutorials (GIDE and Professor DOS).

Because our PC came long after the majority of our personnel in the department, it has been an evolving learning process for all involved, with the supervisory staff keeping only steps ahead of the trainees. There has been many a case where a trainee has either arrived with previous computer experience or has simply had the ability and the time while on the program to learn and experiment with the various software programs and far surpass the supervisory staff.

We are in the infancy stages with the use of our PC but staff are well aware of its enormous potential in the development of our business program.

This aside, we have found it a most effective teaching tool, regardless of the capacity of the particular trainee, or his or her vocational goal. The computer hits a very wide audience and overcomes the various intellectual barriers. Whether it acts as an "instructor," thus as a teaching tool, or as a functional apparatus, the trainee is an active participant. Through the various software programs, the PC assists in adapting instruction to individual needs in a practical and non-threatening manner.

Most importantly it is not demeaning to an adult. It acts as an independent learning experience with reinforcement as required by the trainee. With lightning speed, the HELP menu can be brought up with no supervisory learning over one's shoulder.

Just by what a computer is perceived to be, a part of the "high tech" world, we believe it can actually enhance an individual's self-esteem—which for many of our trainees is initially more important than the actual subject being taught. It is also interesting to note the number of men who are using the instrument and learning "keyboarding" who may never have had the desire to go near a typewriter.

Our department is designed as an open concept business office. While each trainee may be doing similar work, the actual program is individualized according to their needs, abilities and interests. With a staff of three, we often rely upon peer instruction. This again, is employing an integrated process, one person learns while the other gains a sense of responsibility.

A good example was when one trainee, with a particular bent for computers, developed a handbook to be used by her co-workers as an introduction to the PC. She was thrilled to be given the challenge and the difference it made in her self-esteem was remarkable. This project along with her instructor role, enhanced her socialization skills and allowed her to develop empathy and an understanding to intrapersonal differences. Although on a personal level this could have been achieved by other means, growth was achieved and the computer was the medium.

For administrative purposes we are using Lotus 1-2-3 to record department statistics. Our initial assessment battery of 25 clinical exercises and the trainee times and errors on these assignments are recorded to form the data for establishing trainee norms. The inputting of the data (minus trainees' names) will only be concerned about omissions or selective overattention on his part. He can utilize the profile he receives from the program as an overview of the personality and then he is free to proceed towards an intuitive, in-depth exploration.

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The program could stand alone and produce written reports or it could be incorporated into a file system allowing subsequent retrieval and statistical comparisons.
The Alberta Mental Health Management and Planning System, by Karen L. Walsh

A.M.H.M.P.S. has been custom designed to meet the unique needs of Alberta Mental Health Services. A.M.H.M.P.S. replaces a previous on-line information system—the Mental Health Information System (M.H.I.S.)—which operated from 1976-1985. M.H.I.S. was replaced because it became obsolete, failed to meet Alberta Mental Health Services needs in key areas, and at the same time was incurring high operating costs. It was determined that Alberta Mental Health Services required a management information system that provided clinical support in selected areas. A.M.H.M.P.S. has been designed to incorporate a streamlined clinical data base with the newly designed personnel and financial information components.

A review of existing mental health systems available in 1984 revealed that none could adequately meet Alberta Mental Health Services requirements. A.M.H.M.P.S. was built by a project team composed of user representatives from Alberta Mental Health Services and system analysts recruited and managed by the Department's Management Information and System Services Branch. The project team took a phased approach to the development of A.M.H.M.P.S. The Out-patient Clinic client data base and the Personnel component were implemented in December 1985. The next phases will involve the implementation of the Extended Care Centre, Funded Agency and Financial Components. These are scheduled to come on stream in the Spring of 1986.

NETWORK

The A.M.H.M.P.S. network runs on a Provincial Government IBM 370/3081 series mainframe. Seventeen of the 56 out-patient clinics are equipped with data communication controllers, printers and video display screens. These sites are linked to the mainframe in Edmonton, Alberta, via dedicated high speed communication lines. There are a minimum of two data entry sites located at large clinics in each service delivery region. Client information is captured on forms which are forwarded to the mainframe in Edmonton, Alberta, via dedicated high speed communication lines. There are a minimum of two data entry sites located at large clinics in each service delivery region. Client information is captured on forms which are forwarded to the mainframe in Edmonton, Alberta, via dedicated high speed communication lines. There are a minimum of two data entry sites located at large clinics in each service delivery region. Client information is captured on forms which are forwarded to the mainframe in Edmonton, Alberta, via dedicated high speed communication lines. There are a minimum of two data entry sites located at large clinics in each service delivery region. Client information is captured on forms which are forwarded to the mainframe in Edmonton, Alberta, via dedicated high speed communication lines. There are a minimum of two data entry sites located at large clinics in each service delivery region. Client information is captured on forms which are forwarded to the mainframe in Edmonton, Alberta, via dedicated high speed communication lines. There are a minimum of two data entry sites located at large clinics in each service delivery region. Client information is captured on forms which are forwarded to the mainframe in Edmonton, Alberta, via dedicated high speed communication lines. There are a minimum of two data entry sites located at large clinics in each service delivery region. Client information is captured on forms which are forwarded to the mainframe in Edmonton, Alberta, via dedicated high speed communication lines. There are a minimum of two data entry sites located at large clinics in each service delivery region.
Members Comments and Activities

CUSS Network Activities and Reports

The Alberta Mental Health Management and Planning System cont.

2. Activity-Information reports a client’s involvements with Alberta Mental Health Services built up in sequential order from the last Registration/Termination combination to the first. Each Registration/Termination combination constitutes an activity. The Activity Information function reports the name of the therapist assigned to the case, the diagnosis, the registration and termination dates, and the referral source. The Activity Information function supports 4 optional fields, whose contents are defined by region, so that each can uniquely determine what is captured. Optional fields are designed to support management decision-making, program planning and research.

3. Contact-Recording reports all data entered via Contact Records. This function was developed to report contact counts and the number of hours spent in face-to-face contact with registered clients, and moreover, to differentiate between individual, family and group client contacts.

4. File-Transfer is a function which facilitates the transfer of a client health record to a newly designated therapist thereby allowing that therapist access to the client’s data.

5. Reporting will provide immediate on-line reports with locally accessible menu driven report selection and submission capability. Local on site printing of small reports will be possible. Standard periodic report runs are submitted centrally and mailed to the user’s location. Case closed summary counts, case filings by therapist, contact summary statistics, and exception reports (e.g. case undiagnosed) are examples of the kinds of reports produced.

6. Mailbox is a basic, secure message system which allows A.M.H.M.P.S. sites to communicate with each other. The Mailbox function prints and addresses messages to specific staff and locations.

7. System-Support describes some functions necessary to the operation of the system. Included in System Support is the capacity for updating staffing data, and the compiling of tables and codes required for management planning.

CONCLUSION

In summary, Alberta Mental Health Services new A.M.H.M.P.S. is undergoing phased implementation. The transition from the previous M.H.I.S. has been implemented, with the first regular reporting run scheduled for mid-February, 1986. Shortly thereafter, work will begin on the second phase which will include the Extended Care Centres, Funded Agencies and Financial components. A.M.H.M.P.S. is a fairly large, complex and sophisticated management information system, which will provide Alberta Mental Health Services with integrated staffing, budgetary, and client caseload data that will assist in the more efficient and effective management, planning and delivery of mental health services.

Synopsis of National Welfare Grants

Health and Welfare, Canada

TITLE: Continuing Professional Education for Social Workers

ABSTRACT: Continuing education is available through professional schools, commercial organizations or in-house training. This gives rise to problems of accessibility and affordability for many. It also does not lend itself to a system that is comprehensive, ongoing, flexible and adaptable.

At the same time, social workers have an increasing need to maintain competence and enhance ability as accountability requirements increase and new theories are developed into practice modalities. Information technology seems to offer at least one way of meeting these needs and opportunities.

Members Comments and Activities

CUSS Network Activities and Reports

Milwaukee CUSSnet Node From Wallace Gingerich, School of Social Welfare, U of Wisconsin-Milwaukee, Milwaukee, WI 53201

The Milwaukee node of CUSSNet will serve two primary purposes: (1) a means for Milwaukee area human service professionals to network with each other and with CUSS members around the country, and (2) provide a clearinghouse for educationally related software.

As coordinator of the Special Interest Group in Education, I will be working to assist educators in networking with each other, particularly to locate and make available educationally related software. We are interested not only in software that teaches about computer applications, but in software that is useful in the major curricular areas such as intervention methods, human behavior, social welfare policy and services, research methods, and professional practice.

The Milwaukee CUSSnet node is fully operational, and is available to human service professionals for local use without charge. Users will have to make a small deposit ($10.00) prior to using the national FidoNet mail system.

Canadian Association of Social Workers (CASW) and the Canadian Association of Schools of Social Work (CASSW) will be co-sponsoring a project to explore an association based system of continuing education. Present forms of continuing education will be explored as will the potential of developing technology. If this stage proves fruitful, a system will be developed and tested in some provincial jurisdictions and some practice areas.

The project should be of interest to practitioners, educators, agencies, unions, and provincial social service systems.
Research Projects and Reports

Microcomputer Nonprofit Accounting Research From Gregory C. Fearon 1031 Third St., Santa Rosa, CA 95405.

I'm doing a masters degree investigative project on the progress of microcomputerization of nonprofit accounting systems. Nonprofit organizations, like most small businesses, have begun to wonder if microcomputers are an effective tool to reduce costs and increase efficiency in their accounting functions. As their accounting practices are more complex than small businesses, software must exist to meet their particular needs. Various accounting software packages have been developed for use on microcomputers, but it is unclear whether any of these programs will suit the needs of nonprofit organizations. It is also unclear what organizational changes will occur as a result of their use. I wish my project report to be important research into the impacts of current technology and a guide to accounting software for nonprofits.

Health Care Technology Assessment Grants From the National Center for Health Services Research Research Area: Health Care Technology Assessment Proposals Due; June 1, Oct. 1 and Feb. 1. Contact Point: Chief, Review and Advisory Services Program, National Center for Health Services Research and Health Care Technology Assessment, 1-52 Park Building, Rockville, MD 20857, Phone (301) 443-3091.


CHIP OFFERS TRAINING FROM PATTY O'ERTL, ASSOCIATE DIRECTOR, SOUTHERN CALIFORNIA CENTER FOR NONPROFIT MANAGEMENT, 1052 WEST SIXTH ST., SUITE 500, LOS ANGELES, CA 90017.

CHIP provides comprehensive computer and information management services. The principal services of CHIP are:

- Information: CHIP serves as a depository of information on the use of computers for nonprofit organizations through a resource library, bimonthly newsletters, and an extensive referral network.
- Information calls and services are free to CHIP members.
- Seminars provide training at different levels (managers without computers, managers with computers - beginning, and managers with computers - advanced). Seminars will be offered in both the major application areas and nonprofit specific management services. The principal services of CHIP are:

  EDUCATION

  Seminars provide training at different levels (managers without computers, managers with computers - beginning, and managers with computers - advanced). Seminars will be offered in both the major application areas and nonprofit specific applications.

  - Half Day Seminars:
    - $50.00 CHIP Members; $60.00 Nonmembers
  - Full Day Seminars:
    - $100.00 CHIP Members; $120.00 Nonmembers

  DEMONSTRATIONS

  Software packages (both standard and nonprofit specific) are demonstrated to small groups of nonprofit organizations. Managers can see the distinct features, advantages and disadvantages of different packages prior to purchase.

  - Demonstrations are an exclusive benefit of CHIP Membership.
  - Fee is $55.00 per demonstration.

  LAB ACCESS

  Access to computers (Macintosh, Apple IIe, IBM PC and PC compatible) is provided to help nonprofit organizations become familiar with or test computer hardware and software.

  - CHIP Members receive free hours.
  - Regularly, CHIP Members $8.00 per hour; Nonmembers $12.00 per hour.
CONSULTATION
Technical assistance projects assist nonprofit organizations with computer needs assessments, system selection, purchase negotiation, and software development.

CHIP consultation services are an exclusive benefit of CHIP membership; consulting services begin at $4.00 per hour.

COMSAP Offers Consultation on Computerization
From Jeff Van Tine, Computer Project Director, Northern Rockies Action Group, 9 Placer, Helena MT 59601

I am writing to tell you about the Northern Rockies Action Group’s new Computer Services Assistance Program (COMSAP), and how your organization can participate in it.

Becoming computerized has proven to be difficult for many nonprofit organizations. Initially, cost was a major barrier to most groups that were considering computers; however declining prices and improved product lines have reduced the importance of this constraint. An unfamiliar technology and a new language seem to be major roadblocks for many groups. Similarly, the news of some organizations bad experiences travels much more rapidly through the grapevine than success stories. When nonprofit organizations are seeking credible information and advice, the only place they can turn is to the sellers of hardware and software, who all too often have a vested interest in the information they provide.

COMSAP will provide on-site consulting assistance to nonprofits in Idaho, Montana, and Wyoming on acquiring computer hardware and software, and how to more fully utilize the capabilities of the equipment and programs groups currently own. A seed grant from Mountain Bell is making it possible for NRAG to assist a limited number of nonprofits by conducting a free computer needs assessment. This will yield an evaluation of your organization’s current state of (or need for) computerization, and an outline of suggested future priorities.

Health and Mental Health
Hospital Social Work Packages, From Mike King, via CUSSnet 107/37. 26 Apr 86

I attended the Annual Meeting of the Society for Hospital Social Work Directors in Baltimore at the end of March. I was excited to see not only the interest in computerization but the widespread readiness for it. Many more people than I imagined already have computers and are in the process of choosing software. There were 3 systems for hospital social work departments being marketed at the conference. My system was one of them so I won’t do an evaluative piece but stick to the facts about each. They are presented in alphabetical order.

AMIS (Advanced Management Information System) was developed by KING ASSOCIATES, LTD, for hospital social work practice and generates reports which justify the existence in face of cut-backs created in large part by hospital administrators. It provides alerts as to activity deemed for patients. The system runs on microcomputers with 256K and two floppy drives. The cost for the system is $595 and the Productivity module costs $150. For further information contact Bob Miller, Director of Social Services, Froedtert Memorial Hospital, 9200 West Wisconsin Ave., Milwaukee, Wisconsin 53226, 414 259-3058.

For more information, write Michael A. King, Director of Social Work/Discharge Planning Dept., St. Francis Hospital, 100 Port Washington Blvd., Roslyn, NY 11576, 516 627-6200 ext 1688 or send mail on FIDOnet Via Node 107/16.

Medical Social Work Information System Available
From Robert A. Miller Director of Social Services, Froedtert Memorial Hospital, 9200 W. Wisconsin Ave., Milwaukee, WI 53226

The Medical Social Work Information System was developed to operate on a 256K microcomputer with two disk drives. It is completely menu driven for ease of operation and is expandable enough to meet individual needs of each Hospital Social Work Department and flexible enough to meet changes in the Department as time goes on. Basic computer programs can be made via menu screens so that computer programmers are not needed to make changes in data entry fields.

This Program generates thirty-four standard reports via the discharge sheets and includes two optional data fields as well as adhoc report capability. The computer program is written using METAFILE RUNTIME Data Base Management System. The cost of Medical Social Work Information System is $595 up for the Program with a Productivity/Audit Module costing $150.00 planned for introduction early this summer. I am currently installing the program in five hospitals in Southeast Wisconsin. After this Beta site is tried, the program will be available to Hospital Social Work Departments in May, 1986.

I am interested in learning if it might be possible to have this computer evaluated by you, or a panel of Medical Social Workers. The reasons for this request are simple: there are few reasonably priced, menu driven computer programs available to Hospital Social Work Departments and it is absolutely critical that they access data that fully reflects the complexity of hospital social work practice and generates reports which justify their existence in face of cutbacks created in large part by decreasing Federal funding for patient medical care.

Interested in Assessment/Testing Software From Richard Pallazza, 208 Norwest Bank Bldg., Winona, MN 55987

I am a psychologist with interests in clinical psych and vocational rehabilitation. My computer is a TRS 80. Model III (if I must. I will buy an IBM or compatible).

I would like to know more about software for human service applications. Of particular interest, is a menu-driven mental status exam, psych testing aids, programs for personal, social and vocational histories, as well as billing and other practice management aids. Such information will be gratefully received.

Nutrition and Diet Software From Gary N. Costello, Director of Development, Distysymms, Inc., 744 Robin Road, West Amherst, NY 14028
Disability: Project on Science Technology and Disability: From the American Asn. for the Advancement of Science

The Project on Science, Technology, and Disability of the American Association for the Advancement of Science (AAAS) maintains a Resource Group of Scientists and Engineers with Disabilities, which currently numbers more than 1,200. Since 1978, members of the Resource Group have consulted with institutions, schools and colleges, employers, legislators, and other disabled people, and helped to develop a core of information about the use of behavioral and/or medical restraints. The system stores basic information about clients, services, and client loads. It can establish a basis to learn and improve their nutrition. Now, our latest enhancements have made the system software user-friendly for everyone's use!

DINE is used by students in schools and universities, patients in HIV/AIDS, outpatients services, and in private settings and in programs of weight loss, diabetes management, cardiac rehabilitation, athletic training, and exercise programs. Additionally, an increasing number of individuals are purchasing the software for home use.

Medical records Systems and Chemical Dependency Programs: From Richard D. Snyder, The Meadows, Rt. One, Box 259, Centre Hall, PA 16828

I am moving to the above address May 23 from Ft. Wayne, IN (a community mental health center). In Centre Hall (State College-Penn State Univ. Area) I shall be working with a 92-bed private psychiatric hospital managing a chemical dependency unit.

Please start my subscription to the newsletter and help me get the local Electronic...
douing the individual assessment and programming that must be done while complying with regulations and sound practice, and is not an extra task; this minimizes the burden of the system. If desired, the assessment may be reported interactively on a microcomputer instead of by paper forms.

The assessment reports are translated into legible, English-language summaries and graphics which are easy to interpret. They report: identifying information, and information about the characteristics and needs of the person that are pertinent to programming; a description of the client’s adaptive behavior in the major areas of life, with the client’s profile compared to other clients; a statement of the client’s medical care needs, if any; statement of program goals that might be appropriate to the client; and a statement of the client’s maladaptive behaviors, if any, that will require staff attention. For the maladaptive behaviors, the system indicates treatment methods that have been reported in the literature. These reports back to the direct service agency are designed to give information and structure to individual programming, service provision, and monitoring of outcome.

In addition, information is aggregated by the system to provide case load and service descriptions which support management of the local agency and of the statewide service deployment, regulation, and funding. If desired, the MDRS will compute the cost of community-based service that would be appropriate to a client with the reported behavioral competence, medical care needs, and maladaptive behaviors.

Where Do You Get the MDRS? Both customization and operation of the MDRS are available from Bock Associates, Inc. This is a consulting firm which has been responsible for the implementation of the system since 1976. The Senior Associate of Bock Associates, Inc. was a co-director of the federally-funded project at the University of Minnesota which initially developed the system, and other key employees and consultants to the firm have participated in development for periods of up to 12 years.

The system is not available for turn-key or subcontract operation. The technical integrity of the system requires that its operation be very carefully handled, and efforts to operate otherwise have proven unsuccessful. The cost of customization and operation is reduced by the extensive development that has been contracted out under continuous management.

Inquiries should be directed to: Warren H. Bock, Ph.D., Senior Associate, Bock Associates, Inc., 2929 4th Ave So., Minneapolis, MN 55408; Phone: (612) 827-7726.
Disabilities cont.

Interdisciplinary MR/DD Applications Sought From Thomas Ayotte, Rome Developmental Disabilities Services Office and Developmental Center, Lewis DDSO, Box 237, W. Main St., Tunkhannock, PA 18657.

The Rome Developmental Disabilities Services Office of the NYS Office of Mental Retardation provides a wide range of residential, day program, diagnostic and family support services to persons in the central region of New York. I am presently engaged by the Rome DDSO in a search for computer applications to interdisciplinary practices in the field of mental retardation/disability services. Part of the search includes the identification of relevant user groups or support networks.


The Center for Information Resources is a training and research facility whose purpose is to create and offer employment opportunities for physically and mentally disabled persons in computer related occupations.

Information Systems for Vocational Rehabilitation From George C. Youn, Project INTERACT Director, Metro Industries, Inc. 1086 Brentwood Ct., Lexington, KY 40511.

I am currently director of a national project developing computer information systems for vocational rehabilitation facilities.

Welfare

Interested in Welfare Systems From Harry G. Gin, Foster Care Licensing Supervisor, Social Services Agency of Alamada Co., 401 Broadway, Oakland, CA 94607.

My areas of interest are in the field of child welfare services, i.e., foster care licensing, placement and selection. Areas of microcomputer application include the following: database management; descriptive and inferential statistics and trend and graphics analysis.

General

UPDATE, New Newsletter on Human Service Applications From Ying-Ying T. Yuahn, Editor, The Center for Computer Applications in the Human Services, 910 Florin Road., #110, Sacramento, CA 95831.

The Center for Computer Applications in the Human Services has been established to provide a forum for exchanging information on requirements, practices, and improvements in small computer systems and to educate practitioners and managers about the potential of information systems in improving the management of their programs and agencies. The Center tracks emerging technologies and develops new techniques to the handling of data. It disseminates information on new approaches to a wide variety of information system issues and problems. The Center is a not-for-profit organization.

UPDATE is one of our first efforts in exchanging information. The goal of UPDATE is to provide information of different types: conceptual design principles; implementation strategies and policies; and technical information useful for Data Managers. We see our newsletter as being geared towards persons assigned the responsibility of researching new systems, implementing systems, and maintaining systems. We hope to provide news about innovative applications, practical guides about procedures, and technical guidelines about systems installed at subscriber sites. Your input and questions about systems will help us to help you.

JURIS, Juvenile Information System and Records Access From UPDATE on Human Services Computer Applications (see above)

Kent County Juvenile Court was the prototype site for the microcomputer version of JISRA (Juvenile Information System and Records Access). Kent County implemented the 1983 microcomputer version as developed by the National Council of Juvenile and Family Court Judges. The program includes such functions as: registering identification information on a juvenile; conducting a name search of all known juveniles by real name or by alias; providing an automated case history including various dates, types of referrals, reasons for referral and disposition of the referral; calendaring and scheduling of court activities; maintaining addition information on hearings, dispositions and detention, and registering information on other individuals associated with a case whether they be family members, witnesses, or other adults.

In June, 1985, the Court upgraded its hardware equipment. The Court uses a Zicomp Ultra S3E2 with over 16 users on the system. (There is capability for an additional 16 users.) The Zicomp CPU uses the SGOA5S, and has two 85 MB hard disks giving disk storage for future growth. Some of the features of the Zicomp computer are a high density floppy drive used for software transfer and a high density tape drive used for daily backup (the drive can backup a 16 MB hard disk volume in three minutes). Besides the possibility of four spooled printers and other system wide peripherals, the Zicomp provides each user with a port for a dedicated printer or modem. The Court has purchased two interface units so as to use Royal typewriters as privately available printers.

The Court also uses its Zicomp multiuser microcomputer to access two Hewlett Packard 3000 minicomputers. This capability gives on line access to the prosecutor’s information system and the Friend of the Court’s information system. The Juvenile Court and the Friend of the Court have a cooperative arrangement to handle child support payments made for children who are wards of the court.

Automation of the Court has also included developing an adoption system and a financial bookkeeping system to handle the Court’s need to account for reimbursement and restitution receipts, fines and program findings. On the accounts payable side, the new system will prepare vendor vouchers for foster homes, attorneys, institutions and other vendors. The financial system reflects the hybrid nature of the Court’s financial transactions. (The Court must manage and track its own receipts and expenditures as a legal branch of government, but the funds are handled by the county’s treasurer.) The Court is planning to have on-line access to the county’s IBM computer by early fall which will help provide up to date information for the Court’s financial transactions and budget control.

Reflecting the on-going commitment to automated information systems, the Court is considering other activities such as: development of a Crisis Intervention module; designing an electronic docketing system; and establishing an automated linking to local child welfare agencies.

For further information contact: Philip J. Hamlin, Kent Couy Juvenile Court, 1501 Cedar Street, N.E., Grand Rapids, MI 49503, (616) 774-3700.

Residential CYCIS System From UPDATE on Human Services Computer Applications (see above)

RESIDENTIAL CYCIS is a computerized approach to monitor and evaluate treatment, to assess treatment effectiveness, and to study the process by which resources of a program affect the course of child development. The system registers children and members of their families, and tracks services provided to them. In addition there is a Treatment Tracking Component, based on the Devereau Behavior Rating Scale, which has been expanded to be relevant to both non-academic as well as classroom settings. The categories include significant sym-
Computerization may have an even greater impact on society than the industrial revolution. According to this view, whereas the industrial revolution was characterized by the fact that machines began to replace or improve upon physical behavior, the development of the computer will be known as that point in history when machines began to replace or improve upon mental behavior.

Our rationale for the formation of the Division is in part based on the belief that the application of psychological knowledge to the use of computers in society (e.g., at work, in education) will serve the public interest as well as the interests of psychology as a discipline. A failure to apply such knowledge may leave society ill prepared to defend against the negative effects of computerization or to take full advantage of its positive impacts. In terms of their training, professional focus and ethical responsibilities, psychologists are uniquely qualified to help society understand, evaluate and improve upon the impact of computers on people. If we do not, who will?

Professional Issues in the Public Interest

There is another aspect of computerization which should be of concern to psychologists, namely the computerization of their own professional activities. At the most basic level, psychologists are becoming computerized. Second, psychologists are being called upon to study the use of computers both within their own discipline and in society at large. At the most basic level, psychologists are being called upon to study the use of computers both within their own discipline and in society at large. According to this view, whereas the industrial revolution was characterized by the fact that machines began to replace or improve upon physical behavior, the development of the computer will be known as that point in history when machines began to replace or improve upon mental behavior.

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Board of Convention Affairs made the interface of computers and psychology a topic of special focus for its Ninety Third Annual Convention.

We believe that the time has come for APA to take a leadership role in coalescing the various groups within its ranks who have an interest in this area, by creating an APA Division on Computers and Psychology. The formation of such a Division is consistent with APA's goal of advancing the science and profession of psychology as a means of promoting human welfare. Specifically, this Division will meet five needs:

1. Whereas persons interested in the interface of computers and psychology are scattered throughout the other divisions within APA, this Division will bring such individuals together.
2. The Division will assume a leadership role in giving this emerging field direction in developing a substantive body of knowledge.
3. The Division will provide a forum for the development of high standards of scholarship in the field.
4. The Division will encourage the application of psychological knowledge to the development of public policies that best control the impact of computers on people in society.
5. The Division will encourage the development of high standards for how computers are used by psychologists.

For more information, contact Amiram Elwork, Ph.D., Dept. of Mental Health Sciences, MS5403, Hahnemunn University, Broad & Vine Sts., Philadelphia, PA. 19102.

MMPI Software Law Suit Won

From Tom Pratt, Applied Innovations, South Kingstown Office Park, Wakefield, RI 02879.

Applied Innovations, Inc. (AI), a Rhode Island firm that develops and markets microcomputer-based software for the mental health industry, has announced a double victory in the highly competitive mental health marketplace.

The twin accomplishments occurred simultaneously: one in Washington, D.C., this August at the 1986 American Psychological Association Convention, where the firm introduced three new software products to aid mental health professionals with the scoring and interpretation of the widely-used Minnesota Multiphasic Personality Inventory (MMPI); and in two in Minnesota, where they successfully responded to a legal challenge by both National Computer Systems (NCS), a $215 million public company and one of AI's competitors, and the Regents of the University of Minnesota.

Difficult timing, coupled with the size of the opposition in the legal skirmish, made the victories that much sweeter for the small firm. (AI has only 15 employees.)

"In the middle of preparing for our major trade show and the introduction of three new software programs, we were advised of the suit against us," explained AI President Tom Pratt.

Pratt surmised that there may have been a link between the release of the new products and the legal action. "News of our products leaked into the market in the summer of 1986. Had the legal attack against us by our competition been successful, we would have been enjoined from selling our MMPI scoring program. So, despite the size of the opposition, we fought the legal attack against us by our competition at the Association Convention, and to ease jail overcrowding.

The program will permit judges to sentence low-risk prisoners to serve time in their homes. To keep tabs on their activities, at-home prisoners will wear electronic devices that let police monitor their whereabouts by computer. The program will be given as a six-month trial involving about 10 prisoners.

The crypto-telemonitor devices will be used for offenders who have committed non-violent crimes. "It's intended for people who are eligible to serve time but don't necessarily need to go to jail," said Susan Muranishi, head of research and development for the county administrator's office.

The device is an electronic wristwatch with a cryptographic program that randomly assigns each inmate personal codes for identification by a monitoring computer. The system is being designed by Comsec, a company founded by two men who helped to develop the Alameda County program. Al Borden, a Comsec founder and data security consultant to the county explained that under the system, a central computer dials the prisoner's telephone number at random intervals throughout the day and, through a voice synthesizer or pre-recorded message, requests identification. The computer can be programmed to call the prisoner at different prearranged locations such as at work and at home.

When called by the computer, the prisoner must respond by entering an identification code, which changes randomly throughout the day and appears on the watch's LED display at the touch of a button. The code is entered on the telephone's touchtone keypad.

Resources and Materials

New Resources

I am writing to tell you about the Northern Rockies Action Group's new Computer Services Assistance Program (COMSAP), and how your organization can participate in it.

COMSAP has proven to be beneficial for many nonprofit organizations. Initially, cost was a major barrier to most groups that were considering computers; however, declining prices and improved product lines have reduced the importance of this constraint. An unfamiliar technology and a new language seem to be major roadblocks for many groups. Similarly, the news of some organizations bad experiences travels much more rapidly through the grapevine than success stories. When nonprofit organizations are seeking credible information and advice, the only place they can turn is to the sellers of hardware and software, who all too often have a vested interest in the information they provide. COMSAP will provide on-site consulting assistance to nonprofit organizations in Idaho, Montana and Wyoming on acquiring computer hardware and software, and how to more fully utilize the capabilities of the equipment and programs groups currently own. A seed grant from Mountain Bell is making it possible for NRAG to assist a limited number of nonprofits by conducting a free computer needs assessment. This will yield an evaluation of your organization's current state of (or need for) computerization, and an outline of suggested future priorities.

Contents of Books, Magazines & Journals

This list is taken from CUSSten, the CUSSt electronic newspaper, thus, some of the information has appeared in previous CUSSt issues. This list will be updated continually and distributed via the CUSSten Poll. For a current listing, call one of the CUSStnet nodes listed on the inside cover. Thanks to Micki Blocken for entering this information into CUSStnet node 1305.
Resources and Materials cont.


Journal: Communication Outlook [This quarterly journal focuses on communication aids and techniques.] Source: Artificial Language Laboratory, Michigan State University. Issue: Winter 1985, Vol. 6, No.3

Contents
"Learners and Communication Aids in the United Kingdom" by M. Hope.
"Alternative Assessment Procedures for handicapped infants and toddlers" by P. Zelazo, Ph.D.
"Conversations with Non-Speaking People", [introduction taken from the book]
"Code of Ethics", [recently approved at the annual meeting of the Northeast Communication Enhancement Group (NCEG).
"Computer Aided Response Acquisition with a Profoundly Handicapped Child" by W. Tracy, D. Brevans.

Newsletter: Communication Outlook [A quarterly journal focusing on communication aids and techniques.] Issue: Summer 1985, Vol. 7, No.1. Other: (Total pages in the journal = 27)

Contents
Communication Outlook: Expanding Augmented Communication", editorial to readers concerning the goals of COMMUNICATION OUTLOOK, by K. Portnoy.
"Voice I/O Applications", by R. Rodman, Ph.D.
"The Use of Words and Phrases On a Minispeak Communication System", by B. Bacher.
"The Life of a Salesman" (technical aids salesman gives ideas for evaluating users and distributors of communications systems), by S. Cristall.

Newsletter: Communication Outlook Issue: Fall 1985, Vol. 7, No.2 (32 pages total)

Contents
A Communication Skills Learning and Improvement Program Application of Videodisc Technology to Training in Developmental Handicaps" by C. Coon, and H. Lambert, Ph.D.
"Life of a Salesman, Part II" by S. Cristall.
"Some Thoughts Concerning Communication and Individuals Experiencing Handicaps" by M. Marachou.
"Hearing Impairments and Microcomputer Technology", by R. Hoyt, Jr.
"Coming of Age in the Age of Computers", by J. Eulenberg, Ph.D.

Newsletter: Micropsych Network Source: Professional Resources Exchange, Inc., P.O. Box 15560, Sarasota, Florida 34277-1550. (941) 368-1913

Issue: Volume 2, Number 2. Total pages in journal = 42.

Contents
"Review of MMPI interpretive system software" by L.C. Bernard.
"Automated Client Intake Program in Basic", by R. Fell.
"Psychworld Software Reviewed" by T.F. Pettijohn.


Contents
(Software): "Emerg-Dos" by C. Sea, M.D., and A. Clark, M.D. (Twelve programs that can be used by the emergency physician). Pg. 28-33.
(Office Practice Management): "A Directory of Medical Software Companies" by R. Polacek, M.D. Pg. 47-53.

Magazine: Nonprofit World (The National Nonprofit Leadership and Management Magazine is dedicated to bringing together those who serve the nonprofit world in order to build a strong network of professionals throughout the country. Issue: Sept/Oct., 1985, Vol.3. No.5. Source: The Society for Nonprofit Organizations, 634 Odana Road, Suite I, Madison, WI. 53719

Contents
"People and Technology: Take The Challenge" by M. Sidler. Dedicated to the person at the nonprofit organization who most frequently operates the computer p 10.


Contents
Editor's Note on the Special Series by A. Kazdin. Pg. 745
Introduction to the Special Series, by J. Butcher Pg. 746
Landmarks in Computer-Assisted Psychological Assessment, Pg. 748
Direct Patient Computer Interviewing, Pg. 748
Adaptive Testing by Computer, by D. Weiss. Pg. 774
Automated Interpretation of Neuropsychological Test Data, Pg. 807
Current Developments and Future Direction in Computerized Personality Assessment, by Butcher, Keller, and Bacon. Pg. 807
Validation of Computer-Based Test Interpretations: problems and Prospects, by K. Moreland. Pg. 816
CUSS Network Newsletter, Fall 86

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- Building Computer Comfort
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- "Pascal Program Listing for the Determination of Discounting: A Computerized Experiment"
- "The Determination of Discounting: A Computerized Experiment"
- "Early Clinical Evaluation of a Robot Arm/Worktable System for Spinal-Cord Injured Persons" by Seamone and Schmeissar
- "Trace Center Software/Hardware Registry Forms"
- "Microcomputer as a Laboratory Aid for Visually Impaired Students" by K. Powell, K. Shaver, and P. Payne
- "A Minicomputer Approach to Consultation-Liaison Data Base: Pedagogic Applications of a Computerized Data Base," by Strain, Mueenuddin, and Strain
- "Data-based Psychiatric Consultation: Applying Mainframe Computer Capabilities to Consultation," by Popkin, Mackenzie, and Callies
- "Microcomputers and Consultation Psychiatry in the General Hospital" by W. De Fruyt
- "Pneumologie Applications of a Computerized Data Base," by Mackenzie, Popkin, and Callies
- "A System for Collecting Dyadic Interaction Data on the Apple II Computer" by W. Ickes and S. Trued
- "The Determination of Discounting: A Computerized Experiment" by K. Powell, K. Shaver, and P. Payne
- "Applications of Microcomputers by Visually Impaired Persons" by G. Goodrich
- "A Computer-Automated System for Functional Assessment-Part II" by Moooney, Kondratek, and Srithin, Pg. 96
- "Primary Attitudes," by K. Powell, K. Shaver, and P. Payne
- "Computerized Information Resources for Commercial Technology: Pedagog-Admin-Clinfo" by Strain, Norvell, Strain, Moore, and Callies
- "Clinical Evaluation and Application of A Computer-automated System for Functional Assessment
- "V. functional Assessment"
- "Development of a Computer-Automated System for Functional Assessment" by Kondraski, Van Malngh, Chen, Nakamura, and D. Morrissette, Pg. 428
- "How I learned to Love and Control the New Technology: The Year of Getting Computerized" by M. Muholland, Pg. 438
- "Blindness in the Information Age: Equality or Irony?" by L. Scadden, Pg. 394
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- "Using a computer when you can't use the standard keyboard"
- "Sources for more info. on microcomputer applications for disabled people"
- "Trace Center software/hardware registry forms also info. on databases, clearnghouses and networks"
- "Journal: Journal of Visual Impairment and Blindness, Vol. 78, No.9, November 1984
- "Contents"
- "Introduction to Word Processing"
- "Sources: Taft Group, 500 MacArthur Blvd N.W., Washington, D.C. 20005, (202) 366-7086, Date: 1985
- "Contents"
- "Needs Assessment"
- "Building Computer Comfort Introduction to Word Processing"

Use your modem-equipped personal computer to access a large-scale computer network. Twice yearly the contents are published in hard copy like Vol. I, No. I. Editor: Bruce Morsich, 803 Wilshire Blvd. #880, Los Angeles, Cal 90025. Issue: Vol. 1, No. 1, June, 1985.

Contents

- "A Theoretical Analysis by Means of Computer Robots, of Single Interactions in 2 X 2 games," by H. Kelley
- "A System for Collecting Dyadic Interaction Data on the Apple II Computer" by W. Ickes and S. Trued
- "Facial Expressions of Emotion as a Means of Suralization" by D. Heeke
- "Self Esteem, Persuasion, and Retrospective Distortion of In- tial Attitudes," by R. Baumeaster and M. Covington
- "Pascal Program Listing for the Determination of Discounting: A Computerized Experiment" by K. Powell, K. Shaver, and P. Payne

Special Issue: REHABILITATION PUBLICATION Journal: Vocational Admin. Rehabilitation R&D Progress Reports Issue: 1984 Source: Office of Technology Transfer (OSTD), 50 Irving Street, N.W. Washington, D.C. 20422 Contents relating to computers:

- "V. functional Assessment"
- "Development of a Computer-Automated System for Functional Assessment" by Kondraski, Van Malngh, Chen, Nakamura, and D. Morrissette, Pg. 96
- "Clinical Evaluation and Application of a Computer-Automat ed System for Functional Assessment-Part I" by Moooney, Kon dratek, Tintner and Srithin, Pg. 96
- "Clinical Evaluation and Application of A computer-automated System for Functional Assessment Part II," by Moooney, Kon dratek, Tintner and Srithin, Pg. 96


- "Early Clinical Evaluation of a Robot Arm/Worktable System for Spinal-Cord Injured Persons" by Seamone and Schmeissar, Pg. 38-47.


- Information Resources: Computerized Information Resources for Commercial Technical Aids
- Information Networks
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- Additional Sources of Information Equipment Selection
- Books Addressing Computers and the Disabled user
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Directory: IBM DIRECTORY OF SERVICES AND SPECIALIZED EQUIPMENT FOR THE PHYSICALLY IMPAIRED Source: IBM Corporation, Dept. 63C/028, King­ston, N.Y. 12401, Other: First ed., 1982. The purpose of the directory is to provide comprehensive and up to date information bearing on the education and productivity of physically impaired data processing professionals and provides understanding of services and equipment available Contents

Includes chapters on computer science: agencies, braille print ing, devices and literature. also includes a chapter on electronic aids: agencies, publications, devices. Contents

Journal: JOURNAL OF VISUAL IMPAIRMENT AND BLINDNESS Source: American Foundation for the Blind, 6 W. 16th St., N.Y., N.Y. 10001, Other: Special Issue on Microcom­puters, Vol. 78, No.9, November 1984

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- "Blindness in the Information Age: Equality or Irony?" by L. Scadden, Pg. 394
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- "A Micromodule Computer in the University: J. Keeler, Pg. 414
- "The Microcomputer as a Laboratory Aid for Visually Impaired Science Students," by R. Morissette, D. Lupeney, Pg. 408
- "Constraints on Microcomputer Access for Visually Impaired Persons" by M. Yolung, Pg. 426
- "Large Print Computers: An Evaluation of their Features," by D. Morissette, Pg. 428
- "How I learned to Love and Control the New Technology: The Year of Getting Computerized" by M. Muholland, Pg. 438

Directory TECHNOLOGY FOR INDEPENDENT LIVING SOURCEBOOK, Editor: Alexandre Enders, O.T.R., Write: Suite 402, 4405 East West Highway, Bethesda, Md. 20814, (301) 657-642, Date: 1985 Contents

- Chapters on microcomputer applications: General guidelines for selecting a computer
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- An issue of access
- Computer related information from Trace
- Using a computer when you can't use the standard keyboard
- Sources for more info. on microcomputer applications for dis abled people
- Trace Center software/hardware registry forms also info. on databases, clearnghouses and networks


- "A Microcomputer Approach to Consultation-Liaison Data Basing: Pedagogic Admin-Clinfo" by Strain, Norvell, Strain, Mueenuddin, and Strain, Pg. 83
- "Microcomputers and Consultation Psychiatry in the General Hospital" by W. De Fruyt
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- "Discussion of the use of Computers in Consultation-Liaison Psychiatry," by W. De Fruyt, Pg. 133


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Interactive Video In Nursing Medicine and Allied Health, (Second Annual Conference), February 11-13, 1987. November 3, 1986 is deadline for call for papers. Contact Gary D. Hales, Division of Health Administration, Dept. of Health Related Studies, Univ. of Texas Medical Branch, Galveston, Texas 77550 (713) 784-8326.

Nursing and Computers (International Conference), June 21-24, 568 at Trinity College in Dublin Ireland. Will be hosted by the Irish Nursing Board, Contact Secretary, Irish Nursing Board, 11 Fitzwilliam Place, Dublin 2, Ireland, or call (01) 609799, Telex is 91212 ABAL EI.

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