UNITED STATES DEPARTMENT OF THE INTERIOR WAR RELOCATION AUTHORITY Tule Lake Center Newell, California

May 5, 1944

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MEMORANDUM TO: Mr. Willard E. Schmidt

Chief, Internal Security

SUBJECT: Ward X

At the present time, considerable confusion seems to exist as to the department responsible for persons admitted to Ward X. As you know, this ward is used for persons taken in custody for drunkenness, mental illness and violations of the law on various offenses. It is apparent, therefore, that when a person is admitted to Ward X, the department responsible for the individual be quite clear. We, of course, are particularly concerned with those who are believed to be suffering from a mental illness. However, at present, we are not officially advised when such a person is brought in that he is mentally ill and should be examined by the medical staff. It seems to be assumed by the Department of Internal Security that mental cases admitted to Ward X will be automatically examined. This assumption is incorrect since we have not interfered with people put in Ward X by the Internal Security Department as we feel that they are Internal Security's responsibility and we are only concerned in making the ward available.

It seems to me advisable that there be some understanding between the hospital and the Department of Internal Security so that the responsibility for individuals in Ward X would be entirely clear. I would suggest that all persons brought into Ward X by the Internal Security for whatever cause remain the responsibility of the Internal Security until they are regularly admitted to the hospital. When cases are brought in, which are believed to be mentally ill, the Internal Security should notify the Outpatient Department that they are putting an individual in Ward X whom they think is mentally ill and would like a medical examination of the individual. If after medical examination, the individual is found mentally ill, he can be regularly admitted to the hospital and become a hospital responsibility. Those cases not found to be mentally ill, will not need to be admitted to the hospital and can remain the responsibility of the Internal Security.

I would appreciate any suggestions or comments which you might have in regard to this matter in order that the responsibility in these cases might be made clear. An early comment would be appreciated.

Jack C. Sleath, M. D. Chief Medical Officer