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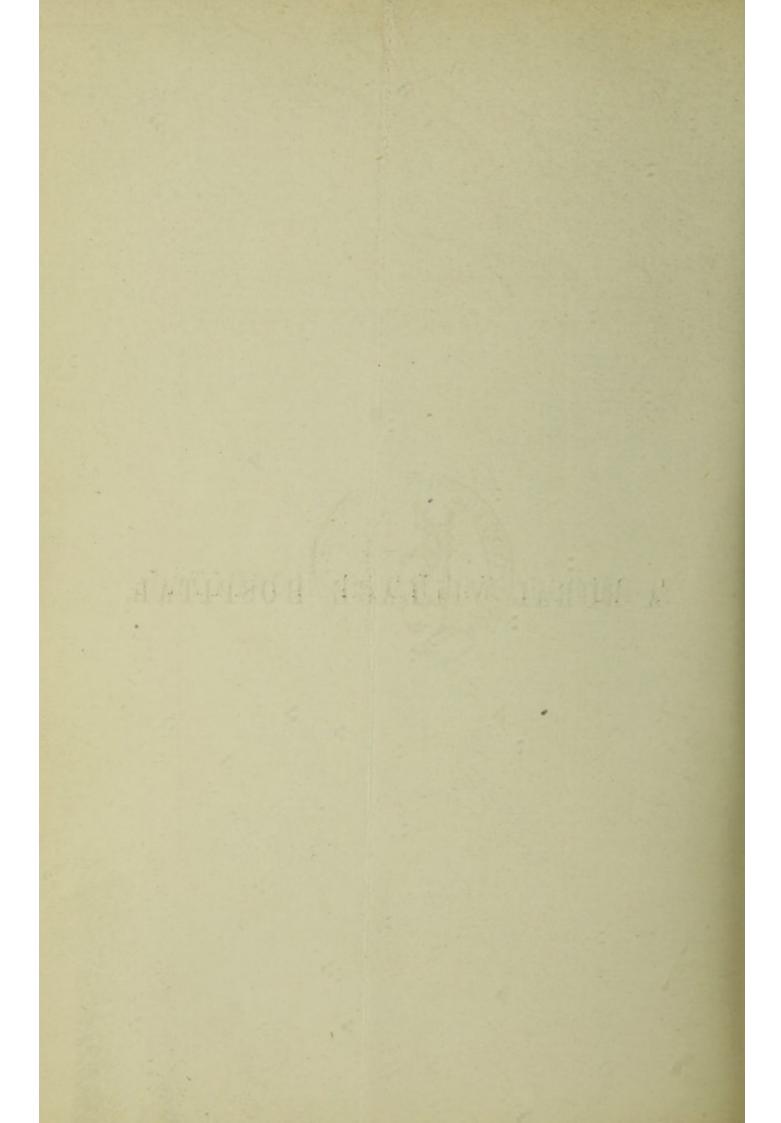


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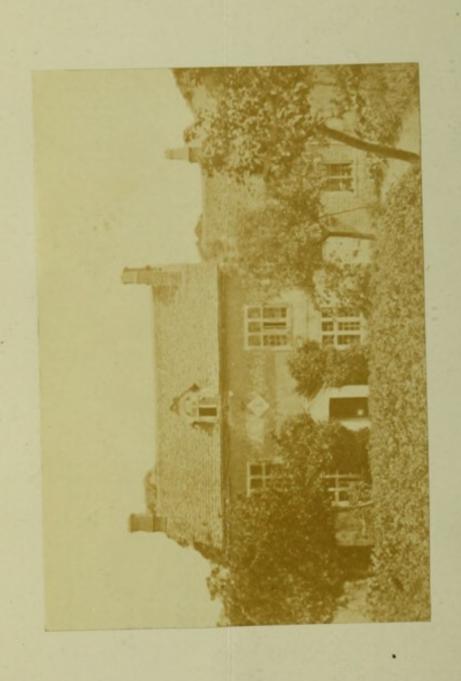
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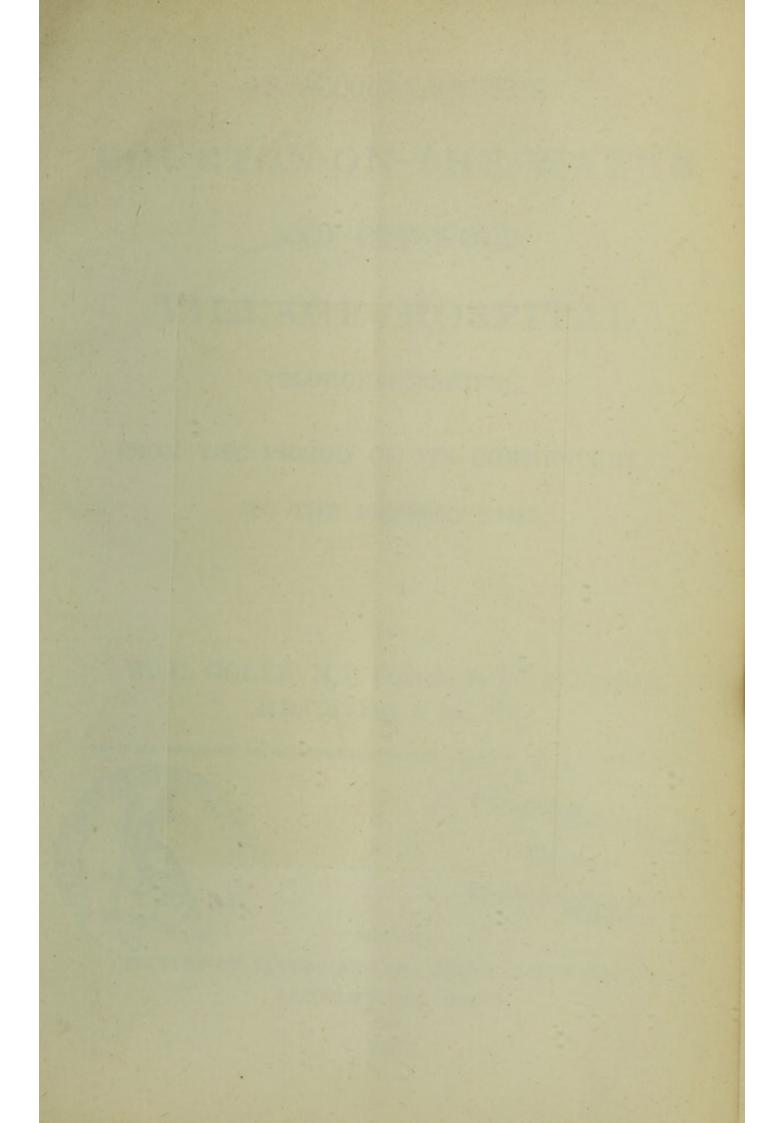
A RURAL VILLAGE HOSPITAL.

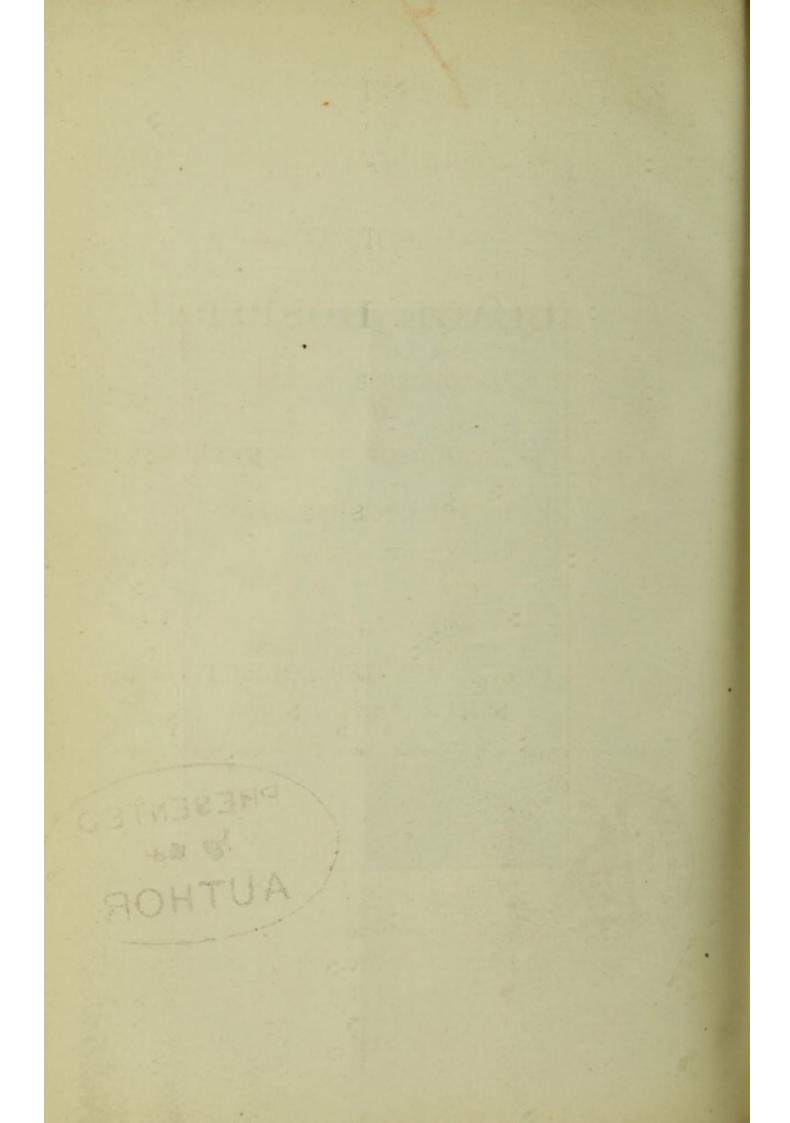












AN ACCOUNT OF THE

BOURTON-ON-THE-WATER

AND COTSWOLD

VILLAGE HOSPITAL

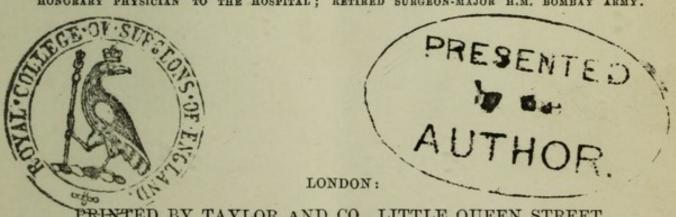
(GLOUCESTERSHIRE),

FROM THE PERIOD OF ITS COMMENCEMENT
TO THE PRESENT TIME.

BY

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PRINTED BY TAYLOR AND CO., LITTLE QUEEN STREET, LINCOLN'S INN FIELDS.

A RURAL VILLAGE HOSPITAL.

The photograph facing the title-page gives a fair idea of the Bourton-on-the-Water and Cotswold Village Hospital, established 1st March, 1861. It is thought that a short account of the Institution for sixteen years might be interesting, and its statistics worth placing upon record. The Committee have kindly allowed access to the data necessary for compiling the accompanying Tables, but in no other way are they responsible, nor is the expense of this publication defrayed by the Hospital Funds. The annual published reports have been made use of, whilst information regarding Village or Cottage Hospitals has been obtained from the pamphlets and periodicals mentioned in the foot-note.*

From these, and from other sources, it appears that Village Hospitals were commenced about the year 1859, and that the credit of first organising one is due to Mr. Napper, of Cranleigh, near Guildford, in Surrey. The second was opened by Mr. Davis, at Fowey, in Cornwall, in 1860, and the third was established at Bourton-on-the-Water in 1861, chiefly by the exertions of Mr. Moore, Surgeon.

- * 'Village Hospitals,' by Horace Sweete, Esq., London, 1866.
 - 'Plea for Village Hospitals,' do. do. do. 1863,
 - 'Good Words,' for 1862.
 - 'Lancet,' 'Medical Gazette,' and
 - 'British Medical Journal,' for current years,

In each instance the medical officer was supported by one or more influential persons, and notably in the case of Bourton, active interest was taken in the establishment and working of the Hospital by the Rev. C. W. P. Crawfurd, who was temporarily acting for the Rector, and who continued to devote himself to its welfare so long as he remained at Bourton.

Since that time, Village or Cottage Hospitals have sprung up in many directions, almost all based upon the principles of the Cranleigh and Bourton Hospitals.

A Village Hospital has been described as "the smallest and most simple mode yet devised for the attendance upon patients away from their own homes." What is called the "Cottage Hospital system" is on a larger and more pretentious scale. It is a system better suited for towns of some considerable size, where a furnished house can be obtained, where beds for ten or twelve patients can be provided, where a matron can be maintained, and where, perhaps, nursing can be performed by Sisters of Charity, or others. It is intermediate between the village and county hospital. A writer on the subject states, "The intention of the Village Hospital plan is to adapt a suitable cottage in the village, for the use of a few patients, to restrict the number of beds to four or six, to entrust the care of the sick, as regards nursing, to an intelligent female nurse, to have all the surroundings of the hospital of a substantial but plain character, to encourage payments to be made by patients, so that the Institution may become partly self-supporting, and to avoid interference with the authorised fees due to medical officers employed by Government authorities; at the same time to look for the chief support of the Hospital to the voluntary contributions of that portion of the public who are interested in securing the welfare of the sick and suffering." A characteristic feature of the Bourton Hospital is that the medical officer is left unfettered by the Committee. The undoubted success which has attended the Institution hitherto, is due to the deference paid to the recommendations of the medical officer, and to his

views regarding the sick having been carried out by the com-

The house in which the Bourton Village Hospital is located has been found, duringthe sixteen years of its existence, sufficient for all needful purposes. Its rental is £12 a-year. It has been added to, and adapted, as circumstances called for, to meet particular requirements, by special funds raised and set apart for this purpose. It is the home of a pensioned soldier and his wife, the latter acting as nurse. It is situated on the outskirts of Bourton, but is easily accessible, has a southern aspect, and from its upper windows commands pleasant views over the surrounding country. There is a garden, in which convalescents take exercise, whilst its products are found useful in the Hospital dietary. The want of a good carriage approach is greatly felt, insomuch that a vehicle conveying an injured person cannot draw up close to its principal entrancedoor. It is a substantial, but not a modern building, of three storeys, and hence necessarily the rooms are low. It was doubtless erected on the plan adopted generally in the village about a century ago, of utilizing all available space, at the least possible expenditure of money. The lower rooms on the basement floor are a little below the surface level on the outside, so that you descend a step to enter the house. On the ground floor there are a consulting out-patients' room (which is also used as a Committee and Visitors' Room), a kitchen, with the usual offices in the rear, and a cheerful spacious convalescent ward. On the first-floor, reached by a broad old-fashioned staircase, there are three good-sized wards * (for males and females respectively), each capable of containing two or more beds, all well lighted and ventilated, and are quiet and cheerful. These wards are fitted with appropriate beds and furniture, are both neat and comfortable, and are kept scrupulously clean. The necessary surgical and other appliances are close at hand ready in case of need, and

also hot and cold baths. The upper floor has one large ward * under a ceilinged roof, capable of holding three or four beds, and is occupied by males only. It is sufficiently well lighted and ventilated, and is more in unison with the accommodation found generally in cottages than the other wards. The surfacewater is well drained, and the house, being built upon gravel, is seldom damp. There are no houses or buildings in the immediate vicinity, so that it possesses the great advantages of retirement and quietude. The Hospital is furnished with earth-closets. The walls of the wards are painted in oils, to allow them to be washed when required. The other parts of the building are frequently whitewashed, and the house is kept in a sound serviceable condition. The regulations are hung up in all the wards. There is a book for the insertion of visitors' names, and an alms' box for occasional donations.

"The simplicity of the domestic arrangements and the comfort of being within easy reach of relations and friends, as well as the quiet of a private room, and the home feeling which prevails throughout the Hospital, add materially to the popularity of the Institution in its own immediate district, and combined with a certain amount of liberty—more than can be accorded to inmates of larger Hospitals—has an influence which certainly aids in the recovery of many of the patients."

Library.—There is a very fair library of books of a light and entertaining kind, along with a few works of a moral or religious character, besides illustrated newspapers, magazines, and prints, which are all prized by the patients. It is scarcely necessary to state that no expense has been incurred in the purchase of books. They have been presented to the Hospital from time to time, the donor's name and date of gift are recorded, and each volume is stamped with the name of the Hospital.

^{* 1922} cubic feet.

[†] Extract from the Report of the Cranleigh Village Hospital for 1876.

An outline of the history of the Hospital may perhaps best be shown by furnishing a summary of its published annual reports.

The first printed list of officers is as follows:-

Visitor and Manager .- Rev. C. W. P. Crawfurd.

Medical Officer .- John Moore, Esq.

Honorary Secretary. - J. D. Eames, Esq.

Treasurer.—The Gloucestershire Banking Company, Stow.

Members of Committee.—Rev. C. W. P. Crawfurd; Rev. E. F. Witts; Rev. D. Royce; W. S. Stenson, Esq.; Wm.

Kendall, Esq.; James Ashwin, Esq.; John Moore, Esq.

1861.

In-patients, 22. Out-patients, 208.

In their first report the Committee, after an experience of ten months, state, "We consider that our experiment has been "justified by success." Many of the cases admitted were such as would, but for the establishment of the Hospital, have been sent to the County Infirmary, thus aggravating the sufferings of the patients from the long distance to be travelled, whilst many minor operations would have been left unattended to, or insufficiently treated at the sufferers' own homes, for want of the adequate and proper resources available in the Village Hospital.

"The self-supporting system on which the Institution is "based has been found to work advantageously, and to relieve "a most deserving class economically both to themselves and "the funds."

1862.

In-patients, 31. Out-patients, 311.

In the second annual report the Committee repeat their opinion of the success of the Hospital, and of the value of the self-supporting principle. They observe that the amount charged to patients must depend somewhat upon the income

of the Hospital, and hence in order to lessen the cost to each patient, the subscriptions must be maintained or increased. They state that several urgent cases of accident were admitted during the year, and were supported entirely by the Hospital, as the employers in whose service the individuals were injured did not contribute towards the funds of the Institution.

1863.

In-patients, 40. Out-patients, 201.

The Committee observe "whilst the necessities of some few "cases have required that they should be treated gratuitously, "the sums contributed by the patients themselves afford "satisfactory evidence that the benefits of the Institution are "fully appreciated by the class for whose use it was specially "founded, viz. those, who beyond the aid of parish relief, are "yet unable to meet the expenses attendant upon medical "help at home."

1864.

In-patients, 35. Out-patients, 252.

The Committee refer with pleasure to the success of a bazaar held in the autumn of 1864, which realised upwards of £200. About £90 was immediately expended in altering, fitting-up, and furnishing a new general and also a convalescent ward, both greatly needed, besides, the Committee state, having "procured many medical and surgical applimances, previously unattainable, which we trust will add "materially to the comfort and well-doing of the patients and "extend the usefulness of the Institution."

It may be here mentioned that previous to 1864 the medical officer provided medicines gratuitously for the inpatients. The state of the finances this year, however, for the first time justified the Committee in putting an end to so unusual and generous a proceeding.

1865.

In-patients, 46. Out-patients, 234.

The Committee state that this year 36 patients contributed on an average 15s. 4d. each, or nearly £28 towards the cost of their maintenance, a satisfactory proof that the class specially intended to be benefited appreciated the system "of afford—"ing help rather than giving charity." Illuminated texts for walls, pictures, and books for the use of patients, were for the first time asked for, and some presents of books were acknowledged. The Committee state that the average daily cost of each patient was about eighteenpence.

1866.

In-patients, 45. Out-patients, 212.

The Committee consider the success of the Hospital to be fully established, and that it is in a flourishing condition. They notice that similar Institutions are springing up in all directions, "everywhere meeting with hearty support from "rich and poor, affording our rural population those oppor-"tunities of recovering from accident or disease which have "hitherto been restricted to the denizens of towns."

They observe with reference to out-patients, who seek medical aid, but provide themselves with medicines at their own cost, that by so doing they not only shun applying for Union medical relief, but assert their dependence upon self-help, avoid the first step to pauperism, and thus indirectly relieve the rate-paying population.

1867.

In-patients, 37. Out-patients, 180.

No special report was written this year, owing to the pressure of professional engagements upon the medical officer, who was also Honorary Secretary. A paid secretary was

engaged "at nearly nominal salary." The medical and financial statistics for the year were however furnished.

1868.

In-patients, 36. Out-patients, 164.

The Committee regard the past career of the Hospital with satisfaction, and look forward hopefully and confidently to the future. They state, "that in the management of the Hospital "our first consideration has been the welfare of the patients, "and our next care has been to expend economically the "moneys committed to our charge by the supporters of the "Institution." They allude to the balance left from the bazaar amounting to more than £100, which had been placed in the bank as a deposit at three per cent. per annum in order to form a reserve fund "to enable us either to meet untoward "contingencies to which all human undertakings are liable, "or to adopt such improved means of treatment or accom-"modation as the rapid progress of sanitary science may "dictate." The Committee acknowledge "with sincere "gratitude the receipt in 1867 of the proceeds (nearly £3) "of a sermon by the Rev. D. Royce, of Nether Swell, in aid " of our funds." Thus, the first example was set of establishing Hospital-Sunday Collections.

In 1868 the inhabitants of Great Barrington testified in a liberal and substantial manner their acknowledgments and gratitude for recovery from alarming sickness and restoration to health by a special thanksgiving service, at which the sum of £29 odd was collected and forwarded to the medical officer for the use of the Hospital.

1869.

In-patients, 36. Out-patients, 203.

In their Report the Committee affirm "that the prognos-

"tications of usefulness and success of the Hospital, in which we "indulged at its origin, were well founded." They state that "judging from the number of Cottage Hospitals already esta-"blished, from the numerous personal inspections of our own, "and from the many enquiries by letter as to its cost and "management, we may reasonably hope that, ere many years "have elapsed, every inhabitant of rural districts, whose cir-"cumstances render him a fitting recipient of its benefits, will "have within easy access a Hospital to which in case of emer-"gency he may resort." They specially and gratefully mention the second year's contribution from Nether Swell, and one from Westcote (Rev. J. W. Pantin) as "proceeds of col-"lections at harvest-home thanksgiving services."

They state that "since the establishment of the Hospital "the patients or their friends have contributed rather more "than one-fifth of the income." They appeal "for a further "continuance of support, in order to be still better qualified "to offer to their poorer neighbours, in their hour of trial, a "house of refuge, affording them comforts and attendance,

"which could not be procured at home."

1870.

In-patients, 32. Out-patients, 167.

At the end of the first ten years the Committee refer with satisfaction to their efforts to establish and to continue the Hospital having been crowned with success, although doubts, difficulties, and discouragements attended its origin and progress. There had been admitted and treated within its walls 334 patients. The Committee allude to the forgetfulness of some patients, and of their employers, in not regarding the Hospital as partly self-supporting. They observe that most of the out-patients are now of the necessitous class for whom dispensaries afford a means of charitable relief. They appeal to the clergy to establish "Hospital Sunday Collections" in their respective churches in aid of the Institution, and refer

again to the first "kind endeavours" made at Nether Swell, Barrington, and at Westcote.

1871.

In-patients, 48. Out-patients, 185.

The death of their late respected Visitor and Manager, the Rev. R. Waller, and the removal of an influential Member of the Committee elsewhere, are referred to by the Committee in terms of regret. The success of the Hospital Sunday Collections during the last year enabled the Committee to improve the state of the Hospital, and to obtain additional appliances, rendering the Institution "as efficient as any of its kind."

1872.

In-patients, 56. Out-patients, 205.

The Committee consider that the Hospital Sunday Fund has been mainly instrumental in meeting increased expenditure consequent upon the dearness of provisions, and again urge congregational collections. They state that a visit to the Hospital will afford satisfactory evidence that "whilst the "comfort of the patients is in every way studied, the intro-"duction of such luxuries as would tend to induce convales-"cents to be dissatisfied with the modest conveniences and "supplies of a decent cottage home, are carefully avoided."

1873.

In-patients, 47. Out-patients, 153.

The Committee allude to the establishment of similar Hospitals to their own, within eight or nine miles of Bourton, in confirmation of their views formerly expressed of such Institutions being more and more appreciated by those for whom they were designed. They express little fear of the Bourton Hospital suffering diminution of support from the close prox-

imity of rival Institutions, seeing that it has outlived opposition, and has, by its success, aided in the establishment of other Village Hospitals, whilst it is still endeavouring to confer the greatest amount of benefit upon the suffering poor, at the smallest cost compatible with the well-doing of the patients.

1874.

In-patients, 38. Out-patients, 175.

The Committee refer to the general result of support given to the Hospital as satisfactory, and to the steady increase in the amount of congregational collections. They allude to the appointment of a Matron instead of a Nurse, an arrangement which was some short time afterwards discontinued.

1875.

In-patients, 43. Out-patients, 151.

The Committee congratulate the Subscribers on the present organisation and efficiency of the Hospital as satisfactory proofs of its continued usefulness and success. They again urge the more general adoption of congregational collections, which they look upon as peculiarly well-suited to bring the claims of the Bourton Hospital under the notice and within the reach of all persons charitably disposed.

1876.

In-patients, 51. Out-patients, 198.

The Committee bring to notice that considerable increased expenditure has been incurred during the past year on account of the number of serious surgical cases admitted, and especially from one source, the navvies working on the new line of railway. They mention that nearly £28 was paid by patients towards their maintenance, which they consider gratifying, as showing a desire on the part of the inmates of the Hospital to assist its funds, and that more than £50 had been

collected at churches and chapels in 1876. They refer with regret to the death of Mr. Kendall, one of the earliest and most attached friends of the Hospital; and they state that the Hospital is in a satisfactory condition, that the patients are well nursed and attended to, and that economy, as far as is consistent with efficiency, is duly maintained.

Having thus sketched some of the chief features of the Annual Reports, the medical, financial, and other statistics may next be examined.

Table No. 1 .- A list of diseases and injuries, on account of which 593 patients were admitted into the Hospital from 1861 to 1876, not specially classified, but arranged chiefly alphabetically. The surgical greatly exceeded the medical cases, as will be seen by reference to Table No. 3, and also may be judged of by the following enumeration of some of the principal surgical operations performed, viz. :- Amputation of arm, 3; of thigh, 1; of arm at shoulder joint, 1; of fingers and toes, 9; contractions excised, 3; cancer of lip, 8; diseasedb one removed, 12; eye, operations on, cataract, &c., 30; fistula lachrymalis, 2; fistula in ano, 9; hare-lip, 4; hæmorrhoids removed, 4; hydrocele, 14; ingrowing toe-nail, 5; laryngotomy, 1; lithotomy, 1; ovarian tumour removed, 1; polypus nasi, 4; tracheotomy, 1; tonsils removed, 11; tendons divided, 5; tumours excised, 4; tumours removed, 23—total, 157.

Table No. 2.—A list of deaths, 12 in number, which occurred in the Hospital in 16 years, being on an average one fatal case every 15 months, or one death in about every 50 patients admitted, or 0.75 per mille.

Table No. 3.—A table showing the number of patients who passed through the Hospital in each year, from 1861 to 1876, their length of stay, and the result, as well as the yearly number of new patients attending the Dispensary.

Table No. 4 .- Financial.

TABLE No. 1.

INJURIES AND DISEASES.

			No.	1 30	No.
Abscess			34	Diseases of blood vessels	10
Cancer			21	bones	14
Contusion			10	" breast	3
Deformity			12	" eye	25
Dislocation , .			10	" eye, operations on .	30
Dropsy			24	" heart and circulatory	
Fracture, simple .			37	system .	. 7
" compound			16	" intestines	17
General disease .			20	" joints	24
Hare-lip operation .			4	" kidney	5
Rheumatism, acute .			8	, liver	7
" chronic			10	lung	19
Rickets			2	,, mouth	18
Scrofula and tubercle			7	,, nervous system .	54
Simulated disease .			4	,, nose	5
Tumour			31	" stomach	6
Ulcer			19	" skin and appendages	16
Wound			19	" uterus	9
Unclassed diseases .			15	Control of the Contro	
Diseases of bladder			5	Total	593
" brain and	memb	ranes	12		

TABLE No. 2.

DEATHS.

Dates.	Sex.	Causes.
January 22nd, 1864	M.	Lacerated wounds.
May 19th, ,,	M.	Foreign body in bronchus.
September 4th, 1866	M.	Compound fracture of jaw.
December 15th, ,,	M.	Fractured ribs.
January, 10th, 1867	F.	Dropsy.
March 22nd, 1869	M.	Compound fracture.
February 15th, 1870	M.	Dropsy. Bright's disease.
October 27th, "	F.	Cancer of breast.
September 21st, 1871	M.	Punctured wound.
February 5th, 1875	M.	Meningitis.
February 15th, 1876	M.	Enteric fever.
May 4th, ,,	F.	Acute atrophy of liver.

TABLE NO. 3.

	-	1				-											
1861, 1862, 1863, 1864,	1863.	THE RESERVE AND ADDRESS OF THE PARTY OF THE	1864.	1865.	1866.	1867.	1868.	1869.	1-70.	1871.	1872	1873.	1874.	1875.	1876.	Total.	Атегаде.
C? C?	cs		೦೦	०२	4	7	60	1	ಲಾ	4	4	9	00	०२	50	50	60
28 38 3		6.0	32	44	41	33	333	35	53	4	53	41	35	41	46	593	37
15 19 1		-	19	56	24	55	14	55	14	98	25	53	15	30	35	338	21
13 19 1		-	13	18	17	10	19	13	15	50	27	18	50	11	11	255	16
5 10			œ	-	14	œ	13	4	6	1.5	19	18	16	15	16	177	11
23 28 24	1	S	-	37	27	24	50	31	50	32	333	53	19	26	30	416	36
31 40 35		65	10	46	45	37	36	36	35	48	56	47	38	43	51	643	40
29 37 31	-	31	-	43	38	33	35	35	56	43	20	44	36	37	45	577	36
23 20 20		20	1000	31	18	25	19	50	17	30	37	24	20	16	35	376	53
6 17 11		1	- 4	11	18	00	16	13	6	13	13	20	16	15	13	201	13
		टर		:	€र	1	:	1	cs	-	:	:	1	-	cx	13	0.75
39 30 31		31	-	35	34	35	56	34	56	34	25	35	40	37	30.	:	33
8 8		3		4	4	4	60	9	cì	30	4	4	4	4	4	:	3.20
OUT-PATIENTS 208 311 261 252	261 255	25		234	212	180	164	203	167	185	205	153	175	151	198	3259	204

In-patients.—The total number admitted was 593; viz., 338 males, and 255 females, in the proportion of rather more than 5 males to 4 females: of these 177 were medical, and 416 surgical cases, i.e., about 5 surgical to 2 medical admissions. The average number yearly admitted was about 37, rather more than 3 per month, or an admission every 9th or 10th day. The three or four patients remaining at the end of the year, together with the new admissions constitute the number yearly under treatment which, on an average of 16 years, was about 40. The average stay of each patient in the Hospital was about 33 days, i.e., rather less than five weeks, but in 1874 the average period exceeded 40 days. It occasionally happens that some diseases require a long time to effect an improvement or cure, whilst, in other instances, convalescence is tardy, rendering it undesirable to discharge a patient in an unsatisfactory condition, to go back, perhaps, to an unhealthy home, with the almost certain prospect of seeking re-admission. The records show that 15 patients remained between three and four months, six between half and a whole year, and that two exceeded a year. Deducting these unusually long periods, the average stay of the remainder was considerably under 30 days.

The daily average number of patients occupying beds in the Hospital was about three and a-half. There were 577 patients discharged, of whom 376 were returned "cured," and 201 were reported "relieved" or "no better," or "incurable," or "absented," &c. The proportion of recoveries is therefore large, about six in every nine patients under treatment.

Out-patients.—Gratuitous medical advice is given on Monday mornings to persons in indigent circumstances, whose means only permit them to pay at a druggist's for the medicines prescribed. During the 16 years, 3258 individuals of both sexes, and all ages, sought advice; their names, &c., with a record of their cases are kept. On an average about 204 new patients were yearly attended to.

TABLE No. 4.

YEARS.	RECI	EIP	TS.	EXPI	END	ED.	В	ALA	NCE	IN BAN	к.		
								lR.			Dr.		
	£	s.	d.	£	s.	d.	£	s.	d.	£	S.	. d.	1000
1861	139	16	4	104	1	7	35	14	9	1			10
2	58	2	0	60	14	8	33	2	1	1			
3	68	14	0	82	13	4	19	2	9				-
4	142	3	5	87	16	4	73	9	10				
5	126	11	11	171	9	7	28	12	2				
6	86	1	0	124	0	7				9	7	5	
7	-90	10	3	82	6	3	1			1	:	3 5	
8	95	5	0	66	12	6	27	9	1				
9	98	1	11	124	3	6	1	7	6	Tennes.			
1870	97	6	11	100	3	3				1	8	3 10	
1	129	17	7	119	10	6	8	18	3				
2	157	12	0	145	2	6	21	7	9	100			
3	147	15	10	152	7	6	16	16	1				
4	146	17	3	134	5	2	29	8	2				
5	178	4	1	138	5	6	69	6	9				
6	202	1	8	193	15	2	77	13	3				
Total.	£1965	2	2	£1887	8	11							30
Average.	£122	16	4	£117	18	9							1

Table No. 4. — This table shows the finances of the Hospital from year to year, as taken from the bank passbooks, exclusive of a reserve fund, raised by the bazaar in 1864, and specially alluded to in the Report of 1868 (page 12 ante), amounting at the end of 1876 to about £120. The total receipts from all other sources yielded £1965, which, on an average of 16 years, gives about £123 as the annual income. The total expenditure was £1887, or about £118 a-year, so that, taking the series of years, the income exceeded the expenditure every year by about £5, although, on three occasions, there was a small deficit at the bank at the end of the year. By calculations, which it is not necessary to set out, the average charge for the maintenance of each patient daily was about 18 pence, whilst the average cost of each individual who passed through the Hospital was about 50 shillings. The total average daily expenditure may be reckoned at about 6s. 6d., of which sum 5s. 3d. was spent in the maintenance of between three and four patients a day, whilst the balance 1s. 3d. appertained to furniture, repairs, instruments, and incidental expenses of the Hospital.

Congregational collections in churches, except when otherwise stated, were made at the following places; the amounts stated are in the nearest round numbers of pounds sterling :-Barrington, £50; Lower Swell, £45; Stow (Ebenezer Chapel), £28; Temple Guiting, £27; Bourton-on-the-Water, £27; Lower Slaughter, £25; Stow (Baptist Chapel), £15; Great Rissington, £14; Daylesford, £13; Sherborne, £13; Farmington, £11; Westcote, £11; Notgrove, £8; Clapton, £7; Windrush, £6; Wyck, £6; Upper Slaughter, £6; Longborough, £4; Oddington, £4; Guiting Power, £4; Aldsworth, 34 shillings; Blockley, 30 shillings; Icomb, 12 shillings; total, £327 (odd). Doubtless this very considerable amount would have been lost to the funds had not congregational aid (Hospital-Sunday collections) been solicited by the Committee, and responded to by the clergy, ministers, and inhabitants of the several parishes indicated. In 1861 and 1862 the proceeds of two lectures by the

Rev. C. W. P. Crawfurd (£13 odd), and the proceeds of his Shakesperian Readings in 1863 (£4 odd), total nearly £18, were bestowed on the Hospital. In 1873 an amateur concert at Bourton realized nearly £3, and in 1874 two concerts, also at Bourton, by the late Mr. Ransford, of London, yielded about £17 towards the funds of the Hospital. Very recently an amateur concert, given at Kingham, produced £10 in aid of the funds.

Localities.—The largest number of patients came from the following places:—Bourton, 55; Sherborne, 49; Barrington, 42; Great Rissington, 38; Stow, 25; Upper and Lower Guiting, 22; Upper and Lower Swell, 20; Westcote, 17; Aston, 17; Upper Slaughter, 15; Naunton, 14; Notgrove, 13; Lower Slaughter, 13; Clapton, 12; Farmington, 12; Railway, 23; total, 387. Seventy-five other places sent from one to ten patients each,—206; total, 593.

On a review of the working of the Hospital for sixteen years it may, perhaps, appear surprising that for so long a period no untoward event occurred to frustrate the hopes of the Committee, but that they were able cheerfully and gratefully to record the steady advancement of an Institution over which they unceasingly watched, and which they zealously nurtured. At the same time it could not but be a matter of congratulation to the Committee, if they had allowed themselves the indulgence, to reflect that for sixteen years the same medical officer-Mr. Moore-had bestowed his best energies and valuable services—not only ungrudgingly, but with a devotedness and zeal characteristic of one whose single aim was directed towards the welfare of his patients. There is, moreover, another element which could not be alluded to by the Committee, but which should, nevertheless, not be forgotten, and may now be briefly mentioned, viz.: - that if the better classes residing in country districts wish to retain near them experienced and skilful medical men, they should encourage the planting and growth of rural Hospitals in their midst, in order that country

practitioners may have an opportunity of keeping themselves practically acquainted with their profession, not only as respects the more common and lighter instances of disease, but in the graver and more severe forms of accident and surgical operations. It is not too much to affirm that no individual was ever sent away, on application, from the Bourton Hospital to seek admission into County or District Hospitals because the severity of the case, or the formidable nature of the operation, was such as to unnerve the medical officer, to baffle his skill, or to cripple his resources; but, on the contrary, although an immense tax upon his time, attention, and professional knowledge, the heavy responsibility of a serious case—on which not only reputation is at stake, but the life of the patient placed in the balance-was accepted with that confidence and trust which can only arise from, and be inspired by, adequate skill and knowledge, kept constantly added to, and improved by experience, gained in such Institutions as Village Hospitals.

These views are, perhaps, better expressed in the following extracts from an Article by the late Dr. Wynter, published in "Fruit between Leaves," entitled "Help for the Agricultural"

" Sick."

The writer says:—"Whilst the importance of Village Hos"pitals to the labouring poor cannot be over-estimated, the resi"dent gentry will equally participate in the benefit. Under the
"old style of things the country was drained of all serious sur"gical cases. The Guardians of the Poor rather than incur
"the expense of treating severe accidents, and of performing
"the more serious operations in the workhouse, sent the
"patients, often suffering the most excruciating agony, to the
"nearest County or Town Hospital. The private practitioner,
"knowing how useless it was to treat such cases in the homes
of the patients, often miles away from his own abode, also re"commended the transport to the centres of medical skill. In
"this manner the country suffered a complete drain of all
"instructive cases, and the art of the country surgeon became

"rusty with disuse."... Again, "It is not every man who can afford to summon a celebrity from town. Such persons should hail the establishment of Village Hospitals as a boon to themselves, certainly not less than it is to the poor. The country gentleman who gives his annual subscription to maintain one of these valuable Institutions must consider that whilst he is ministering to the wants of the poor, and relieving parish rates, he is at the same time keeping the Village Surgeon at school, against the time when some terrible accident overtakes him in the hunting field, or when some sudden emergency to those near and dear to him calls for the trained and skilful hand."

The present sketch having extended to a greater length than was originally intended, may be now brought to a conclusion by the following quotation from one of the publications before mentioned, which is peculiarly applicable to the Bourton Hospital.

"At first it was uphill work to arouse sympathy, and face opposition, but by sustained effort the scheme prospered and was brought to a successful issue, not only because the men engaged in it were earnest, but also because the cause itself was good."

W. C. Coles, M.D.

Bourton-on-the-Water, Gloucestershire, April 10th, 1877.